

HIV Care Coordination Specialists, a population-based approach to engage and retain self-sufficient clients at risk of disengaging in care.

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INTRODUCTION

- The AIDS Foundation of Chicago (AFC) is a non-profit organization mobilizing communities to create equity and justice for people living with and vulnerable to HIV or chronic conditions. AFC has implemented a unique initiative for individuals who are currently virally suppressed and self-sufficient but at risk of disengaging with care.
- Care Coordination Specialists (CCS) work with the clients who do not qualify for medical case management services because they are virally suppressed and self-sufficient. However, clients face unexpected barriers such as risk of homelessness, lack of resources to complete AIDS Drug Assistance Program (ADAP) applications for medication and health insurance premium assistance and lack of food or personal items that put them at risk for disengaging in care. CCS assist clients to bridge the gap and offer assistance for temporary emergency crises and barriers that help clients to reengage and stay in care.

METHODS & ACTIVITIES

AFC has created a model intervention that assists self-sufficient clients needing to stay in care. The CCS determines eligibility of clients with short term needs for Ryan White services every 6 months, and serves as the main contact when needed and they provide support and vital services. The CCS assists clients with barriers to allow for adherence to HIV treatment and appointments. In addition, CCS assist the clients with the following: Eligibility Assessments (ADAP); Acuity Scale ; AFC Emergency Financial Assistance Program ; Emergency Flexible Financial Fund Policy ; Dental Referral; Vision Referral ; Vital Bridges Food Services ; Mental Health Referral ; Clothing resources ; Transportation and Food Vouchers.

The objective is to assist clients with basic needs to help eliminate barriers that prevent clients from remaining in care.

RESULTS

- The CCS role has proven vital due to the number of clients who have remained in care that were at risk for disengaging in care. Care Coordination Specialists have retained 250 self sufficient virally suppressed clients in care. The CCS's role has proven instrumental to ensure that the self-sufficient virally suppressed individuals' needs are being addressed in a timely manner when unexpected barriers occur.

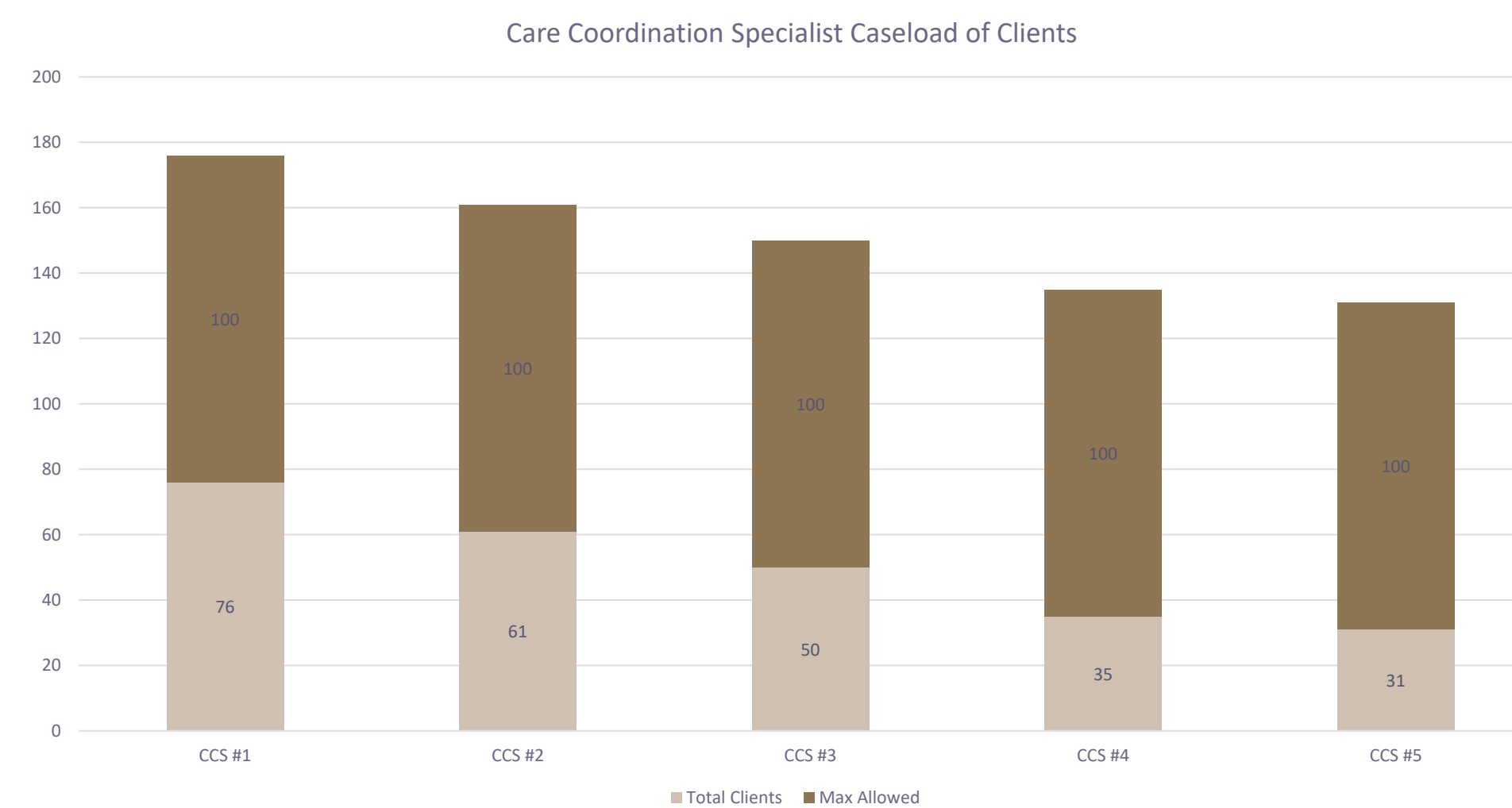


Figure 1.0. Bar Graph shows the number of clients of each Care Coordination Specialist Caseload.

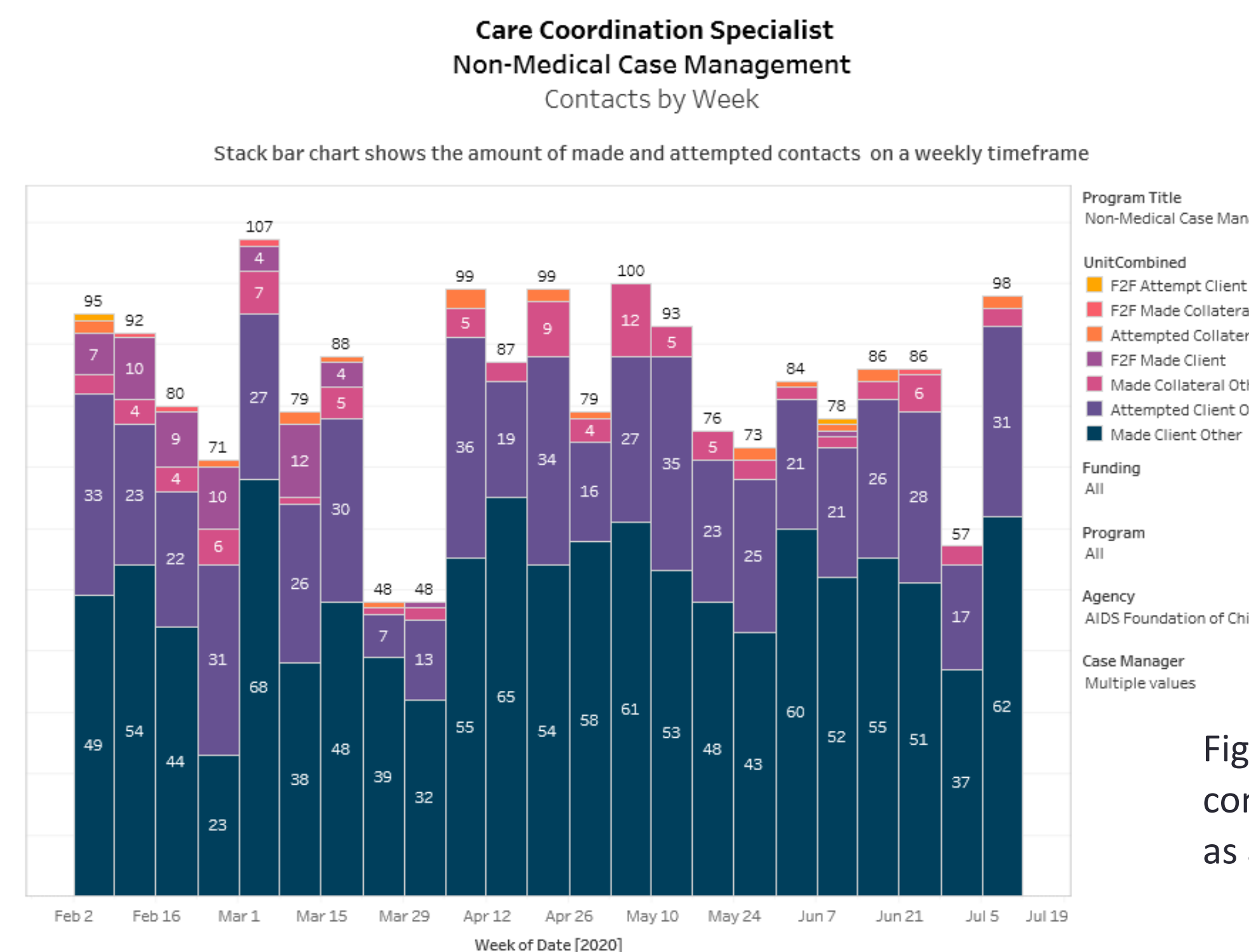


Figure 2.0 This graph shows the weekly contacts made to clients that are documented as a progress log in provide.

LESSONS LEARNED

- Care Coordination Specialists (CCS) have learned to adapt to challenges during the COVID-19 pandemic by adjusting services from face to face to fully remote methods communicating by phone or email only.
- CCS have learned to transfer clients to medical Case Management when non-medical is no longer an option.
- CCS have learned how to manage a caseload of 50+ clients while still meeting the needs of each client as an individual.
- CCS have learned to complete evaluation of clients to determine their level of need.
- CCS services allows clients to access Ryan White Part B services without being directly case managed.

CHALLENGES/LIMITATIONS

- Care Coordination Specialist (CCS)have adjusted to assisting clients without following the Medical Case Management track.
- Identifying funding that is not earmarked for medical case management remains a challenge.
- This project is ongoing, and we currently have 5 staffed Care Coordination specialist at AFC.

CONTACT INFORMATION

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