# DAP Health: A Rapid StART Journey

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## The History of DAP Health

RYAN WHITE CONFERENCE ON HIV CARE & TREATMENT

1984 - present

Year	Nearly Four Decades of Community Response
1984	Founded by Volunteers in Response to AIDS Crisis
1991	Secured Ryan White Funding
1992	Established as a Licensed Medical Clinic
1997	Formalized our Behavioral Health Program
1999	Purchased our 1696 N. Sunrise Building
2007	Opened our Permanent, Supportive Housing Complex
2008	Opened DAP Dental Clinic
2013	Granted Operating Status as a Federally Qualified Health Center Look-alike
2014	Launch of Get-Test Coachella Valley Public Health Campaign
2015	Opened our Sexual Wellness Clinic
2016	Opened our Hepatitis Center of Excellence
2018	Formalized Gender Affirming Wellness at DAP Health
2020	Opened our COVID-19 Triage Clinic Opened 2 New Primary/ID Clinics
2021	Launched our Mobile Clinic
2022	Open an Additional Primary/ID Clinic Open our Sexual Wellness Clinic in Indio, CA Launch our Harm Reduction Program Broke-ground on our 2 <sup>nd</sup> , Permanent Supportive Housing Complex

#### Rapid StART:





- Organizational Culture
  - Rapid StART, only for Newly Diagnosed
- Inconsistent reporting structures and processes
- Financial barriers limiting patients access to Rapid StART

### Data To Drive Decision Making



- Retrospective Data
  - Rapid StART ART wait times:
    - Newly Diagnosed Patients with HIV = 1.0 days
    - Out-of-Care HIV Patients = 48.63 days
    - All HIV Patient types = 10.30 days
- Process Map
  - Identified different processes for each HIV patient type
- Utilization of "Plan Do Study Acts" (PDSAs)

#### Action



- Restructured Organizational Work Chart
  - Aligned Community Health Programs with Sexual Wellness Clinics
  - Integrated Patient Registration and EIS within established Clinical Procedures
  - Cross Training of Personnel
- Standardization
  - Replicated effective processes for newly diagnosed HIV patients, and applied those processes to other HIV patient types
  - Created Rapid StART Clinical Protocol
- Eliminated Cost Barriers to all services in the Sexual Wellness Clinic

#### Point Zero



- No Wrong Door
- All HIV Patients are streamlined through our Sexual Wellness Clinic
  - EIS is first point of contact for all patients
  - EIS conducts patient needs-assessment to identify barriers to care
  - Support Services (Lyft, tracfones, insurance enrollment)
  - Schedule Patients at our Sexual Wellness Clinic
  - 10am and 3pm appointment spots are held for Rapid StART

### The First Rapid StART Visit (slide 1)



- Our Rapid StART Clinician meets with Patient
  - Patient History; Medical, STI, surgical, family, tobacco, alcohol, allergies, substance use, sexual activity, e-cig/vaping use, SOGI, functional assessment, PHQ-SBIRT, TB Risk & advance directive
  - Education on U=U
  - Medication side-effects, and regimen selection
  - 2-week Starter-pack provided
  - Direct Observation Therapy (DOT)

<sup>\*</sup>If a return-to-care patient with history of SU and/or Mental Health issues, MSW Intern meets with patient in exam room to complete behavioral health assessments, including PHQ-9, GAD-7, and PTSD

### The First Rapid StART Visit (slide 2)



#### Baseline Laboratory Tests for Initiation of Rapid StART:

- HIV 4<sup>th</sup> generation Ag/Ab if HIV testing was not done previously
- HIV Genotype (RT, PR, IN)
- HIV-1 Viral load, RNA, PCR
- Absolute CD4 T-cell Count
- CBC with Differential
- Comprehensive Metabolic Panel (CMP)
- Hepatitis panel: HAV Ab, HBcAb, HBsAb +HBsAg +HCV Ab
- Urinalysis w/Micro; w/Reflex to culture and sensitivity
- GC/CT- Rectal, pharyngeal and urine NAAT (All sites)
- RPR w/Reflex Titer, TPA
- Quantiferon TB Gold Plus
- Pregnancy Test (all persons of child-bearing potential)

## The First Rapid StART Visit (slide 3)



- EIS reconnects with the patient at the Sexual Wellness scheduling desk, following the first Rapid StART Visit
- EIS schedules second Rapid StART Visit (within 2 weeks), and the first "Establish Care" appointment in Primary/Infectious Disease Clinic, for ongoing HIV care
- EIS accompanies patient to on-site lab, and to on-site pharmacy
- EIS provides an orientation tour of the DAP Health facility
- EIS summarizes experience, reviews action steps
  - Insurance or Medication Assistance
  - Referrals to BH, Peer Support, Food & Transportation

### Follow-up & Retention



- EIS contacts the patient 2-days after first Rapid StART visit to check/discuss medication adherence, side-effects, and offer any other support
- Patient is reminded of second Rapid StART appointment, via MyChart and by telephone, within 24 hours
- Following the second Rapid StART visit, the patient is referred to Case Management for ongoing Social Support Services

### Marketing & Other Interventions







https://www.youtube.com/c/DAPHealth

#### Outcomes



- Rapid StART ART wait times:
  - Newly Diagnosed Patients with HIV = 1.0 days Now = 1.5 days
  - Out-of-Care Patients with HIV = 48.63 days Now = 2.73 days
  - All HIV Patients Types = 10.30 days Now= 2.23 days
- Linkage to Care within 7 days
  - Was 59.50%; *Now 91.40%*
- A Patient Story; When virtual PrEP turns into Rapid StART

## Thank you



