

Advancing the NHAS and EHE plan: Nurses have unique roles.

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- Learning objectives--Participants will:
 - Identify social determinates of health (SDOH) that impact individual's health and wellness
 - Discuss the ANAC recommendations that are most useful to them in addressing SDOH barriers to health
 - Describe action steps they can take to implement or support the chosen recommendations
- Background: The NHAS and EHE focus on undetectable viral load (UDVL) as a strategy to meet goals. To reach and sustain UDVL, the totality of an individual's life must be understood and supported, often by addressing the social determinates of health impacting them. Nurses have unique roles in identifying and addressing these barriers, both thru individual supportive and trusting relationships and thru larger scale practice, service delivery and system changes.
- In 2021, ANAC convened sessions with ANAC members to solicit their insights into achieving the goals of the NHAS and the EtE plan. A series of recommendations resulted.

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Overarching recommendation: To end the epidemic, social determinants of health must be a focus:

- Nurses are uniquely positioned through trusted relationships and open dialogue to identify and address social determinants that impact an individual's health and wellness.
- Housing instability and homelessness is a major barrier or disruptor of treatment and care. A comprehensive and repeated housing assessment can be incorporated into routine visits and interactions with nurses.
- While housing is a leading barrier to effective care and treatment, domestic violence, stigma, and mental health are also important factors.

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- **Build upon public trust in nurses**

- Nurses viewed as the most trusted profession and source of health information.
- Nurses understand the complexity of people and view patients holistically.
- Develop & fund public education campaigns to promote nursing as the trusted source of information, including sexual health information.
- Develop and support nurse-led HIV prevention and treatment programs that address the Intersection of HIV, mental health and substance abuse.

- **Expand nurses' roles and practice**

- Expand Nurse Practitioner diagnosis, treatment & prescribing authority in all states.
- Pre-authorization takes nurses away from caring for patients and keeps patients out of care. Insurers must be part of the NHAS and realize that this is a barrier.
- Provide staffing and reimbursements for home or community visits for nurses to follow up with people lost to care.
- Expand community health worker teams, led and mentored by nurses to reach people where they are.

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- **Utilize nurses in non-traditional settings**

- Expand nursing roles in non-traditional settings for status neutral approach: test/treat on the spot at:
 - schools and colleges
 - Job Corp
 - recreation and sports centers
 - school-based clinics
- Minute clinics should incorporate nurse provided HIV testing, rapid initiation of care and PrEP and PEP into routine nursing services.

- **Enhance HIV content in nursing education (pre & post licensure)**

- Nursing education should address stigma, trauma, social determinants of health and resultant health inequities, including HIV risk, acquisition and outcomes
- Inter-professional courses for all in healthcare education to promote team based care for optimal HIV care should be encouraged and supported.
- Encourage & support nurses to include sexual health as part of regular dialogue and assessments.

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- **Continue modifications in care delivery initiated during COVID-19 pandemic.**

- Telehealth including billable hours for care delivered by nurses and nurse practitioners should remain an option.
- For patients without privacy or web access or skills, inter-personal interaction must be easily accessible. COVID has revealed the impact of isolation on mental health.
- Extended prescription refills and visit scheduling for those that do not need frequent support and counseling should be continued.

- **Federal & reimbursement initiatives**

- National Health Service Corps loan forgiveness programs can develop special tracks for HIV providers, to include registered nurses, not just nursing faculty or nurse practitioners.
- Federal assistance and grants to nursing schools at HBCUs to diversify the nursing workforce and foster interest in HIV nursing in underserved communities by nurses of color.
- CMS to develop practices that allow for billing of RN time and services.