



“Getting to Zero” through the Integrations of Sexual Health

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Disclosure

- I have no actual or potential conflict of interest in relation to this presentation.



About PCDC

Primary Care Development Corporation (PCDC) is a national nonprofit organization and a community development financial institution catalyzing excellence in primary care through strategic community investment, capacity building, and policy initiatives to achieve health equity.



HIP in Health Care

PCDC's HIV prevention capacity building assistance program provides **free training and technical assistance** to health care organizations with the goal of expanding and improving the delivery of HIV prevention services within clinical settings.



Today's Learning Objectives

Understanding of the importance of integrated HIV prevention and sexual health within primary care

Knowledge of best practices for how to integrate HIV prevention and sexual health within primary care

Understanding of how capacity building assistance (CBA) can support this integration, including how to access CBA

Rationale and Importance



Rationale and Importance

- So why is this important?
- Why do we think that integrating sexual health within primary care will help us “get to zero” and end the HIV epidemic?

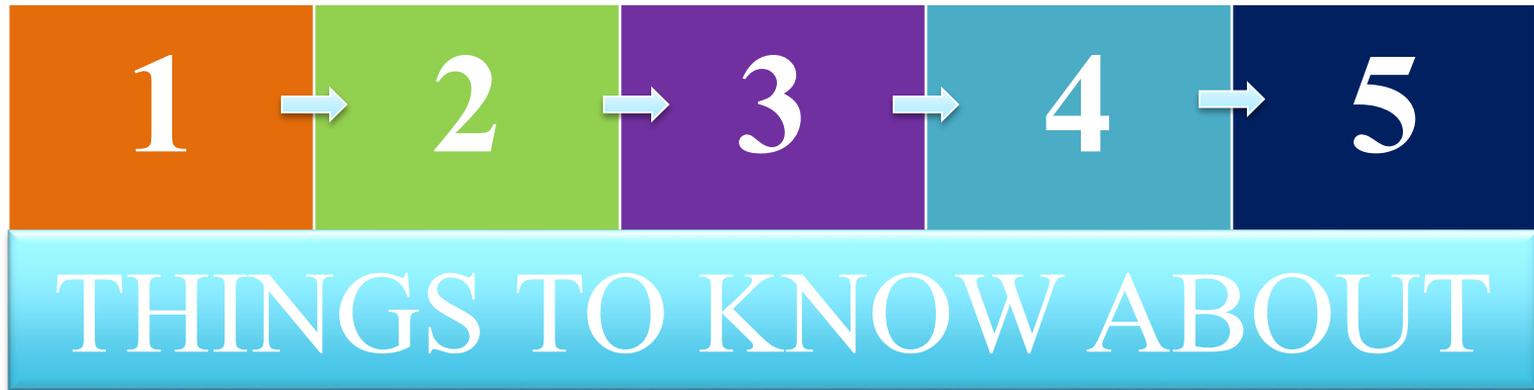
Rationale and Importance of Integration

- Primary care providers **MUST** integrate sexual health discussions into their practice
- When we don't talk about sexual health as part of primary care, we miss opportunities for prevention
- We know that stigma plays a role in keeping people from getting tested, keeping people from getting into treatment and keeping people from staying in care
- Primary care providers can be neutralizers and routinizers and reduce stigma around HIV by providing HIV prevention as part of standard care



Sexual Health as part of Primary Care

- Sexual health is an essential element of patient-centered primary care
 - Primary care providers and teams really need to get to know their patients in order to provide patient-centered care and at the core of our lives is our sexual health
- We need to set the right context and talk about why it's important to include sexual health as part of primary care
 - It's a way for us to discuss how patients can reduce their risks
 - It's a way for patients to discuss healthy sexual function and sexual satisfaction
 - It's also a way to discuss reproductive desires and concerns



INTEGRATION OF SEXUAL HEALTH INTO PRIMARY CARE

Take a Sexual Health History



Improves Our Patients' Overall Health

Preventing and treating STDs, HIV, and hepatitis, can help us reduce disease and death among our patients

Identifying and treating sexual problems and low sexual satisfaction can help us improve our patients' mental health and well-being

When we show our patients that we are interested in and compassionate about their sexual problems, behaviors, and identity, we will see an improvement in our relationship with patients

Patient-Centered

In a survey of 500 men and women over age 25:

- 85% said they were interested in talking to their doctors about sexual issues
- 71% thought their doctor would likely dismiss their concerns.¹

The sexual history allows health centers to identify clinical needs early and provide clinically and cost-effective care – essential elements of a patient centered medical home (PCMH).

Who Is This For?

All of our patients!

Sexual history information should be taken from all of our patients, regardless of gender, race, ethnicity, socioeconomic status, sexual orientation or gender identity.

Who Will Be Involved?

All of our staff!

All staff have a role in making sure that sexual histories are completed in an accurate, appropriate, sensitive, and confidential manner throughout the patient visit.

Collect Sexual Orientation and Gender Identity Data (SOGI)



Why Collect SOGI Data?

- Research shows increased health disparities among LGBTQ+ individuals
- U.S. government formally committed to eliminating health disparities affecting the LGBTQ+ population
- Disparities are related to experiences of stigma, discrimination, bullying, and violence directed at LGBTQ+ people
- A provider's knowledge of a patient's sexual orientation and gender identity is essential to providing appropriate health care

Adhere to Evidence-Based Guidance on HIV and STI Testing and Treatment



Evidence-Based Guidance on HIV and STI Testing and Treatment

Offer HIV testing to all patients ages 13 to 64

- Offer testing more frequently to patients with ongoing risk

Follow clinical guidelines on STI prevention, testing and treatments

For patients with ongoing risk for HIV, offer PrEP

For patients who report recent exposure <72 hours, offer PEP

Offer age and population appropriate vaccines

Identify Clinical Champions



Clinical Champions

Provide support and ensure that other physicians/nurses input is sought across an organization

Advise implementation on integration process without compromising on the quality of the services

Advocate for the use of a new system or service by physician/nurse colleagues

Facilitate guideline implementation and improvement of patient outcomes

Deliver training about the quality improvement efforts to their peers

https://cvquality.acc.org/docs/default-source/pci-bleeding-risk-checklist/18-sami-characteristics-of-clinical-champions.pdf?sfvrsn=da638dbf_0

Build Staff Capacity to Serve Patients of Different Ages, Cultural Backgrounds, Sexual Orientation and Gender Identities



Building Staff Capacity

Include interview questions to assess candidates' comfort with and enthusiasm for providing sexual and reproductive health services

Prepare staff to meet patient's needs via annual trainings in:

Rights regarding sexual, reproductive, behavioral and mental health

Customer service training for all staff

Cultural competence—emphasis on institution and structural causes of health disparities

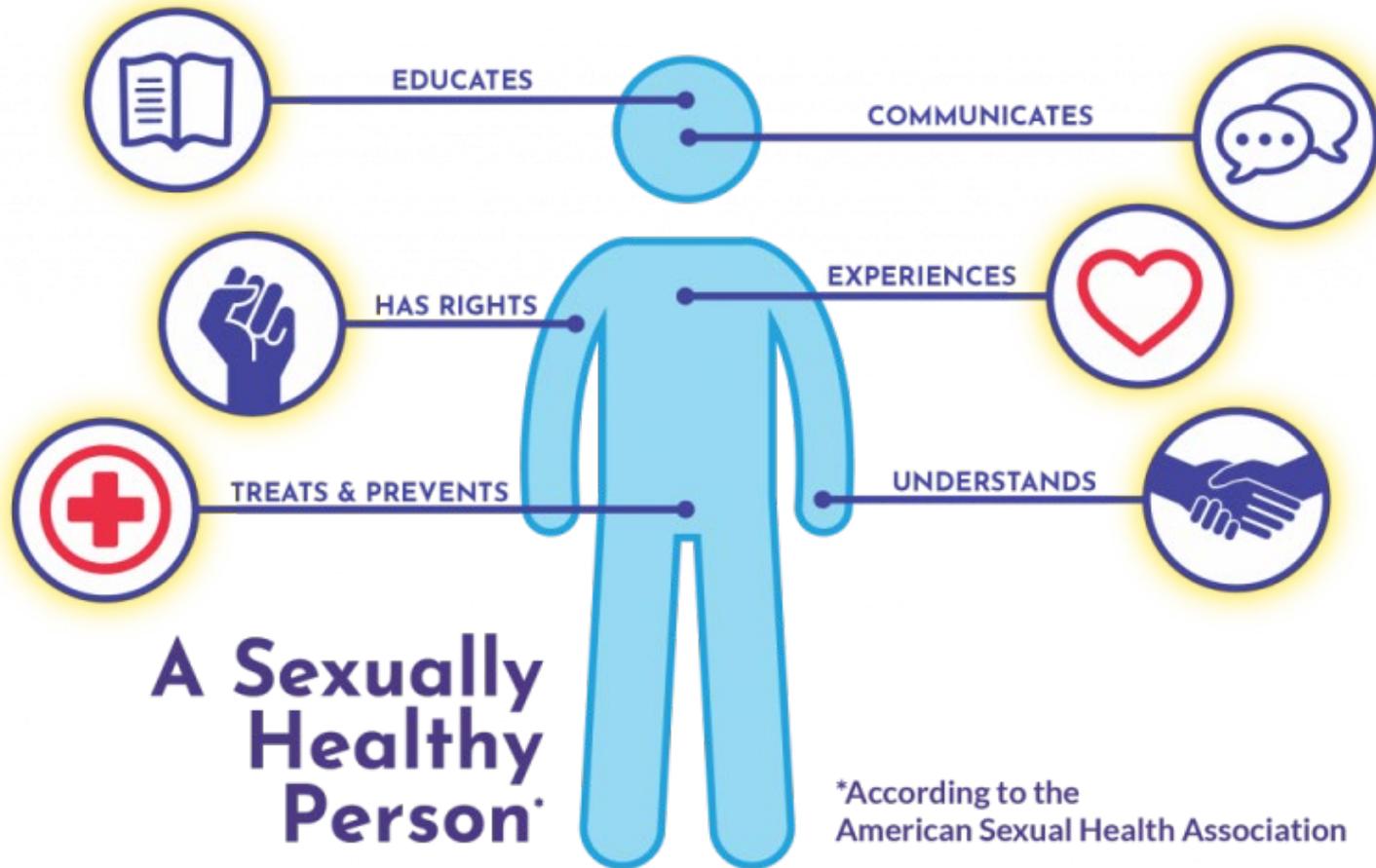
Language access services and care considerations

Special considerations for LGBTQ+ patients

Special considerations for populations harder to engage in health care

CAPACITY BUILDING ASSISTANCE

- Motivational Interviewing
- Biomedical Prevention
- Culturally Responsive Care and Prevention
- Implementation of HIV Testing
- Linkage, re-engagement and retention to Care
- Prevention with Positives
- Staff Burnout Prevention



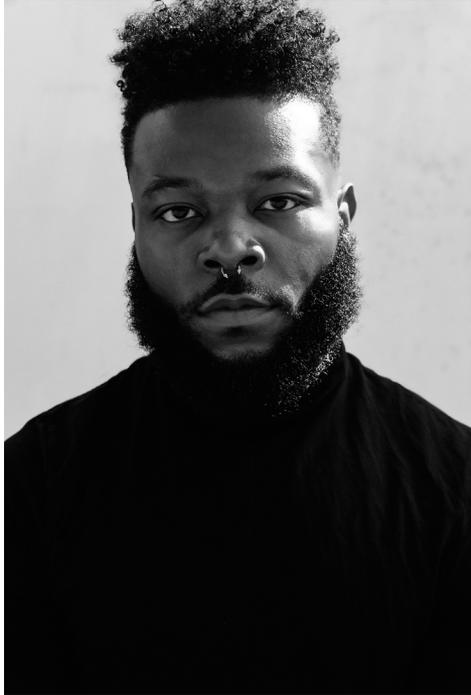
THANK YOU!

For more information about PCDC's HIP in Health Care capacity building assistance services, contact us at:

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