# Engaging and retaining people living with HIV in care at Western Sydney Sexual Health Centre

#### Authors:

<u>Yasmin Hughes</u><sup>1</sup>, Emma Mason<sup>1</sup>, Melissa Power<sup>1</sup>, Lara Goulding<sup>1</sup>, Peter Yu<sup>1</sup>, Rohan Bopage<sup>1</sup>

1 Western Sydney Sexual Health Centre

## Background/Purpose:

For people living with HIV (PLHIV), retention in care is critical to treatment adherence, optimisation of health outcomes and quality of life (QOL). The aim of this project was to develop a formalised multidisciplinary process to retain 99% of PLHIV at Western Sydney Sexual Health centre (WSSHC) in optimal care.

#### Approach:

A multidisciplinary team (MDT) of medical, nursing, social work and pharmacy staff was created to develop a formalised process to actively engage PLWH. A virtual collaborative workspace through Microsoft teams allowed clinical and pharmacy data collection and integration, to identify PLWH that were lost to follow up (LTFU) defined as no medical review in the preceding 6 months, those who have run out of medication, or who have significant psychosocial barriers to accessing care. These LTFU patients are then discussed at a monthly structured MDT meeting and actively recalled. Those at risk of LTFU, or with significant medical or psychosocial issues have formal multidisciplinary case management plans created to optimise engagement in care.

#### **Outcomes/Impact:**

A formalised procedure document has been developed, allowing this process to be integrated into routine clinical care. Of the initial 399 PLWH identified at WSSHC, 45 have confirmed transferring care to other services. 29 patients identified as LTFU have been actively recalled. 25 patients are identified as at risk of LTFU with multidisciplinary case management plans created. Of the 323 patients engaged in care, 97.5% have undetectable viral loads.

### Innovation and Significance:

Prior to this project, there was no formalised process to re-engage the 11.6% of PLWH identified as LTFU. The formalised procedure document has created a sustainable, reproducible, multi-disciplinary model to improve retention in care of PLWH. Digital tools such as Microsoft Teams has facilitated inter-disciplinary communication and collaboration e.g. through real-time updates of pharmacy dispensing data, allowing early identification of those LTFU.

### **Disclosure of Interest Statement:**

Nothing to disclose.