

# The ABCs of Creating a Welcoming Clinic for Older Adults with HIV

“A senior friendly environment requires commitment from administrators and all staff that provide care for the senior population. They must take into consideration the appropriateness of the environment, process of care, ethics, as well as the emotional and behavioral environment of the facility.”

Joanne O’Keefe, 2020



A

## Accommodations

- Clinic is fully accessible (e.g., handrails, ramps, seating with support & stability, bathrooms equipped with emergency pull strings, & no fall hazards)
- Pamphlets, signs, forms, & paperwork have larger-sized fonts
- Staff are available to assist with smartphone applications (e.g., patient portal & telehealth apps) & other patient communication tools (e.g., text messages or emails)
- Paper forms & documents are available with health literacy accommodations
- Professional medical interpreter services are available in the patient’s primary language & provided as needed
- Background noises are kept to a minimum (e.g., waiting room TV or music)

B

## Basic Cognitive/Sensory/Motor Assessments

- Cognitive assessment completed (e.g., patient engagement, level of awareness, interaction with environment)
- Motor function assessments completed
- Vision & hearing assessments completed
- Mental health assessments completed
- Alcohol & substance use assessments completed
- Pain assessment completed

## C



### Caregiver & Community Connections

- Patient identified supports (e.g., relatives, friends, spouse/partner, &/or community-based advocates) assessed & documented
- Assess for & address social isolation & elder mistreatment
- Recognition & collaboration with community-based organizations & agencies (e.g., home care, transportation, food services, & legal services that are HIV, LGBTQIA+, & senior welcoming)
- Establish outpatient follow-up to ensure patient understands & can implement plan
- Eligibility assessment & referral to long-term care settings as needed
- Suggest patient journaling to keep track of questions & concerns before, during, & after each visit

## D



### Documentation

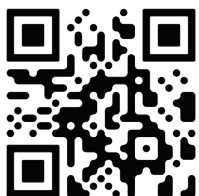
- Provide simple step-by-step instruction sheets for self-monitoring tasks (e.g., blood pressure, blood sugar)
- Remind patients to have a list of their medications & supplements at every visit
- Assess information retention through teach-back method & questioning
- Review coordination of care team roles, follow up appointments, & means of communication with patient
- Coordinate specialist consultations as needed
- Identify status of healthcare proxy & living will

## E



### Emotional Sensitivity

- Identify what matters most for each patient at each visit
- Speak slowly with direct eye contact
- Include diverse populations & groups (i.e., LGBTQIA+, multicultural, spirituality) in visual materials & language used with patients; ensure relevance to care
- Use motivational interviewing
- Discuss & counsel on sexual health
- Assure patient needs are being addressed through referrals & team based care



#### Scan for “HIV and the Older Person”

Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV. Department of Health and Human Services. 2024. <https://clinicalinfo.hiv.gov/en/guidelines/adult-and-adolescent-arv/hiv-and-older-person?view=full> Accessed April 17, 2024.

#### For more references

[aidsetc.org/olderadults](https://aidsetc.org/olderadults)