Discussion of Care Integration Best Practices & Challenges

Alicia Downes, LMSW
Snr Program Manager-AIDS United

Peter Coronado, Jr-Valley AIDS Council
Director of Linkage to Continuum of Care
South Central AETC LPS Coordinator

Objectives

- Identify collaborators who support linkage and retention in care
- Recognize key challenges that prevent clients from staying in care
- Develop and apply strategies to case studies
National AIDS Strategy

- Reduce New Infections
- Increase Access to Care and Improve Health Outcomes for People Living with HIV
- Reduce HIV Health Disparities and Health Inequities
- Achieve a more Coordinated National Response to HIV Epidemic

Key Areas To Change

- Positive and unaware of diagnosis
- Aware of diagnosis and not engaged in care
- Not virally suppressed
Identify Collaborators Who Support Linkage and Retention In Care

What Cities are represented?

- Group Assignment
- Name agencies that are invested in HIV Care…
- What collaborations occur?
- Identify Key Players at the agencies.
The Current Landscape

- New Mexico 2015 HIV Data

Recognize Key Challenges That Prevent Clients from Staying in care
Benefits of Focusing on Retention in Care:

- Positive Health Outcomes
- Regular visits allow for treatment adherence and clinical monitoring
- Lead to improved viral load suppression
- Reduced Opportunistic Infections
- Decreased Resistance
- Reduction in mortality

Activity

- What prevents people from testing?
- What gets in the way of clients engaging in medical care?
- What are the barriers to viral suppression?
Individual Barriers to Retention in Care

- Health beliefs
- Not liking a provider
- Not feeling well enough to come to clinic
- Feeling well and not understanding the need for regular HIV care even when feeling well
- Forgetting clinic appointments
- Substance use and mental health challenges

Individual Barriers to Retention in Care

- Insufficient financial resources and/or lack of insurance
- Housing issues
- Fears related to treatment
- Competing time demands such as work and other appointments
- Limited access to transportation
- Family responsibilities and/or need to care for others that may supersede self-care
Structural Barriers to Retention in Care

- Inconvenient clinic hours; especially for patients who work
- Staff turnover-CMs, Providers
- Clinic is not located in areas with accessible public transportation
- Homophobia, racism, discrimination and stigma
- Cycling in and out of prison

- Long wait time from making appointments to actual visit, especially for first appointment
- Registration requirements for appointment
- Culturally insensitive treatment from the front desk to the provider
- Language barrier
- Coordination of care
Develop and Apply Strategies to Case Studies

Activity

- What can you do to get more people to test?
- What can you do to help clients engage in medical care?
- How can you increase the number of clients with viral suppression to 81%?
Ways to Improve Retention

- Comprehensive and easy access to services
- Decreasing structural barriers
- One-Stop-Care
- Creating a clinic environment that is welcoming
- Providing Basic Education
- Teaching patients skills to help them stay in care

Models of Care

- Multi-disciplinary Teams
- Monitoring Patient Retention/Retention Team
- Mobile Care Teams
- Tele-Health/Medicine Team
**Multidisciplinary Team**

- Doctor
- Nurses
- Mental Health
- Peer Educator
- Social Worker

- **Peer Center**

**Monitoring Patient Retention**

- **Active Patient List**
  - Identify patients who have fallen out of care
  - Monitor Patient attendance over time
  - Track individual patient attendance patterns
  - Measure the rate of patient retention at your clinic
  - Observe trends in patient retention and demographics
Retention Team
Goals:
- Identify list of patients not in care
- Determine ways of locating patients
- Develop plan to re-engage
- Identify ways to retain patients in care

Mobile Care Teams
Services:
- HIV Testing
- Hep C Testing
- Routine HIV Primary Care
- Laboratory Services
- Medication Assessment
Telemedicine/Telehealth

Services:
- Prison Systems
- Veteran Administration
- Hospitals
- HIV Care in Rural Communities

Cases and Strategies Applied

- At your clinic you’ve been assigned to develop a plan to identify and re-engage patients who have not had a medical appt. in 9 months (lost to care patients). Develop a plan to implement. Include all members of the your team.

- You are part of the agency Quality Improvement Team. You have been instructed to develop a Patient Retention Plan that includes reducing the Patient Appt. Gap Measure from 18% to <10%. Develop a strategy for implementation.

- What strategies would you have developed and implemented to address the Rural Indiana HIV/Hep C outbreak? Your plan must include a retention in care strategy.

- There is a large HIV and Mental Health Homeless problem in your city that leads to patients not retained in care. Develop a plan and strategy to include community partners and teams to address the need.
References

- www.aids.gov
- From the Mountain Plains AETC. Retention in HIV Care: A Guide to Patient Centered Strategies, May 2011
- New York State Department of Health AIDS Institute

Contact Information

- Alicia Downes, LMSW
  - aliciad8904@gmail.com 816-304-3000
- Peter Cornado
  - peterc@westbrookclinic.org 956-507-4828