



VIRTUAL
2020 NATIONAL
RYAN WHITE
CONFERENCE ON
HIV CARE & TREATMENT

Behavioral Health Co-location to Facilitate HIV and HCV Care in the Non-metropolitan South

Kelly O. Turner, MS, ADC
Administrative Director
Health Services Center, Inc.

Cathy Simpson, Ph.D.
Evaluator
Simpson & Associates

Barbara J. Hanna, MD
Executive Physician
Health Services Center, Inc.

Disclosures



- Kelly Turner has no relevant financial or non-financial interests to disclose.
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- Commercial support was not received for this activity.

Learning Outcomes



1. Attendees will be able to describe unique barriers to accessing HIV, HCV, and behavioral health care experienced by underserved, high risk populations (e.g., persons living with HIV, LGBTQ populations, persons in poverty) in the Deep South.
2. Attendees will be able to summarize the rationale for co-location of HIV and HCV healthcare and behavioral health care services and challenges related to service provision.
3. Attendees will review program outcomes, lessons learned, and best practices exemplified by the BHC Project.

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- 1987: Grass roots support agency in Calhoun County, Alabama for PWH.
- 1990: Volunteer Medical Clinic Added
- 1991: Funded by HRSA for Ryan White Title III
- 2000: Funded by SAMHSA to expand Behavioral Health Services (SUD and MH)
- 2001: Funded by CDC for Prevention
- 2005: Funded by HUD for Housing Services
- 2009: Funded by HRSA for Ryan White Part D
- 2020: Funded by HRSA, SAMHSA, HUD/HOPWA, State, Local agencies



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- **Geography/Distance and HIV Health Care**
 - **5 locations across our 9,000 square miles of service area**



Area Strengths and Barriers

- Strengths

- Hobson City
- Social services network
- Faith Communities
- Health Services Center
- Quality of Life (FQHC)



Strengths and Barriers (cont)

Barriers to Care

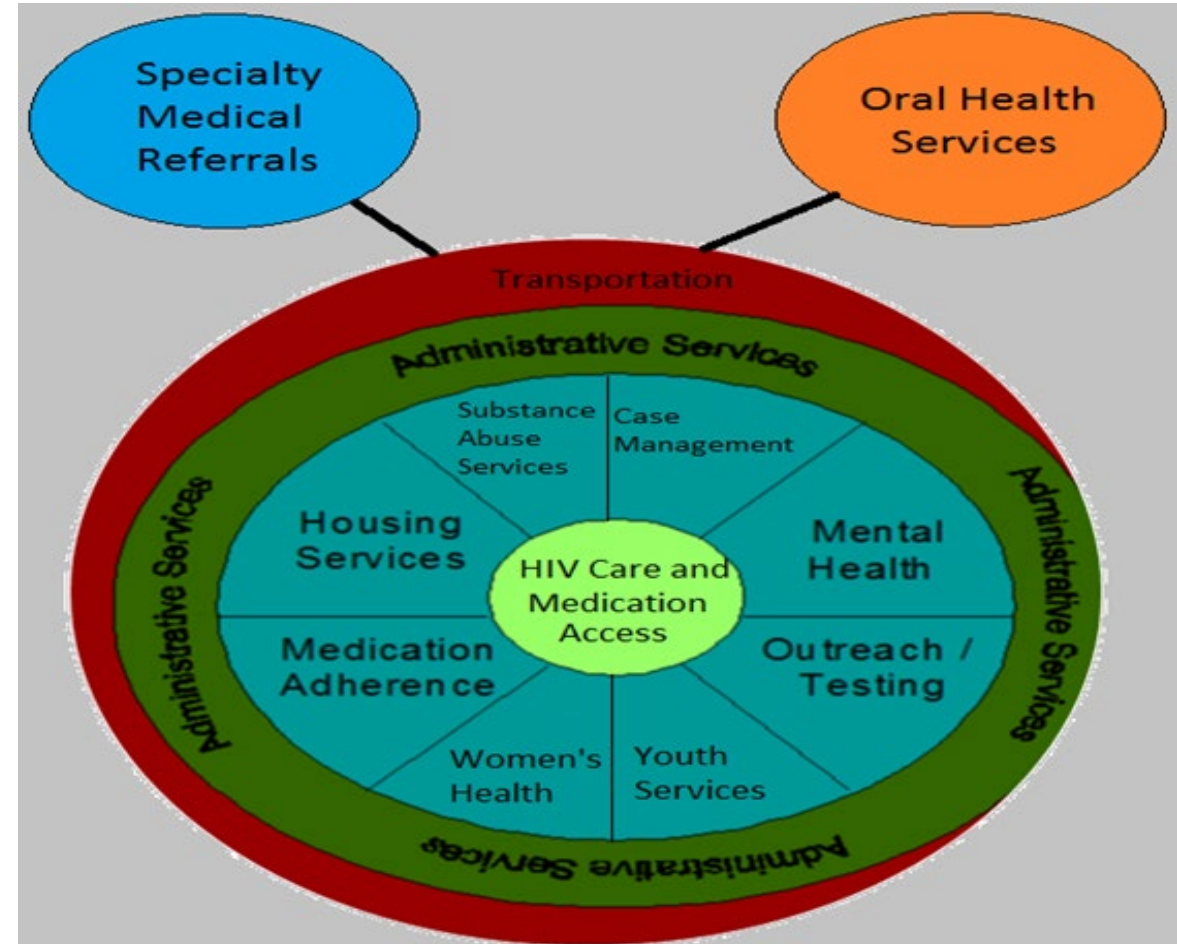
- Poverty
- Lack of Education
- Geographic Distances
- Lack of Behavioral Health Resources
- Housing/Homelessness
- Uninsured
- Racial Inequality
- Stigma



Barriers Addressed

HSC implemented a ray of services to create a safety net for PWH in our service area

- Rationale:
 - Increases access to MH and SUD services
 - Destigmatizes behavioral health services
 - Increases retention in HIV Healthcare
 - Leveraged community funds for otherwise unavailable HCV services



Partners and Collaborators

- Partners
 - Patients
 - Specialty Medical
 - Dental
 - Local Colleges and Universities
 - Health Departments
 - FQHC's
 - State Mental Health Department
 - Faith Communities
 - Other social service providers
 - Judiciary/Law Enforcement
 - Community Stakeholders



Behavioral Health Co-Location (BHC) Project



- Behavioral Health Care (BHC) Grant funded by SAMHSA from 2014 to 2018 to co-locate HIV/MH/SUD services
- Combined funding from CSAT, CSAP and CMHS
- Project goals to improve overall healthcare for PWH or at risk, particularly minorities
- BHC Services
 - Assess for MH, SUD, HIV, HCV risk
 - Testing for HIV and HCV
 - Linkage to HIV and HCV medical care
 - SUD and individual MH services
 - Community education/awareness events
 - “No wrong door” approach

BHC Outcomes

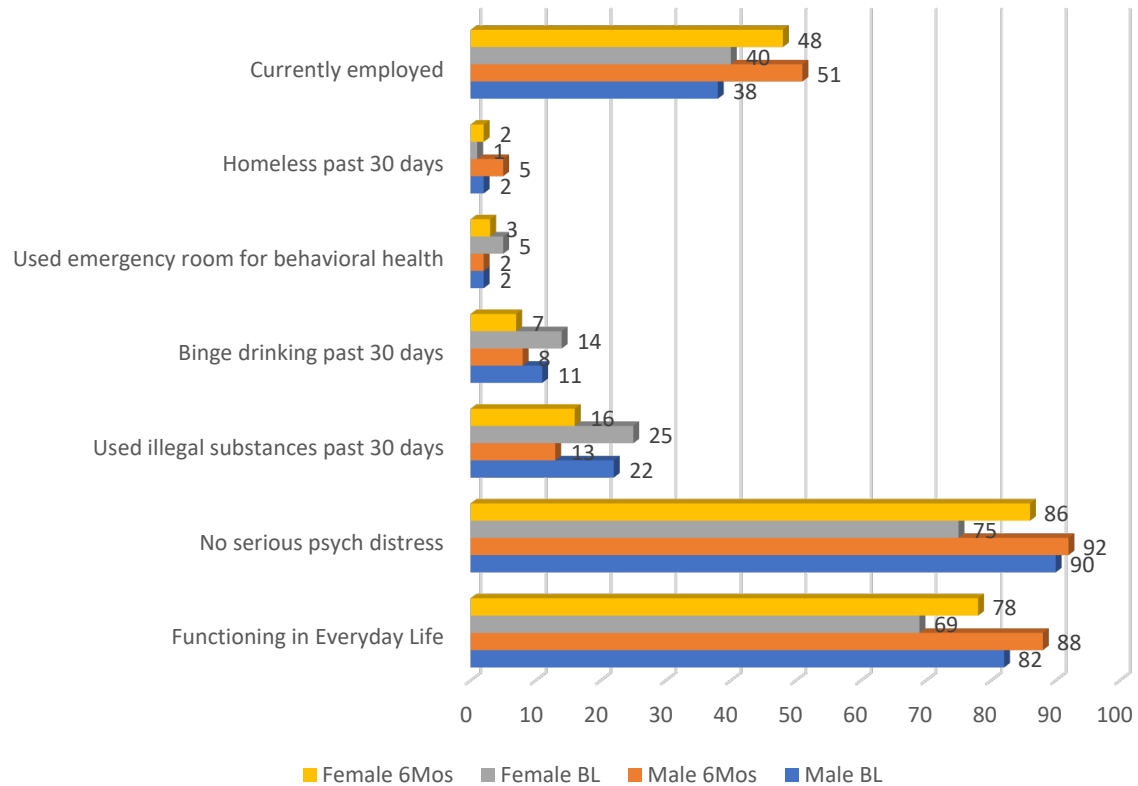
- Diverse population served
- 1,999 HIV Tests conducted
 - 3 positive and all retained in care
 - 189 linked to HIV related services
- 1,945 HCV Tests conducted
 - 964 positive and all linked to care
- 325 MH and SUD assessments
- 4,062 session hours
- 1,999 received an evidence-based prevention intervention
- 43 educational/awareness events
- 417 community providers trained

- Client representative narrative story

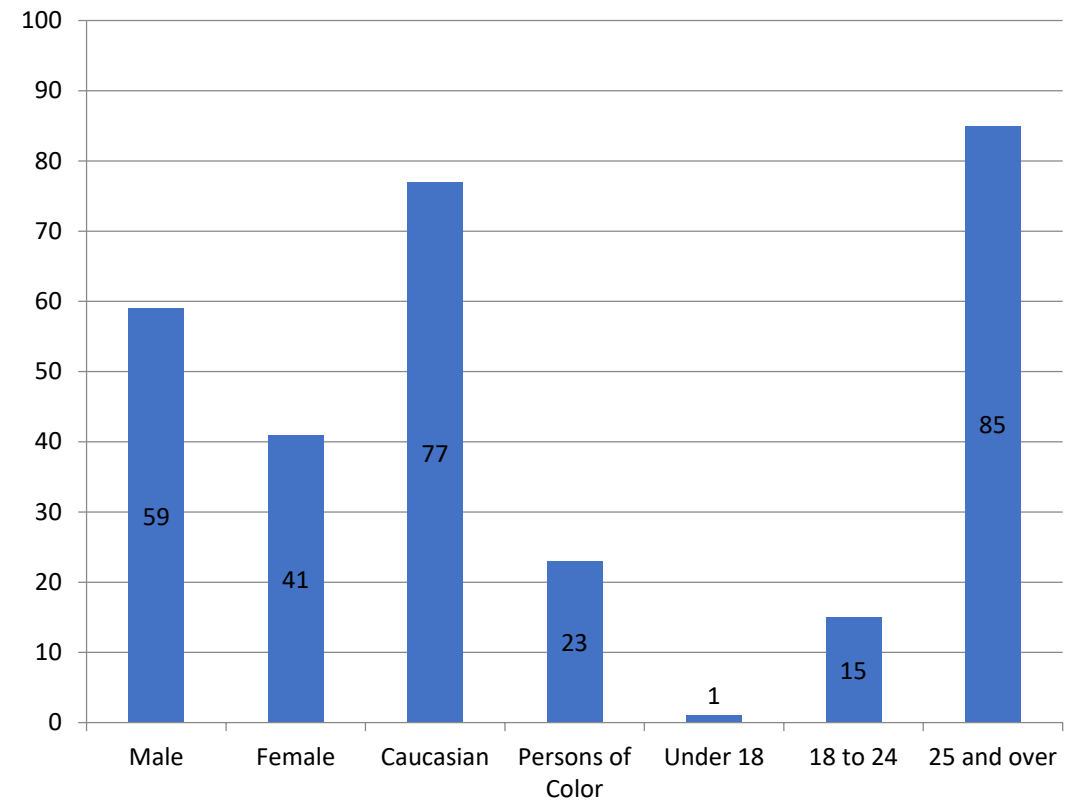


BHC Outcomes

Baseline to 6-Month Follow-up Comparisons by Gender



Outreach Demographics



Lessons Learned

- Agencies MUST create the social supports and wrap around health supports for their clients in low-resource communities.
- Behavioral Healthcare IS critical
- Staff buy-in
- Staff understanding own and other responsibilities and roles
- Mission-guided strategic plan and quality management goals
- Constant sustainability efforts



What We Wish We Had Known



- Relationships take time to initiate and maintain; staff time is necessary to establish this
- Co-location is challenging and requires understanding and mutual respect
- Networking is a MUST (conferences, community, state and regional committees, trainings)
- There is NEVER enough money and resources; you MUST leverage

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