Harnessing Local AETC Partnerships, Resources and Clinic Staff to Jumpstart Quality Improvement/Practice Transformation Projects

Kathryn Burklund
Darla R. Krom, MSW, LISW
Disclaimer

- Speakers do not have financial conflicts to disclose
Disclosure

This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling $3,139,511.00 with zero percent financed by non-governmental sources. The contents are those of the authors(s) and do not necessarily represent the official view of, nor an endorsement by, HRSA, HHS, or the U.S. Government.
Learning Objectives

- Describe evidence-based and replicable interventions for improving projects along the HIV care continuum through practice transformation
- Identify at least 3 benefits to partnering with an outside agency on quality improvement/practice transformation projects
- Identify one or more strategies to implement related to programmatic, fiscal, data and/or quality management change that can enhance and/or support care along the HIV care continuum
- Identify at least 2 promising practices, innovations, tools or resources to support priority goal setting and resource allocation along the HIV care continuum
Aids Education & Training Centers
MATEC
AETCs- AIDS Education and Training Centers

- Ryan White Part F
- Federally funded through HRSA HAB for over 30 years
- Traditionally provide education and technical assistance to healthcare professionals
- Part of a national network of AETCs, serving all states and territories and including four supporting national centers
- Aim is to develop and transform the health care system and its workforce to advance equitable and patient-centered care
MAETC AETC

- We cover Minnesota and Iowa
- Our programming is tailored to our state/local audience
- Support to clinics/hospitals/community-based settings
- Support to individuals
- All of our programs are no cost and easy to access
  - Join mailing list if interested
Primary Health Care
The Project of PHC
Primary Health Care Serving People With HIV

Federally Qualified Health Center

- Mission - to provide healthcare and supportive services to all, regardless of insurance, immigration status, or ability to pay
- PHC has 400 employees; 8 medical clinics, 4 dental offices, pharmacy

Ryan White Part B & C Services

- 744 active patients living with HIV
Patients receiving care at The Project have access to many services under one roof, including:

- Medical
- Dental Care
- Pharmacy
- Behavioral Health
- Supportive Services & Programs (HIV, Homeless Support Services)
The Project of PHC Model of Care

The goal of The Project of PHC is to provide confidential, free or low-cost services to help people living with HIV move through the continuum of HIV care.

- Provider - PHC Medical Provider monitors care and prescribes medications
- Nurse Care Manager - Provides support for medical needs
- Case Manager - Provide and connect patients with supportive services
The Project of PHC

- **Prevention**
  - HIV, STD and Hep C testing
  - Outreach and education
  - Mobile and at home testing

- **Medical**
  - HIV, STD and Hep C treatment
  - Nurse care management and pharmacy
    - Med adherence and sexual risk counseling
    - Sliding fee scale, financial assistance

- **Case Management**
  - Oral care, referrals, financial assistance, labs, mental health, substance use, food, housing and transportation assistance, bike program and smoking cessation
The Project of PHC - Highlights

- Viral suppression – 93%
- Patient adherence supplies and education
- Sexual risk counseling
- Support groups
- Mobile health - 27 ft. RV
- Telehealth
Practice Transformation
Practice Transformation

Practice Transformation is defined by the Centers for Medicare & Medicaid (CMS) as “a process that results in observable and measurable changes to practice behavior.”

Through coaching and practice facilitation, the goal is for the AETC’s to assist partner community health centers in enhancing outcomes along the HIV care continuum.
Practice Transformation Project with Iowa AETC (MATEC)

PT Project funded July 2019 – June 2024

- 2019-2020 - 1st year baseline data work & relationship building
- 2020-2021 – Set priority goals and action plans based on baseline data
  - Special Projects (3)
- 2021-2022 – Revised, deleted and added new goals and action plans based on annual data and clinic needs
  - Special Projects (4)
- 2022-2023 – Current year
Annual Assessments

- Organizational assessment
- Data and performance measures
- Provider/staff assessment
PHC HIV Care Continuum & Goals

Prevalence-based HIV Care Continuum, U.S. and 6 Dependent Areas, 2019

- Diagnosed: 87%
- Received Care: 66%
- Retained in Care: 50%
- Viral Suppression: 57%

Linked to Care: 81%

PHC HIV Continuum of Care

- Tested (Baseline Aug 2018 - July 2019): 13%
- Diagnosed (Baseline Aug 2018 - July 2019): 15%
- Linked to Care (Baseline Aug 2018 - July 2019): 87%
- Internal Linkage (Baseline Aug 2018 - July 2019): 83%
- Engaged in Care (Baseline Aug 2018 - July 2019): 64%
- Prescribed ART (Baseline Aug 2018 - July 2019): 74%
- Virally Suppressed (Baseline Aug 2018 - July 2019): 92%

COVID-19 reduced labs

*COVID-19 reduced labs*
Individual support for clinicians
- National HIV Curriculum
- Lifelong Learners Program

Capacity Building
- Policy & procedures project for HRSA Part C clinical and administrative requirements
- LGBTQ+ friendly clinic

PHC HIV Care Continuum & Goals

[Diagram showing GOAL: 75% reduction in new HIV infections in 5 years and at least 90% reduction in 10 years.]

- Diagnose all people with HIV as early as possible.
- Treat people with HIV rapidly and effectively to reach sustained viral suppression.
- Prevent new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and service programs (SSPS).
- Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.

HHS will work with each community to establish local teams on the ground to tailor and implement strategies to:
Replicable Practices: PT Special Projects
Project Selection

Developing Goals & Action Plans
- Annual assessments
- PT Champion discussion
- Staff and clinician input

Special Projects
- PT project goals that are stalled and/or could benefit from internal staff effort
- Projects of interest at PHC for years without time, resources, and staffing to progress
- Conversations and meetings among PT coach and project director
PT Special Projects

- **2020-2021**
  - HIV opt out testing
  - Healthcare Equality Index, LGBTQ+ patient-centered care
  - Methamphetamine harm reduction

- **2021-2022**
  - Viral suppression celebration
  - Passport to care
  - Aging population support
  - Mosaic, LGBTQ+ patient-centered care
Contracts

- MATEC contracted with staff, not the clinic
- Bonus opportunity to increase staff pay
- Payment per steps/goals NOT per hour
- Work completed outside of clinic hours
Staff Selection

- Staff interests
- Recognized for future advancements
- Work independently
- Could benefit from a bonus

Positions include:

- 2020-2021
  - Prevention Services Manager*
  - Prevention Specialist*
  - Housing Case Manager*

- 2021-2022
  - Nurse Care Manager
  - Pharmacist
  - Behavioral Health Consultant

*Promotions after project completion
Structure

- Clearly defined actions, steps, goals and timeframes
- PT coach preparation of best-practice research on each project
  - HEI Criteria
- Data to support the need and evaluate gaps in care
- Regular meetings/check-ins
- Tracking of staff time
Meetings

- Meetings were scheduled during lunch to avoid conflict of clinic responsibilities and paid time
- Onboarding orientation meeting
- Regular meetings upon completion of steps, often weekly
- Final meeting including presentation of final documents
- Post project presentations:
  - Staff meetings and Executive Leadership
  - PHC Board meetings and Consumer Advisory Board meetings
Scope of Work - HIV Opt Out Testing

- Data review and summary
- Review best practice document
- Best practice policy, procedure, and workflow research & review
- Project Charter
- Develop draft policy, procedure, and workflow
- Draft training and implementation plan
HIV Opt Out Testing

Achievements:

- 13 clinic/organization contacts
- 38 sample P&P documents & best practice articles
- 7 best practices for EMR implementation
Sample Documents Created: HIV Opt Out Testing

- PHC HIV testing data
- Project charter
- Policy
- Procedure
- Workflow
- Sample Script
- Training plan
Scope of Work - Healthcare Equity Index (HEI)

- Project Charter
- Review of Human Rights Campaign website, requirements, and documents
- Review and research PHC status for all HEI criteria
- Determine stages of change and rate PHC for all HEI criteria
- Note strengths and weakness within each category
- Draft action plan for HEI certification

Scope of Work to be completed by June 30, 2021. PHC staff selected will work on this project outside of PHC paid time. Payment for project completion will total $3250, to be paid in increments as target action steps are completed. Anticipated number of hours for the project is 65 hours.

PHC staff will work closely with MATEC PT Coach and provide detailed reporting on all action steps. An introductory meeting with the MATEC PT Coach and HIV Program Director will be the start of the project. Some additional virtual meetings may be required to touch base and adjust/add to action steps as needed. Please note that meetings will be scheduled during the lunch hour to not interfere with PHC staff time. A final presentation meeting will be held with MATEC PT coach and MATEC management. Project staff will need to be prepared to attend an executive board meeting with the HIV Program Director and assist in presenting the project, to be completed after June 30, 2021.

Action Steps
1. Develop and maintain google doc folder of all resources gathered, notes, etc
2. Finalize Project Charter draft developed by HIV Program Director
3. Review the Human Rights Campaign Foundation National LGBTQ Healthcare Equity Index Center of Excellence website, requirements and documents
   a) Healthcare Equity Index Resource Guide
   b) Guidelines for Quantum Leap with Multiple Locations
   c) HSE 2021 Rating System and Methodology
   d) HEI Scoring Criteria
      i) Be sure to click on each blue section’s + for more details
   e) HIV 2021 Question Requirements Grid
4. Determine single site vs whole organization requirements
   a) Coordinate meeting with HEI staff**
      i) MATEC PT Coach has emailed with HEI and they would like to talk regarding
      ii) Connect with HEI to set meeting with MATEC PT Coach and HIV Program Director
   b) Meet with MATEC PT Coach and HIV Program Director and present data and progress in steps 1-4
5. Prepare to rate all required HEI criteria
   a) Review the HIV 2021 Question Requirements Grid and Readiness to Change, document that will be used for this project
   b) See boxes 50-65 for stages of change rating guidance
   c) Learn about the public health stages of change model by visiting two sites:
      i) Stages of change google site
      ii) Australian Department of Health
6. Meet with MATEC PT Coach and HIV Program Director to discuss steps 6
7. Determine stages of change and rate each HEI criteria
   a) Research the progress and stage of change for PHC University clinic for each HEI criteria
   b) Using the public health stages of change model, rate each HEI criteria on the HIV 2022 Question Requirements Grid and Readiness to Change document, columns a-e
   c) Include hyperlinks of all relevant policies, procedures or documents in column K
   d) Include all relevant notes, why you rated it a certain way, in column L, including:
      i) What research you did to determine rating
      ii) Staff you consulted
   e) Include notes on changes required to successfully meet HEI criteria, if not rated as maintenance meeting best practice criteria
8. Meet with MATEC PT Coach and HIV Program Director and present data and progress in step 6 and discuss step 7
9. Draft action plan for HEI certification
   a) Utilizing the data in step 6 to develop an written action plan to successfully meet all requirements
      i) Utilize columns M to develop detailed action plan
      ii) Develop an action plan in a word document, see example. Details may include:
         1) PHC staff responsible for changes
         2) Key PHC staff important to meeting timeline
         3) Budgetary considerations to make changes
         4) Structural changes needed
         5) In collaboration needed for training with outside agencies or is there a trainer internal
   b) Meet with MATEC PT Coach and HIV Program Director and present drafts and progress of complete project

Payment
The agreed payments will total $3250 with successful completion of all seven steps. A detailed summary of each step and hours worked must be submitted to the MATEC PT Coach for each step.

Payment Breakdown
Steps 2-4 - $1500 payment with target date of May 31, 2022
Steps 5-6 - $1500 payment with target date of June 30, 2021
Step 7 - $1250 payment with target date of June 29, 2021
Sample Documents Created: HEI

- HEI criteria excel sheet (60+ criteria) with:
  - Requirements and validation materials needed
  - Links to PHC required documents
  - Rating & “Stages of Change”
  - Notes on readiness to change
  - Notes on strengths/weaknesses
- HEI draft action plan (8 page document)
Benefits
to partnering with an outside agency on quality improvement/practice transformation projects
Practice Transformation Benefits to Clinic

- Outside partner to facilitate change and quality improvement projects
- PT Coach can do the preliminary research and draft documents
- Allows clinic to analyze data and review priority projects
- Provides access and equitable health care
- Special emphasis: MATEC resources allowed us to accomplish so much more
Special Projects Benefits to Clinic

- Provides education for clinical and nonclinical staff to know more about the topic area

- Prescreening - (testing or questionnaires) catches health concerns early or earlier

- Opt Out Testing:
  - #1 reason, it's just good practice
  - Normalizes efforts & a method of eliminating stigma.
  - Closes the gap - catch those missed opportunities to educate and test
Special Projects Benefits to Staff

- Develop new skills and responsibilities
- Adds to their professional portfolio
- Opportunity for future job projects and/or promotions
- Self initiative to expand project scope and reached out to peer clinics
- Recognition by other leaders and departments
- Have become the internal “expert” on the subject
Special Projects Benefits to PT Project

- PHC has a strong intent to do transformation
- Strong partnership/trust with PHC & Program Director
- Valuable insight from front line staff
- Accelerated work within the PT project goals
- Would not have completed the amount of work, or depth, within the project year without the staff support

*Note, the special projects did NOT decrease coach work, but rather increased the workload
Thank you!!

Kathryn Burklund
Project Manager
She | Her | Hers

Midwest AIDS Training + Education Center (MATEC) - Serving Minnesota and Iowa
University of Minnesota, Twin Cities Campus
Department of Public Health

P: (865) 824-7385
kburklun@umn.edu
https://matec.info/minnesota-iowa

Darla R. Krom, MSW, LISW
Program Director
They | Them | Theirs

The Project of Primary Health Care (PHC)
1200 University Ave. Suite 120 Des Moines, IA 50314

O: (515) 248-1517 I F: (515) 248-1830
dkrom@phcinc.net
phciowa.org
phctheproject.org
MATEC Resources

Clinical Consultation Center
http://nccc.ucsf.edu/
- HIV Management
- Perinatal HIV
- HIV PrEP
- HIV PEP line
- HCV Management
- Substance Use Management

AETC National HIV Curriculum
https://aidsetc.org/nhc

AETC National HIV-HCV Curriculum
https://aidsetc.org/hivhcv

Hepatitis C Online
https://www.hepatitisc.uw.edu

AETC National Coordinating Resource Center
https://aidsetc.org/

Additional Trainings
https://matec.info
Questions and Discussion