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Highlights from

## A Low-Effort, Clinic-Wide **Intervention Improves** Attendance for HIV **Primary Care**

as published in Clinical Infectious Diseases

- Patients who enter treatment after a diagnosis of HIV infection must remain in care to realize the full benefits of effective antiretroviral therapy.
- Improving retention of HIV-infected patients in care is a priority from both clinical and public health perspectives and is a major objective of the National HIV/AIDS Strategy.
- CDC and HRSA jointly funded a two-phase, 5-year project to implement interventions to retain patients in care. One interventional project provided coordinated messages to encourage patients' clinic attendance. The enclosed article reports on the first phase ("Stay Connected") of this project.
  - Stay Connected is a clinic-wide intervention designed to retain patients in HIV care using posters, brochures, and brief messages delivered by primary care providers and other clinic staff. The intervention was conducted at six HIV clinics in the US after clinic staff received standardized training.
  - The intervention used targeted messages emphasizing the benefits of staying in care. Providers were asked to deliver these very brief messages, which could be worked into the routine of an HIV primary care visit.







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Small Talks IN HIV PRIMARY CARE

PREVENTI

attendance.

- the pre-intervention year.
- years of age [see Table 2].
- the pre-intervention year.
- patients.

Source: Gardner LI, Marks G, Craw JA, et al for the Retention in Care Study Group. A low-effort, clinic-wide intervention improves attendance for HIV primary care. Clin Infect Dis. 2012;55:1124-1134.

## Small Talks IN HIV PRIMARY CARE

## Retaining patients in HIV care can be improved with coordinated messages to encourage clinic

• During the first 3 months of the intervention year, 87.6% of 291 surveyed patients reported that a healthcare provider talked to them about the importance of keeping all of their appointments.

• The intervention resulted in relative overall improvements in clinic attendance that ranged from 7% for two consecutive appointments kept to 3% based on the proportion of all appointments kept.

• Although as a percentage the impact of the intervention was relatively small across all patients, the effect was highly significant compared with

• Subgroups with a doubled or greater intervention effect include new or reengaging patients, patients with a detectable viral load, patients 16-29

• Although as a percentage the impact of the intervention was relatively small across all patients, the effect was highly significant compared with

• Delivered at minimal effort and cost, targeted messages on staying in care were shown to improve clinic attendance, especially for new or reengaging patients, patients with elevated viral loads, and young

• Retaining patients in HIV care can be improved with coordinated messages to encourage clinic attendance.

