

ONE CLINIC'S SYSTEMATIC APPROACH TO RETENTION IN CARE: MAINTAINING CLIENTS ON TREATMENT LONG TERM.

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Background/Purpose:

Individual clinicians in our service would recollect that a long term client had not been seen for some time, often believing this was due to transfer of care to another practitioner elsewhere. We realised that relying on staff memory and uncertain referral meant that it was likely that patients were 'slipping through the cracks', potentially risking serious illness. The NSW HIV Strategy 2016-2020 recommends that specialist services should look to automatic recall methods and systems to identify loss to care, and to initiate actions where follow-up issues are known.

Approach:

We utilised the unit's HIV clinical database to identify all patients who had not been seen in the past nine months. Software changes were required to ensure information captured was accurate. We examined outpatient medical records and the specialist correspondence to determine the intended follow-up plans, and if there was any information relating to the client moving out of area or transferring care.

Outcomes/Impact:

We examined over 400 medical records as a one-off intensive exercise, creating a list of either 'Active' or 'Inactive' clients, the latter being those who had transferred care elsewhere. From the active client list we have been contacting people who did not have a scheduled follow-up appointment. Many hard to reach clients have responded to personalised efforts, making and keeping new appointments, and renewing antiretroviral scripts.

Innovation and Significance:

This strategy did not rely on a single automated text message or form letter to contact lost to follow-up clients. We tailored the method of contact to our knowledge of the individual client and what we thought would give us the best chance of successful re-engagement. We hope this strategy will prevent hospitalisations for advanced HIV. We now have a simple report to run on a regular basis to prevent future loss to care.

Disclosure of Interest Statement:

The authors declare that they have no conflicts of interest in the work described in this study. No pharmaceutical sponsorship was obtained to undertake this project.