



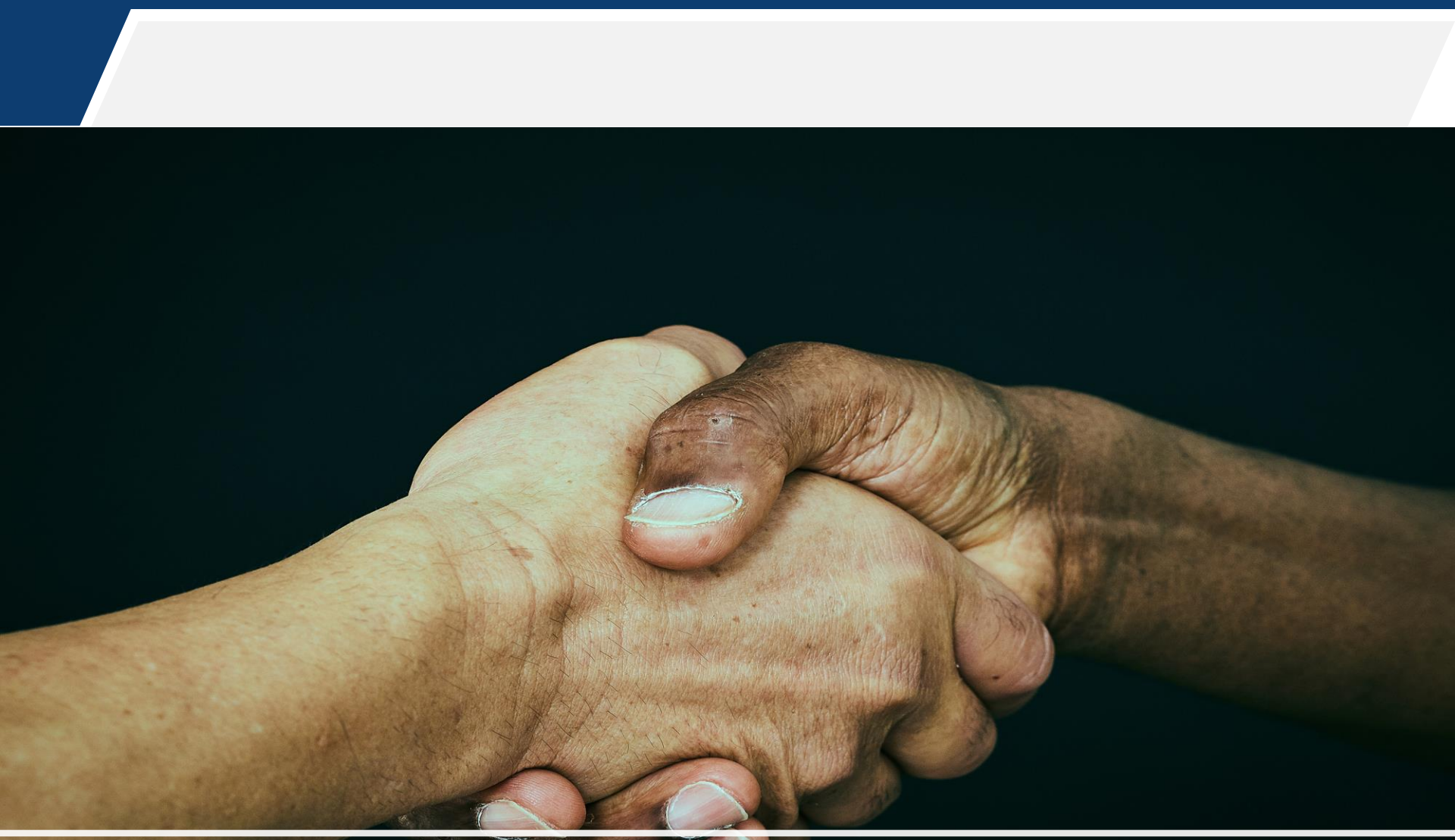
**FULTON
COUNTY**

FY23 DHE NASTAD PRESENTATION

FULTON COUNTY GOVERNMENT

OCTOBER 11-13, 2023

Department for HIV Elimination



WELCOME PARTNERS

AGENDA

Program Overview

Data drives our Work

Quality Management Strategies

DHE Strategies

- No resident of the Atlanta Eligible Metropolitan Area (EMA) acquires HIV.
- Persons in the Atlanta EMA who are living with HIV will receive high quality, culturally appropriate medical and support services through a system that respects and values individuals as they access care, remain in care, and reach viral suppression.

Mission

Our mission is to provide a coordinated response to the HIV epidemic in the Metropolitan Atlanta Area.

Our Core Values

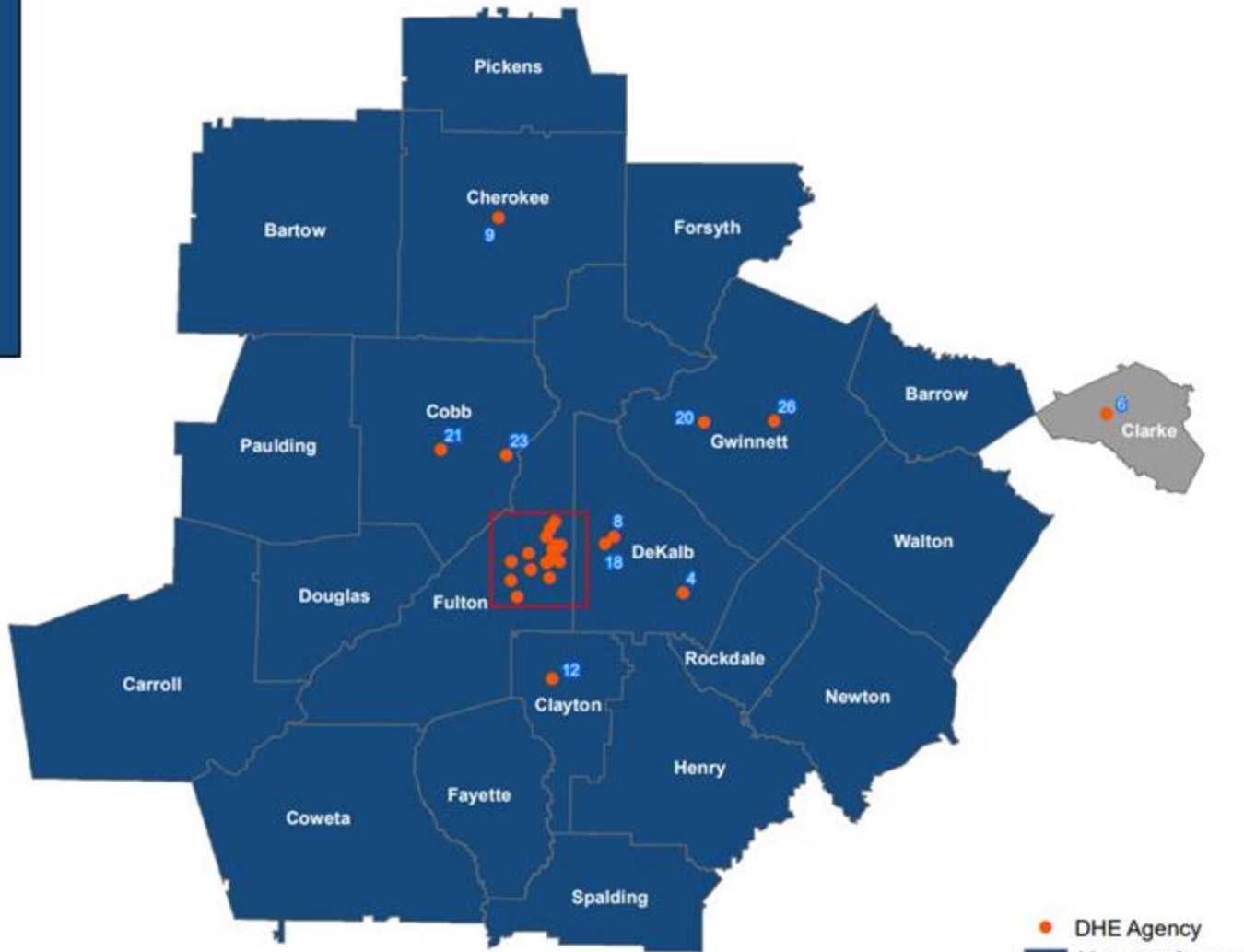
- **EMPOWERMENT** – Persons Living with HIV will be empowered and supported in actively participating in their care and treatment.
- **REPRESENTATION** – The Metropolitan Atlanta HIV Health Services Planning Council will be reflective, representative, and diverse.
- **HEALTH EQUITY** – Eliminating health disparities.
- **TRUST** – Effectively and efficiently administering Ryan White Part A funds.



Team DHE

PROGRAM OVERVIEW

DHE AGENCY LOCATIONS



Map No	Agency Name
1	AIDs Healthcare Foundation (AHF) - Midtown
2	Anis, Inc.
3	Atlanta Legal Aid Society, Inc.
4	AIDs Healthcare Foundation (AHF) - Lithonia
5	AID Atlanta
6	Clarke County Board of Health
7	Carl Bean Men's Health and Wellness Center, Inc.
8	DeKalb County Board of Health
9	Cherokee County Board of Health
10	Georgia Harm Reduction Coalition, Inc.
11	Emory University Hospital at Midtown
12	Clayton County Board of Health
13	Grady Police Center
14	Heather Ivy Society
15	Fulton County Board of Health
16	HOPE Atlanta
17	NAESM, Inc.
18	Positive Impact Health Centers- Decatur
19	Open Hand Atlanta
20	Positive Impact Health Centers- Duluth
21	Positive Impact Health Centers - Marietta
22	Saint Joseph's Mercy Care
23	Someone Cares, Inc- Marietta
24	Here's to Life
25	Southside Medical Center
26	To Our Shores, Inc.
27	THRIVE SS
28	Someone Cares, Inc.- Atlanta

● DHE Agency
 ■ 20 metro County



PART A/ EHE FUNDED PRIORITY CATEGORIES

Part A

- Childcare Services
- Emergency Financial Assistance
- Food Bank/Home Delivered Meals
- Health Insurance Premium and Cost Sharing Assistance
- Linguistic Services
- Medical Case Management
- Medical Nutrition Therapy
- Medical Transportation
- Mental Health
- Non-Medical Case Management
- OAHS
- Oral Health
- Other Professional Services (Legal)
- Psychosocial Support
- Referral - Health Insurance Navigation
- Referral General
- Substance Abuse

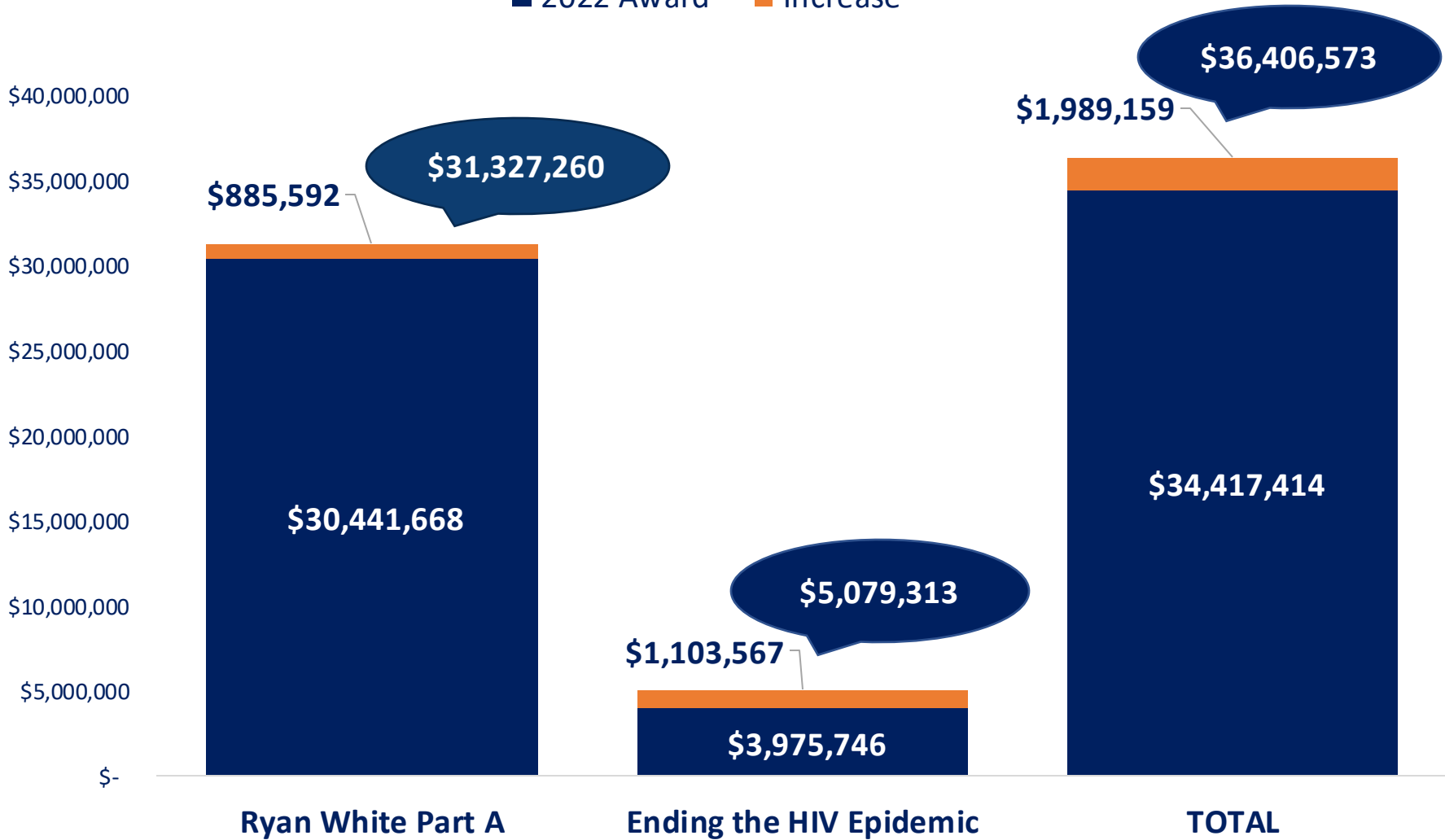
EHE

- Emergency Financial Assistance
- Food Bank/Home Delivered Meals
- Housing Services
- Initiative Services
- Linguistic Services
- Medical Case Management
- Medical Nutrition Therapy
- Medical Transportation
- Mental Health
- Non-Medical Case Management
- OAHS
- Oral Health
- Outreach Services
- Psychosocial Support
- Referral General
- Substance Abuse

GY2023 AWARDS

GY2023 FUNDING

■ 2022 Award ■ Increase



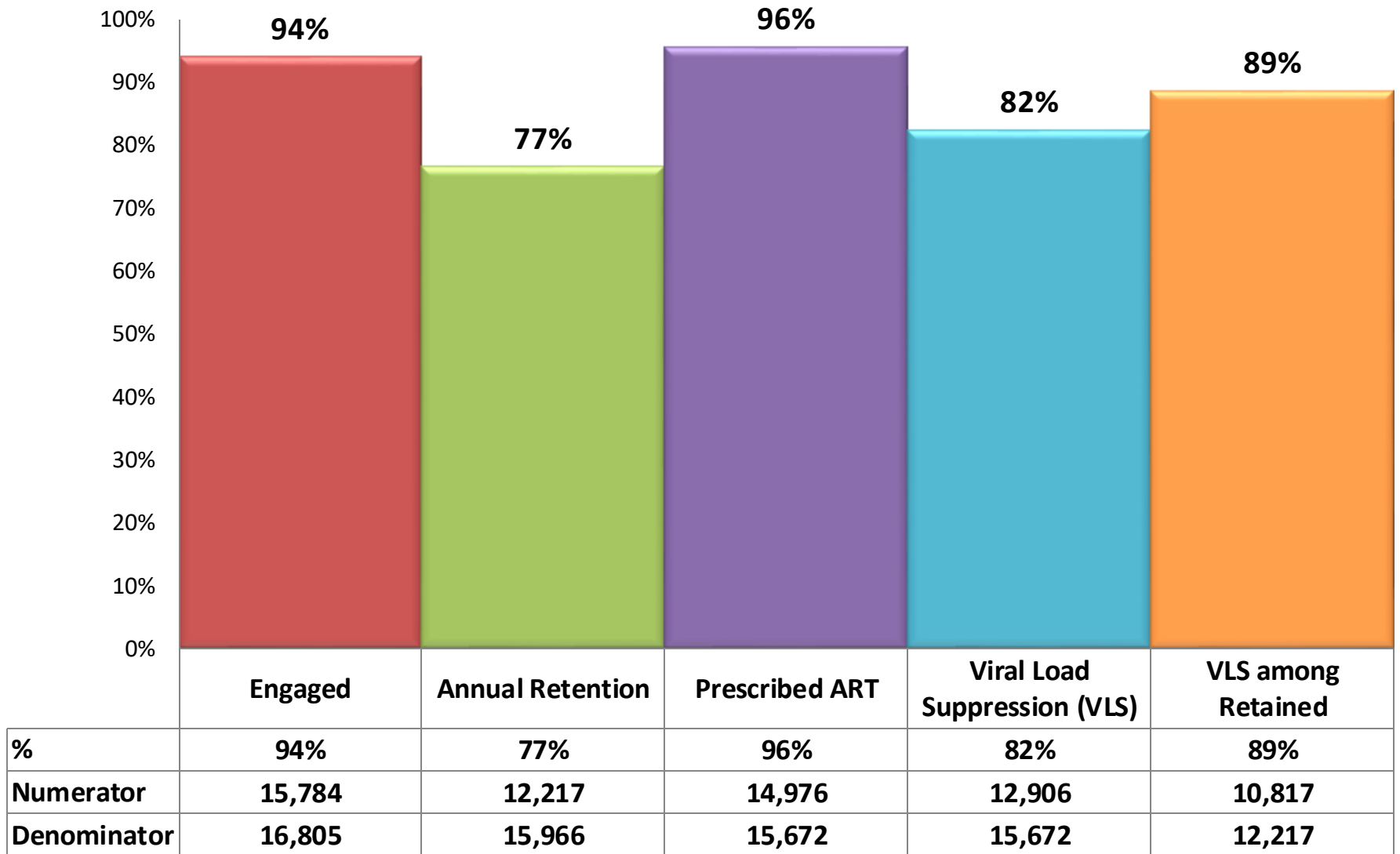
**DATA DRIVES OUR
WORK**

OVERVIEW: CLIENTS SERVED IN CY2022

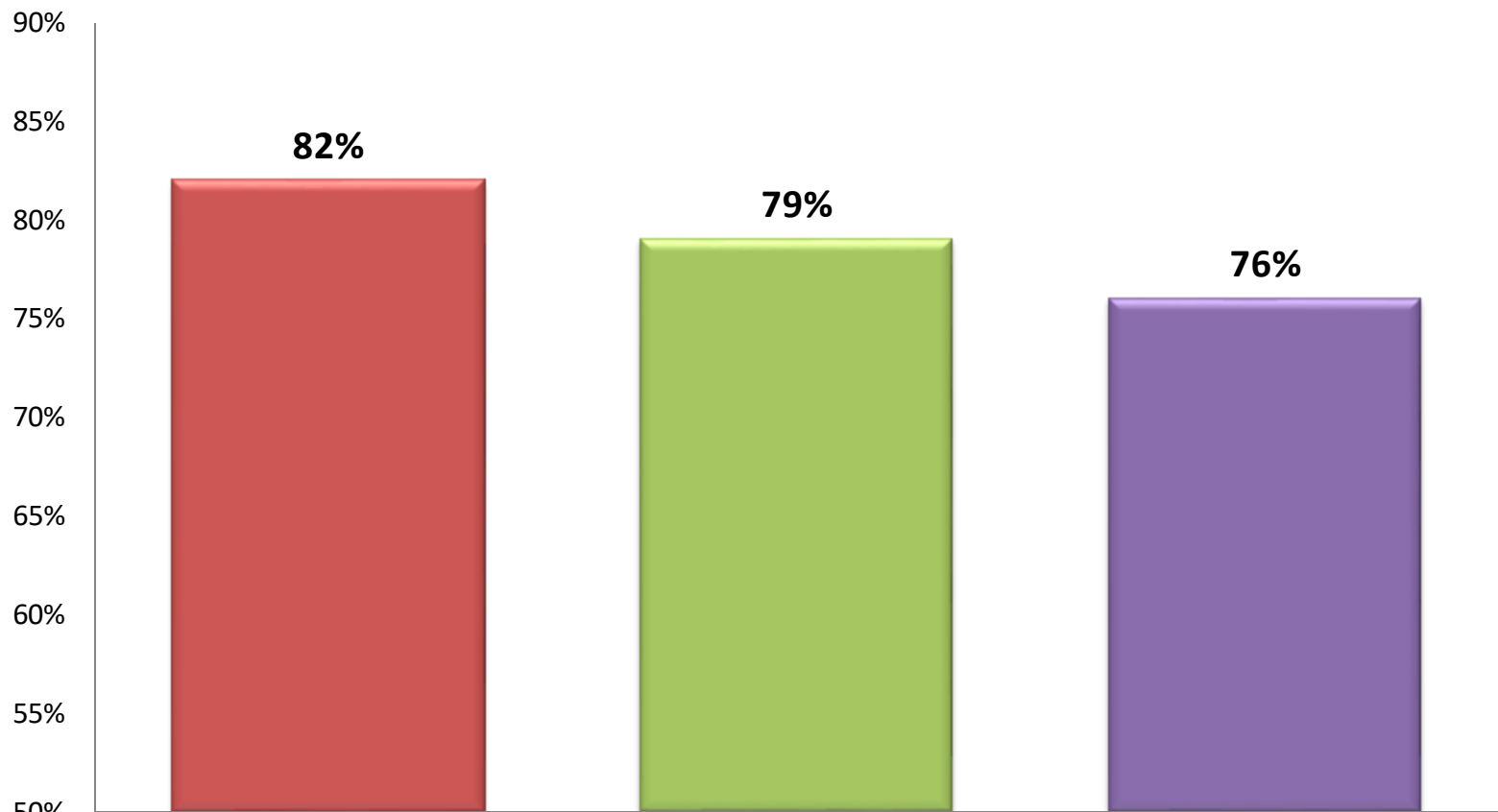
- In CY2022, a total of **16,978** clients received services; demographics reflect the state of the epidemic in Atlanta.
- The majority (79%) of clients were Black/African American
 - 60% are Male
 - 18% are Female
 - 2% are Transgender
- African American HIV Risk Factor:
 - 56% Male to Male sexual contact (MSM)
 - 34% reported Heterosexual contact
- Black/African American MSM (BMSM) make up 47% of clients served.



OUTCOMES IN CY2022

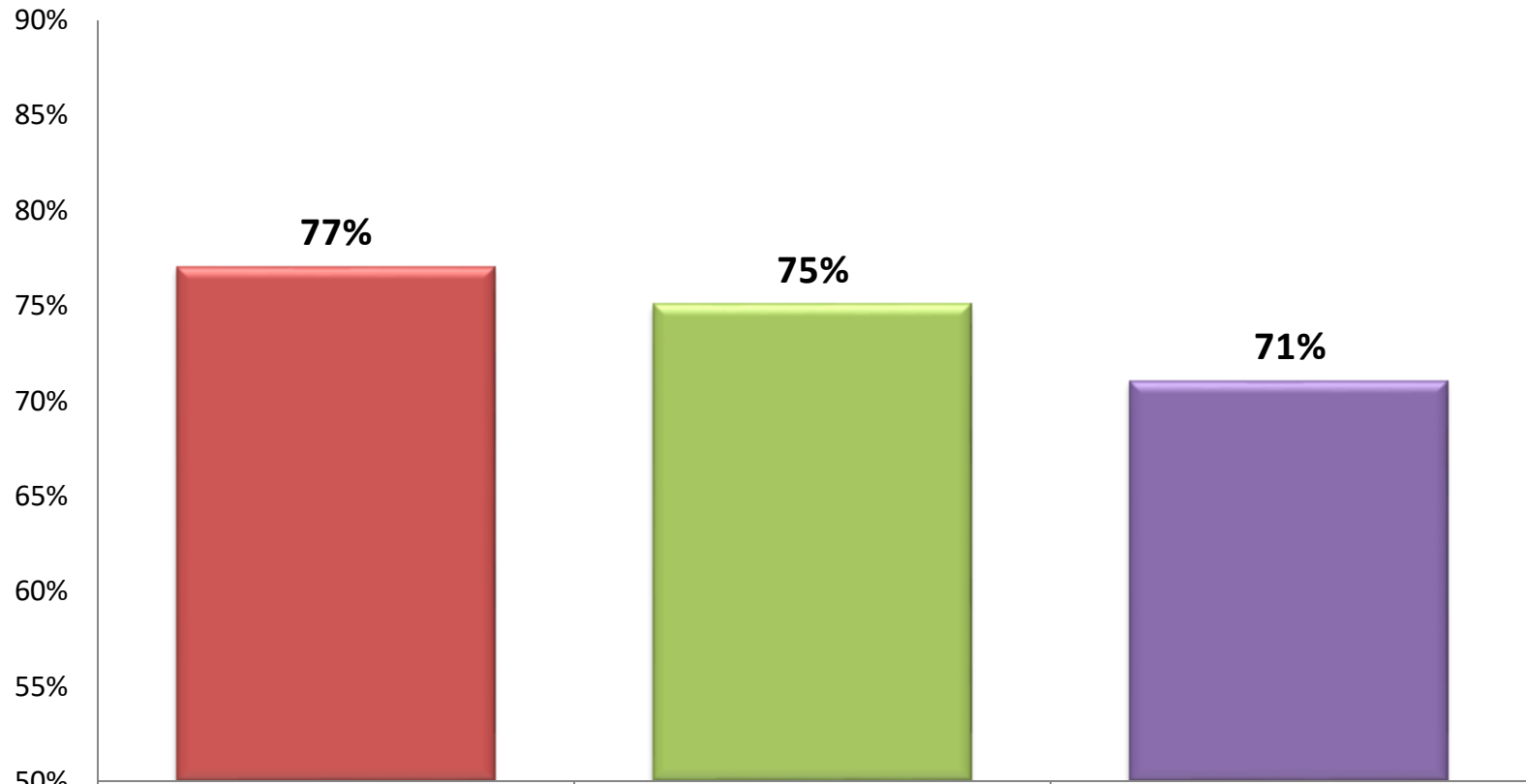


DISPARITIES IN VIRAL LOAD SUPPRESSION, CY2022



	All Clients	BMSM	BMSM ages 24-35
Percent	82%	79%	76%
Numerator	12,906	5,881	2,575
Denominator	15,672	7,409	3,368

DISPARITIES IN RETENTION, CY2022



	All Clients	BMSM	BMSM ages 24-35
Percent	77%	75%	71%
Numerator	12,217	5,663	2,462
Denominator	15,966	7,566	3,454

QUARTERLY DATA DISCUSSIONS & FOLLOW UP

- DHE conducts Quarterly Monitoring Calls with all subrecipients to ensure data compliance. We review the following:
 - Clients Served & Service Units provided to ensure work plan objectives are met.
 - Viral Load Suppression (VLS) Success & Challenges
 - Performance measures (VLS, Prescribed Anti Retroviral Therapy (ART), Annual Retention in Care, etc.)
 - OAHS will receive non-compliant lists for VLS and Prescribed ART
 - Data Quality & Timeliness
- OAHS agencies will receive VLS and Prescribed ART non-compliant client lists to address. This process provides additional client information and ensures that data is complete.

**VIRAL LOAD
SUPPRESSION**

*Achieving a viral load less than 200
copies within the measurement
year*



Viral Suppression Bulletin

August 2023

The ultimate goal of HIV treatment is to achieve viral suppression. This is important for people with HIV because it is crucial to staying healthy, living longer, and reducing the chances of transmitting HIV to others.

This monthly bulletin will share best practices and resources that support viral load suppression efforts in the Atlanta EMA. Please review and feel free to share with staff and community partners

Strategy 1: DHE's Internal Efforts

Efforts facilitated by DHE to support service providers' viral suppression efforts.



e2Fulton Training: Client Data Entry

Join us August 23rd, 1:00PM - 3:00PM
for an overview of client record data entry.

[Zoom Link](#)
[Training Announcement](#)



Making your Facility A Safe Space

Many LGBTQ+ people experience stigma and prejudice, they are cautious about entering spaces. Making a few of the adjustments detailed here establishes your facility as a safe space that happily supports and serves LGBTQ+ clients. Check out the document below.

["Make your Facility a Safe Space"](#)

Distributed to our subrecipients monthly with information on four strategies:

1. Internal Efforts
2. Trainings & Resources for Providers
3. Community Outreach Efforts
4. Marketing Campaigns

**QUALITY
MANAGEMENT
STRATEGIES**

DHE QI Project Scope

Viral Load Suppression

Quality Improvement
Expectation

INC Learning
Collaborative

Improve Care, Outcomes,
or Satisfaction

QI Initiative: Viral Load Suppression

- Agencies must have a viral load suppression project if:
 - ✓ Performance is lower than the EMA goal (90%) by more than 5%
 - ✓ Has declined over the previous year by more than 5%
 - ✓ A subrecipient measured as one of the lowest five performers for a funded service category
 - ✓ Disparities exist among priority populations
- Utilize an evidence-informed intervention to improve health outcomes among priority populations.
- Short-term project metric may differ from VL Suppression measure

QI Initiative: Agency-Specific

- Agency is funded for a core or support service
- Improve patient care, outcomes, and satisfaction
- If a subrecipient is performing at EMA goal (90% for viral load suppression), and disparities do not exist among priority populations, the subrecipient may select a QI project on any other measure of interest based on performance data.
- Subrecipients who only provide support services must select a QI project that reflects how they are influencing viral load suppression efforts (i.e., social determinants of health – Housing, MH, SA, Substance abuse, and Legal)

To achieve effective monitoring of QI projects, subrecipients are categorized as follows:

- **Novice**
 - **2x /month check-in calls**
 - **One-on-One TA Sessions**
 - **Review and discuss check-in call forms and PDSA work sheet**
 - **Emphasis on building QM Infrastructure and provide support to implement QI Projects**

To achieve effective monitoring of QI projects, subrecipients are categorized as follows:

- **Intermediate**
 - **Monthly check-in calls**
 - **Group TA Sessions**
 - **Review and discuss check-in call forms and PDSA work sheet**
 - **Emphasis on improving Performance Measurement system and provide support to implement QI Projects**

To achieve effective monitoring of QI projects, subrecipients are categorized as follows:

- **Advanced**
 - **Quarterly or Ad hoc check-in calls**
 - **Group TA Sessions**
 - **Review and discuss check-in call forms and PDSA work sheet**
 - **Emphasis on conducting and documenting Quality Improvement efforts**

- **The Impact Now Collaborative(INC) is a national quality improvement initiative to maximize the viral suppression rates by targeting those Ryan White HIV/AIDS Program (RWHAP) recipients and subrecipients that have the highest potential for a measurable national impact. Includes recipients as well as subrecipients.**
- **The goal of the INC is that 90% of Impact Sites have successfully implemented a quality improvement project that uses a cross-functional team that includes at least one person with HIV by June 2024.**
- **DHE's AIM statement: To provide support by Increasing CQM funding by 25% across the EMA – Part A CQI budget is now 4.9%**

DHE STRATEGIES

ATTACK FROM ALL FRONTS

SUBRECIPIENTS

Through CQI Projects and Impact Now Collaborative.

CONSUMER CAUCUS

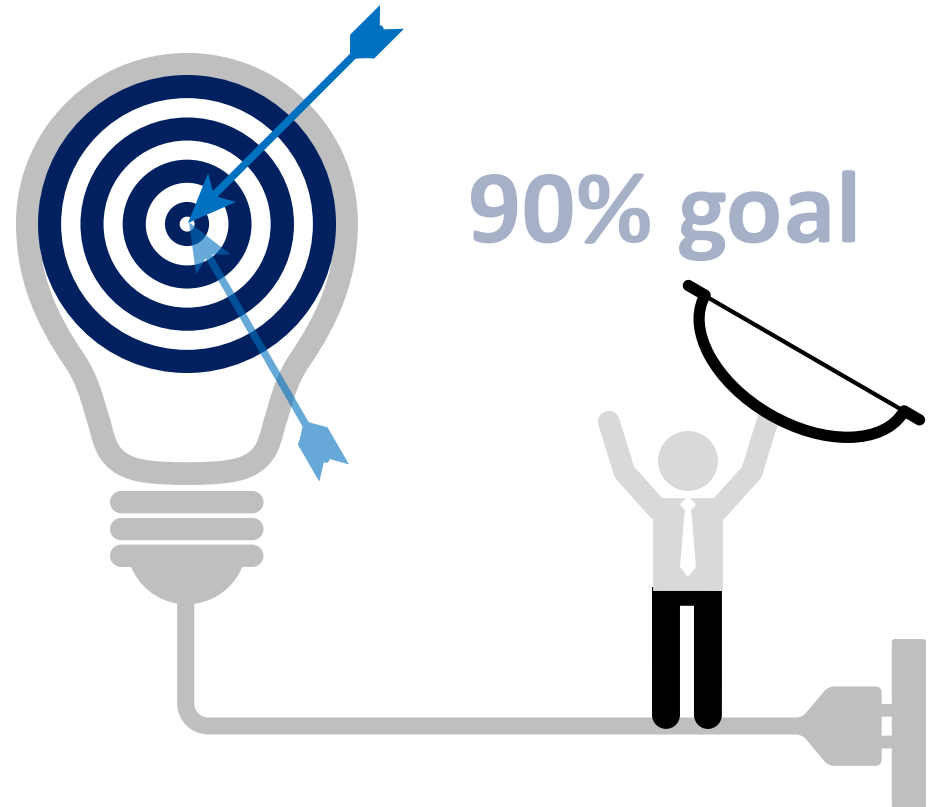
Identify ways of addressing barriers.

QM COMMITTEE

Collaborative effort among all providers

DHE

DHE support of subrecipient projects as well as Departmental efforts (e.g., Tap-In).



BEST PRACTICES REPORTED WITHIN THE EMA

- ✓ Building rapport/relationships with patients
- ✓ Following up on clients who missed appts/out of care or are not virally suppressed
- ✓ Referring for supportive services
- ✓ Treating the whole patient
- ✓ Bringing up viral load and treatment at every visit
- ✓ Same day walk in appointments – OAHS, mental health, oral health, etc.
- ✓ Coordination with pharmacy → Following up on patients who didn't pick up prescriptions

VLS EFFORTS FOR NON-CLINICAL AGENCIES

What does Viral Load Suppression (VLS) and QI efforts look like for agencies that do not provide OAHS?

As stated earlier, VLS should be attacked from all fronts, as such non-clinical providers can adopt and tailor any of the following strategies in embarking on a VLS QI project:

- Provide educational training on what VLS is, how to attain and sustain it etc.
- Marketing Campaigns
- Community outreach events

Ryan White **HIV** Care Providers & AIDS Drug Assistance Program

If you do not have insurance or need financial assistance with your HIV care and insurance costs, there are programs that can help, regardless of immigration status.

[CLICK TO GET CONNECTED TO HIV CARE & SERVICES THROUGH THRIVE SS →](#)

The **Ryan White HIV/AIDS Program** works with health departments and community-based organizations to provide HIV-related medical care and prescription drugs for people living with HIV who have no insurance, need services their insurance doesn't cover, or need help with insurance costs.

The program also provides **other essential support services for people living with HIV** including transportation, housing assistance, dental and mental health, substance abuse and more.

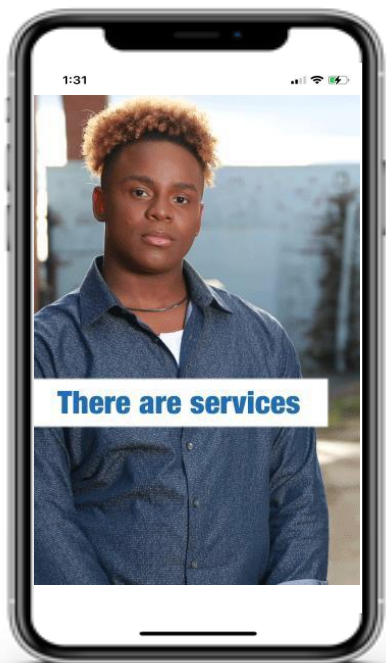
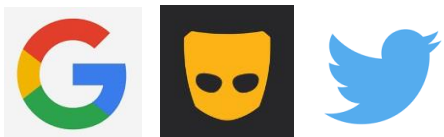
Find a Ryan White HIV Care Provider in Metro Atlanta

Same-day appointments may be available. Open early mornings, evenings and weekends in some locations. [Click to request help.](#)

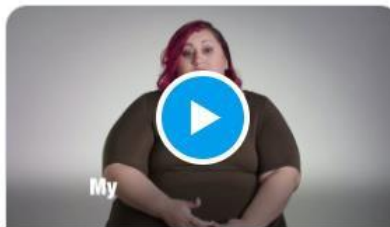
FIND PROVIDERS

GreaterThan.org/Atlanta-Ryan-White

GOOGLE DISPLAY NETWORK, GRINDR & TWITTER



Greater Tha... @GreaterTh... · Oct 10
The Ryan White HIV/AIDS Program provides financial assistance with HIV-related medical care and medications for those in need. The program may also be able to help with mental health care, dental care, and other essential services.



greaterthan.org
Connect with Ryan White HIV Services Near You



Talk with a Ryan White HIV care provider today.

Same day appointments available.

Find out more →

The bottom of the ad features two logos: on the left, the Ryan White Part A Program logo for Fulton County, and on the right, the Atlanta AIDS logo.

FREE OR LOW-COST MONKEYPOX TESTING →

A small blue right-pointing arrow icon in the bottom right corner.

FIND FREE MONKEYPOX VACCINES NEAR YOU →

A small blue right-pointing arrow icon in the bottom right corner.

Agency Spotlight



OPEN HAND

Open Hand is creating equitable access for BMSM and communities of color to fresh produce or nutrition education. The courses also teach them how to cook and shop for in season produce, giving clients the continued skills to needed to thrive. In addition, they cover transportation costs to access these services as well as home delivered produce, removing the barrier of not having their own vehicle or the extra resources to utilize public transportation. The services provide extra support for BMSM and other minority clients, encouraging them to remain in care because they are addressing their health from a comprehensive perspective incorporating all aspects of their health, not just their HIV care. By addressing their nutrition sensitive conditions, they are improving overall well-being and reducing levels of stress.



"Thank you so very much Open-Hand. I feel healthier and stronger. I can take my medications without worry. I am eating healthier; my blood pressure is getting to improve as well as not getting sick as often. You saved my life, thank you."



GRADY PONCE CENTER

The GOAL (Get Out And Live) provides comprehensive, wraparound services for individuals who are experiencing multiple co-morbidities. Their flexible model allows individuals to walk in for primary care services, mental health services, and psychosocial support. Each patient has a point person that supports patients through the care continuum by providing enhanced patient navigation to ensure patient has updated financial counseling, viral load monitoring, assistance with medication access. This has increased viral load suppression from 40% to 60%.

GREAT (Grady's Retention Enhancement Retention Team) involves enhanced patient navigation and a specialty pharmacy program.

I'm pleased with the Care I'm currently receiving and have received in the past. I wouldn't be Alive today if it wasn't for Grady

-Consumer Statement

Program Successes:

- End of program fiscal year 526 individuals were enrolled into great
- The initiative enrolled 92% of the proposed prioritized population
- Transportation services helped to improve retention
- Patients with viral loads trending down, viral suppression and/or undetectable

AIDS HEALTHCARE FOUNDATION (AHF)

- Community Health Workers (CHWs) reach out to patients who have not been seen in the last 6 – 12 months to re-engage them in medical care and encourage them to access any programs for which they are eligible.
- **Their intent is to utilize their mobile lab service to meet these clients at a location that is convenient for them, to re-engage them and get them the appropriate services.**



**CELEBRATING
SUCCESES**



In 2023, the Department For HIV Elimination (DHE) began developing Agency Scorecards for DHE subrecipients. Score cards are designed to:

- Evaluate progress on Subrecipients' Key Performance Indicators related to consumer health outcomes
- Highlight successes, best practices, and exemplary efforts
- Engage consumers, understand barriers to success, and receive buy-in from community members
- Encourage transparency and accountability between service providers and consumers.

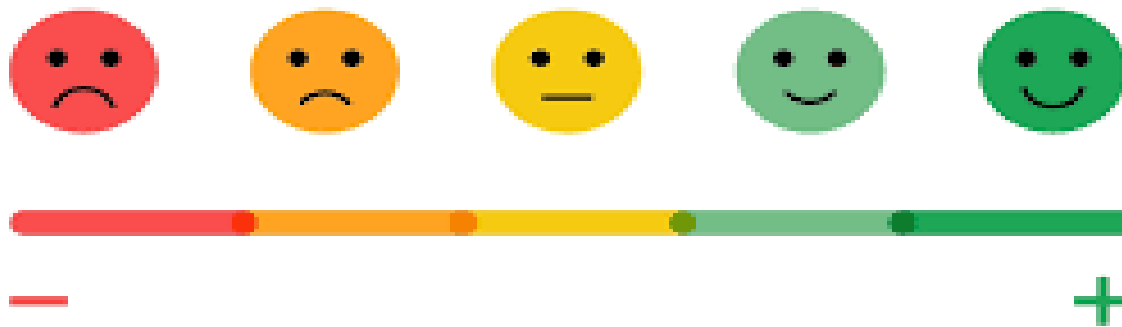
**COMMUNITY
ENGAGEMENT**

CLIENT SATISFACTION SURVEY

- The Client Satisfaction Survey aims to measure patient satisfaction to assess the quality of health care delivery.
- Any client that receives a service and has a valid email address and/or phone number in their client record will automatically receive a survey from e2Fulton. They will not receive more than two surveys in a six-month period per agency and/or service.
- The survey can be completed on a tablet, mobile, phone, or computer. The survey has audio assistance capabilities, computer-generated audio that will read the questions and answer choices to the responder in English or Spanish, and emoticons for every answer choice.

CLIENT SATISFACTION SURVEY

- The surveys are used to highlight successes as well as areas of improvement for agencies.
- DHE follows up with clients who request a call or report being *Very Dissatisfied* with the services received.





“I have been using Ryan White services since 2019. This service has really changed my life for the better...I remind myself every day to take all the time in the world if I need it. ... Thank you for this great service it really means a lot to me that I'm [a part] of something AMAZING. This service has been an EYE OPENER because I'm walking into my destiny of GREATNESS.”

- Corey

- The Vulnerable Populations Task Force utilizes the results of the Needs Assessment to evaluate disparities through the lens of vulnerable populations. The analysis of viral load suppression and the examination of other data points including HIV testing, Intake, Outpatient Ambulatory Health Services (OAHS) care, undetectable status and retention in care. Our deliverable will be quality improvement recommendations.
- Vulnerable Populations include:
 - Black Males 24-35
 - Black Females 24-35
 - Transgender Individuals 24-35

DHE COMMUNITY EVENTS DURING BLACK GAY PRIDE WEEKEND



DHE AT THE MAYOR'S BLACK GAY PRIDE GALA



PART B ENGAGEMENT BEST PRACTICES

QUESTIONS



The image features four decorative blue geometric shapes in the corners: a square-like shape in the top-left, a triangle in the top-right, and two overlapping triangles in the bottom-right. The central text is written in a black, elegant cursive script.

Thank you