

CFAR Symposium:
*Engaging community organizations in
academic HIV research*

San Ysidro Health Center



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SYHC: Humble Beginnings

- Founded 1969 - 45 years
- Local Women's Organization
Founding Mothers
- Grant in partnership with
The Medical Society of SD and UCSD
- Casita – First Clinic Site



SYHC Today

SYHC is now a Federally Qualified Health Center (FQHC) providing comprehensive primary care services and family support programs to more than 89,000 registered patients residing in the South and Central/Southeastern Regions of San Diego County annually. SYHC's patient population profile is predominately Latino with high rates of poverty, uninsured individuals and families, low education levels, and non-English speaking heads of households.

The Mission of San Ysidro Health Center is to improve the health and well being of our community's traditionally underserved and culturally diverse people.

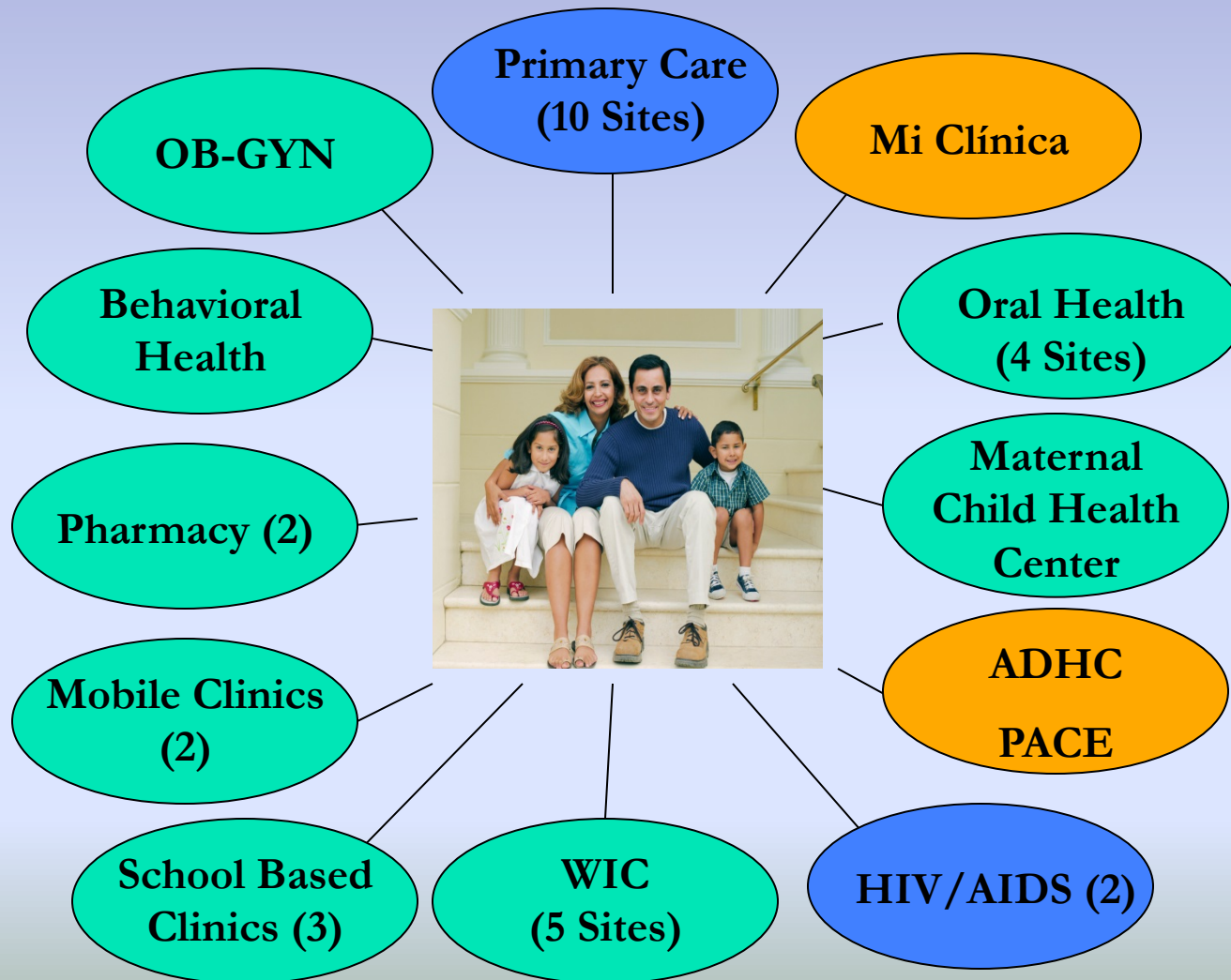
SYHC Patient Demographics 2015

- Total patients: 89,662
 - 39% 0-19 yrs
 - 52% 20-64
 - 9% 65 & over
- Demographics: 83% Latino, 5% AA, 4% API, 8% White
- Income: 91% of SYHC patients live at or below 200% of FPL
- Insurance:
 - 31% Uninsured
 - 57% Medi-Cal
 - 8% Medicare
 - 4% Private (mostly Covered California)

SYHC FQHC Programs and Services

- Comprehensive Primary Care
- Urgent Care
- Integrated Behavioral Health Services
- Integrated Women's Health Services
- Health Education
- Pharmacy
- Primary Care specialties (Podiatry, Eye clinic, Chiropractic...)
- Comprehensive Dental Services

SYHC Services Overview



History- SYHC HIV Services

- 1990s South Bay AIDS Project - HIV Case Management Services in the South Bay area
- 1999 HIV Specialty Care integrated at San Ysidro Health Center – once a week for 4 hours
- 2001 UCSD Owen Clinic and SYHC collaborate to provide full-time HIV Medical Specialists at San Ysidro Health Center
- 2008, SYHC acquired Comprehensive Health Centers including 2 HIV clinics (Elm St. & Euclid St.)
- HIV Department currently has 50 staff members and multiple programs across Southern San Diego County

Our Mission

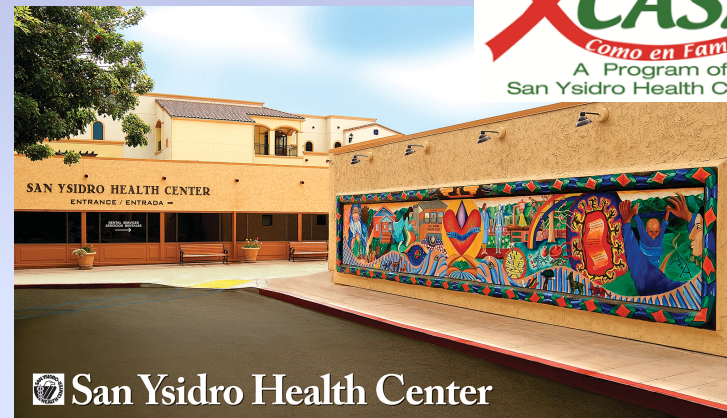
To provide a continuum of culturally sensitive medical, social and supportive services free of charge that enhance the health and enrich the quality of life of people living with HIV/AIDS and their families

SYHC HIV SERVICES:

ONE DEPARTMENT, TWO REGIONS, FOUR SITES

SOUTH BAY Clinic: MX Border

- 650+ HIV+ patients
- **CASA** drop in center

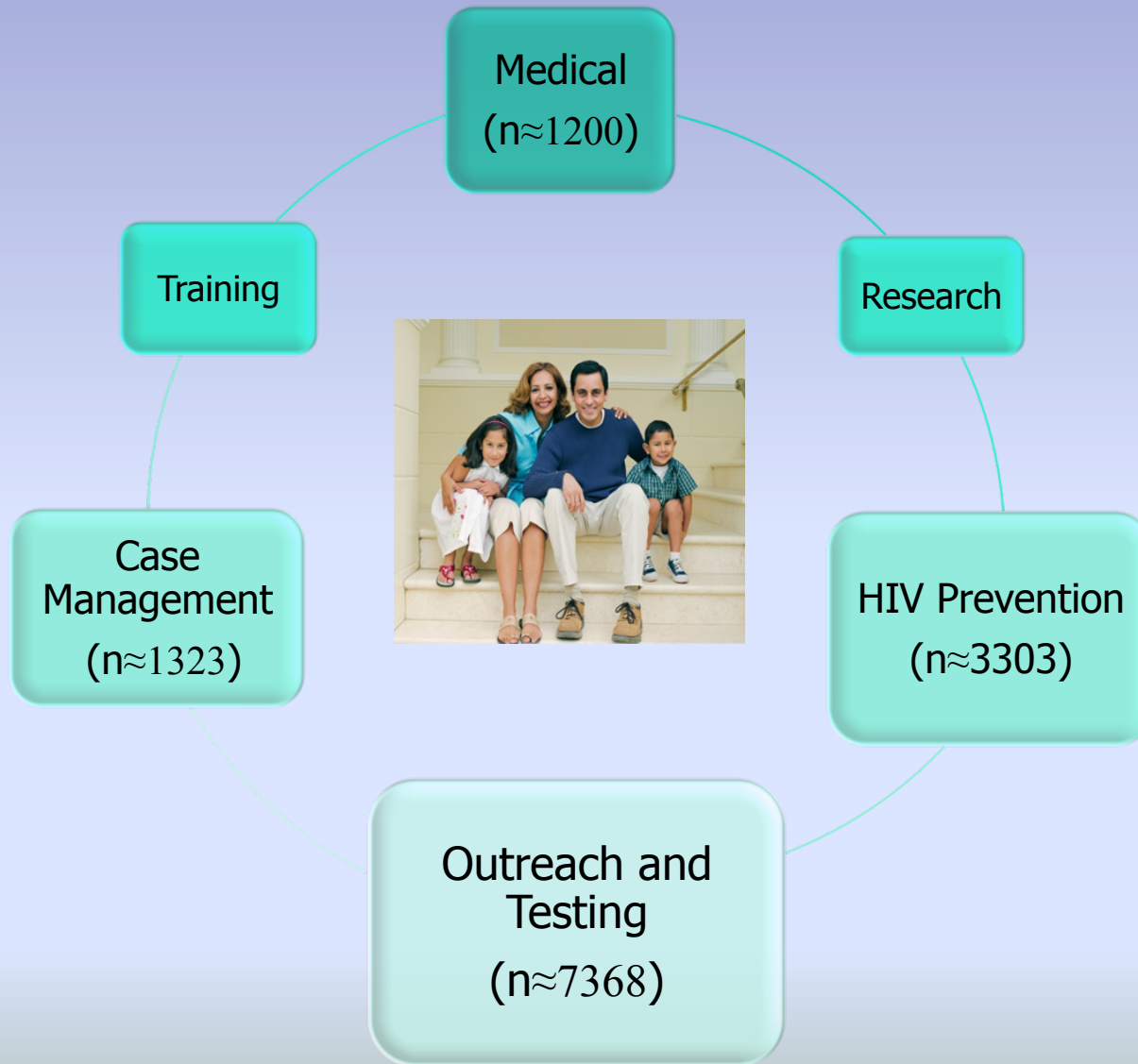


SOUTHEAST: King-Chavez Health Center (KCHC)

- 350+ HIV patients
- **OUR PLACE** drop in center



SYHC HIV Services Overview





SYHC HIV Department

Clinic Services

- Comprehensive HIV specialty and Primary Care
- Treatment and Adherence Counseling
- Medical Case Management
- Prevention Counseling
- Pre-exposure Prophylaxis Clinic

SYHC HIV Department

Coordinated Services at CASA and Our Place

- Case Management
- Peer Advocacy
- Support Groups
- Art Therapy (only at CASA)
- New Client Orientations
- ADAP Enrollment
- Events & Activities
- Link to care to all social and medical services
- Referrals
- Mental Health Services
- Legal Services
- Food Assistance
- Housing Assistance
- Treatment Education and Adherence Counseling
- Substance & Addiction Counseling
- Transportation Services



Medical Education:

Community-Based HIV Medicine

1) Family Medicine Residents

- 6 week clinic rotation for R2s at two sites
- 2-4 week advanced rotation for R3s

2) SYHC Primary Care Providers

Current research activities:

Special Projects of National Significance

demonstration project

- ❑ HRSA RW Part F funded demonstration projects to improve HIV service delivery (one of 15 sites nationwide)
- ❑ Evaluation partner: Mari Zuniga, PhD
- ❑ Second SYHC SPNS project in 12 years
 - ❑ Prior study documented socio-demographics and HIV care access behavior of Latinos living with HIV in the U.S.-Mexico border region
- ❑ Purpose of current funding:
 - ❑ *"Further the overall understanding of system-level structural changes within the HIV workforce that will optimize human resources while improving health outcomes."*



KEY COMPONENTS OF OUR SPNS DEMONSTRATION PROJECT

Practice Transformation

- Improvements to our HIV Care Teams

“Project Connect”

- Increasing access to SYHC non-HIV services for HIV positive patients through Patient Navigation, training, and outreach within SYHC

Workforce Capacity Building

- Expanding HIV workforce capacity through training residents and non-HIV providers
- Partnership with SYHC Family Practice Residency



OUR UNIQUE CHALLENGES

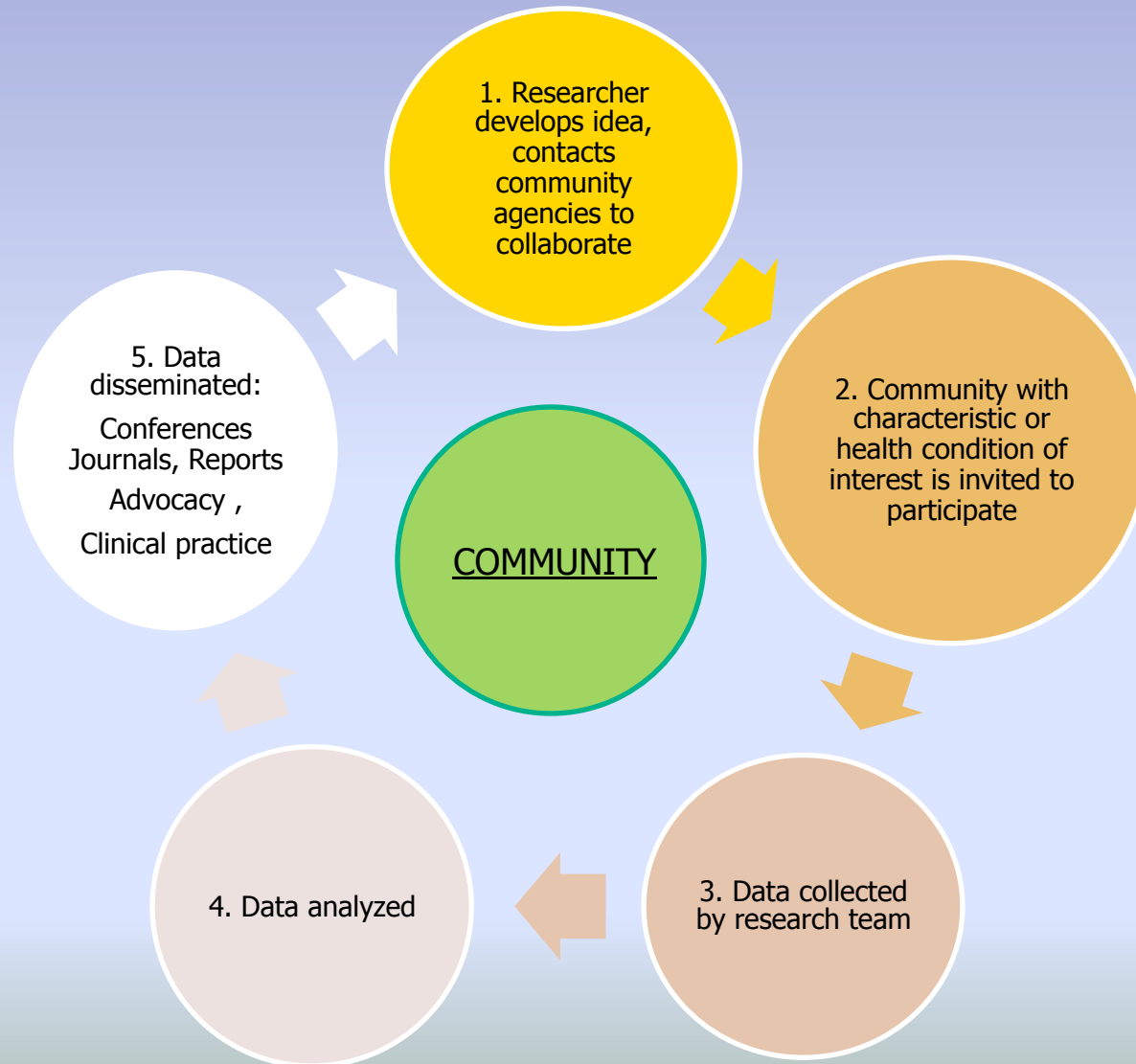
Current priorities and Future goals

- Integration and de-stigmatizing HIV across the organization.
 - Increasing access to internal services
- Behavioral health/Substance abuse services
 - Closer relationship with Behavioral Health Dept
- Targeting Youth (focus: young MSM of color)
- Expanding access to PrEP
- Hep C treatment
- TB treatment cascade (clinic-wide)



RESEARCH IN THE COMMUNITY, OUR FQHC PERSPECTIVE

Traditional paradigm for community-based research



Academic Research Collaborations: Comments from HIV Department staff

"The few studies we have been involved in definitely interrupted the patient flow. PI [wanted to be] on site... Having the PI around the clinic was not part of what was agreed on which resulted in problems with patients and staff."

Academic Research Collaborations: Comments from HIV Department staff

"We had a study in which participants were expected to use a laptop for the questionnaire. Staff could not assist with the laptop and many clients ended up with an incomplete questionnaire, lost data, etc....many patients were not comfortable with electronics."

"Spanish translation...was not appropriate. Participants often skipped questions because they did not understand what was being asked."

Academic Research Collaborations: Comments from HIV Department staff

"[study] thought that what worked with the MSM community in Hillcrest would also work for SYHC's... population."

Academic Research Collaborations: Comments from HIV Department staff

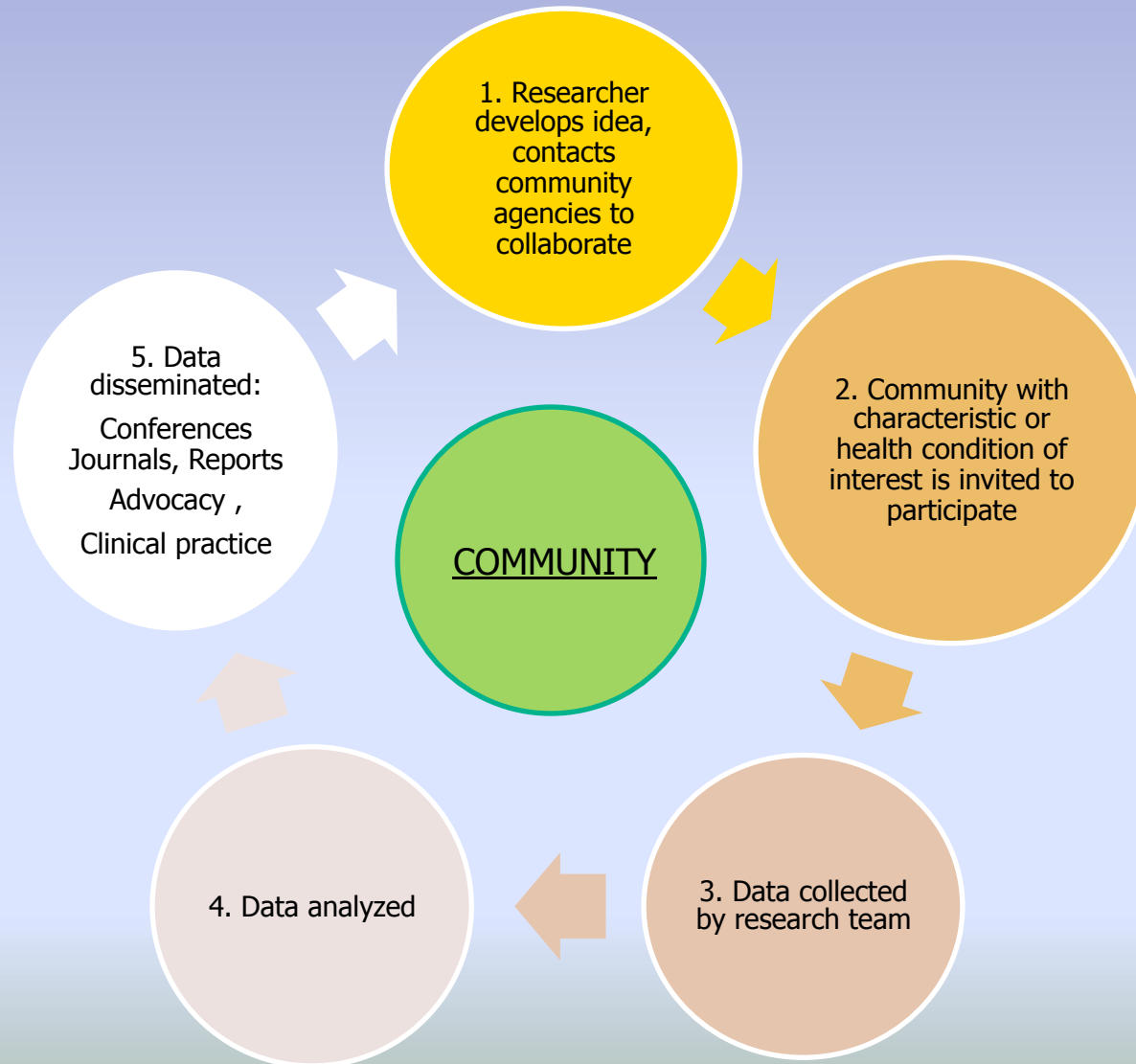
"I would say before even implementing a study, the PI should know well where they would like to implement the study. Ask about the agency/staff about the patient population, demographics, educational level of, potential barriers to enrollment, retention, etc."

Research in the Community: Lessons Learned

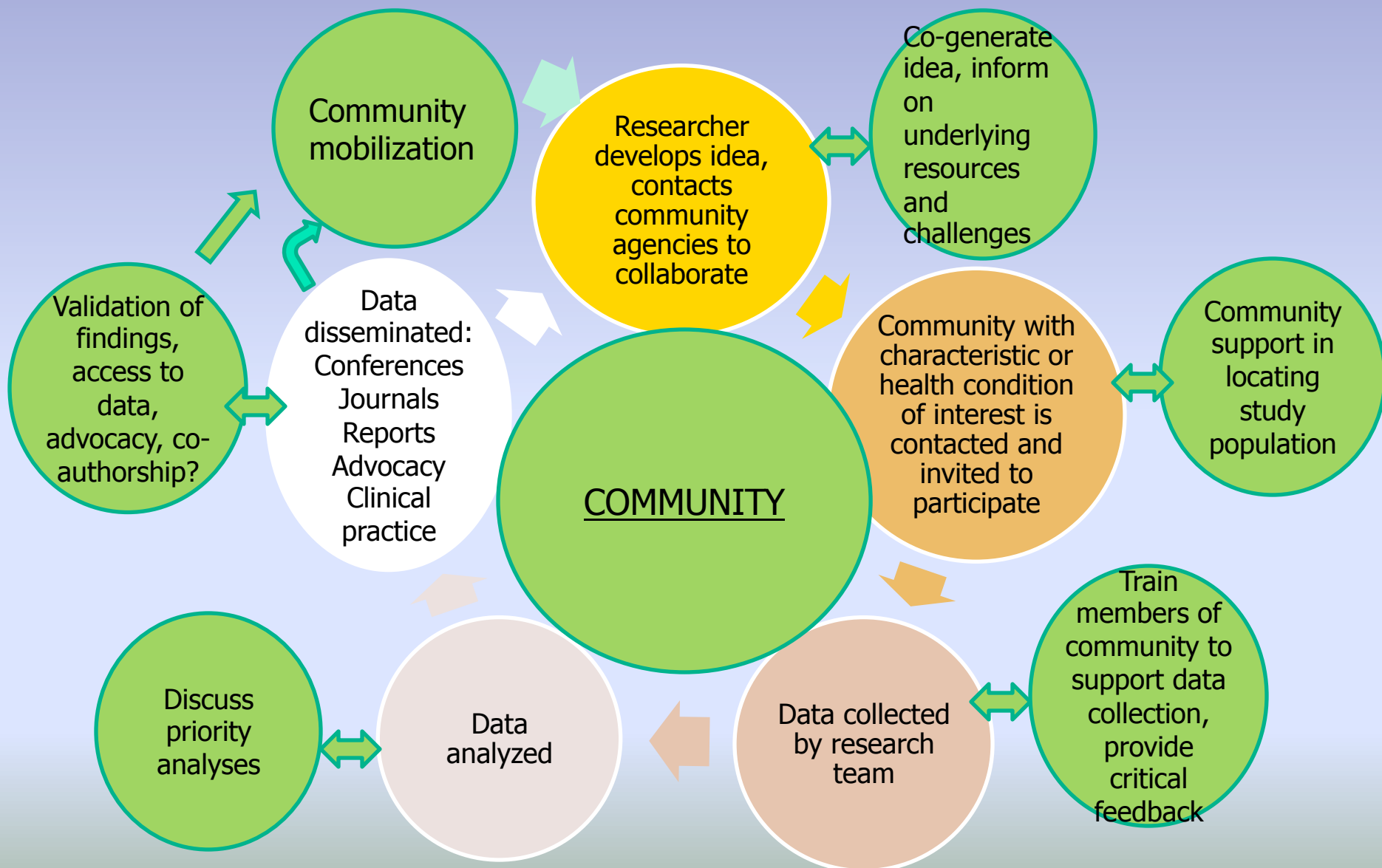
"community clinic leaders and providers also recognize the importance and potential contributions of research conducted within a community clinic setting given the patient populations, etc.

Take home message for academic folks is: as long as your research doesn't get in the way of busy clinic operations, then yep we're happy to let you [in]"

Traditional paradigm for community-based research



Opportunities for community-engaged research



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**For you.
For everyone.**

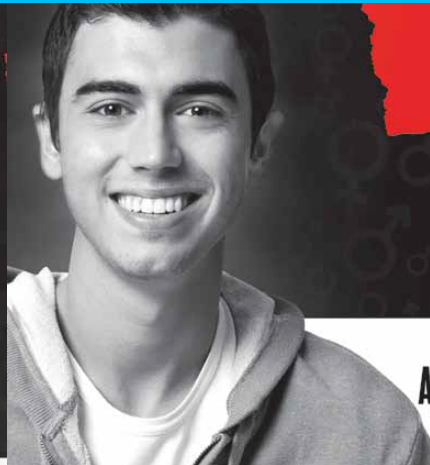
Your routine tests now
include HIV screening.



**For you.
For everyone.**

Your routine tests now
include IV screening.

THANK YOU



**For you.
For everyone.**

Your routine tests now
include HIV screening.

Agree to get tested.



Agree to get tested.

