

### 3f Sample Provider Interview Guide

#### Using Rapid Assessment Methods to Understand Issues in HIV Prevention, Care and Treatment in the United States

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## Provider In Depth Interview Guide

Clinic ID: \_\_\_\_\_  
Date: \_\_\_\_\_

Participant ID: \_\_\_\_\_  
Start time: \_\_: \_\_ am/pm

Data Collector ID: \_\_\_\_\_  
End time: \_\_: \_\_ am/pm

### DEFINITION OF ENGAGEMENT (5 min)

Just to remind you, funding for this study is provided by the Centers for Disease Control and Prevention (CDC). Now I'd like to discuss the barriers and facilitators that you've experienced in providing HIV care and treatment. For the purposes of this interview, we'd like to define **engagement in care** as a broad process that begins with initial linkage to a healthcare provider after a person learns of their HIV+ diagnosis and is ongoing with ART adherence and viral suppression. Engagement therefore includes the following components:

- **Linkage to care** is the process of assisting diagnosed HIV-infected persons to enter medical/HIV primary care (e.g. a visit with an HIV care provider authorized to prescribe ART)
- **Retention in care** is the process of helping HIV patients make and continue to attend provider appointments.
- **Re-entry or re-engagement in care** is the process of re-connecting HIV patients to HIV medical care after they have dropped out of care.

16. In what ways do these definitions align with your facility experiences? In what ways are these definitions different from your facility experiences?

### APPROACH TO ENGAGING PATIENTS IN CARE (8 min)

17. Can you describe the steps or general approach that you take to engage a patient in HIV care and treatment?

- Probe: What types of **assistance** do you typically provide to patients beginning HIV care to improve the likelihood they will return for continuing care?*
- Probe: What types of tools or resources do you use to **assess your patients' readiness** for initiating HIV care or treatment?*
- Probe: What steps or approach do you take if a patient **refuses HIV care or treatment**?*
- Probe: What types of assistance do you provide to established patients to help them return for follow-up appointments (e.g., appointment reminders by mail, phone, or other, or follow-up for missed appointments)?*
- Probe: What types of assistance do you provide to re-engage patients who have dropped out of care?*
- Probe: What types of tools or resources do you use to **assess your patients' need for a referral** to other health-related services (e.g. mental health, substance abuse, dental care, case management)?*
- Probe: In your opinion, are these tools and resources **adequate**? What could be improved?*

### BARRIERS AND FACILITATORS TO ENGAGING PATIENTS IN CARE (13 min)

**18. What are some of the barriers (e.g. facility or system features<sup>1</sup>) that you experience as a provider when attempting to help patients engage in HIV care?**

- a. *Probe: What are some of the barriers (e.g. facility or system features) that you experience when attempting to **retain** patients in care?*
  - i. *Probe: How might that differ for someone who is new to care versus someone who has been in care for a longer period of time?*
- b. *Probe: What are some of the barriers (e.g. facility or system features) that you experience when attempting to **re-engage** patients in care?*
- c. *Probe: What are some of the barriers (e.g. facility or system features) that you experience when attempting to **refer** patients to other services?*

**19. What are some of the facilitators (e.g. strategies, facility or system features) that help you as a provider when attempting to help patients engage in HIV care?**

- a. *Probe: What are some of the facilitators (e.g. strategies, facility or system features) that help you **retain** patients in care?*
  - i. *Probe: How might that differ for someone who is new to care versus someone who has been in care for a longer period of time?*
- b. *Probe: What are some of the facilitators (e.g. strategies, facility or system features) that help you **re-engage** patients in care?*
- c. *Probe: What are some of the facilitators (e.g. strategies, facility or system features) that help you **refer** patients to other services?*

<b>RELATIONSHIPS WITH EXTERNAL PROVIDERS (7 min)</b>
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**20. What services does your practice provide onsite?**

*Probe for the following services if they are not mentioned:*

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<sup>1</sup> This could include **patient-provider communication** issues such as trust, cultural and linguistic competency, provider experience and skills and/or **infrastructure issues** such as funding and reimbursement policies, availability of EMR, facility hours, follow-up/continuity mechanisms, and staff training and turnover.

- 1 Dental care
- 2 Mental health counseling by psychiatrists, psychologists, or others who are licensed to conduct mental health counseling
- 3 Substance abuse treatment
- 4 Consultations or programs specifically designed to support or improve patient adherence to HIV treatment
- 5 HIV risk reduction counseling sessions by a counselor trained specifically to conduct this type of counseling
- 6 Partner counseling and referral services (PCRS)
- 7 Nutrition consultation with a dietician or nutritionist
- 8 Patient navigation services (e.g., accompanying to appointments as needed)
- 9 HIV/AIDS Case-management/care coordination services
- 10 Social services
- 11 Language translation services
- 12 Transportation services or financial assistance with transportation
- 13 Opioid maintenance therapy (e.g. buprenorphine, methadone) for opioid-dependent patients
- 14. Provision of risk-reduction tools (e.g., condoms)

**21. In what ways do these services effect engagement and retention of patients in care?**

**22. In what ways do you help patients obtain other health-related services?**

- a. *Probe: What types of organizations do you work with to help HIV-positive individuals obtain **health-related services** (e.g. mental health services, substance abuse, dental care, case management, risk-reduction counseling and tools (e.g. condoms, or other services)?*
- b. *Probe: Are there **organizations** with whom that you would like to work that you have not been able to?*
  - i. *Probe: What are some of the **reasons you have not been able to work with them**?*
- c. *Probe: What might **improve your ability to collaborate with external organizations** (e.g. formal contracts or agreements)?*

**23. In what ways do these external services effect engagement and retention of patients in care?**

**MONITORING OF PATIENT ENGAGEMENT IN CARE (10 min)**

**24. How does your facility monitor patient engagement in HIV care and treatment?**

- a. *Probe: How does your facility monitor patient **retention** in HIV care and treatment?*
- b. *Probe: How does your facility monitor patient **re-engagement** into HIV care and treatment? For example, how do you track patients who are missing appointments?*
- c. *Probe: What is your role in the documentation/monitoring process?*

**For referral purposes only**

Phase	Visits with HIV Primary Care Provider (authorized to prescribe medication)	CD4 or HIV viral load test(s) (at least 3 months apart if multiple tests)
Method of Confirmation	Check of medical records or self-report	CD4/VL reports to surveillance
Linkage	Attended an initial care visit following receipt of	Received a CD4 or HIV viral load test(s)

	HIV diagnosis [could be up to 3 months following diagnosis – Mugavero]	
<b>Engagement</b>	Patient has attended two or more HIV medical care visits in the 12 months following the initial care visit	Received at least 2 CD4 or HIV viral load tests during the 12 months after diagnosis
<b>Retention</b>	Patient has attended two or more HIV medical care visits in each 12-month period following the initial 12-month period	Received at least 2 CD4 or HIV viral load tests during any 12-month period starting ≥12 months after diagnosis
<b>Re-Entry</b>	Patient has attended two or more HIV medical care visits following a lapse of 12 or more months without any HIV visits	Received a CD4 or viral load test after a period of at least 12 months without a CD4 or viral load test
<b>Re-Engagement</b>	Patient has attended two or more HIV medical care visits in the 12 months following the re-entry visit	Received a CD4 or viral load test after a period of at least 12 months in the 12 months following re-entry

(Source: Bertolli J., Gardner L., Marks G., Linkage to and Retention in HIV Medical Care. NASTAD Webinar, November 16, 2011)

25. What are some of the barriers (e.g. facility or system features) that you experience when attempting to monitor patient engagement in HIV care and treatment (e.g. the purpose, who is doing the monitoring, available data, or other categories)?

26. What are of the facilitators (e.g. strategies, facility or system features) that help you monitor patient engagement in HIV care and treatment (e.g. the purpose, who is doing the monitoring, available data, or other categories)?

#### UTILIZING INNOVATIVE PRACTICES TO ENGAGE PATIENTS IN CARE (10 min)

27. Please describe any aspects of your organization's service model used for engaging HIV-positive patients that you consider to be innovative.

28. Tell me about any successes you have had in your practice where you were able to help patients engage who were having difficulty doing so. Please do not provide names or any information that could identify a patient or individual.

- a. Probe: Can you think of examples of patients **new to care** who were initially reluctant to accept care or treatment that you were able to engage?
- b. Probe: What made that change possible?
- c. Probe: Can you think of examples of **established patients** who were missing appointments or were non-adherent to care or treatment that you were able to engage consistently?
- d. Probe: What made that change possible?
- e. Probe: Can you think of examples of patients who had **dropped out of care** that you were able to re-engage in care?
- f. Probe: What made that change possible?

#### For interviewer reference:

**Innovative strategies /models** can include but are not limited to: linkage to care programs, case management, outreach, use of peer or paraprofessional patient navigators, clinic-wide messaging via text, email or social media, use of EMR across integrated healthcare systems, etc.

**CLOSING QUESTIONS (2 min)**

**29. Is there anything else you'd like to share today regarding patient engagement in care, including linkage to, retention in, and re-engagement in care or referral to care?**