

SYNChronicity

LEADERSHIP TRACK

Sustaining Organizational Capacity: Linkages and Community Connections



Presenters



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SYNC Participants



- Who are you?
- Where are you from?

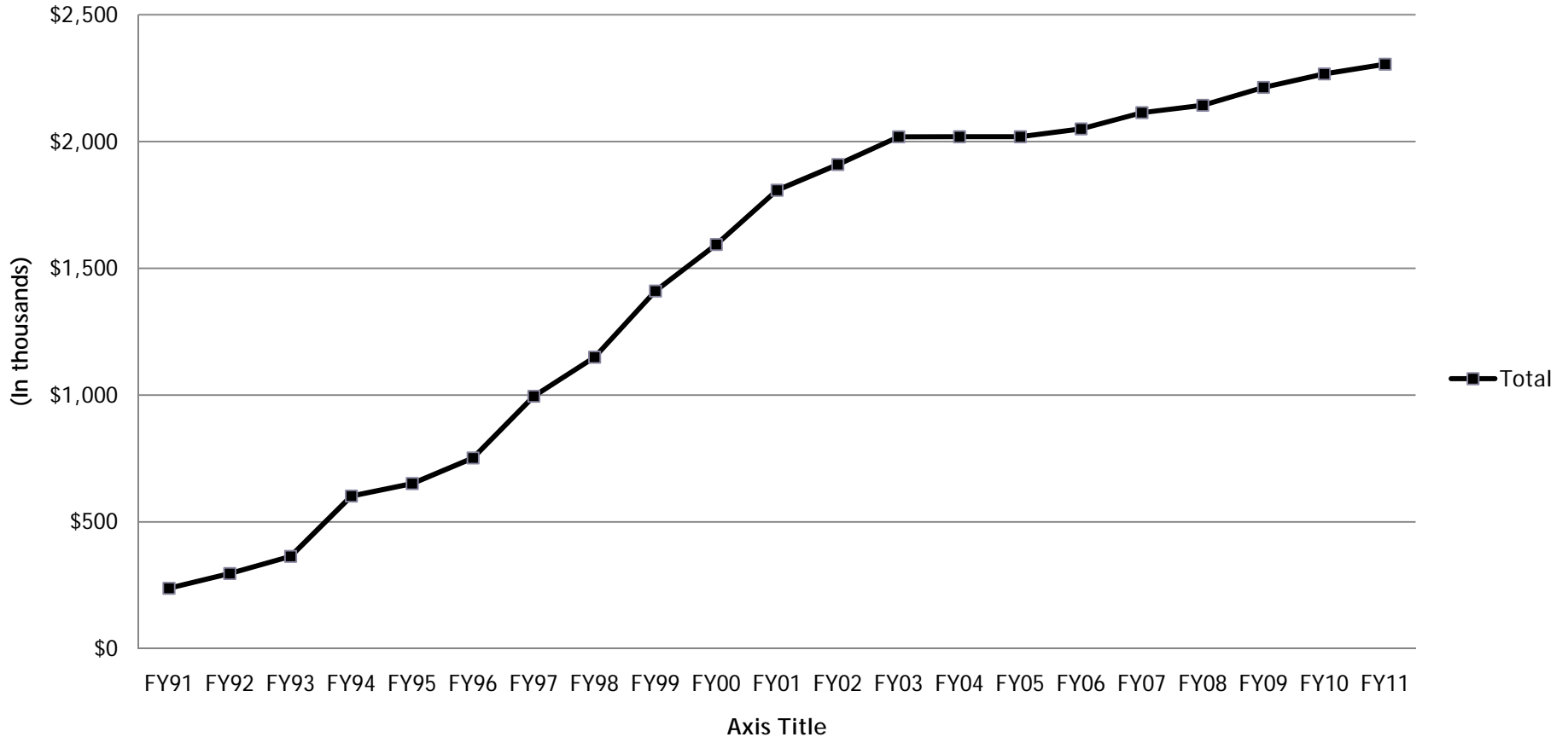
Ryan White: Who's that?



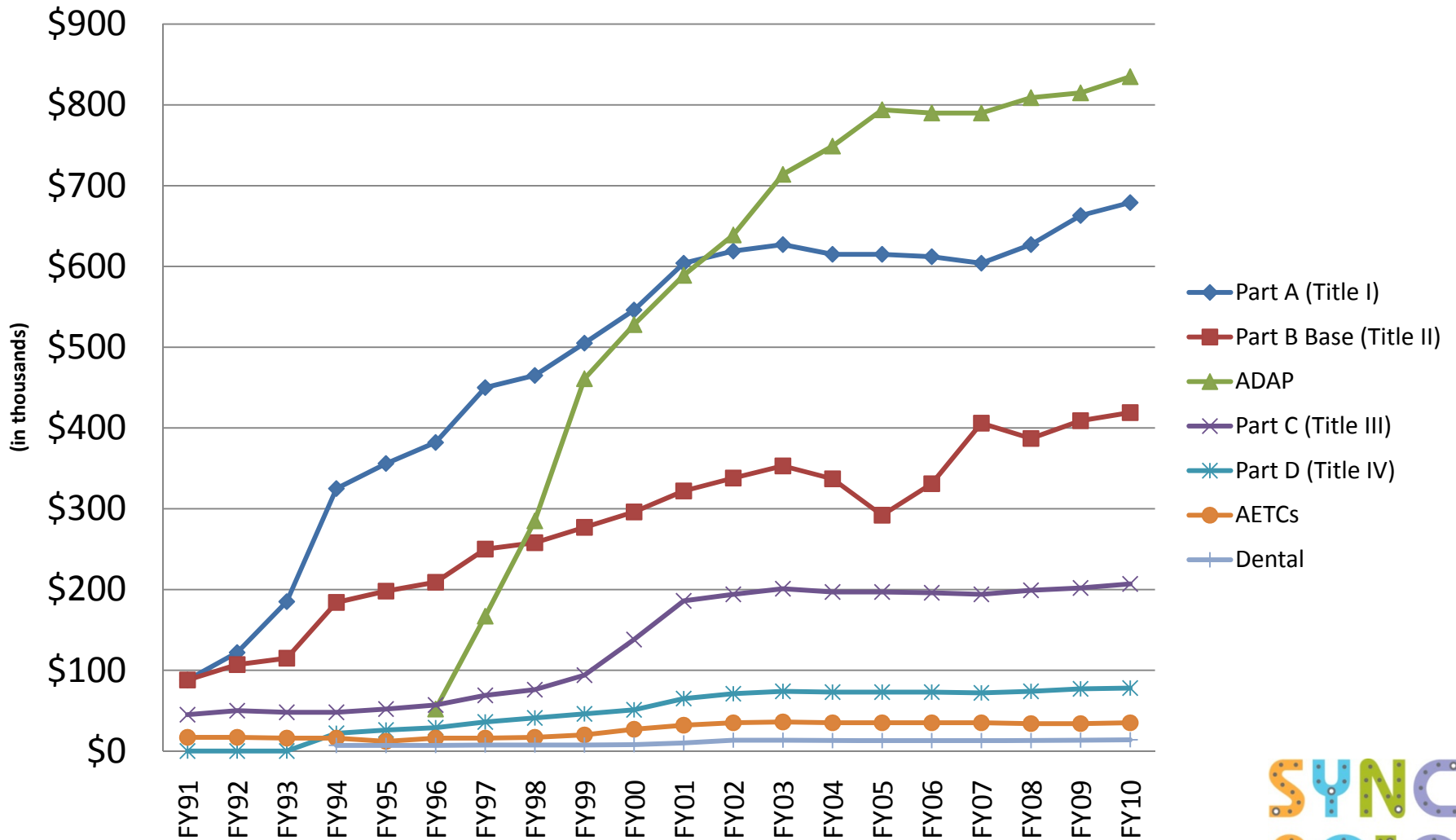
"Ryan White has shown that a very young and frail person can tower about others in strength of character, dignity, and courage. His legacy is to have given us more compassion for all people with AIDS and a renewed determination to vanquish to disease that has taken his and so many other precious lives."

*Dr. Mathilde Krim,
American Foundation for AIDS
Research (AmFAR)*

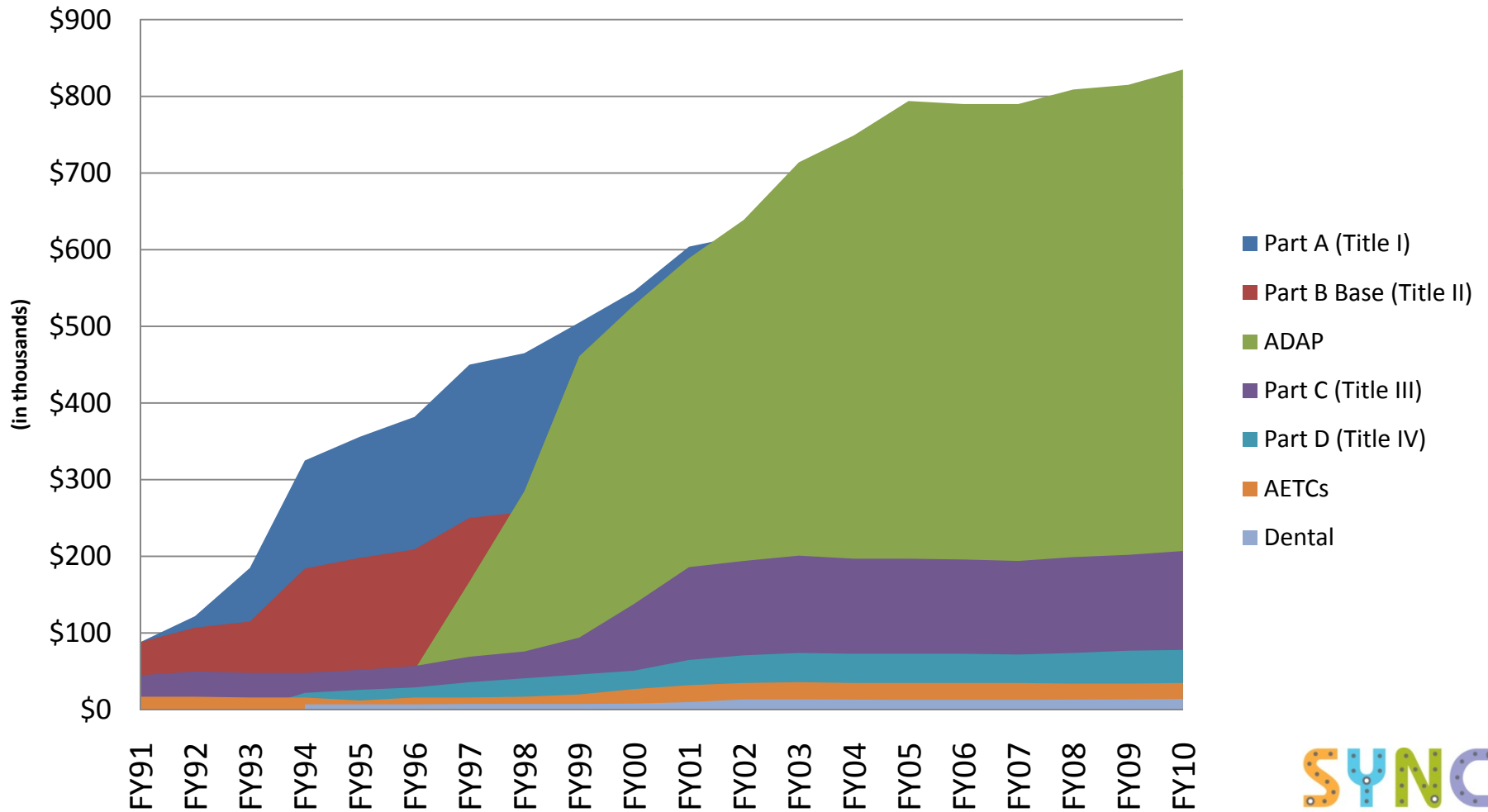
Total Ryan White Funding



Ryan White Funding by Part



Ryan White Funding by Total Part Share



What does the future hold?

- **Medical Home Demonstration**—\$40 million to support creation of patient-centered medical homes. Research indicates that medical homes result in improved quality, reduced errors, fewer emergency visits, and fewer hospitalizations, which all result in savings to the health care system.
- **Health Professions**-Health care workforce shortages are likely to increase... An additional \$170 million to expand health-training programs.... Will improve both improve patient access to necessary health services and open doors to those seeking jobs.
- **Nurse Faculty Loan Forgiveness**—Over 50,000 students turned away from nurse training programs last year, largely due to a lack of faculty. ...doubles the resources available to provide loan forgiveness to nurses agreeing to teach.
- **Rural Physician** –\$5.1 million for a newly authorized program to create opportunities for primary care physicians to train in rural areas.
- **Ryan Transition Plan**— The Committee expects HRSA to offer a plan for how to transition Ryan White benefits into a larger system of care so that Ryan White resources may be targeted to the areas of most need. The plan should include a year-by-year list of actions needed by the administration, the Congress and the States in order to ensure the smoothest possible transition for beneficiaries. The Committee expects the plan **no later than 8 months after enactment of this act.**

National HIV/AIDS Strategy



National HIV/AIDS Strategy Vision Statement:

The United States will become a place where new HIV infections are rare and when they do occur, every person, regardless of age, gender, race/ethnicity, sexual orientation, gender identity or socio-economic circumstance, will have unfettered access to high quality, life-extending care, free from stigma and discrimination.



National HIV/AIDS Strategy Initiatives

- Create a seamless system to immediately link people to continuous and coordinated quality care when they learn they are infected with HIV.
 - Facilitate linkages to care
 - Promote collaboration among providers
 - Maintain people living with HIV in care

Ryan White Legislative Mandates

Part A and B funded providers must have Memoranda of Understanding with key points of entry into care:

- HIV testing facilities
- Health departments
- Emergency departments
- Homeless shelters
- Substance abuse treatment facilities
- Federally Qualified Health Centers

What is happening in your community?

Making it Work

- What is the purpose?
- What is the outcome?
- What is the benefit of collaboration?
- How else can both partners benefit?
- Is there any financial incentive attached?



Community Health Centers 2010



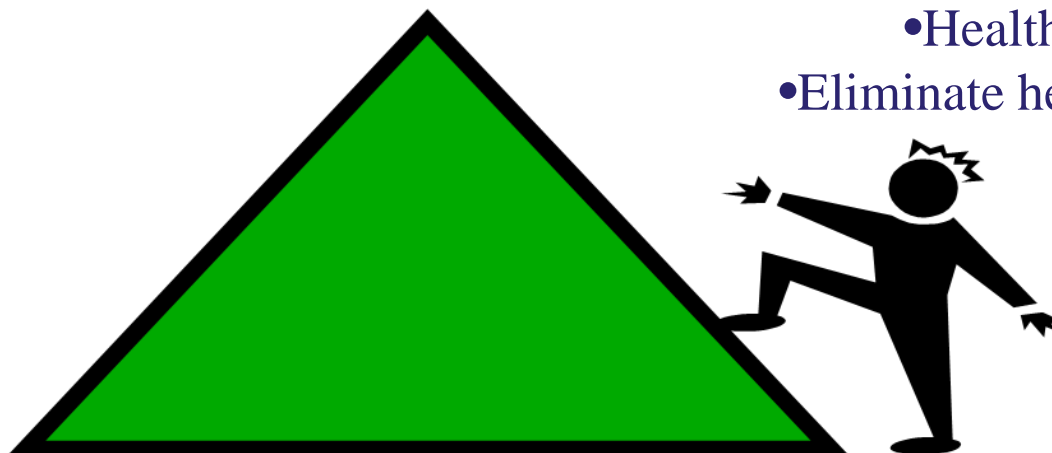
Patient Protection and Affordable Care Act

- ACCESS
- Quality
- Payment

Community Health Centers 2010

Population Health

- Access For All America
- Healthy communities
- Eliminate health disparities



Value:

Quality/Cost

- Effective
- Strong Workforce Teams
- Efficient
- Safe
- Timely

Citizen-Centered: Patient & Community Activation

- Patient-Centered
- Equity/Access



Community Health Centers 2010

Environment

- Patient Protection and Affordable Care Act
- Medical Home
 - Demonstrations
 - Legislation
 - Certification
- Meaningful Use
- Federal focus on CHCs

Community Health Centers 2010

PRIMARY CARE

- Integrated Systems of Care
- Population Health (HIV)
- Vertical and Horizontal Care Coordination
- Patient and Family Engagement
- Practice Redesign

Community Health Centers 2010

Public Health

Today, the two cultures “medicine” and “public health” seem to live in different, often unfriendly, worlds. This was not always the case. Experiences with universities, health departments, and governments during four decades have convinced me that continued separation of the two enterprises greatly diminishes their combined scientific, organizational and institutional potentials”

Kerr L. White, Healing the Schism: Epidemiology, Medicine, and the Public's Health, 1991



Community Health Centers 2010

Public Health and Primary Care Synergy	Examples
1. Coordination of services	Disease Intervention Specialist (DIS) interface with patients in the health center setting; Shared staff
2. Improved access to care	Coordination of referrals and linkage to care
3. Population perspective	Partner notification services and prevention of new infections
4. Identify and address community health problems	Outreach into the community
5. Strengthen health promotion through community strategies	Education and information around STD testing and prevention
6. Shaping the future: policy, training & research	Creating a model for health center and public health collaboration

What Health Departments Need From Health Centers

- State DOH need to know health centers are an untapped market
- FQHCs are a vital service to the safety net
- Assist with HIV and STD with high risk groups

HOW

- Better understanding of health centers
- Get to know the Primary Care Association
- Support from national level: state partners and program managers
- DOH need to work at relationships with health centers
- Need advocacy help (PCA) for Pharmacy and Medical Boards
i.e.. *Expedited partner therapy*

What Health Centers Need from Health Departments

- **Transfer of Information**
 - Data - extent of the problem (prevalence)
 - Community Assessment

- **Coordination and Sharing of Benefits and Resources**
 - Test kits
 - Screening tools
 - Data charts, training etc
 - DIS coordination
 - Partner notification and Expedited Therapy

- **Support for integration of STD and HIV into primary care medical home model**

Thank You

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