Transforming Latino HIV Care in the Washington Metropolitan Region

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La Clínica del Pueblo

- Founded in 1983 in response to first Salvadorian immigrant wave to area (1980s) as volunteer-run clinic

- Today a Federally Qualified Health Center and Patient Centered Medical Home integrated with community-based public health approach

- Immigration status is most significant social determinant of health affecting clients
Immigration Status and HIV

- For 22 years, the “HIV ban” prohibited HIV positive immigrants from becoming legal permanent residents
- Immigration status restrictions to benefits, education, employment, stability
- Immigration status as a social determinant of HIV risk
- Immigration status is only factor besides poverty now determining health access through marketplaces
- Ryan White, District of Columbia (Alliance) notable exceptions
Country of Origin HIV Patients (N=295)

- El Salvador, 38%
- Other Central America, 23%
- Other Latin America, 15%
- US, 12%
- Africa, 11%

El Salvador
Other Central America
Other Latin America
US
Africa
Barriers to Care for HIV Positive Latinos

- Conflicts between work and medical care
- Instability/lack of availability of housing
- Immigration issues
- Lack of family/support structures
- Lack of linguistically and culturally appropriate services, particularly mental health services
- Stigma
La Clinica’s Model of Care: Direct Services

- Patient Centered Medical Home
- Bilingual/Bicultural
- Services on-site/co located
- Interdisciplinary care teams
- Flexible
- Warmth
- Safe Space
- Advocacy, participation in local planning, public policy
La Clinica’s Quality Indicators

- **Entry to Care: 90% or above**
  - Over 90% of newly diagnosed patients are seen by provider within 30 days of diagnosis
  - (Quarterly Quality reports)

- **Engagement in Care: 85% or above**
  - 85% of medical patients consistently meet HRSA HIV/AIDS Bureau standard for engagement in care of not having gap in medical visits over last 24 month
  - (Quarterly Quality reports)

- **Viral Suppression: 88%**
  - 88% of clients with at least one medical visit in 2013 were suppressed at their last visit
  - (RSR 2014)
SPNS Workforce Capacity Development Initiative

- HRSA HIV/AIDS Bureau Special Projects of National Significance
- Partners: La Clinica del Pueblo and George Washington University, Latino Health Research Center
  - Contractors: Fenway Health (Evaluator), Qualis (Practice Transformation Coach)
  - Collaborators: PA-Mid Atlantic AETC and HIVMHRC
- The TLHC Intervention is intended to enhance LCDP HIV workforce’s readiness and capacity for the delivery of patient-centered care framed by the medical home model that will optimize human resources and patient health outcomes for Latinos LWHA in the DC area.
- What works in what we do? Where and how can we improve?
Expected Outcomes

- Integration of HIV and behavioral care services
- Integration of Community Health Workers (CHW) into healthcare team
- Optimization of the use and exchange of health information for decision making purposes
- Improve involvement of patient in disease self-management
- Team-based care and relationship building
Conclusions

- High quality outcomes can be achieved for “difficult” populations with community/clinic providers + health system providing access to care and medications

- Reduction in HIV health disparities for Latino immigrants directly related to reduction around immigration barriers

- Community/academic partnerships can help us script and improve our models of care