

# Re-Engaging Mental Health Services Clients to PCP to Update HIV Viral Load Lab Work



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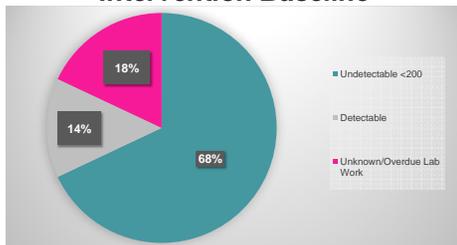
## Background

In November 2016, the Mental Health Services (MHV) team noted that the number of program clients who had not obtained updated labs within the last six months was steadily increasing. The MHV team identified 22 of 120 (18%) clients in the MHV program in Housing Works East New York, Downtown Brooklyn Health Center, and Cylar House sites, who did not have updated lab work.

To address, the team decided to find out if targeted outreach, such as phone calls, home visits, and accompaniments, could be used to re-engage clients lost to care or without a scheduled appointment with their Primary Care Provider (PCP). This effort would help MHV and PCP obtain a more accurate measure of HIV viral load, showing whether or not a client was medically stable/undetectable, or detectable in his/her HIV treatment.

The MHV team decided to implement the intervention with one of the Social Worker team sites, which included Housing Works East New York and Downtown Brooklyn Health Center.

### HIV Viral Load Lab Work Intervention Baseline



## AIM

The goal of the intervention is to reduce the number of clients in need of updated HIV viral load lab work by 50%, by utilizing services offered by the MHV Mental Health Advocate (MHA). MHAs assist clients with scheduling internal or external PCP appointments and accompany clients to their PCP appointments and to get labs.

## Methods

The MHV program team, including the Program Director, Social Worker, and MHA collaborated on reducing the number of MHV clients who had not obtained updated viral load lab work within the last six months.

By utilizing the MHV viral load lab work tracking log, the MHV team was able to identify 14 clients at the Housing Works East New York and Downtown Brooklyn Health Center sites who had not received updated HIV viral load lab work in the six-month timeframe.

The Social Worker team members from the two sites were chosen as they had the highest number of clients lost to care.

As of December 2016, the MHA began conducting outreach with the identified clients through phone calls and home visits, and clients were assisted in scheduling PCP appointments. The MHA also accompanied clients to their medical visits to have lab work done.

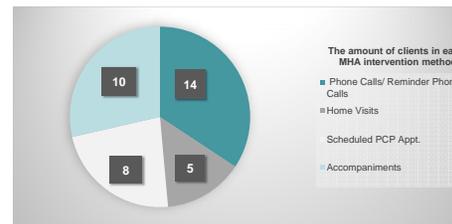
## Results

Between December 2016 to June 2017, the MHV team continued to conduct outreach and monitored if targeted outreach was successful in obtaining updated viral load lab work.

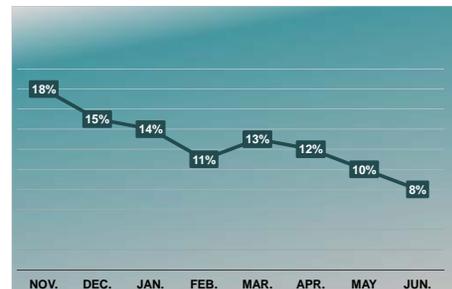
In March, the MHV team identified two clients lost to care and with past due lab work and added them to the project.

Within this seven month period, the Mental Health Advocate intervention demonstrated a significant reduction in the overall number of MHV clients without updated lab work, decreasing from 18% to 8% as of June 2017.

### Intervention Methods



### Updated HIV Viral Load Lab Work Intervention Results

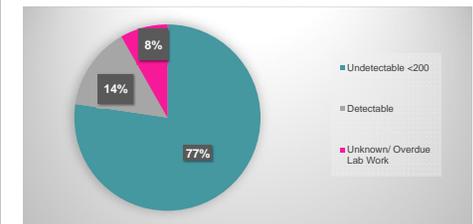


## Lessons Learned/ Next Steps

As a result of the Mental Health Advocate intervention, the team learned that providing targeted outreach, including phone calls, home visits, scheduling appointments, and providing accompaniments was successful in reducing the number of MHV clients without updated lab work and PCP engagement.

The MHV team decided to continue the intervention project to assist the 8% of clients lost to follow-up—to re-engage them to PCP and to ensure that HIV viral load lab work was current.

### HIV Viral Load Lab Work Intervention Outcome



The next step is to expand the intervention project to all three MHV Housing Works sites, and to re-engage all MHV clients who are within the three to six month period to have updated lab work and PCP visits.

The Program Director, Social Workers, and Mental Health Advocates will continue to collaborate in identifying clients, utilizing the targeted outreach strategies, to ensure MHV clients remain engaged in care.