

MENTORING IN COMMUNITY-BASED HIV PRACTICE: FUTURE DIRECTIONS FOR THE EXPANSION OF THE HIV WORKFORCE



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Introduction

In response to the National HIV/AIDS Strategy and Affordable Care Act's demand for access to care and subsequent need for primary care providers that treat and care for people living with HIV/AIDS, MATEC created a selective longitudinal training program. The MATEC Clinician Scholars Program is a 12-month clinician mentoring model that intends to increase the number and diversity of primary care providers who are able to deliver high-quality HIV/AIDS care to underserved and disproportionately affected populations in their communities. It is a standardized, yet participant-centered program.

Building Skills, Knowledge & Local Connections

Cohort Classes – Scholars learn about the full spectrum of core and advanced HIV/AIDS concepts in a small cohort classroom setting, including teleconferences and webinars Clinical Consultation – Scholars consult with clinicians experienced in diagnosing and managing HIV/AIDS patient care

Networking – Scholars meet local and regional HIV experts and become HIV/AIDS leaders in their communities

Mentorship – Scholars are matched with a member of MATEC's clinical leadership to guide their experience

Clinical Interaction – Scholars observe the care of HIV/AIDS patients, participate in simulated patient care scenarios, and respond to case presentations

Demographics

To date (Fall 2012), the program has enrolled 40 clinicians. Twenty-seven of 28 Scholars (96%) enrolled in the 2010 and 2011 cohorts have successfully completed the program. Thirteen Scholars are currently enrolled in the 2012 cohort and actively engaged in learning. Participants differ with regard to profession, level of experience in HIV care, and clinical learning objectives/goals. Eighty percent (80%) of participants are female; 20% are male.

Each Local Performance Site (LPS) in MATEC's region recruits applicants and engages Scholars based on the HIV epidemiology in the respective state and capacity to provide mentorship and training opportunities. See Scholars location of practice (figure 1) and Scholars by Discipline (figure 2) for recruitment details.

Figure 1. Scholars Location of Practice (2010-2012) N=3 8% N=13 32% Illinois Indiana Iowa Michigan Minnesota Missouri Wisconsin

Scholars' Self-Identified Goals of Participation

Clinical Care Capacity

- Medication management
- Drug interactions
- Co-infection expertise

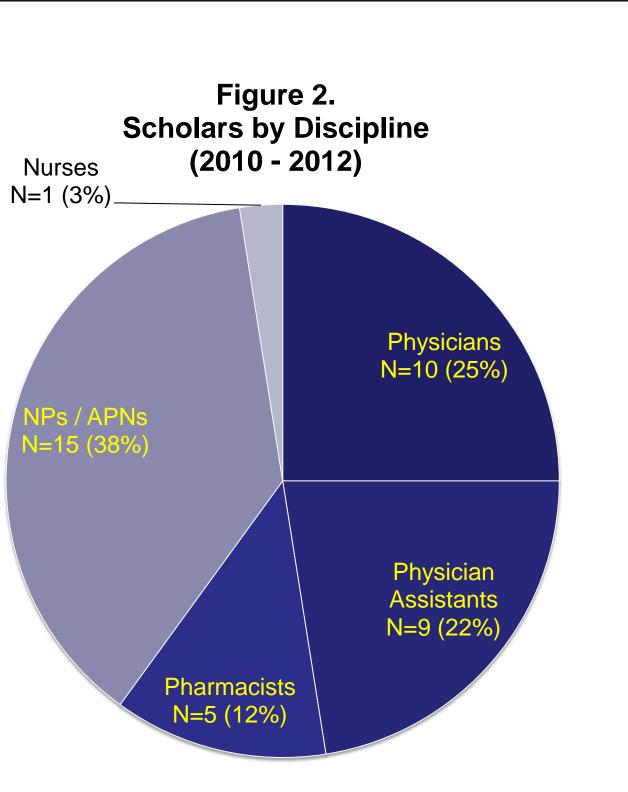
Increase HIV patient load

Exposure to or expansion of patient populations

Connect with HIV care providers

- Bridge gap between primary care and infectious disease care
- Access to HIV-experienced clinical leadership as mentors and coaches
- Improve communication with patients and colleagues by learning about provider styles and strategies

Build skills as an educator / trainer



Results

Findings from Scholars Cohort Exit Interviews

- Every scholar interviewed reported knowledge change
- Every scholar interview reported skill acquisition

Self-Reported Evidence of Increased Skill Set and Patient Load as a Result of Being in Program

I'm [seeing] over 20 patients now. I don't know how many exactly, maybe 20, 22 patients and quite a variety of people. I mean, I've had a few people that have had it [HIV] for a long, long time and never been on therapy, some that I've started on therapy. I've had some that have been just recently diagnosed that I've started on therapy, some that are diagnosed that are stable and not on anything, some pregnant patients...

It used to be I'd get them in and they'd be sick and I'm like, "Ah, what do I do? I have an HIV patient and they're sick!" ... Most of the time, you treat them like any other patient who is sick. So, it kind of calms me down a little bit to know that, so I think I've gotten better at dealing with that.

Lessons Learned

Relationships with and availability of mentors was the most mentioned and highest impact component of the program

Twelve months is indeed enough time in this structure to indentify evidence of knowledge and skill acquisition

The Goodness of Fit Between Scholars' needs and LPS depends on:

- Proximity to LPS staff and mentor
- Range of experience and expectations