Rapid Access of Initial HIV Appointment and ART Prescription

Michelle Shearer, MSW; Suzanne Lavoie, MD; Susan Jonte, RN; Ryan White Programs and Infectious Disease Clinic, Virginia Commonwealth University



BACKGROUND

VCU Ryan White Program (VCURWP) implemented a Clinical Quality Improvement project for Rapid Access (RA), Linkage-to-Care within 30 days. A review of the continuum of care data revealed a low linkage to care measure for newly diagnosed clients with an average appointment wait time of 6-8 weeks.

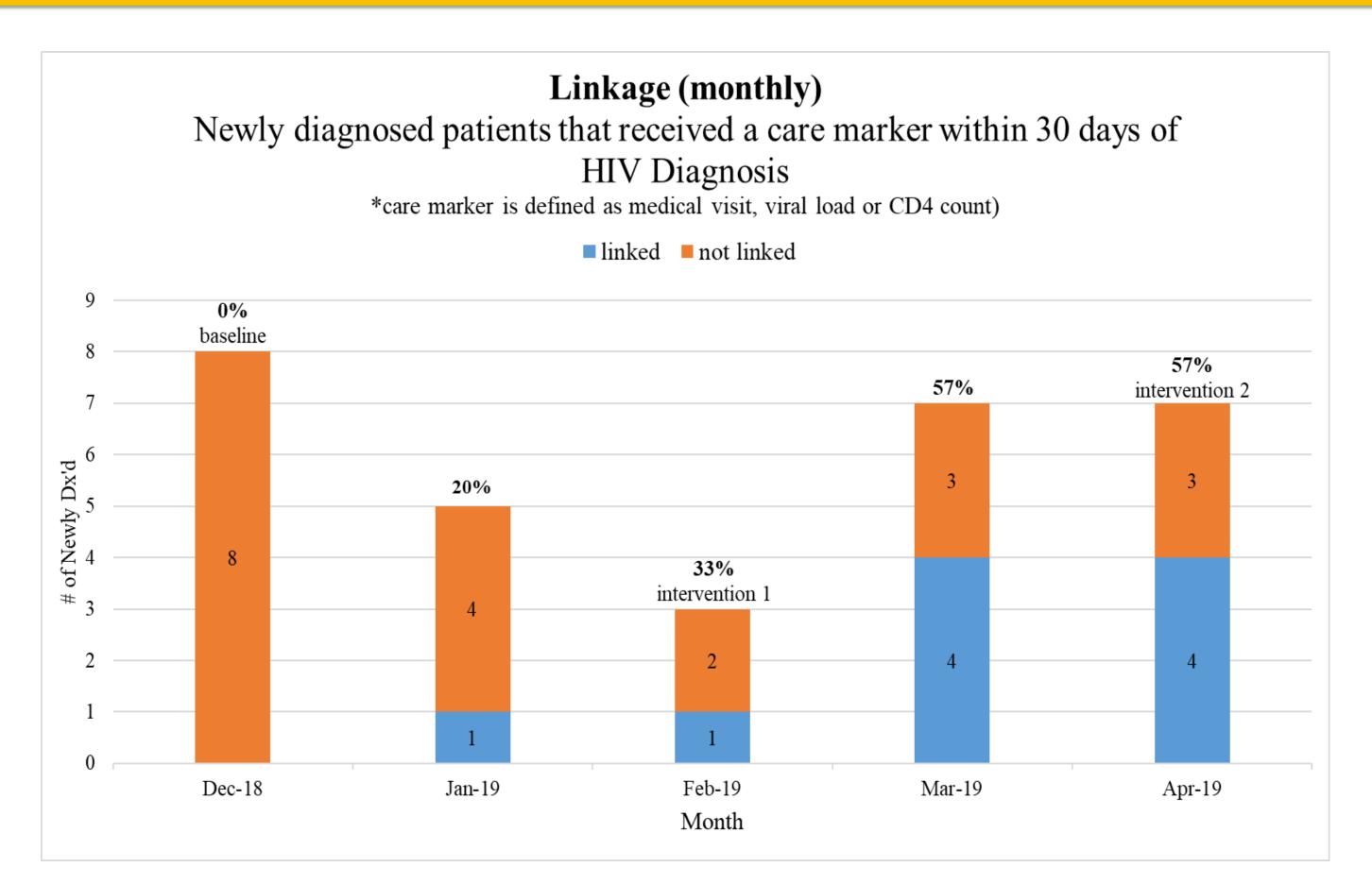
METHODS

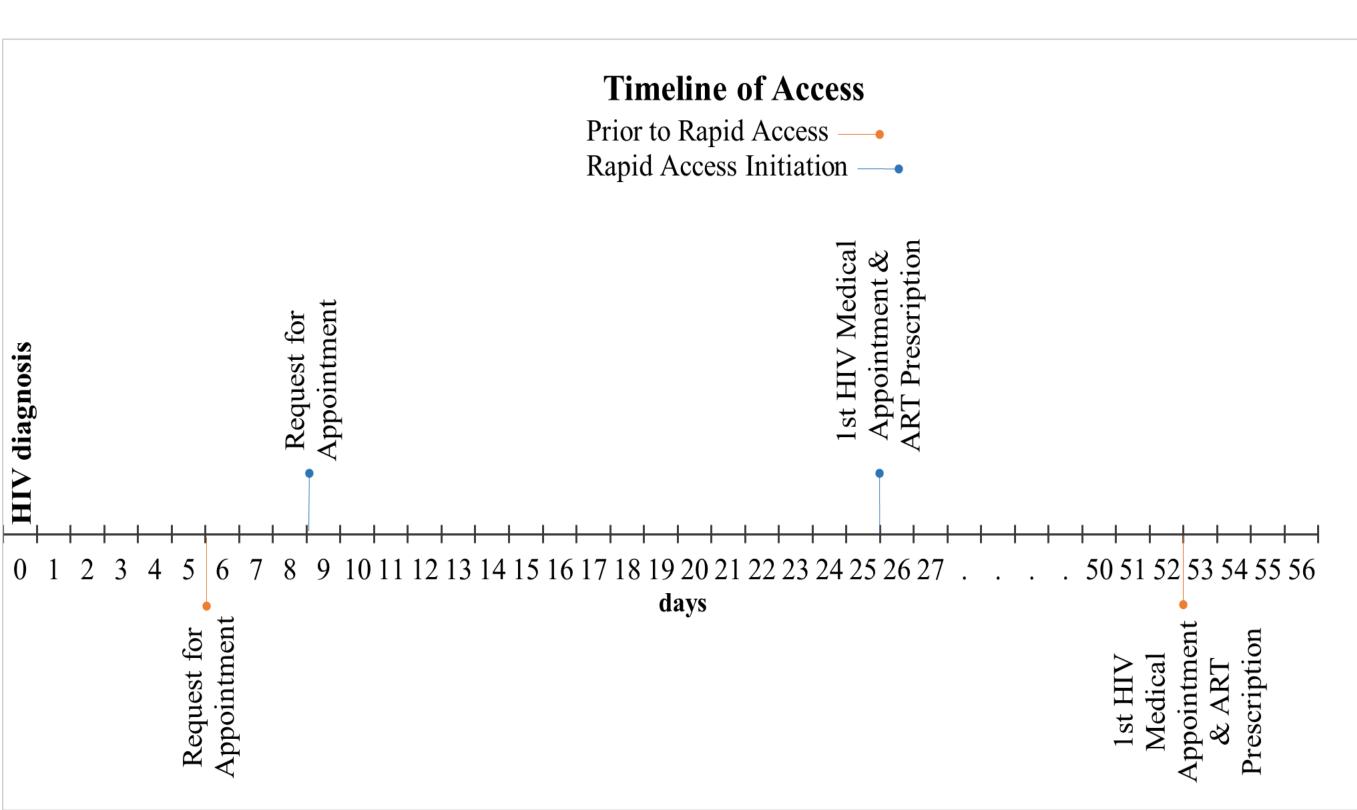
Intervention 1:

Two RA appointments were made available each week for newly diagnosed patients age <28. RA appointments were scheduled for 30 minutes instead of 60 minutes with no requirement for full intake and labs prior to the visit. The care team (registered nurse, patient navigator and medical case manager) facilitated access to appropriate information so that ART could be prescribed at the first visit. RA appointments were not filled within 48 hrs could be given to returning patients.

Intervention 2:

The clinic opened 2 additional RA appointments per week for newly diagnosed individuals age >28. A total of 16 RA appointment slots per month were available in order to facilitate rapid access to HIV care and RW services.





RESULTS

Baseline Data:

Linkage-to-Care: 0%

Request for appointment (days): 5.5

1st HIV appointment & ART (days): 52.5

Follow-up data:

Linkage-to-Care (Intervention 1): 33% Linkage-to-Care (Intervention 2): 57% Request for appointment (days): 8.5 1st HIV appointment & ART (days): 25.5

LESSONS LEARNED

- Teams are an effective way of testing small change
- Teams need to meet frequently to discuss challenges, successes, and develop strong communication
- Strong relationships with testing sites are needed for quick referrals
- There is an opportunity to expand RA to patients diagnosed >30 days that have never been in care

CHALLENGES & LIMITATIONS

VCURWP does not provide HIV testing and relies on community referrals for RA which can delay linkage-to-care. Available RA appointments do not always fit patient's schedule. RA appointments have a high no-show rate. Project is ongoing to address challenges/limitations.