

OPTIMISING QUALITY OF CARE: HOW TO ENMESH QUALITY IMPROVEMENT INTO ROUTINE HIV CARE

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Now that many cities and countries are reaching the goal of 90% of all people with HIV diagnosed, and 90% of those diagnosed linked to care and on ART, and 90% of those on ART have virological suppression, there has been a recent increased push to include a fourth 90 – 90% receiving Quality HIV Care. What exactly is Quality HIV Care? From a patient perspective it is likely to be Individualized Patient-Centred Care, which can be ascertained through Quality of Life, PROMs – Patient Reported Outcome Measures, and Patient Satisfaction surveys. From the Healthcare provider perspective, it is ensuring appropriate screening, monitoring and management of HIV and associated comorbidities is delivered in efficient, cost-effective, equitable and patient-centred manner. How do we measure quality of care? Evidence based Guidelines are critical to assisting in the decision of what to measure, and acceptable targets, and data systems are essential tools to assist in performance measurement. Cycles of clinical audit, feedback and team-based problem brainstorming will encourage “buy-in” from all those delivering HIV Care. Systems issues changes are often the key to improving performance. This presentation will explore the varied examples and approaches to measure quality HIV Care in the Victorian HIV Service, the successes and failures, the interventions required and will emphasise the need for a Quality of HIV Care champion prepared to continue to audit and feedback outcomes to practitioners.

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