NATIONAL **S**RYAN WHITE CONFERENCE ON HIV CARE & TREATMENT



SEPTEP Southeast Practice Transformation Expansion Project

Jennifer Burdge, MEd.

Program Director – Southeast AETC Vanderbilt Comprehensive Care Clinic Vanderbilt University Medical Center

Disclosures

Presenter(s) has no financial interest to disclose.

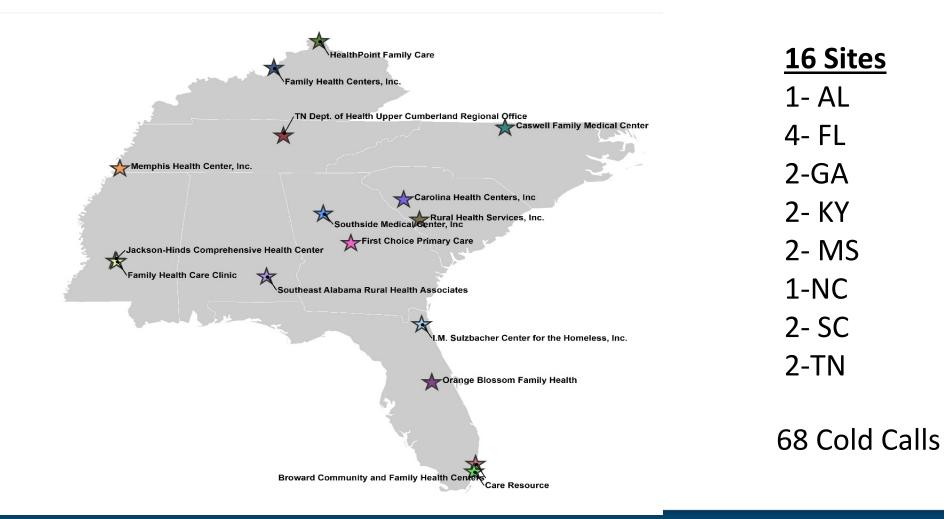
This continuing education activity is managed and accredited by AffinityCE/Professional Education Services Group in cooperation with HRSA and LRG. PESG, HRSA, LRG and all accrediting organization do not support or endorse any product or service mentioned in this activity.

PESG, HRSA, and LRG staff as well as planners and reviewers have no relevant financial or nonfinancial interest to disclose.

Commercial Support was not received for this activity.



SEPTEP – Health Center Sites







SEPTEP – Objectives

- Implement Opt-out HIV Testing
- Establish Linkages to HIV Care
- Create a Stigma Free Clinical Setting
- Apply Culture Change Leadership
- Improve Sexual History Taking Practices
- Prescribe PrEP to Patients at Risk





November-June, 2018

- Select 16 Health Centers
- Create Contract /Assessment
- Communicate Objectives / Workgroup
- Two Day Live Orientation /Training
- Implement Culture Change CoP
- Individual Coaching and Technical Assistance
- Train All 16 Health Centers live on site
- Post Assessment /Interview all Health Centers
- Champions Academy / CACoP



Ultimate Goal...Move the Needle





Two Day Training in Nashville

- Deliver Training /Implementation plan for SEPTEP
- Two Four attendees from each Health Center required to attend
 - Administrator or Medical Director, Clinical providers and Champions attend the training
- Friday and Saturday only one clinic day missed
- Individualized survey summaries provided to each attendee
- Day One Coaching for Cultural Change Leadership Workshop and How to Combat Stigma
- Day Two- Interactive HIV Testing and Motivational Interviewing Workshop as well as How to Prescribe PrEP
- Training Manuals including protocols and patient information provided



Why screen for HIV?

19 year old male in the ED for fever, chills, joint pain and malaise.

- Labs unimpressive except for elevated LFT's.
- Sent home with symptomatic care.
- Returns 2 weeks later with ongoing fatigue, some n/v weight loss.
- Now with pancytopenia, HIV RNA 2.4 million.

The patient had been seen by his PCP twice and by two walk in clinic providers in the last two years. His sexual debut had been at age 14.

He has sex with men and women.

He was never asked about his sexual history or offered any STI screening.

There is a new, rapidly growing epidemic among African American MSM of college age.

• Now 15-20% of all new patients enrolled at the VCCC are in the 18-24 year old age group.



Funding - \$30,000 per Health Center

Completed letter of agreement for project November, 2018

- \$15,000 provided at baseline survey completion
- \$15,000 provided after attending December Two-Day Training
- Health Centers also required to complete:
 - SEPTEP follow-up survey
 - Live on site training
 - 8 Work Group CoP
 - 6 Culture Change Community of Practice
 - PrEP Implementation Webcasts
 - Monthly Individual Calls
 - Optional: Webcast Wednesdays, Case Conferences, Symposiums, Preceptorships, etc



How health centers used funding and how it was helpful...

How is your center using the funding, and how has it been helpful?

| To start testing and train staff | To provide PrEP | Training |
|--|---|---|
| additional training for staff testing for non insured patients interpreters for non English patients | Not sure waiting until after live training | Training staff |
| Adding testing as part of routine care | Equipment Travel to Educational Conferences Training for non-HIV clinicians | staff training, testing for non insured |
| core | Cirricians | |



www.seaetc.com/septep

Training By Topics



Practice Transformation & Culture Change Workshop Resources

| Resources | | |
|--|---------------------|---|
| | Cultural Competency | 0 |
| Pre-Exposure Prophylaxis (PrEP): Daily medication to reduce HIV & | | |
| How To Be a PrEP Provider | | |
| Sean Kelly, MD | HIV Testing | 0 |
| Click Here To Download Presentation (Pre-Exposure Prophylaxis (PrEP): Daily medication to reduce | | |
| HIV) (.pdf) | Linkage to Care | 0 |
| Click Here To Download Presentation (How to be a PrEP Provider) (.pdf) | | |
| Click Here To Register & View Webinar | PrEP | 0 |
| Introduction to Culture Change, | Stigma | 0 |
| Identifying Barriers to Culture Change & | 0.08.000 | |
| Best Practices for Implementing Culture Change | | |
| Bill Cooper, MD | | |
| Click Here To Download Presentation (.pdf) | | |

Culture Change Coaching Webinars

- SEPTEP Culture Change Coaching Webinar (Session 1).
- SEPTEP Culture Change Coaching Webinar (Session 2)
- SEPTEP Culture Change Coaching Webinar (Session 3)
- SEPTEP Culture Change Coaching Webinar (Session 4)
- SEPTEP Culture Change Coaching Webinar (Session 5)
- SEPTEP Culture Change Coaching Webinar (Session 6)

Workgroup Calls

- SEPTEP Group Call 1-17-18
- SEPTEP Group Call 2-21-18
- SEPTEP Group Call 3-21-18
- SEPTEP Group Call 4-18-18
- SEPTEP Group Call 5-09-18
- SEPTEP Group Call 6-20-18

Newsletter 3

Cultural Competence



Newsletter 2

HIV Testing Resources

Click To View

Newsletter 1

- · Coaching for Culture Change: Community of Practice Sessions
- SEPTEP Resources
- Live Training



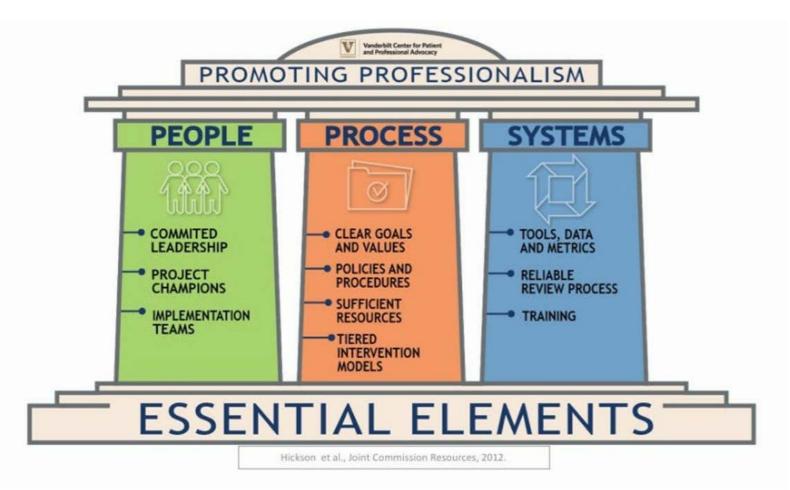


Main Topics Discussed

- 13 Health Centers received PrEP prescribing and implementation training
- 10 Focused on increasing comprehensive sexual history at each visit
- 14 Recognized a need for developing cultural humility
- 7 Health Centers received testing practice training
- All health centers completed training on how to deliver an HIV test result
- 11 Completed LGBTQ cultural humility and improved intake forms
- 3 worked to create improved linkage protocols for patients testing HIV+



Essential Elements of Culture Change





Culture Change Work Group Community of Practice

Webinar CoP #1

• It's All About The People

Webinar CoP #2

• Addressing Pushback Part I

Webinar CoP #3

• Addressing Pushback Part II

Webinar CoP #4

• Rocking with Resistance

Webinar CoP #5

 Moving the Needle - Systems Accountability

Webinar CoP #6

• Sustainability

Are AETC's Pressured to Skip to Systems?



Impact Quotes

"One thing that impressed me was the SEPTEP participants' embracing of the learning collaborative approach. Through the reinforcing of concepts on the monthly webinars and check-ins from the sites, they began to teach and learn from each other."

-Culture Change Facilitator- TN

"Participating in the Culture Change Work Group helped me to learn strategies to move the needle by seeing how other groups are faring and asking questions and getting support from colleagues."

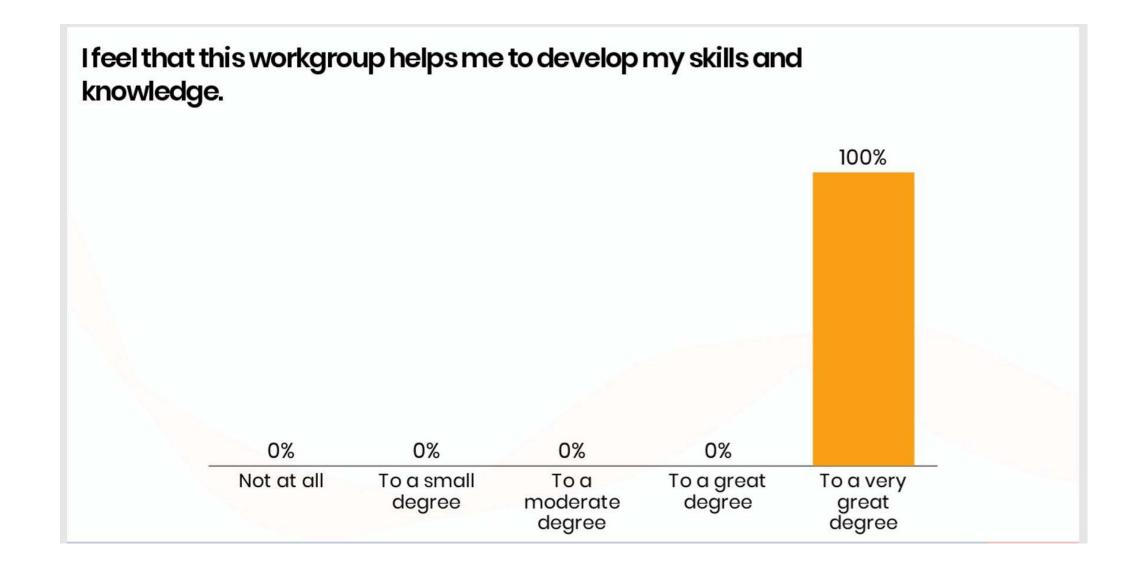
– Florida SEPTEP Champion



SEPTEP Work Group

- Work Group 1: SEPTEP Welcome/Overview
- Work Group 2: PT Survey, working with EMRs, Upcoming Programming/Events
- Work Group 3: PrEP Protocols and Resources, Implementing PrEP
- Work Group 4: How to Take a Comprehensive Sexual History
- Work Group 5: Opt-out testing protocols and Delivering Test Results
- Work Group 6: Examining Our Bias to Improve Cultural Humility
- Work Group 7: Building Relationships to Improve Health Outcomes
- Work Group 8: Wrap-Up final questions (mostly concerning PrEP)

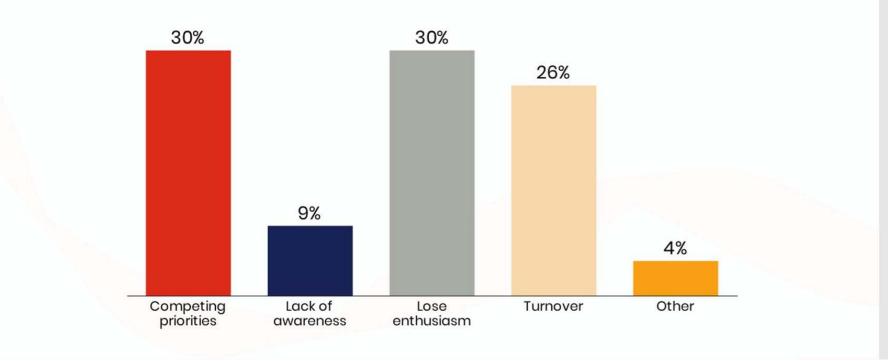






Reasons staff members become unengaged?

What are the reasons people become disengaged?





Plans to maintain momentum...

In a few words, what is your clinic's plan to maintain momentum after this project ends?

clinic wide staff update and input Everyone is a champion we will continue to meet and gather data on testing, linkage to care and PrEP to insure is in effect Continue monthly HCT Monthly meetings with DOH staff to address Develop regular center wide newsletter Continue community partners meeting Attend community lost to care and newly diagnosed plan on working towards improved care continuum outcomes-clinic just became recipient of Ryan White Part A as well as ADAP enrollment site wide awareness events patients continue working to identify/create a team meetings to remind why we formal report with our EHR system to are doing this. identify patients that are on PrEP Continue monitoring data Continue Linkage to care



Needs for sustainability...

What help do you need to create sustainability?

| aotan raisinty i | | |
|---|--|---|
| Training access and continuous support | it would be great if this program continued. | Recognizing our good efforts |
| Regular and automated data | Training IT to understand our needs. | more staff and community resources (tests from DPH) |
| Comparing how we're doing to other centers | Continued education Support Programs such as this Stability | Benchmarks and celebrate |
| Assistance helping convince someone to be the "champion" because my role in our organization is changing | Annual septep meeting in Nashville | Going to the 2 conference, the monthly phone calls, meeting with my team every week when possible |



Most helpful during SEPTEP

What was the most help during this project? Frequent touchpoints w septep for support and ask questions webinars for staff trainings Hearing what others are doing to get going on the project Webinars and training participating in the group calls to see Funding bc it got the attention of what and how other groups are leadership faring Partnership with Jen and Sierra Trainings Followthrough Live training addressing collecting Learning strategies for "moving the sexual history needle

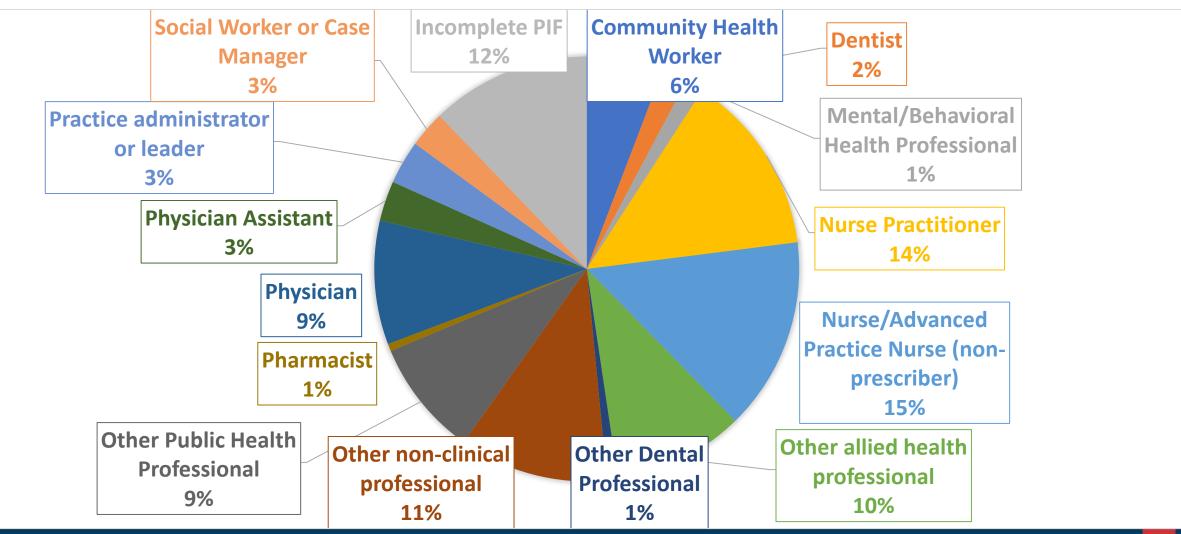


Most helpful during SEPTEP Cont.



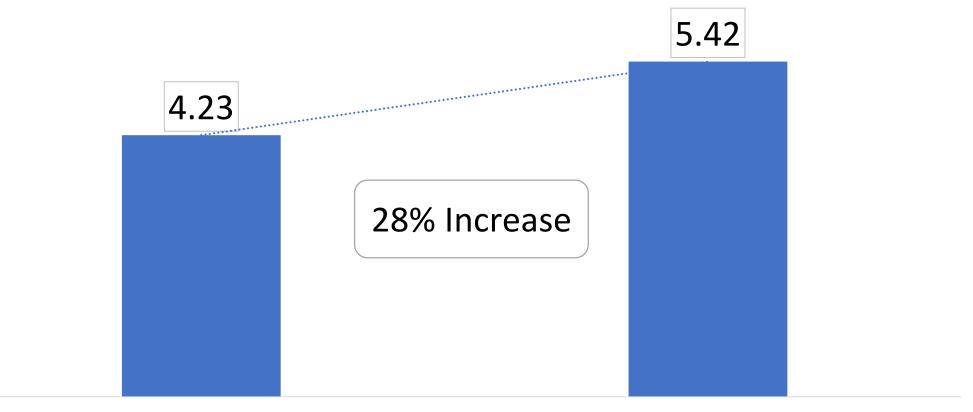


Percentage of Professions (611 Total PIFs)





SEPTEP Participants Overall Change in Knowledge



Before

After

Overall Evaluation Score – 6.51 out of 7



Quotes From Training Evaluations

Very informative training . . . learned a lot about gender pronouns. Trainer had great interaction with the class and good Q&A. -Florida Participant

I will continue to educate myself and to practice what I learned with the people I interact with and serve. – Alabama Participant

As a result of attending this training: I will make an effort to improve my attitude towards the HIV community and to try to make a difference. -Mississippi Participant

This training taught me to be more receptive to people's feelings and lifestyle. —Alabama Participant

"I learned to treat people as a human being and not be judgmental."

-Tennessee Particpant



Quotes From Training Evaluations

"During LGBTQ Humility training, I realized we don't ask patients what they need from us. We need to listen better about what patients want from their providers." - Champion

"I am going to educate patients, visitors and co-workers on the info presented today." -KY Participant

"I need to work harder at making my patients feel valued and exceptional." - AL Participant

"After the cultural humility training, I learned I need to be a better person." - Alabama Particpant





- Formed a Community of Health Center Champions ongoing resource sharing
- 14 of the 16 health center complete cultural humility training and embrace the importance of creating an inclusive environment for patients.
- Sexual History Taking, Opt-Out testing and PrEP is a priority at most sites
- 12 of the 16 health centers participated in the Champion's Academy at the Southeast Conference in Orlando, planning to treat PLWH
- Three health centers increased the number of PLWH on ART
- Increasing the reach of the AETC champions and administrators realized the importance of AETC training
- All health center participants are taking steps to recognize there own bias and reduce stigma



As a result of SEPTEP

(as compared with same time frame the year before)

- 10 health centers increased HIV rapid testing (preforming 329 additional)
- 7 health centers increased number of blood tests (6,021additional tests)
- 5 centers initiated opt-out testing (2 more post project)
- 3 centers developed protocols and conducting comprehensive sexual histories
- 5 health centers started offering PrEP Services (adding 21 patients) (1- post)
- 6 health centers developed a PrEP and PEP policy (2 more post project)
- 9 health centers reviewed data, improving monitoring of linkage retention rates
- 9 health centers updated their intake/registration forms, adding LGBTQ inclusive language and questions



SEPTEP Lessons Learned

- Pilot was a success!
- Realistic goals can be achieved in 8 months
- Allowing time to implement a process and then returning to training
- Full group buy-in needed not just leadership and not just staff
- Separate individual calls with Champion and Management
- Include all the paperwork required in the contract (PIFs/Evaluations)
- Live in-person orientation should be mandatory/consider live wrap-up
- Share resources from regional clinics and highlight strengths
- Many levels to PT, striving to move the needle creates motivation to continue
- Celebrate all the wins! Don't make the steps to big!



Sustainability

www.seaetc.com/champions/



The Champions Academy Community of Practice (CACoP) is geared toward providers seeing a low volume of HIV patients or who would like to begin treating HIV in their organization. The goal of CACoP is to maintain momentum for the attendees of the live Champions Academy Course and the SEPTEP to stay motivated to apply newly acquired resources and knowledge in practice as advocates and champions for quality HIV care and prevention.



Impact Statements – Champions Academy

The Champion's Academy . . . revived my spirit. At my clinic, I am the only clinician that wants to care for people with HIV. To be surrounded by like-minded providers that care and want to do this work was what I needed to keep going.

-Clinician Mississippi

"I would like to express my gratitude for the Champions Academy. . . The Conference has provided a platform for me to engage our Primary Care Providers on the importance of taking a sexual history and talking about PrEP and PEP with our high risk patients. I believe I can help the Providers understand the significant role we play in educating our patients and community.

- Social Worker Mississippi





- Steve Raffanti, MD, MPH SE AETC PI, VCCC Medical Director
- Clare Bolds- SE AETC Program Manager
- Sierra Harris- SEPTEP Associate Program Manager
- Jake Souvannaraj- Media Specialist
- Jane Cooper, RN UAB Team Lead Practice Transformation (Hannah Craft)
- Tracy Martin Business Process Manager
- Anna Poker, RN, MS, Project Officer, HRSA
- Nadra Tyus, DrPH, MPH Commander, US Public Health, HRSA/Bureau of Primary Health Care(BPHC)



QUESTIONS ????





Obtaining CME/CE Credit

If you would like to receive continuing education credit for this activity, please visit:

http://ryanwhite.cds.pesgce.com

