Implementing Client-Program Standard Contracts for Improved Service Delivery of Healthy Living Project (Evidence Based Interventions)

HARLEM UNITED

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Background

Harlem United's (HU) Integrated Harm Reduction Program (IHRP)'s Ryan White Contract provides group services throughout Manhattan, Brooklyn and the Bronx with harm reduction counseling for people living with HIV/AIDS. Evidence Based Interventions (EBIs) like Healthy Living Project (HLP) benefit participants and are also a key service deliverable for the program. HLP allows facilitators to guide participants to their own healthy living goals using harm reduction principles and theories, like motivational interviewing. For the 2015-2016 fiscal year, IHRP completed 67% of its yearly target for HLP. Based on the low numbers and the significance of HLP, the management team wanted to increase this deliverable by completing 90% in fiscal year 2016-2017.

Aim

Healthy Living Project (HLP) is a significant service deliverable as it allows participants to gain control of their health through developing and achieving weekly goals relating to session topics. Due to decreasing client participation in this evidence based intervention (EBI), this quality improvement project sought to increase the client participation in Healthy Living Project by setting a standard protocol for client and staff expectations and detailing roles and responsibilities of all stakeholders.

Methods

The IHRP HLP facilitators, clinical director, program managers and evaluator met for a Continuous Quality Improvement (CQI) meeting in July 2016. During this meeting, IHRP team members identified barriers to successful HLP delivery. All barriers were listed and staff members were instructed to vote for the areas they thought were most significant; voting occurred during a break to avoid reporting bias. The following areas were identified as the most prevalent obstacles in achieving HLP numbers:

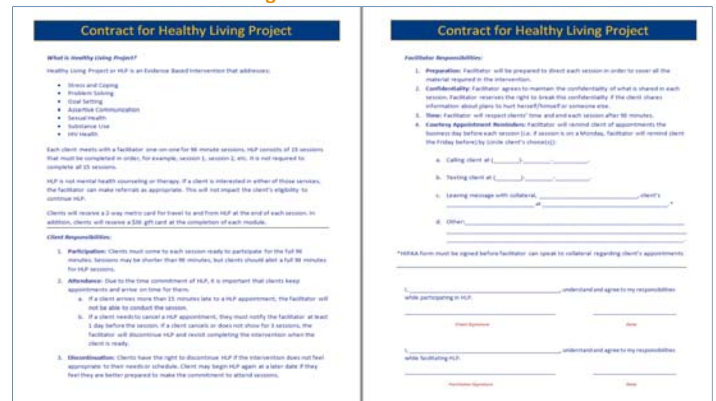
Client and facilitator level barriers: client motivation; accountability for returning each week; inconsistent messaging around the consequences for missing sessions; no set norms for intervention to improve retention and delivery of the intervention.

After the brainstorming, IHRP team members and managers generated solutions focused on creating a clear, standardized set of norms that would increase both participant and facilitator accountability with regard to administering the intervention while maintaining its fidelity. The IHRP team decided to create a Healthy Living Project Contract, which would outline both participant and facilitator roles and responsibilities, create clear and actionable accountability mechanisms, and ensure the overall fidelity of the intervention itself. The contract was fully implemented in October 2016.

Results

Since the implementation of the contract between the facilitator and the client, we saw an exponential increase in the number of HLP sessions conducted after October 2016. Comparing the number of sessions held between January to September 2016, with those from October 2016 to June 2017, there was a 350% increase in the number of sessions after the implementation of the HLP contract. From October 2016 to July 2017, a total of 77 HLP sessions were conducted (the target of 61 sessions), thus achieving 126% of our target goal.

Figure 1



Contract for Healthy Living Project

Figure 1. Contract for Healthy Living Project that was signed by all clients

Figure 2

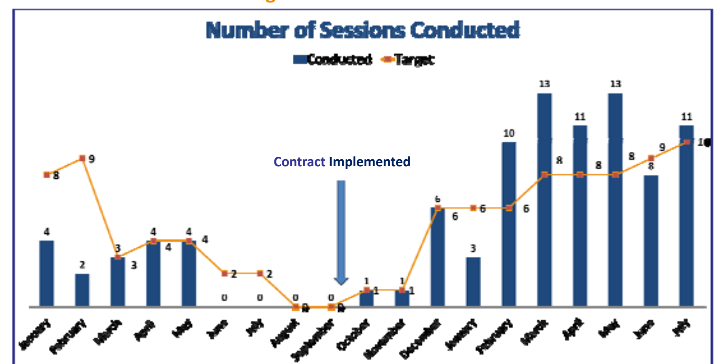


Figure 2. Number of Sessions Conducted Pre and Post-Contract Implementation 2016-2017

Conclusions

The implementation of a simple contract between the program staff and clients, which outlined clear stipulations for both participation and facilitation, guidelines for attendance, upcoming appointment reminders, and the time commitment associated with HLP, translated into increased number of sessions and improved client participation for the EBI delivery. Secondary gains from this CQI included improvement in client health outcomes and strengthening of facilitation skills for staff members, who were able to successfully deliver the intervention with increased consistency.