

**Wayne State University – Detroit Medical Center
Adult HIV/AIDS Program**

Building an Integrated HIV Care Program

The Developmental Process is ongoing...



Wayne State University – Detroit Medical Center Adult HIV/AIDS Program

1523 Patients (2009)

77% African American

12% White

9% Hispanic

69% Male

30% Female

Age

•18 – 24	33 (2.5%)
•25 – 44	625 (41%)
•45 – 64	824 (54%)
•65 +	41 (2.5%)

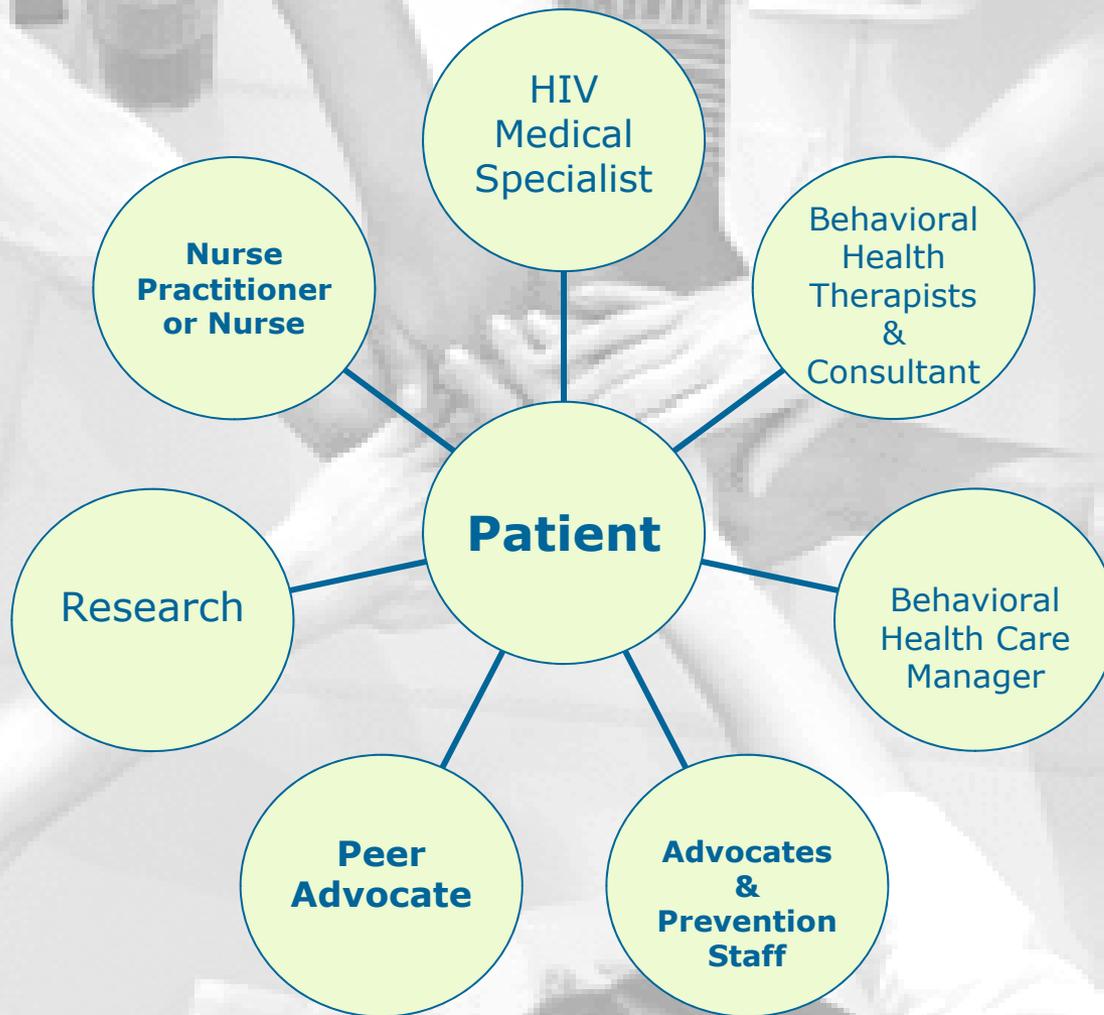
Insurance

•Private	311(20%)
•Public (Medicare, Medicaid & other)	826 (54%)
•Uninsured	386 (25%)

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- 11 half day clinics**
- 7 ID HIV Specialist MDs, 6 ID HIV
Fellows**
- 6 Full time Nurses**
- 6 Behavioral Health Therapists (also
act as consultants)**
- 2 BH Care Managers**
- 4 Advocates/Prevention Specialists**
 - 4 Medical Assistants and 2
Phlebotomists**
 - Community Case Managers**
 - Peer Advocates**
 - Trainees**

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Nursing Staff

**Cumulative Nursing Careers = 217 yrs
Total HIV Nursing experience = 86.5 yrs**

Various educational backgrounds

Nurse Practitioner

MSN

BSN

LPN

**ACRN-AIDS Certified Registered Nurse
Trainees**

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Behavioral Health Staff

(funded under 2 SAMHSA grants)

- Psychiatric Nurse Practitioner**
- 6 Therapists (PhD Psych and Masters level educations) also act as Consultants during clinics**
- 2 Care Managers (both certified HIV Case Managers with prior experience)**
- Pain and Addiction Specialist MD**
- Data coordinator**
- 2 Evaluators**
- 2 P.I.s and Clinic Director**
- Community Advisory Board**
- Trainees**



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Behavioral Health Services

- **Mental Health Assessments available for all patients**
 - **Psych Evals**
 - **Psych Med Review**
 - **Individual, Couple and Family Counseling**
- **Substance Use Disorder Counseling (including on-site Buprenorphine and Methadone Maintenance off-site)**
- **Psycho Educational Groups (New to Care, Total Wellness, Pain Management, Recovery, Serodiscordant Couples, Dating and Relationships)**
- **Controlled Substance and Pain Management Treatment**

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Advocates Duties

Patient Advocate duties	Part D (Families, Women & Children)	Prevention Specialists
<ul style="list-style-type: none">•Appt. Reminder•No Show Follow Up•PCP Referral Assist•Medicare/Medicaid Applic. Assist•Case Management referrals•Prisoner Re-Entry coordination•Dental Referrals•Shelter Assist.•Transportation Assist.	<ul style="list-style-type: none">•OB/GYN Clinic•Pediatric ID Clinic•Moms in Motion Support•Community Advisory Board•Project Challenge (Family Support)•Camp Hope (Summer & School Break Day camp)	<ul style="list-style-type: none">•Counseling and Testing•Outreach•Offsite C & T•Partner Notification•Sex Health Education•Social Networking Strategy•Condoms

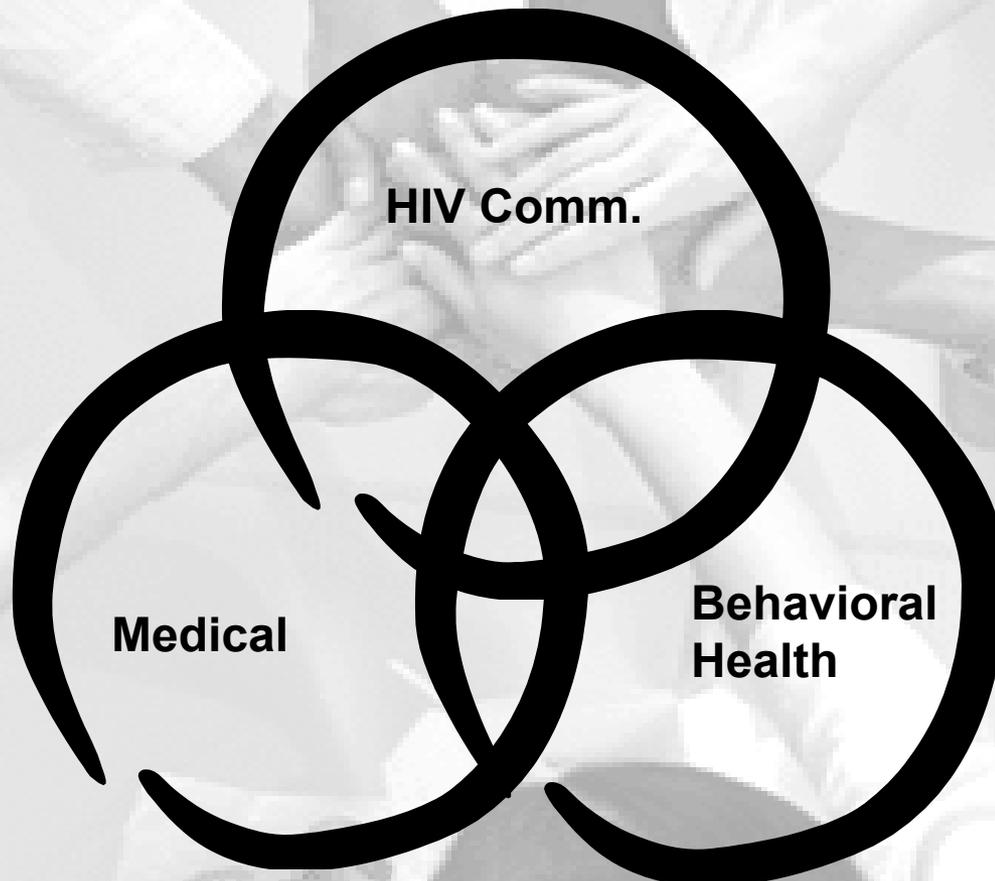
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Three Distinct Cultures



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Integration??





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**Developing an Integrated Care Program
Challenges**

Original Location

- **New Service for Program**
- **Co-Located (2 services at same location)**
 - **Separate cultures**
 - **Poor communication**
 - **Space wars**
- **Behavioral Health staff unfamiliar with HIV
Community**

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Challenges

1st Move Location

- **NO SPACE!!!**

- Clinic Dir. And therapy offices in bldg ½ mile away
- Staff offices reduced to 4 foot desk top per person
 - 12 people put into space formerly occupied by 4
 - Sharing waiting room with OB/GYN patients
- New Building Staff did not want HIV patients using clinic restrooms
- Staff had to stand in a crowded hall waiting to see consumers

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2nd Move, Lessons Learned

- **6 new exam rooms, medical assistance work space, Doctors workspace, space for educational materials, Own wait room**
 - **Staff had cubicles with their own space**
 - **5 Therapy and Clinic Dir. Office available**
- **Conference room for meetings and Groups**
 - **Instituted MDT Pre Clinic Meetings**
 - **Recruited and trained Peer Advocates**
- **Space to engage consumer outside of exam rooms**
 - **Communication improved**

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One Key Component was the MDT Pre Clinic Meetings

- Dr, RN, BH Consultant, BH Care Manager, BH Prescriber, Advocate, Peer Advocate**
- Each Patient is discussed as to how they are doing medically and behaviorally**
- BH staff talks about their contact with each consumer**
 - Advocates reports on Reminder calls and other pertinent information (housing, transportation, etc.)**
- Peer Advocates are told how they could help patients that are at risk**

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Name: _____ Date: _____

Check out reminder

Needs _____ Complete _____

_____ **Advocate** _____
 _____ **B.H. CM (Margareth or Erika)** _____

_____ **B.H. Consultant of the Day** _____

MHA__ GPRA NOMs VCB

Depress. Anxiety Cognitive

M.I. Med/Appt Adher. SA

BH Intro BH Check-in Cont.Subs

Other _____

_____ **B.H. Prescriber (Angela)** _____

_____ **Community Case Manager** _____

_____ **Peer Advocate** _____

_____ **Radiology/Procedure** _____

_____ **Research Called** _____

_____ **Other:** _____

_____ **UDS** _____

Dental referral

UofD _____

Other _____

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Peer Advocate Consumer Training – PACT

- **Consumer Identified Need (missing piece)**
- **Key component that ALL the caring staff could not provide**
 - **Needed Leadership and Staff buy-in first**
- **Needed the RIGHT people that wanted to give back to their community**
- **Provide training and resources necessary to make them an effective part of the team**
 - **Let them do their thing**

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Peer Advocate Consumer Training – PACT

First Experience email statements:

- **WOW, it was unbelievable.....in a good way**
 - **Explained, “I was new and my part of your visit to the clinic today, was to let you know that there is life after the diagnosis”**
- **That's when he looked up with a sigh of relief, like the world had been lifted off his shoulders and he said, "really? "**
 - **he visibly had a new attitude/lease on life.....**
- **It was so gratifying to be the one to deliver that message of hope, and see him grab it.**
- **I was full of anxiety when I went in and very confident at the end of the day that this very well could be my purpose.**

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Why it all works

- **Medical Providers are free to focus primarily on Health Issues**
- **Variety of Behavioral Health services based on the consumers needs and readiness to engage (brief contact during Med. appt., scheduled therapy sessions, psych med reviews, drop in availability of psych NP and therapists, groups)**
- **Variety of staff for consumers to engage with (Health Care providers, BH providers, Advocates, Peers) and Warm Handoffs**
- **Increase in Staff trainings, communication and team building**
 - **The right people providing the right care and support**
 - **Continual Development**



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