

AETC Network News

AIDS EDUCATION & TRAINING CENTERS

Providing Healthcare Professionals with Quality Education to Improve HIV Care

Summer 2010

Pennsylvania/MidAtlantic AETC Program Collaboration and Service Integration (PCSI): The AETC role with this Centers for Disease Control and Prevention (CDC) Initiative

The capacity building expertise of the AETC program has a natural role in new initiatives such as the recent CDC promotion of the collaboration and integration of HIV, Hepatitis, Sexually Transmitted Diseases (STD), and Tuberculosis (TB). The Pennsylvania/MidAtlantic AETC was asked to assist the Philadelphia jurisdiction in 2007-2008 when the CDC National Centers for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) issued their green paper outlining the problem of separate, "siloed" systems; describing desired levels of integration for prevention services in health care settings; and grounding these initial remarks in routine HIV testing in line with the 2006 revised recommendations.

The AETC engaged in a systems consultation, the first step of which involved completing an inventory/assessment of the collaboration activities that were already in place in the Philadelphia Department of Public Health (PDPH) within the 4 programs. A workgroup comprised of representatives of these PDPH units was then convened with the assistance of the AETC Local Performance Site in May 2008, and the results of the inventory were discussed in order to launch follow up actions and to further the intentions of integration and collaboration.

Encouraged by the results of the baseline assessment, the workgroup then met quarterly to update the information, share strategies, problem solve barriers and challenges, and enhance and expand the integration. The Philadelphia Office of Addiction Services was added to the internal

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Texas/Oklahoma AETC

Featured Trainer:

Roberto Andrade, MD

Roberto Andrade, MD is an Assistant Professor in the Department of Medicine, Section of Infectious Diseases, at Baylor College of Medicine and has served as the Clinical Director of the Texas/Oklahoma AIDS Education and Training Center Local Performance Site for the past six years in Houston, Texas. Originally from Ecuador, Dr. Andrade has worked extensively in HIV primary care, bringing years of experience in the treatment of infectious diseases, with expertise in the area of sexually transmitted diseases. He currently supervises the clinical training of Residents and HIV Fellows at Thomas Street Health Center, which provides HIV primary care to 4,784 persons living with HIV/AIDS (PLWHA) in Harris County. Concurrently, he has developed and provided oversight of the AETC annual HIV/AIDS update for Houston clinicians as well as the comprehensive preceptorship program for primary care clinicians serving PLWHA.



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New England AETC

Annual HIV Over Fifty Conference Team: NEAETC Best Practice Model

The New England AIDS Education and Training Center (NEAETC) in collaboration with the New England Association on HIV over Fifty (NEAHOF) has been committed to highlighting the needs of patients aging with HIV and their providers by facilitating an HIV Over Fifty Regional Update Conference annually.

Interest in the aging HIV patient has long been on the minds of some consumers and providers. As far back as 1996, a national group was organized to address the topic known as the National Association on HIV Over Fifty (NAHOF). One of the co-chairs of this group Nathan Linsk, Principal Investigator of the Midwest AIDS Training and Education Center (MATEC) along with Jane Fowler (consumer) provided the leadership. Donna Gallagher, Principal Investigator of NEAETC, quickly joined the group resulting in several collabora-

tive efforts between the two AETCs and the NAHOF. These efforts kept the topic alive for the many years that it has taken to reach center stage. NEAHOF is the local New England Offspring of the national group.

NEAETC has imbedded in its mission statement the commitment to work in partnership with People Living With HIV from the New England Communities when planning HIV related events. The Annual HIV Over Fifty Update Conference is a stellar example of these partnerships.

Jim Campbell, past president of NAHOF, current president of the NEAHOF as well as consumer faculty for NEAETC, along with Shirley Royster, NEAETC consumer faculty, work with Jim Meenaghan and Kelly Fattman to create an exciting, informative program each year that highlights and translates current

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Featured Trainer *continued*

Dr. Andrade has been the recipient of many awards including the Fulbright and Gasworks L.L.P. Faculty Excellence Award (F&J) in Educational Leadership and devotes a portion of his time developing and participating in HIV research. Dr. Andrade has presented abstracts on a variety of HIV-related topics, including common challenges in antiretroviral therapy and STD co-infection at national and international conferences. More recently, he served as the course director of the first Syphilis-HIV symposium congregating nationally recognized health care authorities, providers, and educators in Houston, Texas.

Dr. Andrade's Top Five Strategies for Training New Providers

1. **RECOMMEND** that new providers complete an "HIV 101" course to obtain a basic overview of the medical management of an HIV infected patient.
2. **REGISTER** new providers for a one-on-one full day of shadowing with an HIV-experienced clinician. This should include learning how to interview a new client,

how to assess adherence, and how to approach complications in HIV-experienced patients.

3. **FAMILIARIZE** new providers with the multidisciplinary aspects of treating HIV-infected patients, including a basic knowledge of psychiatric illnesses (most typically, depression), pain management and substance abuse.
4. **CONSIDER** (strongly) a medical school-affiliated HIV fellowship (most are 12 months duration). It is considered a subspecialty after completing Infectious Diseases training. Some family practitioners (Family Medicine and Internal medicine physicians) have completed this training and have become HIV expert leaders in their community.
5. **UPDATE** yourself regularly with on-line courses and/or live conferences (IAS, CROI, CCO); the rapid dynamics of HIV require staying abreast of the latest research, and rapidly evolving treatment guidelines. ❖

Annual HIV Over Fifty Conference Team: NEAETC Best Practice Model *continued*



science, treatment and care issues regarding over fifty patients living with HIV.

As we enter the 4th decade of HIV, it is clear that managing HIV in people over 50 is fast becoming the norm. In New England, more than 50% of people with HIV are over fifty. In addition, approximately 11% of newly diagnosed patients are over fifty.

The HIV education platforms, materials, and training opportunities regarding the aging HIV patient have been slow coming over the past three decades of disease. However, we now see HIV and Aging as a topic of growing interest around the world. This was demonstrated by the presence of abstracts, posters, and sessions addressing the topic at

the recent International AIDS Conference in Vienna. In the US, it is predicted that over 50% of the "baby boomers" with HIV will need aging services placing a new burden on an already stressed system. We have five years to prepare the system and the providers for this tsunami of need.

The persistent efforts and leadership of the New England team along with other staff members, collaborators and volunteers in the New England Region has elevated this once small gathering of interested providers, patients, and policy makers to a national level.

The production of this conference requires a year round effort from Jim Campbell, Jim Meenaghan, Kelly Fattman Shirley Royster, and the many other NEAETC faculty and staff as they reach out to the Departments of Public Health AIDS Bureaus, The Councils on Aging, AARP, and assorted Aging services groups as well as legislators and potential funders of the event. Thanks to the efforts of this committed group this event has grown from an initial event of less than 50 in 2005 to over 200 and growing in 2010.

This year the conference will take place at the John F. Kennedy Library in Boston, MA on September 17, 2010. ❖

Program Collaboration and Service Integration (PCSI): The AETC role with this Centers for Disease Control and Prevention (CDC) Initiative *continued*

workgroup after the second meeting as a natural integration focus. The AETC staff, assisted by a public health graduate student from Drexel University School of Public Health, convened and facilitated the quarterly meetings; tracked the progress made and staffed the follow-up activities between meetings; developed and implemented cross training for the integration; provided systems consultation to maximize integration efforts of routine HIV testing into all systems; and promoted the efforts through information dissemination, presentations at national meetings, and an opportunity for the workgroup to meet with Dr. Kevin Fenton of the NCHHSTP to discuss the jurisdiction's efforts.

The results to date of this Pennsylvania/MidAtlantic AETC two year consultation included an expanded and comprehensive level of program collaboration and service integration within the PDPH; identification of a local PCSI champion (Director of the PDPH Division of Disease Control); the implementation of routine HIV testing in all systems; a plan to launch projects that efficiently integrate prevention and linkage to care services; some geo mapping of multiple disease reporting and active discussions of data sharing for effective planning purposes; and public health staff cross training in the four diseases. ❖



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