UK Joint Working Agreement: Providing High Quality And Sustainable Care For Stable HIV Patients

Executive summary

Project aim:
Design and test a nurse-led, technology-enabled service centred around an Annual Review consultation in order to provide high quality and sustainable care for virally-stable HIV patients.

Project background:
ViiV Healthcare’s innovation unit, ‘the hive’, and the Chelsea and Westminster Hospital NHS Foundation Trust (CWFT) are undertaking a joint working agreement to test a proposed service which seeks to address challenges related to the management of virally-stable patients at the Kobler Clinic, one of the CWFT’s HIV clinics.

The service concept, based on insight developed during a 15-week service design initiative undertaken by the hive, is a nurse-led, technology-enabled service which centres on an Annual Review consultation, providing patients with an all-round ‘health MOT’. At the end of the 15-week period, the service concept was appraised by a panel of ViiV and CWFT stakeholders and joint approval was secured to pilot the solution in 100 stable patients, drawing on the expertise of both parties.

Project challenge:
Advances in HIV care mean that services now need to transform from acute centres of care to services that manage people living with a long-term condition, referred to as ‘stable’ patients. These patients present a new set of clinical needs as they are an aging demographic and have associated co-morbidities. The clinical characteristics of this patient population, along with an increasing cohort size, has placed burden on services in providing both quality and sustainable care. There is a logical need to review how care is provided so that positive clinical outcomes are matched with positive service outcomes. The Kobler Outpatient Clinic at Chelsea and Westminster Hospital NHS Foundation Trust is one of the largest HIV services in Europe, caring for close to 8,000 patients, with an estimated 80% of these patients considered stable based on WHO/HARS definition. The volume of the patient cohort along with the change in the nature and requirements of HIV management over a relatively rapid timeframe has created three distinct issues for Kobler: quality of care; model of care; suitability of care for patients. It is important that Kobler addresses these three issues so that positive healthcare outcomes are maintained at the clinic over the long-term.

Project delivery and evaluation:
The service components were tested in a pilot from April to October 2018 with 92 patients completing the pathway. The pilot focused on the Annual Review to ensure that the pilot and evaluation could be completed within a 6-month duration. A joint pilot co-ordination group was established to manage the project and the evaluation sought to address four key objectives:

1. **PATIENT ACCEPTABILITY**
   - Understand patient satisfaction with the service
   - Identify factors that impact patient willingness to continue receiving care through the service

2. **SERVICE OUTCOMES**
   - Understand how application of solution may affect service outcomes
   - Assess the design/performance of each of the solution components

3. **IMPLEMENTATION SIGNALS**
   - Identify determinants that may affect the implementation of beyond the pilot period

4. **SUSTAINABILITY CONSIDERATIONS**
   - Identify potential facilitators/barriers to the service being sustained in the longer-term

Analysis is underway and a full evaluation report will be available in January 2019.