## **AlfredHealth**

# Victorian HIV Service: Partnering with the community to design the future of HIV care

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# Acknowledgement of Country Alfred Health acknowledges the Boonwurrung/ Bunurong and Wurundjeri Woi Wurrung peoples of the Eastern Kulin Nation as Traditional Owners and Custodians, and pays respect to their Elders past, present and emerging. We acknowledge and uphold their continuing relationship to lands and waterways and extend our respect to all Aboriginal and Torres Strait Islander peoples.

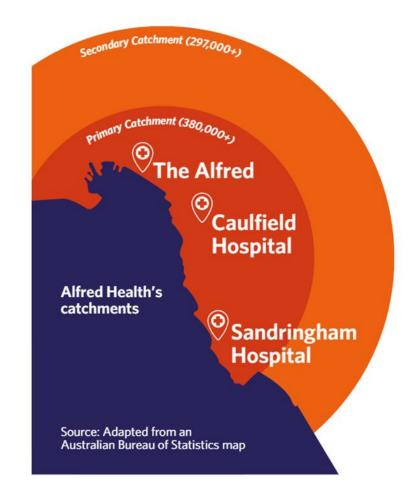


The Soul of Country

# Declaration of competing interests

- No-one is paid to give this presentation
- No-one has previously paid for our advice
- No research funding
- No conflicts of interest
- No shareholdings in pharmaceutical or other companies have paid for attendance

## **About Alfred Health**





18 state-wide services, including the Victorian HIV Service

# Victorian HIV Service

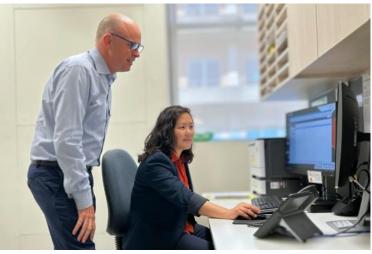






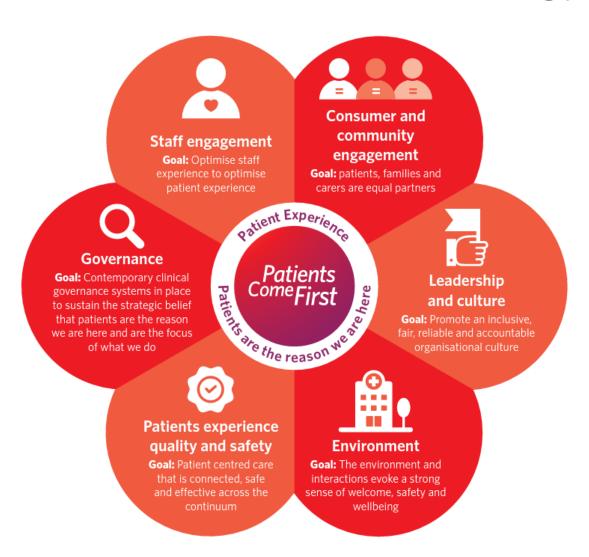






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# Patients Come First Strategy





#### **Empower**

Consumers lead the planning, design, development and evaluation of services/projects



#### Co-design

Consumers partner with us from development phase to design, implement and evaluate services/projects



#### Collaborate

Consumers are represented on committees/working groups etc and can provide advice and recommendations



#### Consult

Consumers are invited to provide feedback on their experiences, persectives and ideas for improvements



#### Inform

Consumers receive information about Alfred Health projects and improvement initiatives

IAP2 Spectrum of Public Participation, 2018 available at: www.iap2.org.au/resources/spectrum/

# HIV Services Advisory Group

Alfred Health's HIV Services Advisory Group (HSAG) has been helping Alfred Health plan for future services and identify community needs and future trends in HIV care since 2014.



#### **HSAG** member David Menadue OAM

I have always been happy to be involved as a consumer on the Alfred Health's HIV Services Advisory Group because I know that the organisation takes consumer representation and our perspectives seriously.

To have senior staff who care for people with HIV in the service involved in this Advisory Group has meant that current issues can be addressed promptly and services improved where necessary.

# Why now?





#### Co-design

Consumers partner with us from development phase to design, implement and evaluate services/projects

To learn what services and facilities are required to support our patients into the future, Alfred Health wanted to begin a conversation with our HIV community.

This would give us a deeper understanding of patient needs, and help identify the best way to deliver HIV services into the future.

## **Principles**

- Do this together
- Recognise what has gone before
- Be responsive
- Communicate 'in language'
- Bring people along
- Be transparent



## What we set out to achieve

## **Objectives**

- Connect with the community through acknowledging the history of long term survivors and the importance of Fairfield House
- Enable the community to connect with the conversation
- Use co-design principles to create an ongoing conversation with our HIV community working with our clinical partners
- Gather quality information that enables Alfred Health to develop a proposal for care development
- Engage seldom heard people
- Contribute to improving the future care of people with HIV
- Create basis for ongoing dialogue and connection with HIV community

## Two-staged approach to consultation

#### **Stage 1 - Pre-position forming engagement**

A needs analysis process to understand the current and future needs of the HIV community. Sharing the results with the community and double checking that we have it right.

## **Stage 2 - Post-position forming engagement**

Develop a proposal for the development of future services and facilities with the HIV community based on feedback from Stage 1. Check in with the HIV community to check that we have it right.

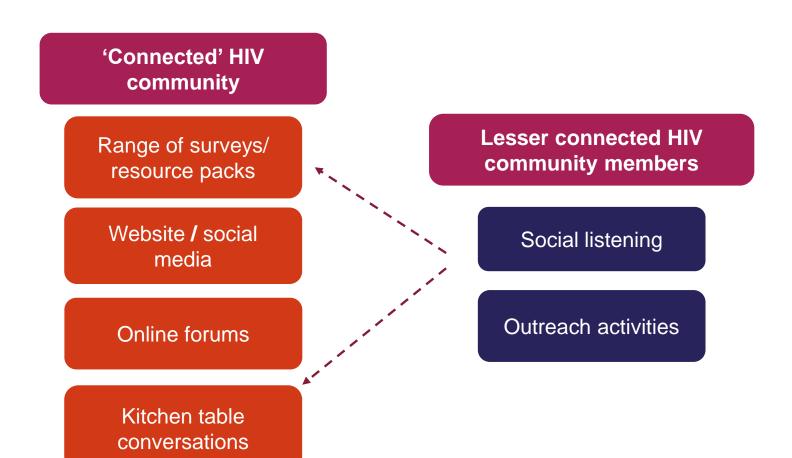


Challenging embedded engagement methods

Consumer Feedback Consumer Reps

Everyone else

# How to connect with the broader HIV community



#### Who were these people?

Younger men living with HIV (recent diagnosis, not necessarily linked in with specialist services)

MSM - Men who have sex with men living with HIV (who may not identify as gay)

Women living with HIV

# Consultation summary – what we did













#### Surveys

Main survey - Fa

Short survey – digital and paper

#### Kitchen table conversations

Facilitated by HIC at Positive Living Centre

## Social listening

Facebook, Instagram, Grindr - Short survey



- Utilise social media algorithms
- Proactive
- Use ads to target groups



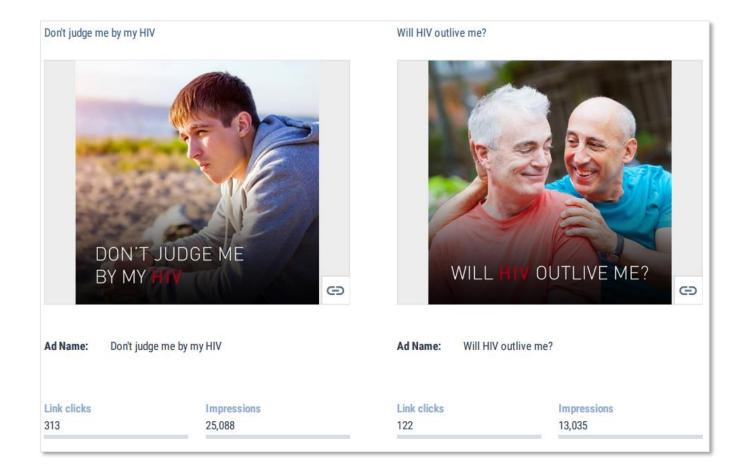






# Social listening





## Images and provocations

- Used the codesign group to select the most appropriate images
- Provocations: tested different statements with the consumer/community members. Which ones would make a person stop scrolling?

# How many people did we reach?

30,062

Alfred Health Social media reach



70,000



Social listening reach



Consultation page, unique visits

227 surveys641 comments



Kitchen table attendees

Zoom forum attendees



## Stage 1

## Who did we hear from?

Preferred language other than English

3 %

Time since diagnosis

35%

Earliest - 3 months Longest - 37 years

**Average –** 17 years

Where are respondents accessing care

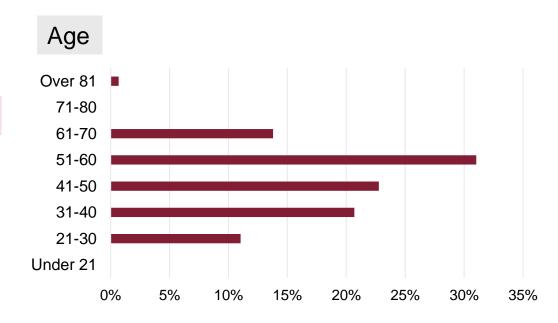
32% 10%

3%

- Alfred HIV service
- MSHC HIV service
- Other HIV service provider

20%

- Does not access specialist HIV services
- Other



#### Gender

Male 88% - Female 11% - Non-binary 1%

Residence

Metro 87% vs Regional/rural 13%

## We asked, we heard, we propose

# HIV Services Review **Building the next generation of HIV care**

The Alfred's response to community feedback















#### We heard ...

#### Ageing

People are concerned about ageing, their future and the long-term impacts of HIV.

Ageing is occurring rapidly ... I can see myself having to access aging supports ... Any help or easing into these ageing supports would be helpful.

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#### Our response ...

#### Continuing to build our current work:

- HIV Outward Program Nursing Home model education and training to nursing homes where people are placed, ongoing HIV care coordination and medication provision to several health services.
- HIV Assist in-reach into nursing homes for psychosocial support and ability to support community access where appropriate.

#### Future responses:

- A new Statewide HIV and Ageing Multidisciplinary Clinic, incorporating the HIV neurocognitive clinic.
- With community organisations, Alfred Social Work to share information and updates on NDIS and aged care services.
- Care co-ordination to facilitate efficient multispecialist review, reduce multiple appointments.

HIV Services Review Building the next generation of HIV care  $\,$  July 2021

## Co-designing the new facility

## Stage 2

## Phase 1 - Deliberative forum



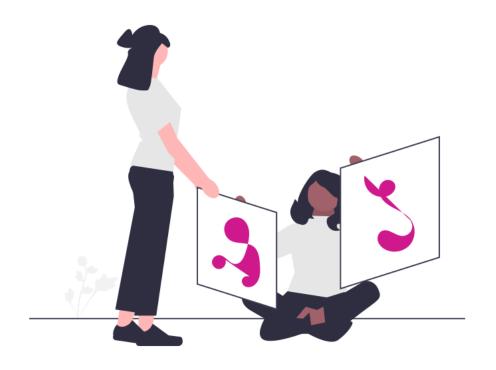
Develop design brief for new facility

## Phase 2 – Consumer partnership

Consumers partner with staff and architects as part of User Design Group to develop schematics and detailed design

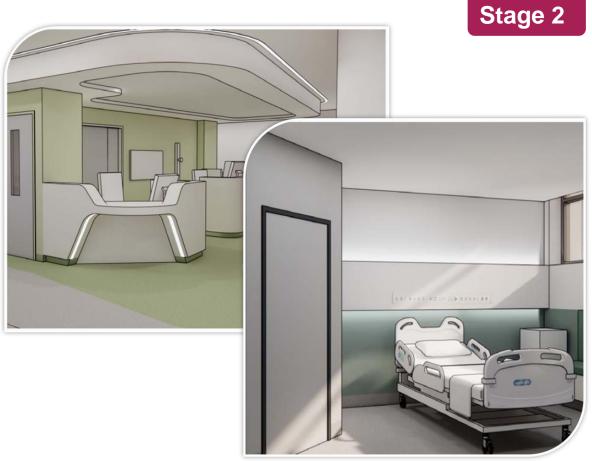
## Phase 3 – Wider consultation

Community asked to provide feedback on schematics and detailed design



# Co-designing the new facility





Where to next?

- Co-design from the very beginning. Develop shared principles and objectives.
- Managing stakeholder expectations
- Feel the fear and do it anyway
- Test and the flexibility to adapt
- Hearing from a small group of seldom heard voices can be incredibly valuable

# Thank you to our partners...













- Prof. Andrew Way, AM, CEO Alfred Health
- Prof. Jenny Hoy, AM, Director HIV Medicine, Alfred Health
- Ursula McGinnes, Executive Director, Public Affairs and Communication, Alfred Health
- Tim Chestney Patient Experience Officer, Alfred Health
- Danny Vadasz, Former CEO HIC

Further information - <u>www.alfredhealth.org.au/hiv-future-care</u> Contact - <u>comparticpation@alfred.org.au</u> Questions and answers session – over to you

