



SPNS Workforce Capacity Building Initiative

Practice Transformation

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Disclaimer

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Overview

Site: Family Health Centers of San Diego (FHCS D)

- Private 501(c)3 Federally Qualified Health Center
- Operates 22 clinic sites throughout San Diego County
- Largest provider of HIV services in SD County
- Approximately 1,300 persons living with HIV per year
- Patient population racially/ethnically diverse, low income

Goal: Expand the capacity of FHCS D to provide specialty HIV care through system-level structural changes

- Train primary care providers (MD, DO, NP, PA) and family medicine residents to provide HIV specialty care
- Expand care from one to several additional clinic sites
- Train support staff at the additional clinic sites in HIV services

Capacity

Capacity requirements for success:

Agency

- Buy in from different levels of agency (staff, clinic directors, supervisors, providers)
- Clinics and medical providers willing to initiate HIV medical care
- Physician champion (i.e. committed faculty trainer) on staff or external HIV specialist
- Staff champions available to train support staff

Adequate Funding

- HIV physician champion or identified specialist - training time
- Existing medical providers - fill clinic hours missed with per diem providers
- Support staff – pay for training outside of business hours
- External persons/agencies – to train support staff for topics not available from in-house champion staff

Capacity (con't)

Resources for success: Medical Providers

- AIDS Education & Training Centers (AETC)
 - National HIV Curriculum (www.hiv.uw.edu)
- HIV specialist champion with time for consultation after training complete
- American Academy of HIV Medicine (www.aahivm.org)
- Internal educational case reviews/meetings
- Pacific AETC's HIV Learning Network telehealth program

Resources for success: Support Staff

- Existing staff expertise to lead certain training topics
 - Internal processes, patient flow, insurance, HIV programs & referrals
- Developed curricula
 - AETC at University of California San Diego, Coldspring Center
- Staff champions willing to train other staff



Implementation: Medical Providers

Training Model – Medical Providers

Curriculum:

- Multi-modal and longitudinal training program culminating in American Academy of HIV Medicine (AAHIVM) specialty certification
 - 24 months for family medicine residents
 - 6 months for existing primary care providers

Methods:

- Immersive clinical **preceptorship**: rotations of one to two and a half days per month progressing to preceptoring then empanelment (assigned own patients)
 - **Independent study** (see next page)
 - **Specialty consultation** (ongoing via text, telephone, electronic)



Implementation: Medical Providers (con't)

Training Model – Medical Providers

Independent Study

- HIV Online Curriculum: National HIV Curriculum (University of Washington)
- HIV Webstudy/Question Bank (AETC)
- Telehealth (Pacific AETC HIV Learning Network)
- Telehealth recorded sessions (Northwest AETC)
- Hepatitis C Curriculum (University of Washington)
- Weekly Hepatitis C huddle (FHCSO)



Implementation: Support Staff

Training Model – Clinical Support Staff

Curriculum: 2-hour sessions both in person and online, approximately once per month for a period of six months

Topics:

- HIV 101 (Pacific AETC)
- Hepatitis C 101 (Pacific AETC)
- Cultural Competency/Sensitivity (Pacific AETC)
- HIV Pre-Exposure Prophylaxis (Existing staff)
- HIV Resources and Referrals (Existing staff)
- Trauma Informed Excellence (Coldspring Center – hired)



Implementation: Adaptations and Successes

Adaptations

- **Provider curriculum:** rotation days modified as needed (1 to 2 ½ days per month); existing provider curricula shortened to six months, resident curricula lengthened to 2 years
- **Staff curricula:** Offered repeated courses as refresher

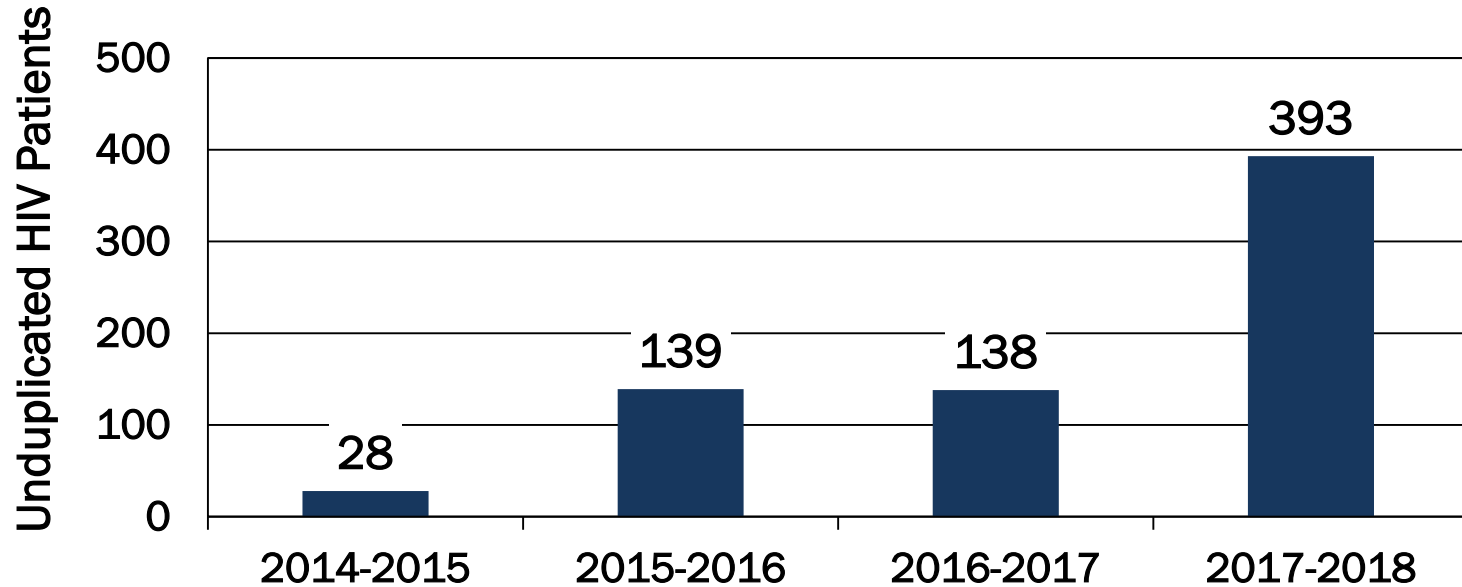
Successes

- **Providers:** 11 trained and practicing by end of 2018
- **Staff:** 185 individuals trained
- **Clinics:** Expanded from 1 to 7 clinic sites offering HIV specialty care



Successes: New Medical Providers

Newly Trained HIV Medical Providers: Number of Patients Living with HIV/AIDS Served



New HIV Medical Provider	2014-2015	2015-2016	2016-2017	2017-2018
Patients	28	139	138	393
Encounters	53	246	245	959

Sustainability

- **Family medicine resident training** will continue
 - Curricula, scheduling and costs built into the residency program (2 per yr.)
 - Physician champion still available
- **Support staff training** will continue but at reduced capacity
 - Clinic directors allow staff hours to complete online trainings
 - Newly hired staff trained by existing champions
- **Agency expansion** is enduring
 - 11 medical providers trained and practicing by 2018 (increased from 3)
 - Clinic directors supportive of providers building HIV panels
 - 185 support staff and support staff champions trained
 - Seven clinic sites offering HIV services (increased from one)



Lessons Learned & Recommendations: Agency / Support Staff

□ Agency

- Time and effort to **gain support** from new clinic sites
- **Synchronize** support staff and medical provider training completion
- More **cost effective** to sustain HIV training within medical residency training than training practicing providers
- Medical provider **location of practice** drives expansion

□ Support Staff

- **Incentivize** support staff training
- **Cultivate champions** for each staff type to continue training culture
- Offer **refresher training** courses
- **Essential** for provider and patient support



Lessons Learned & Recommendations: Medical Providers

Medical Provider

- Need **physician champion** with adequate protected time to teach
- Ensure trained providers are **committed** to remaining at agency after trained
- **National HIV Curriculum** and **AETC** important resources that offer continued training
- **Support and mentoring** for newly trained providers must be ongoing



Lessons Learned & Recommendations: Medical Providers (con't)

Medical Provider

- Prepare trainees to take the **American Academy of HIV Medicine specialty exam**
- **Organizing schedules** for preceptor rotations and monitoring resident efforts takes staff time
- Plan for enough **preceptor time** and **HIV patients**
- **Schedule time** for telehealth sessions / learning network
- Building a **patient panel** after training completed may take time

Resources

- National HIV Curricula
www.hiv.uw.edu
- HIV Learning Network (AETC)
www.paetc.org/hiv-learning-network/
- Coldspring Training Center
www.coldspringcenter.org/training.html
- HIV Webstudy/Question Bank (AETC)
www.hiv.uw.edu
- Telehealth Recorded Sessions (Mountain West AETC)
www.mwaetc.org/training/mwaetc-hiv-echo
- Hepatitis Website (University of Washington)
www.hepatitis.uw.edu

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