

**STAY
CONNECTED**
For Your Health

Implementation Guide

September 2019

Stay Connected Implementation Guide

DESCRIPTION

The Stay Connected intervention is a comprehensive evidence-based behavioral intervention designed to increase retention in care for people with HIV (PWH). Retention in HIV medical care is defined as having two or more visits at least 3 months apart during a given year. This intervention requires all members of the healthcare team to deliver brief, positive, welcoming messages to all patients at the clinic. Clinical care staff (primary care providers and clinical support staff) deliver encouraging health messages to patients about the importance of staying in care. The intervention also designates a Retention Specialist to meet with patients experiencing barriers to keeping their appointments. The Retention Specialist focuses on establishing a relationship with patients through three (3) face-to-face sessions at the clinic and phone calls in between appointments, and serving as a bridge between the patients and the healthcare providers. The intervention has designated an Administrator/Champion, Clinical Supervisor/Champion, and Intervention Coordinator to support the implementation of Stay Connected.

The *Stay Connected* intervention supports the National HIV/AIDS Strategy (NHAS), which is an ambitious plan to reduce new HIV infections, increase access to care, improve the lives of those with HIV, and reduce HIV-related health disparities. *Stay Connected* increases the likelihood that patients will engage in care and we know that once engaged in care, 93% of patients are prescribed antiretroviral therapy (ART). ART can help people with HIV live healthier, longer lives, and has been shown to reduce sexual transmission of HIV by 96%. Eighty-one percent of patients prescribed ART become virally suppressed, which helps patients live healthy, longer lives and greatly reduces their chances of passing HIV on to others.¹

How Stay Connected Works

The *Stay Connected* intervention encourages all clinic staff (non-clinical and clinical) to provide brief, warm, positive greetings and retention messages to all patients during visits in order to enhance relationships and increase their motivation to remain in care. In addition to the warm greetings and retention messages, clinical staff—primary care providers (physicians, physician assistants, nurse practitioners, HIV specialty providers, etc.) and clinical support staff (nurses, medical assistants, etc.)—deliver specific messages to PWH, offering affirmations to those who are consistent attenders and emphasizing the importance of attending appointments regularly to new patients, and inconsistent attenders. A Retention Specialist offers one-on-one personalized services to patients who are new or inconsistently attend appointments.

This includes patients who:

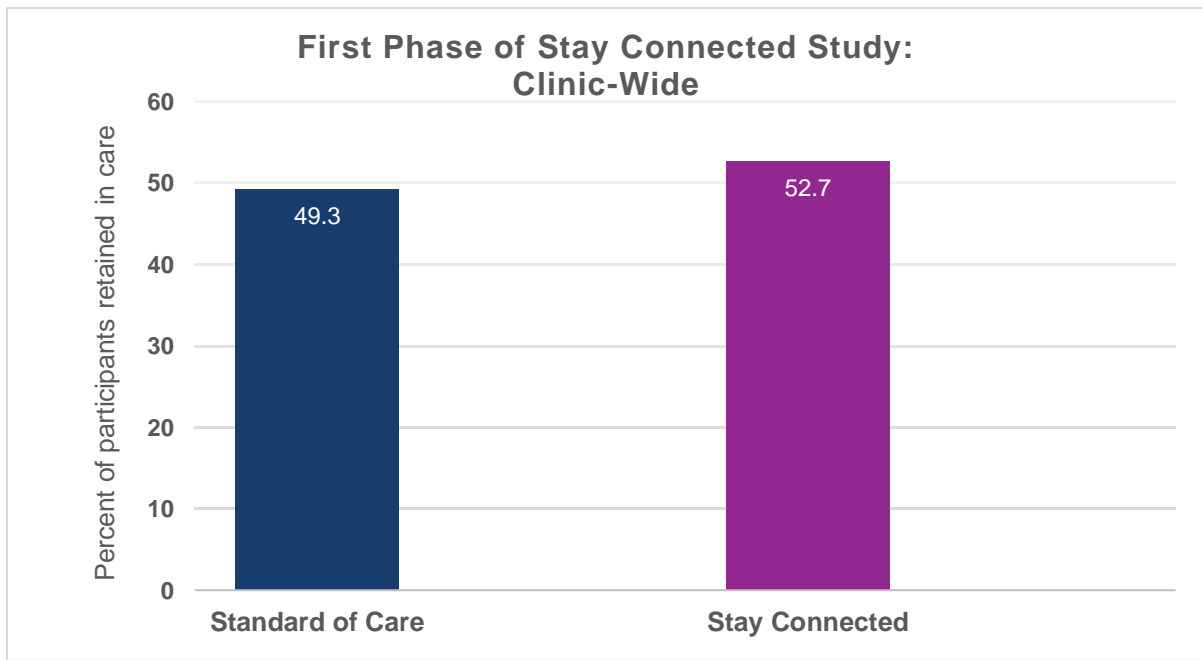
- (1) have had less than two visits at least 3 months apart during a given year,
- (2) are newly diagnosed with HIV,

- (3) are not newly diagnosed, have received HIV care elsewhere, and are new to the clinic, or
- (4) are not newly diagnosed but have not previously received HIV care.

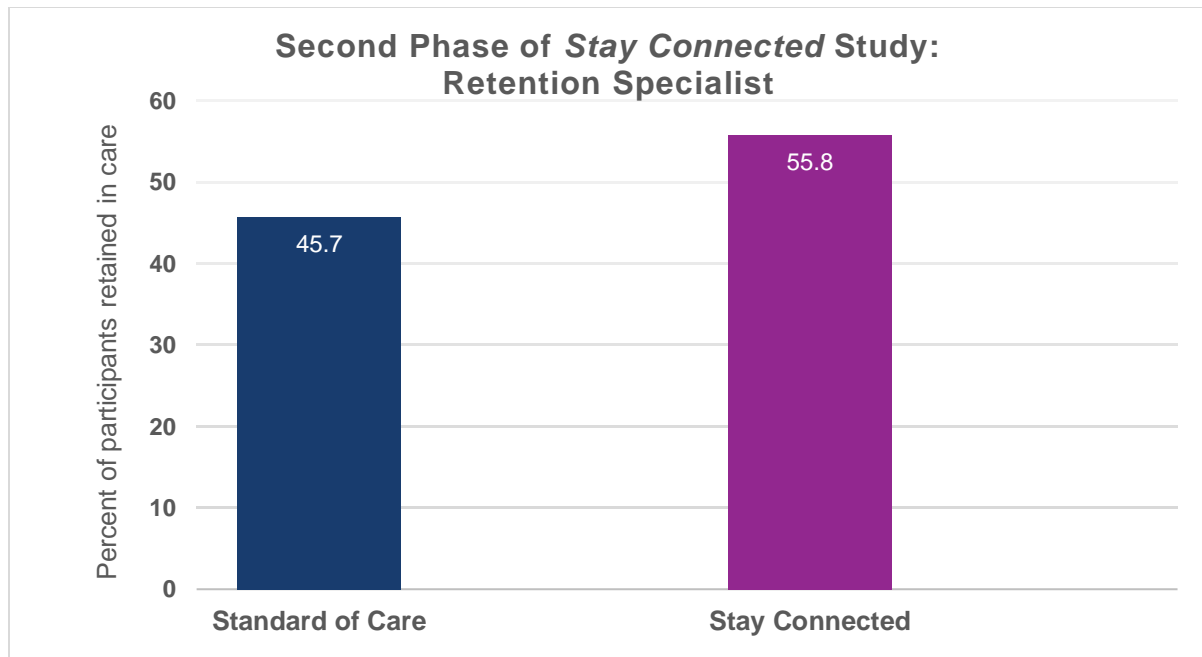
The Retention Specialist talks with patients both face-to-face and over the phone to build a relationship, discuss barriers to remaining in care, and help come up with solutions that work for patients and their circumstances so they are able to keep their clinic appointments.

Research Findings

The original *Stay Connected* intervention was tested in two phases. The first phase of the study examined a clinic-wide intervention to see how posters, brochures, and positive messages from staff and providers impact retention. As stated above, retention in HIV medical care is defined as having two or more visits at least 3 months apart during a given year. It was found that participants from the *Stay Connected* intervention had a greater likelihood of attending two consecutive visits within 12 months after the initial visit than participants from the pre-intervention period (52.7% vs. 49.3%).²



The second phase of the study examined the effect of the Retention Specialist intervention to determine how enhanced personal contact impacts retention. It was found that retention in care among participants receiving support from the intervention specialist was higher than the standard of care (control) group (55.8% vs. 45.7%).³



ESSENTIAL COMPONENTS

A number of components are essential to ensure that the *Stay Connected* intervention is effective at retaining patients in care. These components, determined by the original researchers and implementers, are:

Pre-Implementation

- Secure an Administrator/Champion (e.g., Executive Director, Clinical Director, etc.) to adopt and promote a vision for retaining patients in care, which includes adopting *Stay Connected* as an essential component of this vision.
- Secure a Clinical Supervisor/Champion (a clinician who is well-respected, has a strong rapport with colleagues, and values the intervention) to provide vigorous and enthusiastic attention and support to the intervention.
- Use a team-based model of care, training all clinic staff to deliver warm, welcoming, positive greetings and retention messages to all patients.
- Hire and train a Retention Specialist to build a relationship with patients and address personal barriers to remaining in care.

Implementation

- Frontline staff incorporate warm greetings and retention messages; primary care providers (physicians, physician assistants, nurse practitioners, HIV specialty providers) and clinical support staff (nurses, medical assistants, etc.) incorporate warm greetings and messages about the importance of staying in care in order to stay/get healthy.
- Display waiting room posters and exam room posters and use brochures to reinforce the importance of staying in care.

- During routine visits, the Retention Specialist meets with the patients to increase their relationship with the clinic and staff, address challenges to remaining in care, and assist patients in coming up with strategies to overcome challenges to retention.
- Provide referrals for auxiliary services such as mental health, substance use, housing, etc.

PRE-IMPLEMENTATION ACTIVITIES

Before implementing the *Stay Connected* intervention, clinics must obtain the necessary resources to do the preparatory work and ready staff for the new practices. This includes securing important team members, building buy-in, training staff, and acquiring the necessary resources. Preparation activities are as follows:

Determine Clinic Fit and Capacity

Your clinic should have the capacity to successfully implement *Stay Connected*. Capacity is concerned with issues that relate to the clinic as a whole, not only the capacity to carry out the specific intervention. Determine whether or not *Stay Connected* will be of value to your clinic and appropriate for patients, and whether or not your clinic has the capacity to implement such an intervention. Use the Clinic Fit and Capacity Checklist in Appendix A to keep track of which steps need to be taken before your clinic is ready to implement the intervention. This checklist should be used to make sure the intervention is the right fit for the clinic before moving forward with any pre-implementation activities.

Use Clinic Readiness Checklist

After understanding what is required for implementing *Stay Connected*, your clinic can use the Clinic Readiness Checklist in Appendix B to assess if your clinic has the capacity to implement the intervention with fidelity. The checklist will also identify what areas may need to be developed or identify what stakeholders are needed to acquire specific resources. Use the checklist to keep track of what steps still need to be taken before your clinic is ready to implement the intervention. Be sure to use the checklist to ensure that you've completed the pre-implementation activities described in the section before moving to implementing the intervention. If others need to be involved to accomplish these goals, you can use this checklist to keep track of their progress as well.

Secure Administrator/Champion

See Appendix C for the roles involved in *Stay Connected*. The Administrator/Champion is a champion for the intervention at the administrative level, such as an Executive Director or Medical Director of the clinic. The Administrator/Champion will adopt a vision for retaining patients in care, which includes *Stay Connected* as an essential component of retention. The Administrator/Champion is responsible for making sure that everyone is on board with supporting the implementation of the intervention. They will also

provide opening remarks at the *Stay Connected* staff training and share information and updates about *Stay Connected* during staff meetings. At all times, the Administrator/Champion will provide proactive, vigorous and enthusiastic attention to support implementation and reduce barriers, including reviewing policies, procedures, and patients' barriers to care at their clinic.

Secure a Clinical Supervisor/Champion

In addition to an Administrator/Champion, clinics should secure a Clinical Supervisor/Champion. The Clinical Supervisor/Champion must be a medical provider who is well-respected, has a strong rapport with colleagues, and who values the *Stay Connected* intervention as an integral service provided by the clinic. They will share information and updates with the staff regarding HIV, the latest treatments, and challenges to care within the clinic.

The Clinical Supervisor/Champion will also provide supervision to the Retention Specialist. The Clinical Supervisor/Champion will meet with the Retention Specialist on a set basis (e.g., weekly) to provide support to the Retention Specialist. During these meetings, the Clinical Supervisor/Champion can:

- Debrief any patient sessions that are stressful and difficult, and help find solutions
- Discuss patients' needs
- Facilitate challenges
- Reflect on the progress of the intervention
- Answer any questions the Retention Specialist has about the protocol, clinic policies, work time, pay, forms and paperwork, etc.

Because the Retention Specialist position is not that of a counselor or therapist, some Retention Specialists may not have had clinical training of their own and can find traumatic information disclosed by the patients to be distressing or anxiety-provoking. It is crucial that the Clinical Supervisor/Champion provides appropriate support to the Retention Specialist, and suggestions on how to best respond to patients overwhelmed by stigma or trauma.

Assign an Intervention Coordinator

Each clinic should appoint an Intervention Coordinator to oversee the implementation of *Stay Connected*. The clinic manager or another leader within the clinic would be the ideal choice. This person will:

- Coordinate training
- Make sure that intervention materials are on hand
- Ensure the intervention is being implemented by all clinic staff
- Request technical assistance when required
- Ensure that quality assurance, monitoring, and evaluation plans are being adhered to

Hire or Assign a Retention Specialist

The Retention Specialist is a designated person(s) at the clinic who will develop warm, personal relationships with patients who are new or inconsistently attend appointments. This means the patients that they meet with may:

- (1) have had less than two visits at least 3 months apart during a given year,
- (2) are newly diagnosed with HIV,
- (3) are not newly diagnosed, have received HIV care elsewhere and are new to the clinic, or
- (4) are not newly diagnosed but have not previously received HIV care.

The Retention Specialist will build a relationship with patients by meeting them each time they come to the clinic for an appointment for a total of three face-to-face sessions, and by making phone calls in between sessions to remind patients of upcoming appointments, to see how they are doing, and to follow-up if the patient misses an appointment. The Retention Specialist provides positive affirming statements to patients for attending appointments, helps patients identify challenges/barriers to attending clinic appointments and come up with solutions to overcome them, and responds to questions or concerns about appointments.

It is optimal for clinics to hire a Retention Specialist to deliver this service to individuals who are eligible to receive it. However, if hiring a new person for this position is not feasible, the duties of the role may be split between existing staff. If the number of patients at the clinic who are eligible to participate in the intervention is low, the Retention Specialist responsibilities may be added to an existing staff member's job description. For example, existing personnel such as a patient navigator or HIV case manager could devote 25% of their time, depending on patient load. In order to ensure efforts are not duplicated, it is best to merge the role and responsibilities of the Retention Specialist with an existing role that already provides one-on-one retention services (e.g., HIV case manager).

Note: Although it is not a requirement, patients may feel more comfortable working with a Retention Specialist who represents the community they live in (e.g., race, language, ethnicity, sexuality, etc.).

Review Policies and Procedures

Before a clinic implements *Stay Connected*, the following policies and procedures should be in place to protect patients and the clinic:

- **Confidentiality** – A system must be in place to ensure that confidentiality is maintained for all clinic patients. All patients must also be clearly informed of the limits of confidentiality (i.e., danger to self or others, child endangerment, threats against clinic staff, etc.).
- **Cultural Competence** – Have policies regarding cultural competence in place. Staff should be aware of cultural differences and have a knowledge of different

cultural practices. They should also be equipped with the ability to effectively interact with people of different races, religions, sexual identity, backgrounds, etc.

- **Data Security** – To ensure data security and patient confidentiality, data must be collected and reported according to data collection, storage, and sharing requirements for your organization in support of your State Department of Health laws.
- **Consent to Participate** – All clinic patients should be informed that addressing issues of retention in care is part of the standard of care at the clinic that incorporates HIV retention into medical care. As with any patient care issue, they have the right to refuse to work with a Retention Specialist without repercussion.
- **Legal and Ethical Policies** – By virtue of participation in this intervention, patients will be disclosing their HIV serostatus. Clinics must know their state laws regarding disclosure of HIV serostatus to sex partners and drug injection-sharing partners; clinics are obligated to inform patients of the organization's responsibilities and the organization's potential duty to warn. Clinics also must inform patients about state laws regarding the reporting of domestic violence, child abuse, sexual abuse of minors, and elder abuse.
- **Referrals** – For patients who need additional assistance in decreasing high-risk behavior, providers must know about referral sources for prevention interventions, partner counseling and referral services, and health department and CBO prevention programs for PWH.

Client Recruitment

Stay Connected is a clinic-wide intervention; therefore, all patients will receive welcoming messages from front desk staff. Clients with HIV will need to be screened according to whether they are **(A) consistent attenders**, **(B) new patients** (are newly diagnosed with HIV; are not newly diagnosed, have received HIV care elsewhere and are new to the clinic; or are not newly diagnosed but have not previously received HIV care) or **(C) inconsistent attenders** (they have had less than two visits at least 3 months apart during a given year). This can be accomplished by clinics assigning a staff person to review patient charts and appointment schedules. Different colored stickers can be placed in the patients' charts or an alert/identifier can be added to electronic medical records (EMRs) to indicate the following services that each type of patient should receive:

- (A) Consistent attenders** – Clients who regularly attend appointments will receive welcoming messages from front desk staff and affirming messages from primary care providers and clinical support staff about their current adherence, and the importance of continued regular attendance.
- (B) New patients** – Clients who are new will also receive welcoming messages from front desk staff. Primary care providers and clinical support staff will deliver messages that stress the importance of remaining in care and the Retention Specialist meets with them to deliver one-on-one personalized services.

(C) Inconsistent attenders – Clients who are inconsistent attenders will receive welcoming messages from the front desk staff. Primary care providers and clinical support staff will share messages that emphasize the importance of retention in care and the consequences for missing appointments.

Secure Space

To ensure patient sense of safety and confidentiality, clinics should have private rooms where Retention Specialists can meet with patients to discuss their personal barriers to remaining in care and strategies to overcome those barriers.

Orientation and Training

Orient Staff to the Intervention

Prior to any clinic training, the Administrator/Champion will deliver a short presentation at a time when all clinic staff are convened (e.g., a staff meeting). This presentation will provide information about the intervention, its benefits, and its adoption as an essential component of patient care. The presentation is meant to build buy-in, enthusiasm and motivation to implement the intervention among the clinic staff. It is also important to introduce the Retention Specialist and highlight the one-on-one personalized services that this person(s) will be offering to patients who are at risk of not remaining in care. This is a special role specifically geared to retention; Retention Specialists will not be taking over counseling duties or other services provided by other staff members.

All Staff Training

Implementation of *Stay Connected* includes training for all staff to build their ability to deliver the intervention. Any clinic that wishes to adopt *Stay Connected* must participate in a 3.5-hour training on the intervention for all clinic staff who will be part of delivering the intervention. To avoid disruption, this training can be delivered in the clinic setting. Emphasizing the importance of an integrated team-based approach demonstrates that patient engagement and retention is a priority for *all* staff at the clinic. This will be accomplished by posting messages in the waiting and examination rooms, having all staff, including clinical care staff, deliver appropriate messages, and giving patients printed material related to the importance of remaining in care.

Retention Specialist Training

Retention Specialists will attend a 2-day training that will focus on the role and responsibilities of the Retention Specialists and build their knowledge and skills to implement the intervention with patients.

Develop a Plan for Quality Assurance, Monitoring, and Evaluation

It is essential to plan how quality assurance, monitoring, and evaluation of the intervention will be conducted. For more about this, see the *Quality Assurance* and *Monitoring and Evaluation* sections of this document.

Prepare Materials

The following materials and set-up are required:

- Waiting room posters displaying the general retention message to hang in clinic waiting areas and hallways
- Exam room posters displaying the retention messages tailored to PWH to hang in examination rooms
- Brochures to be handed to patients when they meet with the clinical care staff
- A *Pocket Guide for Clinical Care Staff* that contains messages about retention to use as a quick reference when meeting with patients
- A *Pocket Guide for Non-Clinical Staff* that contains messages that help create a welcoming atmosphere and encourage patients to return for their scheduled appointments, to use as a quick reference when meeting with all patients
- Documentation of messages delivered (e.g., chart sticker, stamp, checkbox in the EMR) to remind clinical care staff to provide the messages regularly

IMPLEMENTATION

Upon entering the clinic, all patients will receive positive messages from front desk staff that help create a welcoming atmosphere, affirm attendance, and encourage patients to return for their scheduled appointments. Specific messages in the *Pocket Guide for Non-Clinical Staff* are tailored for front desk staff to say to new patients and established patients and take less than 30 seconds to deliver. Clients will also see the poster in the waiting room that reinforces the importance of remaining in care.

When meeting with clinical care staff (clinical support staff and primary care providers), patients will hear positive messages about the importance of remaining in care. The clinical care staff will draw patients' attention to the exam room poster and briefly explaining the findings of the *Stay Connected* research. The clinical care staff will also deliver positive tailored messages about the importance of remaining in care depending on whether the patients are new to the clinic, consistent attenders, or inconsistent attenders. Clients will receive a brochure with information about the importance of remaining engaged in care and ways to remember appointments.

Clients who have been flagged because they are new or inconsistent attenders will be recruited for one-on-one personalized services with a Retention Specialist. The Retention Specialist will provide enhanced retention services to eligible patients through three (3) face-to-face sessions with them when they attend appointments at the clinic, and phone calls with them in-between appointments in order to further the relationship building process and to remind patients of upcoming appointments. The Retention Specialist will also follow-up with patients within 24 hours of a missed appointment to address barriers and reschedule the appointment time to one the patient is confident that they can keep.

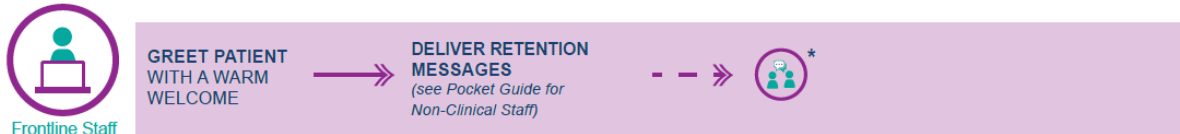
The *Stay Connected* model for new and consistent attenders, as well as inconsistent attenders, is diagrammed on the following page. Note: Because front desk staff may not

have knowledge of which patients have HIV, messages from front desk staff are delivered to all patients. On the other hand, messages from clinical care staff (clinical support staff and primary care providers) are tailored to patients based on the consistency of their clinic visits. Front desk staff will be delivering messages in settings that may not be private, so messages are delivered to all patients to ensure the confidentiality of the patients.

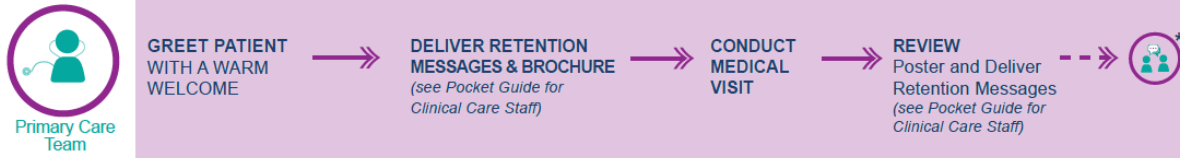
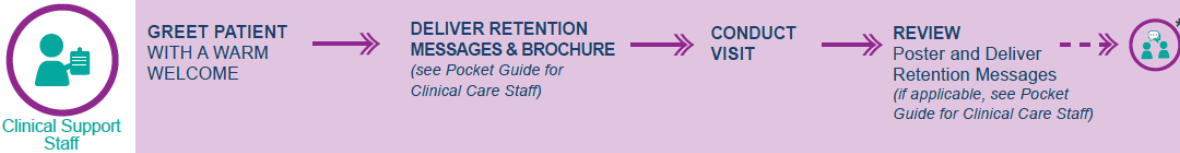
INTEGRATION OF STAY CONNECTED IN PATIENT FLOW



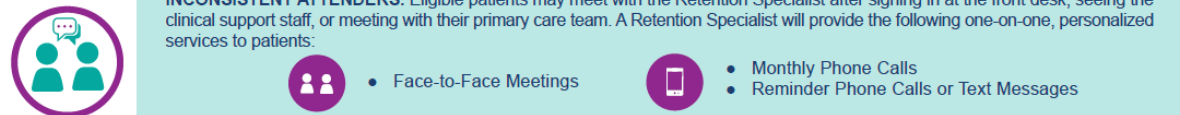
NON-CLINICAL



CLINICAL



RETENTION SPECIALISTS



QUALITY ASSURANCE

The following quality assurance activities should be in place for *Stay Connected*:

Assessment of staff

The following attributes of all staff should be assessed:

- Skill in delivering retention messages
- Attitudes and beliefs about their role in delivering retention messages
- Frequency of message delivery
- Satisfaction with the intervention

The following attributes of Retention Specialists should be assessed:

- Skill in engaging patients, building relationships, addressing barriers to retention, and supporting the development of strategies to overcome barriers that work for the patient
- Attitudes and beliefs about their role in providing enhanced retention services
- Consistency with the intervention
- Satisfaction with the intervention

Intervention process and materials

The Intervention Coordinator should ensure that materials are maintained in the waiting and examination rooms and ensure that patient brochures are handed out to all patients by the clinical care staff. Pocket guides should be made available to clinical care staff and non-clinical staff when they require replacements.

Client satisfaction

Clients' comfort and satisfaction with the services should be assessed periodically.

Staff Meetings

It is important to regularly address the successes and challenges related to delivering *Stay Connected* when staff convene. This may occur during regular staff meetings, daily staff "huddles," or meetings to specifically discuss the *Stay Connected* intervention.

More information can be found on quality assurance in the document titled *Program Monitoring Companion to Antiretroviral Therapy Adherence Interventions*. CDC is able to provide technical assistance on *Stay Connected* to organizations directly funded by CDC.

MONITORING AND EVALUATION

Specific guidance on the collection and reporting of program information, patient-level data, and the program performance indicators will be distributed to agencies after notification of award. General monitoring and evaluation reporting requirements for the programs listed in the procedural guidance will include the collection of standardized

process and outcome measures. Specific data reporting requirements will be provided to agencies after notification of award. Furthermore, agencies may be requested to collaborate with CDC in the implementation of special studies designed to assess the effect of HIV prevention activities on at-risk populations.

KEY ARTICLES AND RESOURCES

Materials and a video about *Stay Connected* can be found at the AETC National Resource Center: <http://aidsetc.org/resource/stay-connected-toolkit>

Gardner, L. I., Marks, G., Craw, J. A., Wilson, T. E., Drainoni, M. L., Moore, R. D., . . . Retention in Care Study Group. (2012). A low-effort, clinic-wide intervention improves attendance for HIV primary care. *Clinical Infectious Diseases*, 55, 1124-1134.

Gardner, L. I., Giordano, T. P., Marks, G., Wilson, T. E., Craw, J. A., Drainoni, M. L., . . . Retention in Care Study Group. (2014). Enhanced personal contact with patients improves retention in primary care: A randomized trial in six US HIV clinics. *Clinical Infectious Diseases*, 59, 725-734.

REFERENCES

¹ "HIV/AIDS Care Continuum." *HIV/AIDS Care Continuum*. AIDS.gov, 03 June 2015. Web. 06 June 2016.

² Gardner, L. I., Marks, G., Craw, J. A., Wilson, T. E., Drainoni, M. L., Moore, R. D., . . . Retention in Care Study Group. (2012). A low-effort, clinic-wide intervention improves attendance for HIV primary care. *Clinical Infectious Diseases*, 55, 1124-1134.

³ Gardner, L. I., Giordano, T. P., Marks, G., Wilson, T. E., Craw, J. A., Drainoni, M. L., . . . Retention in Care Study Group. (2014). Enhanced personal contact with patients improves retention in primary care: A randomized trial in six US HIV clinics. *Clinical Infectious Diseases*, 59, 725-734.

APPENDIX A: CLINIC FIT AND CAPACITY CHECKLIST

Your clinic should have the capacity to successfully implement *Stay Connected*. Capacity is concerned with issues that relate to the clinic as a whole, not only the capacity to carry out the specific intervention. Determine whether or not *Stay Connected* will be of value to your clinic and appropriate for patients, and whether or not your clinic has the capacity to implement such an intervention. Use the checklist below to keep track of which steps need to be taken before your clinic is ready to implement the intervention. This checklist should be used to make sure the intervention is the right fit for the clinic before moving forward with any pre-implementation activities.

Statement	Agree	Disagree
Stay Connected meets the purpose, goals, and objectives of our clinic.		
Stay Connected meets the needs of the target population that our clinic serves.		
Our clinic can secure adequate funding to successfully provide the intervention to patients.		
Our clinic has a history of working with the target population and has access to the target population from our existing services.		
Our clinic is able to secure “buy-in” for the intervention from key staff in our clinic and supporting agencies in the community, as well as from other relevant stakeholders.		
Our clinic has organizational support to develop and sustain <i>Stay Connected</i>.		
Our clinic has the policies and procedures in place to support this intervention.		

APPENDIX B: CLINIC READINESS CHECKLIST

After understanding what is required for implementing *Stay Connected*, your clinic can use the following checklist to assess if your clinic has the capacity to implement the intervention with fidelity. The checklist will also identify what areas may need to be developed or identify what stakeholders are needed to acquire specific resources. Use the checklist to keep track of what steps still need to be taken before your clinic is ready to implement the intervention. Be sure to use the checklist to ensure that you've completed the pre-implementation activities described in the section before moving to implementing the intervention. If others need to be involved to accomplish these goals, you can use this checklist to keep track of their progress as well.

The following lists the capacities and resources needed for *Stay Connected* including staffing requirements as well as policies and procedures.



Capacities and Resources Needed for Stay Connected	Yes/No/Notes
Administrator/Champion	
Adopts a vision for retaining patients in care	
Sees <i>Stay Connected</i> as an essential service	
Secure funds and “buy-in”	
Prepares the clinic for <i>Stay Connected</i>	
Shares information and updates about <i>Stay Connected</i>	
Hire the Retention Specialist or delegate Retention Specialist duties to someone within the clinic who meets the criteria to be a successful Retention Specialist	
Hires a Retention Specialist	
Manages the budget	
Establishes and executes the evaluation plan	
Communicates with the Intervention Coordinator	
Willing to receive training on both the all staff (3.5 hours) and Retention Specialist (2 days) parts of the <i>Stay Connected</i> intervention	
Guarantees that the Retention Specialist correctly follows the <i>Stay Connected</i> implementation protocol	
Reviews policies and procedures related to issues that arise during the intervention	

Capacities and Resources Needed for <i>Stay Connected</i>	Yes/No/Notes
Clinical Supervisor/Champion	
Medical provider who is well-respected and has strong rapport with colleagues	
Values the <i>Stay Connected</i> intervention as an integral service provided by the clinic	
Obtains staff “buy-in” and participation, particularly among other clinicians	
Familiar with HIV and the latest treatments, necessary primary care, opportunistic infections, medication side effects, and other challenges to HIV care and adherence	
Shares information and updates about medical treatment that can enhance <i>Stay Connected</i>	
Willing to receive training on <i>Stay Connected</i>	
Meet with the Retention Specialist on a set basis (e.g., weekly) to provide support to the Retention Specialist and to: <ul style="list-style-type: none"> • Debrief any patient sessions that are stressful and difficult, and help find solutions • Discuss patients’ needs • Facilitate challenges • Reflect on the progress of the intervention • Answer any questions the Retention Specialist has about the protocol, clinic policies, work time, pay, forms and paperwork, etc. 	
Offers suggestions on how to best respond to patients overwhelmed by stigma or trauma	

Capacities and Resources Needed for <i>Stay Connected</i>	Yes/No/Notes
Intervention Coordinator	
Oversees the implementation of the intervention, ensuring the intervention is being implemented by all staff	
Coordinates the <i>Stay Connected</i> training for all staff and the Retention Specialist	
Willing to receive training on <i>Stay Connected</i>	
Helps evaluate clinic policies and procedures as they apply to <i>Stay Connected</i>	
Obtains supplies for the intervention and ensures their availability throughout the intervention	
Determines space to be used for the intervention	
Evaluates clinic readiness for implementation	
Ensures that quality assurance, monitoring, and evaluation plans are being adhered to	
Debriefs on a regular basis with staff, the Retention Specialist, or Retention Specialist's supervisor on intervention successes and challenges	
Requests technical assistance from CDC, if needed	

Capacities and Resources Needed for Stay Connected	Yes/No/Notes
Primary Care Providers, Clinical Support Staff, and Non-Clinical Staff	
Willing to receive orientation on the intervention	
Willing to receive training on <i>Stay Connected</i>	
Able to incorporate the messages in their daily interactions with patients	

Capacities and Resources Needed for Stay Connected	Yes/No/Notes
Retention Specialist	
Able to establish a warm, personal relationship with patients	
Willing to receive training on <i>Stay Connected</i> and conduct Retention Specialist portion of <i>Stay Connected</i>	
Training Requirements	
Committed to the 3.5-hour training to orient staff about the <i>Stay Connected</i> intervention, integration of <i>Stay Connected</i> into the clinic flow, etc.	
Able to attend the 2-day training on <i>Stay Connected</i>	
Resources Required	
Available wall space in the waiting room, exam room and Retention Specialist meeting room to hang the <i>Stay Connected</i> posters	
Ability to copy the My Plan to Stay Connected worksheet	
Ability to copy the brochure for patients	
Ability to copy the Pocket Guide for Clinical Care Staff and Pocket Guide for Non-Clinical Staff, as required	

Capacities and Resources Needed for Stay Connected	Yes/No/Notes
Policies and Procedures	
Existing policies and procedures that are able to satisfy the needs of <i>Stay Connected</i> (note what needs to be amended or created)	
Client confidentiality	
Integrating <i>Stay Connected</i> into the clinic flow	
Screening for eligibility	
Recruiting patients	
Referral tracking	
Safety and security plan	
Planning for potential issues	
Retention Specialist's clinic responsibilities	

APPENDIX C: STAY CONNECTED ROLES



Non-Clinical Frontline Staff

- Greet patients warmly upon their arrival at the clinic
- Deliver a message to encourage patients to schedule their next appointment before they leave



Clinical Staff (Clinical Support Staff and Primary Care Providers)

- Affirm consistent attenders
- Emphasize the importance of attending appointments to new patients and inconsistent attenders
- Give patients a brochure about the importance of remaining in care and ways to remember appointments
- Deliver a retention message using the exam room poster



Retention Specialist

- Develop caring, personal relationships with patients who are new or inconsistently attend appointments
- Meet with patients for three face-to-face sessions
- Remind patients about upcoming appointments and follow up when patients miss appointments
- Work with patients to overcome barriers to missing appointments



Administrator/Champion

- Adopts a vision for retaining patients in care
- Responsible for making sure that everyone is on board with supporting the implementation of the intervention
- Shares information and updates about *Stay Connected*
- Supports the clinic regarding barriers to implementation, as well as review policies, procedures, and patients' barriers to care



Clinical Supervisor/Champion

- A medical provider who will share information about HIV, the latest treatments, and challenges to care with the clinic
- Supports the Retention Specialist by debriefing patient sessions that the Retention Specialist finds stressful and difficult



Intervention Coordinator

- Makes sure intervention materials are available
- Ensures intervention is implemented by all clinic staff
- Can request technical assistance
- Ensures adherence to quality assurance, monitoring, and evaluation plans

Clinics and organizations may choose to combine the Stay Connected roles