

**SMALL TALKS** about:

# Regular, Ongoing Care



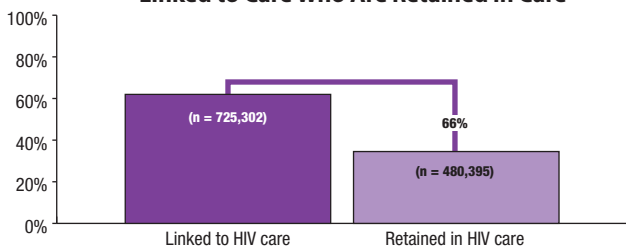
**How medical providers  
can help keep patients  
engaged in HIV care**



## **Regular, Ongoing Care** *helps patients lead longer, healthier lives*

**Retaining** patients in regular, ongoing care is an important component of the continuum of care for successful HIV management and is necessary for optimal treatment of all HIV-infected persons, including patients not yet taking antiretroviral therapy (ART).<sup>1,2</sup>

**Number and Percentage of HIV-Infected Persons  
Linked to Care Who Are Retained in Care<sup>\*3</sup>**



\*N = 1,178,350 persons 13 years old or older at the end of 2008.

Ongoing care, including initiating and monitoring ART, has been proven to improve clinical and individual outcomes, such as increased CD4 cell count, decreased viral load, reduced morbidity, and improved mortality.<sup>4-6</sup>

### **Definition of Retention in HIV Care:**

Two or more outpatient visits (at least 3 months apart) during each year of HIV treatment.<sup>7</sup>

## But not all patients remain in care

HIV care is not always consistent, and some patients may cycle in and out of care.<sup>8</sup> Key demographic, social, and disease-severity factors that can be predictive of patients who drop out or do not remain in HIV care include:<sup>3,9-12</sup>

- Younger age (<25 years old)
- Female gender
- Racial or ethnic minority
- Lower socioeconomic status
- No usual source of health care
- Low readiness to enter care
- Public health insurance, change in insurance, or no insurance
- Substance dependence
- CD4 cell count <200 or viral load >400 on ART

Awareness of these key factors can help providers identify patients who may have challenges staying in care and guide the overall approach to their treatment.

## BRIEF CONVERSATIONS

### *Help Improve Outcomes by Keeping Patients in Care*

It is important for patients living with HIV to understand that staying in medical care is crucial to short- and long-term health.

Talking with patients at regular visits allows medical providers to reinforce positive behaviors and uncover barriers to successful treatment over the long term. A number of studies have shown that brief conversations with patients result in better outcomes.<sup>13-16</sup> And, patients can be assured that regular, ongoing care helps to improve clinical and individual outcomes such as:<sup>4</sup>

- Better survival rates
- Increased CD4 cell count and decreased viral load
- Increased likelihood of receiving ART
- Lower rates of ART failure
- Reduced risky sexual behaviors and HIV transmission
- Decreased rates of hospitalization
- Improved clinical variables (such as blood pressure, weight, or tobacco use)
- Reduced community-level viral burden, which reduces community-wide risk for ongoing HIV transmission.

## Ongoing care results in higher CD4 counts and lower viral loads

In one study, patients who received ongoing, regularly scheduled care (at least one visit in each 6-month period over 2 years) had better outcomes than patients who missed even one appointment within a 2-year period, including:<sup>5</sup>

- Mean **increase in baseline CD4** count was greater in optimal retention compared with suboptimal retention and sporadic retention in care ( $P < 0.001$  for each)
- Mean **decrease in baseline viral** load was greater among those with optimal compared with suboptimal or sporadic retention in care ( $P < 0.001$  for each).

## Ongoing care results in better survival rates

An increased risk of mortality was seen when patients missed two or more visits over a 2-year period.<sup>5</sup> In a separate study, patients who missed visits in the first year after initiating HIV treatment had more than **twice the rate of long-term mortality** compared with those who attended all scheduled appointments.<sup>6</sup>

# SMALL TALKS

## *Lead to Teachable Moments*

Brief discussions about the importance of ongoing care can present teachable moments during which medical providers can help motivate patients to continue with care and/or make positive changes to improve their care.<sup>17</sup>

### **Make the most of teachable moments**

The most effective teachable moments are short, direct, nonjudgmental, and supportive in tone.

Successful teachable moments are those during which the provider (1) helps the patient identify and explore their barriers to ongoing care, (2) provides information needed to motivate a patient toward a specific positive change, and (3) obtains a patient response indicating a willingness to discuss and commit to the behavior change.<sup>17</sup>

Here are some examples:

#### **1. Exploring barriers:**

- **Patient:** "I'm sorry I missed my last appointment."
- **Provider:** "I'm happy to see you today. What was going on when you missed your appointment?"

## 2. Offering modifiable health behaviors to motivate the patient toward change:

- **Patient:** “Sometimes I’m afraid to come. I don’t want to hear more bad news.”
- **Provider:** “You have been doing very well, and if you continue to take care of yourself, I expect this to continue. Would it be helpful to have a friend or family member come to appointments with you?”

## 3. Patient indicates willingness to commit to behavior change:

- **Patient:** “I never thought of that. My sister can probably come to appointments with me.”
- **Provider:** “That’s a great idea. I’d love to meet her. Let’s make sure your next appointment is convenient for both of you.”



## HOW TO

### ***Keep Patients in Care and Connected***

The medical literature offers numerous suggestions for helping patients remain in ongoing care for HIV. These include:

#### **Directly helping patients modify behaviors that lead to poor retention in HIV care.<sup>4,18</sup> For example:**

- Communicate with the patient in a nonjudgmental manner to elicit information or skills related to retention that the patient might lack, such as problem-solving skills.
- Guide the patient to identify possible changes that would eliminate or reduce the barrier.
- Strategize with the patient to identify new goals and healthy behaviors.

#### **Fostering patient trust. For example:**

- Trust is a cornerstone of health care management and helps remove the stigma associated with HIV care.<sup>4</sup>
- Trust-building comes from simple actions, such as asking patients how they prefer to be addressed or explaining why certain questions are being asked.<sup>19</sup>
- Being direct, nonjudgmental, and supportive helps foster patient trust.



## Allowing open communication and collaborative decision-making. Such as:

- Encourage patients to recognize and use their own abilities to access resources and solve problems.<sup>20</sup>
  - Use open-ended questions to encourage patients to participate actively in their management plan.<sup>21</sup>
  - Encourage discussions on subjects including substance use, sexual behavior, and mental health.<sup>4</sup>
  - Provide referrals when needed, and assess patient willingness to complete the referral.<sup>22</sup>
    - Outreach workers, peer counselors, and treatment advocates can also assist patients with referrals.<sup>22</sup>
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## Demonstrating interest in addressing barriers to care, including structural barriers. Examples include:<sup>4,20</sup>

- When possible, extend office hours or offer more flexible appointment times one or more days per week (eg, offer some walk-in or same day appointments).
  - Maintain accurate patient contact information and update at every visit.
  - Use patient-tracking systems to determine whether a patient has dropped out of care; contact patients to reschedule missed appointments.
  - Help patients find resources to address unmet needs and barriers to care, such as lack of transportation, housing, and child care.
  - When possible, connect patients with services such as child care and transportation services and offer co-location of primary care and social services.<sup>20</sup>
    - Health department HIV/AIDS programs can provide information on accessing these services.<sup>22</sup>
  - When warranted, encourage patients to access substance use or mental health services.
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## START SMALL...

The following are suggested conversation starters for discussions about ongoing, regular care.

### **For new patients, set the stage for long-term care:**

"It's important that you come to your medical appointments regularly so I can monitor your progress and help you stay healthy. Let's talk about what that means."

"I know it can be difficult to keep all your appointments, but it's very important. What can we do to make sure you keep your next appointment?"

"I'm looking forward to seeing you on a regular basis."

### **For patients who regularly attend appointments, keep them motivated:**

"You're looking well today, and I'm pleased that you've been coming in so regularly."

"Thank you for doing such a good job of keeping your appointments. It makes it easier for us to work together to keep your HIV virus under control."

### **For patients who keep appointments inconsistently, be supportive:**

"There is proof that people with HIV do better overall when they come to their appointments on a regular basis. How can we make this happen for you?"

"I need your help to keep you healthy. When you come to your appointments to see me, we can work together to make you as healthy as possible."

"So let's talk about what has been keeping you from coming to see me."

**Brief discussions with patients at every office visit help build relationships that keep patients engaged in their own care over the long term.**

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# Helping Patients Participate in Regular, Ongoing Care

For optimal clinical benefit, HIV-infected patients should receive regular outpatient care indefinitely.

This brochure provides:

- Evidence of the importance of regular, ongoing care
- Proven strategies to engage patients in ongoing care
- Conversation starters to allow medical providers to discover modifiable barriers to reduce the number of missed appointments.

## Additional materials available in this kit

To help encourage brief discussions about barriers to and strategies for ART adherence, the following materials are also included in this kit:



- **Reprint of Gardner et al. A Low-Effort, Clinic-Wide Intervention Improves Attendance for HIV Primary Care**—provides evidence that brief conversations work to help patients receive ongoing, regular care



- **Action Plan**—used by you and your patient at each visit to identify and address modifiable barriers affecting regular, ongoing care



- **Patient Record Form**—serves as a guide to (and documentation of) conversations about regular, ongoing care and helps providers identify patients at risk for dropping out of care



- **Keeping All of Your Medical Appointments wall poster**—helps foster open communication



- **Keeping All of Your Medical Appointments brochure**—reinforces your health messages after patients leave their appointments

## Additional materials

- **HIV Resources for Providers Who Deliver Care to People Living with HIV**—provides a comprehensive selection of available resources [url to come]
- **Partner Services Provider Overview and Patient Education (brochure and wall posters)**—explain the Partner Services process and help patients access these services via the health department [url to come]



<http://www.cdc.gov/actagainstaids/pic/>

PREVENTION IS CARE  
Care IS Prevention

ACT against AIDS