

HIV POCT Program Training Scenarios for HIV Test Counselling Role Plays

The following scenarios could be encountered by HIV test counsellors, and in many cases, they are drawn from the experiences of other testers. Use the ones most relevant to your site or add your own.

Role-playing is an opportunity for trainees to practice putting their learning together and to get more comfortable with the counsellor's role. Tell the role players the basic scenario (or cut out these cards and let them draw). When they are ready, provide the testing outcome, so they can practice post-testing counselling as well. The points given are specific to each scenario, but don't reflect everything that needs to be said (e.g., every appointment should ensure that the person understands and consents to the testing.)

In each scenario, the "3P" assessment of HIV risk is applied, based on: **Partners, Practices and Protections**. See: <https://hivtestingontario.ca/wp-content/uploads/2023/03/Ontario-HIV-Testing-Guidelines-for-Providers.pdf>

Scenario	Discussion	Testing & Result
<p>Scenario 1</p> <p>You are seeing an Indigenous woman, Janet, for an HIV test. She has decided to test because she and her boyfriend of six months have decided to be in a monogamous relationship. They plan to stop using condoms.</p> <p>The client has had two previous partners where condomless sex was practiced. Her last condomless sexual contact was six weeks ago when a condom broke with her boyfriend.</p>	<p>What needs to be asked or clarified:</p> <p><i>Partners:</i></p> <ul style="list-style-type: none"> • Has her current boyfriend tested for HIV? If so, when and what were his results? • When was her last condomless sex with the two other partners? <p><i>Practices:</i></p> <ul style="list-style-type: none"> • Confirm vaginal sex; was there anal sex? <p><i>Protections:</i></p> <ul style="list-style-type: none"> • Were condoms used consistently with her boyfriend? • Confirm that there was a condom breakage? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • The window periods for POC testing and Serology testing. 	<p>POC Test #1: non-reactive, #2: non-reactive</p> <p>Serology Test = non-reactive</p>

<p>She is nervous as it is her first test.</p>	<ul style="list-style-type: none"> • Janet is outside the window period for Serology testing and would receive a definitive result. She could still do a baseline POC, and Serology testing. • Should she choose POC only, Janet is still within the POC window period for an exposure with her boyfriend, but discussion is needed about exposure before/beyond their relationship. • If neither Janet nor her boyfriend have had outside exposures within the three- month window period and both test POC negative at the three-month point, they are at no-risk of HIV (unless one/both have new partners). • Discuss her fears and concerns. Since this is her first test is there more she needs/wants to know? Does her anxiety seem disproportionate to her risk? <p>Other considerations:</p> <ul style="list-style-type: none"> • STI testing and pregnancy testing. 	
<p>Scenario 2</p> <p>You are seeing a man for an HIV test. Darnell tells you that his male partner of three years tested positive for HIV six months ago. Darnell seems “depressed” and resigned to the fact that he is likely HIV positive as well. He has been too nervous to test until now.</p> <p>They usually use condoms, but there has been some condomless anal sex as both top and bottom. The last condomless sex was eight weeks ago.</p> <p>Both he and his partner tested negative nearly three years ago at the onset of their relationship. He has requested a Serology test because he’s not ready to deal with an “instant” result.</p>	<p>What needs to be asked or clarified:</p> <p><i>Partners:</i></p> <ul style="list-style-type: none"> • He indicated sex with his primary partner, any other partners? <p><i>Practices:</i></p> <ul style="list-style-type: none"> • He indicated he has anal sex with his partner, top and bottom. <p><i>Protections:</i></p> <ul style="list-style-type: none"> • What is the frequency of condom use? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • Is today the right time to be testing? • The window period for HIV Serology testing, and that the result of today’s testing will be definitive. <p>Other considerations:</p> <ul style="list-style-type: none"> • Discuss client’s feeling of “depression.” Does he need help and support dealing with his partner’s diagnosis/his own risk. • Does he know how his partner acquired HIV and need to talk about it? Does he have concerns about his relationship? • Is his partner on medication? Does he know about U=U? After six months of being undetectable they may be able to negotiate condomless sex, if desired, assuming appropriate protections with any outside partners. 	<p>Serology Test = non-reactive</p>

	<ul style="list-style-type: none"> • Is he interested in PrEP? • Discuss routine testing. • STI testing. 	
<p>Scenario 3</p> <p>You are seeing a man for an HIV test. Max tells you that he has had condomless sex with casual female and male partners.</p> <p>He tells you that the condomless sex happens when he uses drugs. His last risk was 2 weeks ago with a male partner.</p> <p>He's very laid back and casual about the risks that he's been taking as you talk to him.</p>	<p>What needs to be asked or clarified:</p> <ul style="list-style-type: none"> • Is this person a first-time tester? If not, when was his last test? What was the result of prior test results (if any)? <p><i>Partners:</i></p> <ul style="list-style-type: none"> • Does he know whether any of his partners are HIV positive and have a detectable viral load? <p><i>Practices:</i></p> <ul style="list-style-type: none"> • Does he have condomless penetrative sex with both women and men (top and bottom)? <p><i>Protections:</i></p> <ul style="list-style-type: none"> • Does he mostly use condoms or mostly not? • What drugs does he use - does he practice safer drug use practices? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • The window periods for POC testing and Serology testing. • Explain that he can receive a POC test now, as a baseline test, but it's early in the window period for POC to detect his potential HIV exposure from two weeks ago. • Does he use condoms when he is not high? Why does the drug impact his behaviour? • What supports does he have in his life if he did test positive today? <p>After a positive test:</p> <ul style="list-style-type: none"> • With a reactive test, offer supportive counselling and a confirmatory test, explain the need to return for results. • Discuss access to HIV care. • Protecting casual partners; he now has an obligation to disclose; he should be provided with information on the HIV Legal Clinic of Ontario (HALCO). • Explain U=U. • Can he notify his past partners? Does he need help doing so? 	<p>POC Test = reactive</p> <p>Serology Test = reactive</p>

	<p>Other considerations:</p> <ul style="list-style-type: none"> • What drugs is he using? Is his drug use a problem for him? Does he need support around managing his drug use? • If he showed an interest in addictions support, this is still important to discuss. • STI testing. 	
<p>Scenario 4</p> <p>You are seeing Jordon, a Black woman, for an HIV test. She tells you that she is moving to Ottawa to be with her boyfriend.</p> <p>She tells you that her boyfriend has recently told her that he had “an affair” with another woman and that the “affair” was 8 months ago. She tells you that he is also going for testing.</p> <p>She said her last “intercourse” with her boyfriend was 4 months ago. She is testing for peace of mind.</p>	<p>What needs to be asked or clarified:</p> <ul style="list-style-type: none"> • Has she ever tested before? If so, when? What was the result? <p><i>Partners:</i></p> <ul style="list-style-type: none"> • Did she have any sexual activity outside the relationship? If so, when? • Has her boyfriend tested? What were his results? <p><i>Practices:</i></p> <ul style="list-style-type: none"> • What kind of sex did she and her partner have, vaginal and anal? <p><i>Protections:</i></p> <ul style="list-style-type: none"> • Did she and her partner mostly have condomless sex? • Were there any other precautions taken (e.g., PrEP)? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • The window periods for POC testing and Serology testing. • Pre-test counselling should still include questions about the supports available to her in the event of a positive test. <p>After a positive test:</p> <ul style="list-style-type: none"> • With a reactive test, offer supportive counselling for this result – meeting the client where she is at, whatever feelings arise for her. • Offer confirmatory testing and explain the need to return. • Talk about informing her boyfriend; encouraging him to test. • Talk about the move to Ottawa, and access to HIV care in Ottawa. • Explain U=U. <p>Other considerations:</p> <ul style="list-style-type: none"> • Does she need help to process her partner’s sex outside the relationship? • STI testing. 	<p>POC Test = reactive</p> <p>Serology Test = reactive</p>

<p>Scenario 5</p> <p>You are seeing a Trans woman named Sage, for an HIV test. She tells you that her last HIV test was 6 months ago and it was negative. She also tells you that she engages in sex work. She tells you that on average she sees 200 clients per month and that she has, in her words, “had some risks” since her last test.</p>	<p>What needs to be asked or clarified:</p> <p><i>Partners:</i></p> <ul style="list-style-type: none"> • Does she have regular partner? If so, have do they get tested regularly for HIV/STI’s? If so, when? <p><i>Practices:</i></p> <ul style="list-style-type: none"> • Clarify what Sage means by “had some risks”: <ul style="list-style-type: none"> ○ What kinds of sex is she having with her clients and partner - does this include oral, vaginal/front hole, and/or anal sex? ○ Does she engage in injection drug use? ○ Are there other practices she is concerned about? <p><i>Protections:</i></p> <ul style="list-style-type: none"> • Does she use condoms for penetrative sex (with men)? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • When was her last HIV/STI tests? • The window periods for POC testing and Serology testing. • Explain that she can receive a POC now, but it may be baseline depending on the last risk, if the baseline is negative and in the window period, offer Serology testing. • Discuss PrEP, especially if she had challenges negotiating condom use. • Discuss routine testing. 	<p>POC Test = non-reactive</p> <p>Serology Test = non-reactive</p>
<p>Scenario 6</p> <p>Chan, a 26-year-old gay man comes to the clinic on a Monday. He is extremely nervous and anxious. He was partying on Saturday night. Used ecstasy, GHB, coke and pot. He remembers going to the washroom and performing oral sex on a few guys, and then landing at a stranger’s house where they had</p>	<p>What needs to be asked or clarified:</p> <p><i>Partners:</i></p> <ul style="list-style-type: none"> • Does he know the HIV status of his partners? <p><i>Practices:</i></p> <ul style="list-style-type: none"> • Was he a top/bottom for the anal sex? What does he remember about the incidents without condoms? <p><i>Protections:</i></p> <ul style="list-style-type: none"> • Was his anal sex partner on PrEP? If HIV positive, undetectable? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • The window periods for POC testing and Serology testing. 	<p>POC Test = non-reactive</p> <p>Serology Test = non-reactive</p>

<p>sex (mostly with condoms). His memory of the incident is fuzzy. His last HIV test was negative 4 months ago. He is not on PrEP.</p>	<ul style="list-style-type: none"> • Explain that he can receive a POC now, but it would be baseline for the risk on Saturday, if the baseline is negative, offer Serology testing. Recommend a return for testing at three weeks. • Is he being tested for other STIs? Can you set that up? • Reassure about oral sex; talk about relative risk if needed • Discuss the possibility of PEP (if it's been less than 72 hours) and/or PEP for the future, including where, when, and how to obtain it. • Encourage consideration of PrEP for the future. <p>Other considerations:</p> <ul style="list-style-type: none"> • Is his drug use a problem for him? Does he need support with managing it? • Does he need additional supports with his anxiety? 	
<p>Scenario 7 A 35-year-old man named Owen comes to the clinic a bit disoriented and rambling. He has visible physical signs coming down from a high of crystal meth or a combination of party drugs. These includes twitching, dry mouth, and repeating himself. He tells you he injected drugs more than once with strangers over the past few days and may have partied on other occasions.</p>	<p>What needs to be asked or clarified:</p> <p>Assess disorientation:</p> <ul style="list-style-type: none"> ○ Is he able to give consent? ○ Is the counsellor able to get relevant information needed to test? ○ Is he OK to be alone with a counsellor? <ul style="list-style-type: none"> • If no, encourage him to book a follow-up appointment. • If yes, simplify the counselling and continually assess competency • Recommend PEP and link to local PEP access (e.g., local hospital ER) • try and book a follow up appointment • Is this his first test? Has he ever tested for HIV before? When? <p><i>Partners:</i></p> <ul style="list-style-type: none"> • Do you have any sense of the HIV status of your recent partners? <p><i>Practices:</i></p> <ul style="list-style-type: none"> • Confirm injection drug use and sharing needles? • Was there high-risk sexual activity – top and bottom? <p><i>Protections:</i></p> <ul style="list-style-type: none"> • Is he aware of any condomless sex? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • The window periods for POC testing and Serology testing. 	<p>POC Test = reactive</p> <p>Serology Test = reactive</p>

	<ul style="list-style-type: none"> • Explain that he can receive a POC now, but it would be baseline for the risk over the past few days. If the baseline is negative, offer Serology testing. Recommend a return for testing at three weeks. <p>Note: Only do the test if you are confident about consent, his risk and his ability to receive his result.</p> <p>After a positive test:</p> <ul style="list-style-type: none"> • With reactive test, offer supportive counselling and a confirmatory test, explain the need to return for results. • Start the conversation about where/how he can access HIV care. If he previously showed an interest in addictions support this is still important. • Protecting casual partners; he now has an obligation to disclose; he should be provided with information on the HIV Legal Clinic of Ontario (HALCO). • Can he notify his past partners? Does he need help doing so? • Explain U=U. <p>Other considerations:</p> <ul style="list-style-type: none"> • Provide information about Naloxone and where/how to obtain it. • Either now (or at follow-up), ask if his drug use is a problem for him and try and refer appropriately. 	
<p>Scenario 8</p> <p>You see a young man named Chris, who tells you he was couch surfing at a friend’s house when two friends overdosed. One friend is still in hospital.</p> <p>The client feels he had a close call. He says he regularly injects drugs, and that Percocet is his drug of choice.</p> <p>He and his friends regularly get clean disposable needles from a local needle exchange program.</p>	<p>What needs to be asked or clarified:</p> <ul style="list-style-type: none"> • Is this his first test? When was the last time he tested for HIV – and what was the result? <p><i>Partners:</i></p> <ul style="list-style-type: none"> • Who does he have sex with? What sex does he have with these partners? • Ask if there is any HIV risk associated with partners? (For example, are they HIV positive with detectable viral loads?) <p><i>Practices:</i></p> <ul style="list-style-type: none"> • Does he have sex while high? Any concerns about sexual HIV risk activities? <p><i>Protections:</i></p> <ul style="list-style-type: none"> • Probe the comment, “almost never share needles...”. Does he need support with harm reduction? 	<p>POC Test = non-reactive</p> <p>Serology Test = non-reactive</p>

<p>He says they almost never share needles.</p>	<ul style="list-style-type: none"> • For his sex practices, does he use condoms? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • The window periods for POC testing and Serology testing. • Explain that he can receive a POC now, but it would be baseline for any recent risk, if the baseline is negative, offer Serology testing. Recommend a return for testing at three weeks, and again at six weeks. • Discuss routine testing. <p>Other considerations:</p> <ul style="list-style-type: none"> • Chris may be at a point in his life when he is reassessing his drug use. Does he want/need support around managing his drug use? Could you refer him somewhere? • Provide information on Naloxone, where and how to obtain it. • Since he is regularly accessing harm reduction supplies, is there someone he'd like to work with at that service to get support? • Does he need support with housing? Could you help him find a referral? 	
<p>Scenario 9 George, a 30-year-old gay man, hooked up with someone he met at a bathhouse. The man he hooked up with told him he was on PrEP. They decided not to use condoms. Both had condomless anal sex. Three weeks later, George developed a body rash, a sore throat, and a high fever. He rushed into your clinic for an HIV test.</p>	<p>What needs to be asked or clarified:</p> <ul style="list-style-type: none"> • Is this his first-time testing? When was his last test? What was the result of any prior testing? <p><i>Partners:</i></p> <ul style="list-style-type: none"> • Did he have sex with anyone else other than the one person at the bathhouse? • Has he had sex with any other men recently who were HIV positive, or undetectable, or whose HIV status he was unaware of? <p><i>Practices:</i></p> <ul style="list-style-type: none"> • Was he a top or bottom or both? <p><i>Protections:</i></p> <ul style="list-style-type: none"> • Does he mostly use condoms? Other prevention approaches? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • The window periods for POC testing and Serology testing. 	<p>POC Test = non-reactive</p> <p>Serology Test = reactive</p>

	<ul style="list-style-type: none"> • Explain that he can receive a POC now, and if negative, offer Serology testing. Recommend a return for testing at three weeks, and again at six weeks for Serology testing. • Is he also being tested for other STIs? Help coordinate further testing for this person. (These symptoms are similar to syphilis and MPOX) • Note: this is client is at high risk, be sure to ask: What supportive people does he have in his life if he did test positive today? <p>After a positive test:</p> <ul style="list-style-type: none"> • Offer supportive counselling and have information about HIV care options prepared for his return visit. • Prompt treatment will protect his health and others. • Protecting casual partners; he now has an obligation to disclose; he should be provided with information on the HIV Legal Clinic of Ontario (HALCO). • Can he notify partners? Does he need help doing so? • Explain U=U. 	
<p>Scenario 10</p> <p>You see Roy, who is in a long-term relationship with another man who has been HIV positive for eight years. Roy's partner has had an undetectable viral load for the past seven. For the past five years, they have been monogamous and having condomless anal sex. Roy tests for HIV routinely.</p> <p>Two years ago, Roy and his partner decided to have sex with other people as well. Five months ago, Roy met a partner on a social media site, who told him he was HIV negative. They decided to</p>	<p>What needs to be clarified:</p> <ul style="list-style-type: none"> • What is Roy's rationale for seeking testing routinely? What is routinely for Roy? (Quantify testing frequency to see if it aligns with the guidelines.) <p><i>Partners</i></p> <ul style="list-style-type: none"> • Had Roy had any partners other than the two he mentioned? <p><i>Practices</i></p> <ul style="list-style-type: none"> • Roy reported having anal sex. Does he top? Bottom? Both? • Does Roy use any injection drugs? <p><i>Protection</i></p> <ul style="list-style-type: none"> • Roy reported that his sexual partner from 5 months ago used PrEP. Does Roy use PrEP? Does he know what PrEP is and how to obtain it? • Does Roy use condoms ever? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • Explain U=U • The window periods for POC testing and Serology testing. 	<p>POC Test = non-reactive</p>

<p>have condomless anal sex. Roy has now come in for his routine test.</p>	<ul style="list-style-type: none"> • Explain that he can receive a POC now, but it would be baseline for any recent risk, if the baseline is negative, offer Serology testing. Recommend a return for testing at three weeks, and again at six weeks. • Discuss routine testing. 	
<p>Scenario 11</p> <p>A 60 year old man visits bath houses and has anal sex infrequently (once a month or less). Most people he has sex with want to have condomless sex. He finds it hard to negotiate, and gives in. This causes him anxiety, as a result, he tests for HIV frequently, hoping for a negative result.</p> <p>He is already taking many other medications for other health issues and does not want to take another pill (PrEP) everyday if he can avoid it.</p> <p>Due to him being on a fixed income as well, he finds the ongoing cost of PrEP prohibitive.</p>	<p>What needs to be asked or clarified:</p> <ul style="list-style-type: none"> • Is this his first-time testing? When was his last test and the result? <p><i>Partners:</i></p> <ul style="list-style-type: none"> • Try and gauge the number of times he has anal sex when he visits the bathhouse. • Does he have sex partners outside the bathhouse in between bathhouse visits? Only men? <p><i>Practices:</i></p> <ul style="list-style-type: none"> • Is he top or bottom or both when he has sex with other men? <p><i>Protections:</i></p> <ul style="list-style-type: none"> • Does he know whether any, some, most of his partners are on PrEP? <p>What needs to be discussed:</p> <ul style="list-style-type: none"> • When was his last risk? • The window periods for POC testing and Serology testing. • Explain that he can receive a POC now, and if negative, offer Serology testing. Recommend a return for testing at three weeks and again at six weeks for Serology testing. • Recommend STI testing? • Note: this client is at high risk, be sure to ask what supportive people does he have in his life if he did test positive today? <p>After a negative test:</p> <ul style="list-style-type: none"> • Discuss PEP, depending on last risk. • Discuss PrEP for ongoing risk and suggest he speak with a PrEP provider • Share information on the Ontario PrEP Start program, which provides some temporary coverage for PrEP costs: https://ontarioprep.ca/pepstart/ 	<p>POC Test = non-reactive</p> <p>Serology Test = non-reactive</p>