



**ENDING THE HIV EPIDEMIC:** 

Progress, Impact, & the Road Ahead

PRESENTERS:

Lonnetta Wilson HIV Initiatives Program Manager

Kaitlin Lopez Grant Coordinator, Quality and Planning

# WHY IS EHE DIFFERENT?

## **DISRUPTIVE INNOVATION!**

- Introduces innovation into the Ryan White system of care.
- ·Drives change in Ryan White parts.
- ·More PLWH are involved in the planning and implementation.
- ·Breaks down stigma empowers the voices of those living with HIV and ensures their seat at the table.
- ·New platform for new voices, new ideas, new inspiration.



## MEETING CLIENTS WHERE THEY ARE

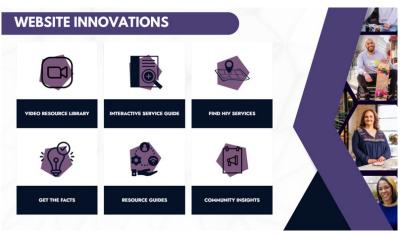


## **Health Education Initiatives**

- Conducted interactive community workshops and peer-led sessions to educate about HIV prevention, treatment, and available resources.
- Distributed multilingual health education materials addressing common barriers to care.
- Empowered participants with knowledge to engage in their health decisions actively.
- Rapid Start Kits and Health Kits for Street Outreach and Jail Linkage.

## **Out-of-Home Media Campaigns**

- Deployed billboards, bus wraps, and posters in high-traffic areas to amplify awareness of HIV care services.
- Messaging focused on breaking stigma and promoting U=U (Undetectable = Untransmittable).
- Reached an estimated 250,000+ impressions within key demographic zones.



## **Social Media Campaigns**

- Developed targeted social media ads aimed at high-risk populations, including Black and Latino MSM (men who have sex with men).
- Highlighted themes of stigma reduction, education, and the importance of treatment adherence.
- Campaigns generated thousands of engagements, driving traffic to local HIV resources.



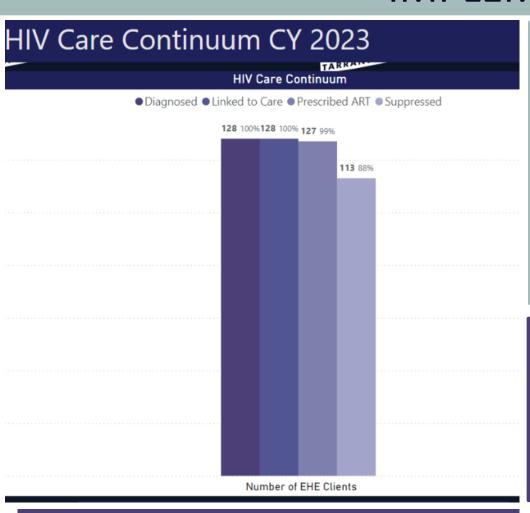
## **Secret Shopper Initiative**

- Anonymous assessments of HIV clinic services focused on accessibility, stigma-free care, and cultural competency.
- Identified strengths in service delivery and respectful communication, with gaps in sensitivity training and followup care.
- Results informed targeted staff training, standardized workflows, and improved client satisfaction.
- Presented project at the NRWC 2024.





## **IMPLEMENTED INITIATIVES**



## **Jail Linkage Project**

- Focused on improving linkage to care for individuals newly released from jail who are living with HIV.
- Utilized a DMAIC framework to identify gaps and streamline referral processes.
- Achieved timely medical visits and viral suppression for the cohort with tailored care plans.

## **Peer Navigation Program**

- Focused on improving engagement and retention in care for PLWH through peer-led support.
- Trained peers provided emotional support, linkage to resources, and assistance navigating healthcare systems.
- Enhanced client outcomes, including increased viral suppression rates and reduced missed appointments.
- Plans to expand peer networks and integrate feedback for ongoing program improvement.

## **Rapid Start for Clients**

- Designed a streamlined process to initiate ART on the same day of diagnosis or re-engagement.
- Collaborated with RW clinics to provide transportation, housing support, and case management services.
- Resulted in 87% of clients achieving viral suppression within three months.



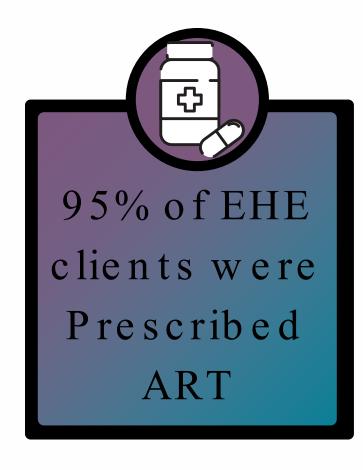
## **Data Dashboards**

- Average number of Days from Diagnosis to ART Prescription is 0 days (same day).
- Average Number of Days to Viral Suppression is 43 days.
- Average Number of Days from Diagnosis to Viral Suppression has been reduced by 52% since 2022.

## **Rapid Start in the JPS Emergency Room**

- Implemented a same-day HIV care initiative for patients diagnosed or out of care.
- Trained ER staff to provide immediate ART (antiretroviral therapy) prescriptions.
- Reduced time to care initiation from weeks to hours, improving health outcomes.

## 2024 EHE Data Highlights









#TarrantCounty #NMAC #BLOC #CDC



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opez with Tarrant County 🙏 🗚

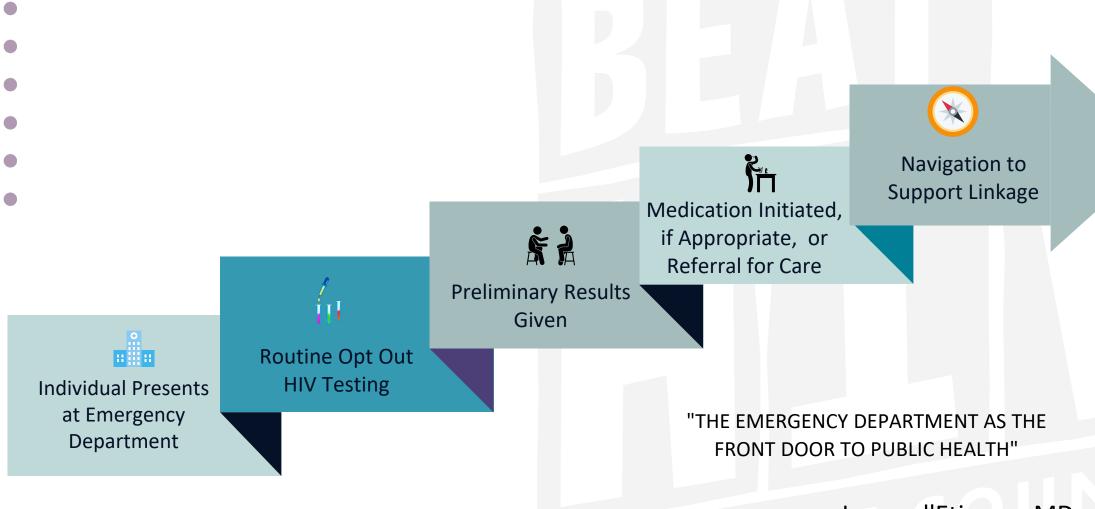
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# RAPID START

## Rapid Start Emergency Department Process



## James d'Etienne, MD

Emergency Medicine Physician
Chief Division of Research and Knowledge Translation, JPS
Health Network

## RAPID START IN THE JPS EMERGENCY DEPT. ROOM

• Implemented same-day HIV care initiative for patients newly diagnosed or out of care.

• Trained ER staff to provide im mediate ART prescriptions.

• Reduced time to care initiation from weeks to hours, improving health outcomes.

• Normalized training for ED Residents in HIV testing and treatment.



## CABENUVA PROJECT AT JPS HEALING WINGS

EHE funds are used to support the Cabenuva program by providing medication to patients with viremia, who are otherwise clinically eligible. The program is supported by a LVN Cabenuva Coordinator and EHE case manager to aide in adherence and patient access to services.

## Expansion

• Non-adherent patients who face barriers to taking daily oral HIV medications

## Benefits

- Expanding access to HIV medication
- Reduces HIV stigma
- Supports better health outcomes

## Recent Data

- Total of 158 patients
- 0% lost to care
- Supports patients who have non-adherence to daily ART





## JPS JAIL LINKAGE

To enhance the linkage to care for recently released individuals living with HIV, aiming to establish consistent care within 30 days of release and achieve a 60% reduction in viral load within six months.

## JPS STREET MEDICINE

Targeted intervention to address barriers faced by those who may be out of care and experiencing homelessness.

This intervention will be implemented through a multifaceted approach including:

- Mobile unit.
- Focus on reengaging homeless individuals in care.
- Aiming to meet people where they are and provide direct access to care.
- Consideration of Cabenuva.



## UPCOMING PROJECTS

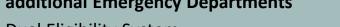


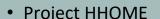
## WHAT'S NEXT...

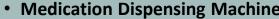
- Community Needs Assessment
- Community Listening Sessions
- Latino Community Forum
- BeU Symposium 2025
- Jail Linkage Project Expansion
- EIS and MCM Scope of Practice
- 27-31 Integrated Plan



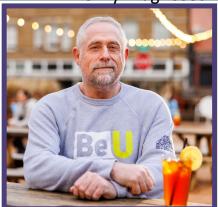
- Dual Eligibility System
- Project HHOME
- Medication Dispensing Machines
- Finalize Data Dashboards
  - Re-engagement In Care







- - Newly Diagnosed









- HIT HIV Training of Trainers
- Tea with Beat HIV
- Cabenuva Pilot Expansion
  - Total of 158 patients
  - 0% lost to care
  - Supports patients who have nonadherence to daily ART



















- 1. Street Medicine
- 2. Jail Linkage
- 3. Rapid Start
- 4. Long-Acting Injectable



# Four Corner Activity



## Discuss



