IMPLEMENTATION OF SMART PHONE PROGRAMS TO ADDRESS BARRIERS TO HIV CARE

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THNK

INTRODUCTION

AIDS Foundation Chicago (AFC) receives RWHAP Part A and Part B funding to lead and coordinate the Northeastern Illinois Case Management Collaborative, a network of partner agencies and HIV case managers in the Chicago metropolitan area. As the coordinating entity, AFC has identified many barriers for subpopulations with retaining in care especially during the COVID pandemic. A quality assurance survey indicated that technology was a prime need during this time for the population we serve.

To address this barrier, AFC purchased Tracfones for clients to continue telehealth appointments with their providers. These phones are prepaid no contract mobile devices that provide access to talk, text, and internet services. Additional phone support was provided to clients who had the greatest financial hardships. Survey results shows an increase in communication with supportive medical staff as well as a decrease in feelings of isolation amongst clients.

IMPLEMENTATION STRATEGIES

350 Tracfones were purchased with TCetra Business Solutions. Care leadership created a one-page distribution strategy for case managers and clients to review activation and utilization which included phone identifiers (SIM & Serial #). Clients are assisted with phone set up by their case manager using AFC's detailed set up instructions. AFC's Intake and Referral team facilitates the process of distributing additional pins which last 30 days.

To Date:



150 Tracfones were distributed to case managed clients



Over 400 Replenishment pins were distributed





12 of those phones were replaced

QUALITY ASSURANCE SURVEY

- A survey was distributed to all case managers to gauge the efficacy of the Tracfone Program in assisting costumers who receive care services.
- 21 case managers completed the full survey.
- Most case managers responded that the number of calls answered by their clients increase a lot in comparison to the 6 months before Tracfone distribution.

Improved Communication

Our survey found that the distribution of phones allowed clients to continue their means of contact with their case manager and medical services.

Increasing contacts between case manager and other supports in client's life. It provides clients autonomy and self-efficacy."

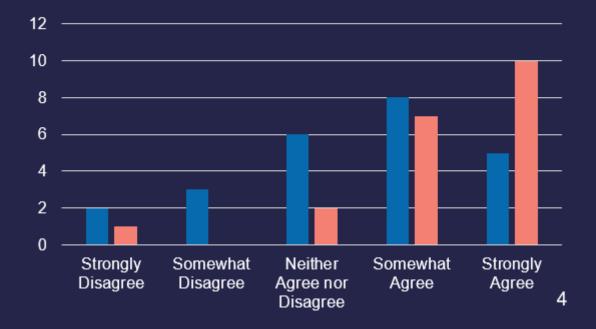
Allows for direct communication and mediates barriers to are and coordination. The clients have been able to rely on themselves to schedule or communicate as opposed to reliance on a family member or not having any form of communication other than in-person."

It isn't just a phone. It is a tool that assists our clients in building a foundation to communicate with important people, organizations and people in their lives, and get jobs etc."

Improved Medical Adherence

I have seen an improvement in my clients' medication adherence

I have seen an improvement in my clients' ability to adhere to their medical appointments (including telehealth, in person, medical, and case management appointments)



IMPROVED COMMUNICATION DURING COVID-19

Our survey found that the distribution of phones during the pandemic helped clients continue communication with their case managers, decreased transportation costs/COVID 19 exposure and continued medical care without in person visits with their providers.

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Clients are more inclined to text and answer phone calls. Video conference has been used more for medical appointments than case management appointments."

Clients did not have to stress about affording transportation or COVID exposure."

It helps a lot meeting with clients when they are unable to meet at the office. It also saves them a visit to the office when they have questions about pieces of mail they receive."

Client Satisfaction & Benefits

Case managers emphasized in their responses the impact the devices had on their clients. Some responses highlight how it has benefitted client's communication with their family and friends. Without this program, some clients would not have access to a phone. Clients are grateful for their free phone service while experiencing financial hardship, homelessness, and hospitalization.

REFLECTION

Challenges

- Not all distribution forms were submitted to AFC, which made it difficult for inventory management.
- In some cases, phones are lost/damaged/stolen. One replacement phone is allowed.
- Not all clients stay in contact with their case manager despite having the phones.
- Case managers are responsible to know when their client's minutes run out. Some phones are turned off if the provider does not request a pin from AFC.
- Case managers experienced challenges accessing technical assistance with the cell phone provider.

Planned Modifications

- Document phone identifiers before distributing to AFC funded agencies.
- Utilizing existing systems/databases for building out inventory management.
- Purchase phones with 12 months of service attached to it, for folks with financial hardships.

REPLICATION RECOMMENDATIONS

Define parameters around who should access the phones. Identify:

- A funding or payer source.
- A cell phone vender that honors tax exempt status.
- What data elements need to be collected, for tactical and assistance purposes.
- Best way to track and distribute phones.
- Clear instructions for activation (FAQ).

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