Reviewer’s report

Title: Trial and error: Evaluating and refining a community model of HIV testing in Australia

Version: 0 Date: 05 Apr 2017

Reviewer: Joseph Debattista

Reviewer's report:

A very interesting, well written, concise and relevant piece of work that will be of great value to service planners seeking to enhance community based HIV testing. I believe this paper has raised a number of important issues concerning the implementation of HIV RPOCT and its relation to broader sexual health testing. Congratulations and thanks to all the authors and those involved in this study.

On a minor note, there were a few grammatical/syntax/expression issues to note:

Line 49 and 56: the word "vast" is difficult to quantify and a little emotive. It might be preferable to either drop it or use an actual number.

Line 68: Delete "the" before the word "jurisdictional"

Line 71: insert full stop after "exists"

Line 342: modify sentence to read "...lower preference for peer testers..."

Line 352: Would be preferable to have a number instead of "overwhelming majority"

Line 376: Check spelling of "gonorrhoea"

Line 386-388: Check sentence structure.

My other overall comments are:

Amongst the group that were disinclined to seek STI testing after Pronto!, do we have any analysis as to their demographics, risk behaviour or previous testing behaviour that might differentiate them from those who self report a likelihood to seek testing?

Given that many people tend to undertake sexual health testing opportunistically as part of an overall medical consultation, it may be difficult to determine whether a self reported intention to test or not test is really indicative of actual testing. Given the significance and importance of this paper's conclusions, that standalone community based HIV RPOCT may inhibit wider STI
testing, it would be useful if the authors could suggest what studies might be undertaken in future that could better verify this conclusion eg cohort longitudinal studies, or studies of overall GP access by Pronto! Attendees

The discussion refers to initiatives undertaken at VAC to address the need to integrate STI testing with HIV RPOCT. It would be useful to look at other diagnostic innovations that break the link between STI testing and clinician oversight/laboratory based pathology, in particular, the potential for POC technology for chlamydia and gonorrhoea (GeneXpert) as being trialled through TTANGO in Northern Australia or the RAPID clinic in Brisbane. The issue of Medicare payments and remote use of clinicians to order pathology on self collected tests would be interesting to discuss further, even if only to point out the limitations of the current Medicare system. I acknowledge this was mentioned in the paper, but I wonder whether there could be an opportunity here for this research to advocate for a system change.

My comments above are merely suggestions and should not be seen as prescriptive conditions set for publication.

Best wishes and many thanks

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Unable to assess

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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