



Clínica de Familia  
La Romana

# Annual Report 2016



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## Executive Summary

Clínica de Familia La Romana had a year of major growth in 2016. By the end of 2016, the clinic reached a total of 11,958 clients (10.7% more than in 2015), of whom 9,213 (8% more than in 2015) came to Clínica de Familia to receive a total of 126,477 services, while the Maternal-Infant Health Annex (MAMI, for its Spanish acronym) provided 11,177 services to 2,745 adolescent clients (7% more than in 2015). The percentage of clients enrolled in the HIV care and treatment program remained constant compared to 2015, at 21%, of whom 5.8% were children under 18 years of age and 49 were pregnant woman, all of whose children, with one exception, were born HIV-negative. This year, as part of the clinic's primary care services, increased emphasis was placed on caring for clients' mental health by providing 69% more consults in the Psychology and Counseling Department than in 2015 and by creating a new counselor's position to provide additional support to newly enrolled clients and those at risk of loss to follow-up in the care and treatment program. The Social Work Department expanded its services, offering a microcredit program to clients in order to improve their quality of life and economic independence and granted approximately US\$28,000 in varied forms of socio-economic support. In the Community Health Promotion Program, 30 families benefited from the kitchen garden program, and the program completed 3,111 home visits to vulnerable clients, 564 more than in the prior year. This year we also celebrated our twelfth Camp Hope and Joy where 72 children and adolescents living with HIV participated. Thanks to enormous efforts in education and prevention, the Women's Health Program achieved a 55.4% decrease in sexually transmitted infections among clients who attended their appointments and performed 50% more Pap smears than in 2015. This year, the Men's Comprehensive Health Program concentrated its efforts on reaching men who have sex with men (MSM) and transgender individuals and successfully ensured that 7% more of these individuals attended their appointments than did in 2015. The Laboratory tended to 6,094 more clients than in 2015 and hired a new nurse to perform sample collection, to ensure full coverage of this service. The MAMI received 576 new pregnant adolescent clients, put forth enormous effort in delivering talks on sexual education and family planning in the community, and performed 5% more HIV tests than in 2015 (1,350). The Student Program signed an agreement regarding community medicine rotations with the Pontificia Universidad Católica Madre y Maestra (PUCMM) as well as with the medical and nursing schools of the Universidad de las Américas – Puebla, Mexico and received a total of 65 students, of whom 43% were Dominican. With the support of Columbia University, we began preparations for a new research study to better understand the effects of the Zika virus. At the personnel level, we said goodbye to the managers of our HIV unit and Social Work Departments who retired this year, as well as our Research Director who accepted a new position at the the office of the US Centers for Disease Control and Prevention in Santo Domingo. A new building was constructed on our premises to improve work spaces and we hired 24 new staff, as part of a project financed by APC/USAID.

## Message from the Executive Director

The year 2016 was a great year for Clínica de Familia, with many achievements to celebrate. In nearly all programs and services, we saw an increase in the number of clients coming to the Clínica de Familia and MAMI. This constant and consistent growth resulted in the creation of a new building with more office space and enabled us to offer improved service quality to our clients. Several milestones this year include: the installation of new laboratory equipment to perform CD4 and viral load testing for HIV, the start of a new APC/USAID-financed project which gave us the opportunity to implement the "Test and Start" strategy, and the commemoration of World AIDS Day with a science fair for high school students in December. In 2016, beyond observing an increase in the number of clients arriving at our health centers, we experienced increases in both our overall budget and the number of projects and programs which we are overseeing. Without a doubt, this growth is helping us to achieve our mission of improving the health of families in the eastern region of the Dominican Republic.



## Introduction

Clínica de Familia La Romana, located in La Romana, Dominican Republic, is a non-profit community clinic. It provides primary care services, various medical specialties, HIV care, family planning, and diagnostic imaging and laboratory services. Additionally, it has programs focused on specific populations, such as vertical transmission prevention for pregnant women with HIV, medical care and education for sex workers, a men's health program, and a separate site focused on adolescent care. Psychosocial services include social work services, psychology consults, counseling for HIV tests, adherence counseling, home visits by the community health promoters, support groups for people with HIV, summer camp for children with HIV, and HIV prevention in the bateyes (communities of sugarcane workers). Clínica de Familia is also dedicated to the professional development of international and Dominican students and residents. The vision of Clínica de Familia is to have a community where all families have access to health services in order to enjoy a good quality of life. The mission is to improve the health of families in the Eastern region of the Dominican Republic, including vulnerable people, through comprehensive health services, education, and research. We are committed to working with dedication, respect, confidentiality, empathy, and love, free of stigma or discrimination based on race, nationality, gender, sex, or sexual orientation.

## History of Clínica de Familia

Dr. Stephen W. Nicholas, a pediatrician who trained in New York, was a pioneer in providing medical care to children with HIV, starting in the 1980s, in Washington Heights and Harlem, New York. He realized there were many children with HIV in the Dominican Republic and in 1999 travelled to La Romana, Dominican Republic to better understand the problem. At that time, there were no medications available in the Dominican Republic to treat HIV. For this reason, Dr. Nicholas created the Columbia University IFAP Global Health Program, which later became the first program in the Eastern Dominican Republic to prevent vertical transmission, treating pregnant women with HIV and their children. In 2004, IFAP collaborated with the MIR Foundation, the Adoratrices Sisters, and the Ministry of Public Health to establish a clinic providing family-centered HIV care, becoming one of the first health centers in the country to provide antiretroviral therapy to its HIV clients. What started as a program to prevent the vertical transmission of HIV from mother to child, very quickly expanded its mission from giving medical care and psychosocial support to women with HIV and their newborns to also including their families and other vulnerable populations. In 2008, MAMI opened, offering specialized services for adolescents, including prenatal care, family planning, gynecology, pediatrics, consults for young men and various sexual education programs in schools and in the community. Today, Clínica de Familia La Romana is an independent, Dominican non-profit organization, recognized as a model of comprehensive health services in the Dominican Republic.



## **Clinical HIV Services**

### **Medical Team**

Clínica de Familia, registered as an official HIV clinic by the General Office of Sexually Transmitted Infection & AIDS Control, provides free antiretroviral therapy and holistic care for clients with HIV. In 2016, the clinic's HIV unit (SAI, for its Spanish acronym) experienced a dynamic year, with a number of personnel changes. In mid-April, following the retirement of the SAI manager, a new department manager was internally promoted. Additionally, new doctors and nurses were also hired. At the end of the year, the team consisted of seven general physicians, five nurses, one gynecologist-obstetrician, and one internist.

### **Adult HIV Care**

Significant changes took place in 2016 related to client services. At mid-year, the national norms for minimum CD4 count were increased, allowing a greater number of clients to be initiated on antiretroviral therapy. In the fourth quarter, we began the Test and Start strategy, as part of a national PEPFAR pilot project, meaning that any HIV-positive client could begin antiretroviral therapy (ART), irrespective of her or his CD4 count, with the goal of improving their overall health. As a result of these changes, a total of 219 new clients were enrolled in the care and treatment program as well as 257 who began ART. In 2016, 103 clients switched their treatment regimen; of those, 45 made the change because of an allergic reaction or other adverse effects, 50 because of therapeutic failure, and eight because of changes of the national treatment guidelines. At year's end, 37 clients were lost to follow-up, 64 transferred to other SAIs, and 156 clients formerly lost to follow-up were re-integrated into treatment, 11% more than in 2015. As of December 31, 2016 there were a total of 1,690 active adult clients, of whom 1,611 were enrolled in ART. In 2016, the HIV program performed 18,369 consults, 7.6% more than in 2015, with an average of 1,531 consults per month.

### **Medical Auditing**

The medical auditing group is a part of the clinical team in charge of ensuring that the clinical teams offer only the highest quality client care and that all medical records are correctly filled out. To do this, the department utilizes a database to track key indicators. In 2016, work volume and the demand for efficiency and effectiveness grew such that, by the fourth quarter, the group included two doctors, which occasional additional support from a nurse.

### **Pediatric and Adolescent HIV Care**

The Pediatrics Department offers medical consults to children with HIV, newborns who were exposed to HIV at birth but who have an undetermined diagnosis, and HIV-negative children who are affected by HIV (they may have HIV-positive family members who consult at Clínica de Familia). Through December 2016, the Pediatrics Department had enrolled 135 HIV-positive children, all on antiretroviral treatment, and six of which were newly admitted to the program in 2016.

This year we worked with eleven clients who were lost to follow-up to re-start their antiretroviral therapy. Nine of these individuals were reconnected to treatment, one continued to be lost to follow-up, and one passed away in December 2016 from causes related to poor adherence to treatment. Within the pediatric department, 1,037 consults were performed in the following categories: 654 consults among children with HIV, 201 consults among children of undetermined HIV status, and 182 consults among HIV-negative children.

In 2016, the Pediatric Nutrition Program continued providing support to 20 under-nourished children and implemented new guidelines for program enrollment, follow-up for enrolled children, and graduation from the program for children whose nutritional status has improved sufficiently. We began a "nutrition party" program which were held every four months and provided additional education and support for the children in the program and their families.



We continued to conduct annual pediatric department audits to improve our services. This year, we conducted the first audit of the program for HIV-exposed infants, which helped us to implement several changes to documentation and follow-up. At the end of the year, we also initiated the process for maintaining our pediatric and nutrition program databases.

## Vertical Transmission Reduction Program

The Vertical Transmission Reduction Program is a collaboration between Clínica de Familia La Romana and the Hospital Francisco A. Gonzalvo, the provincial public hospital, to strengthen and improve services related to the vertical transmission of HIV with the goal of having no child born HIV-positive.

During 2016, the program continued its coordinated work between the Clínica and Hospital Francisco A. Gonzalvo, offering both prenatal and postnatal care to HIV-positive women, as well as pediatric consults for the newborns and other children of women enrolled in the program. The Clínica de Familia's support includes providing staffing and technical assistance to the hospital in the areas of home visits, follow-up, monitoring and evaluation, and medicine provision to newborns in the program. All of this occurs daily thanks to a team comprised of: a program manager, a program

coordinator who is also a licensed nurse and provides medical support during prenatal consults at the Clínica, a home visitor, and an auxiliary nurse who serves as a direct link to the hospital and provides follow-up there.

The program includes three HIV tests for pregnant women: a rapid test before or during the first prenatal consult, a second test at three months gestation, and a third at the hospital when a woman goes into labor.

In 2016, the total number of women who delivered while enrolled in the program at the Clínica de Familia was 49, 36% percent more than in 2015, with 100% being diagnosed using an HIV antibody rapid test before delivery. Of the children who were born in the program in 2016 (51), including two pairs of twins, we had 44 HIV-negative results. Of those that do not have test results, two children died before the test was performed; one from unknown causes and the second from respiratory problems. There was one HIV-positive newborn whose mother was diagnosed with HIV at the moment of delivery in the hospital. This mother did not accept her condition, refused to receive the necessary care from the team, and did not adhere to the vertical transmission prevention protocol. In addition, there are four babies whose status is unknown pending testing in 2017; two of these babies are unable to be located and two (a pair of twins) have an unknown status because their mother has not accepted her condition and has refused testing.

**Table 1. Summary of HIV Care Service Statistics, 2016**

Comprehensive Care Program			Vertical Transmission Program	
Indicators	Adults	Children	Indicators	N
Newly enrolled	219	6	Women detected before labor who received prophylaxis	49
Started on ART	257	6	Newborns who received AZT in suspension for 6 weeks (1 pair of twins)	50
Deaths	37	1	Women who receive formula for their babies	48
Transfers	64	0	Women who receive post-partum, HIV care	48
Lost to follow-up	253	1		
Recovered from loss to follow-up	165	9		
Total active clients on ART	1,611	135		
Total active clients pre-ART	79	0		
Total number of active clients	1,690	135		
Total number of consults	18,369	1,037		





In March of 2016, as a new addition to the educational interventions program, we created quarterly support groups for HIV-positive mothers in the vertical transmission program with the goal of providing better follow-up, improving adherence by offering nutrition packages, and offering a three-hour space in which mothers can share their concerns, experiences, and doubts about motherhood. A total of 31 women participated, of whom 23 improved both their treatment adherence and their family situations. We celebrated nine baby showers in which 34 pregnant women and new mothers participated. The goal of these baby showers is to reduce the vertical transmission of HIV, to reduce infant mortality, and to improve maternal-child health. Each baby shower includes an educational talk about baby care, family planning, and medical adherence, among other topics, with a pair of counselors, a gift exchange, and snacks.

## **Psycho-Social HIV Services**

### **Social Work Department**

The Social Work Department is in charge of conducting internal and home-based socio-economic evaluations for Clínica de Familia clients, which enable us to more equitably distribute available resources to benefit the most vulnerable individuals. In 2016, several personnel and administrative changes were implemented. At the end of the first quarter, the department manager retired, at which point the social worker was promoted to department manager and two additional individuals were trained to offer additional support to the department. At the administrative level, in order to better monitor and evaluate services offered, the department created a database in REDCap, which allows them to create a variety of reports about service provision. In addition, by mid-year, the department began to organize its client records according to record number for SAI clients and alphabetically for general medicine clients. In addition, there was a remodel of the physical space of the department, and evaluation forms were updated, which enabled quality of service

improvement and reduced wait time. Because of these personnel changes, the department was only able to conduct 65 re-evaluations of clients who have received social support for more than two years and 29 socio-economic evaluations of new HIV program clients - of those clients, 41% are living in extreme poverty. During this period, the department awarded different types of economic support including: covering the cost of external consultations or specialized studies that the Clínica does not provide, purchasing medications, or paying for transportation to appointments in order to guarantee adherence. As in years prior, transportation coverage was the most solicited service, with RD\$571,487 awarded to clients, 5% more than in 2015. Transportation payment was also provided to assist with external consults; we provided RD\$30,800 for school transportation to ensure that adolescent clients were able to attend school as well as RD\$211,205 in payments for external studies. Food insecurity continues to be a reality among many of our clients, but thanks to donations from organizations such as USAID and the World Food Programme, we were able to disburse 2,372 nutritional rations. We also provided vitamins to 42 children in the HIV care program and approximately 1,500 peanut bars to malnourished children. Within the nutrition program, we continued to offer monthly support by providing packets of balanced foods to 20 malnourished children and an average of 25 bedridden or fragile adults in the program.

During the year, we continued to reinforce our ties with institutions such as Diagnóstica Social, Asociación Dominicana de Rehabilitación, Instituto Dermatológico and Hogar Nuestros Pequeños Hermanos, with the objective of being able to cover all of our clients' needs and ensure the best services at a minimum cost. The social work department continued to offer support and accompaniment to adolescent clients to acquire their legal identification documents.

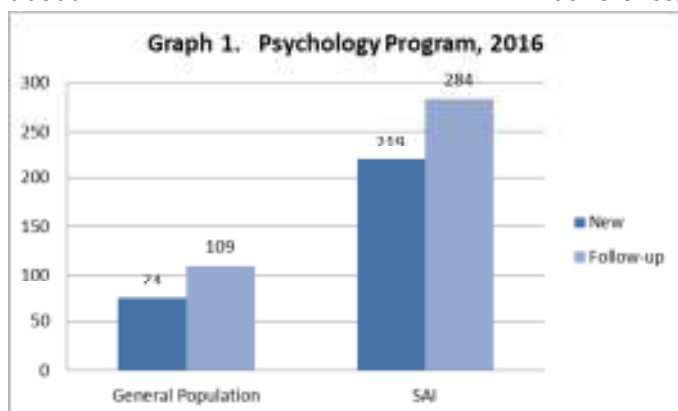
New this year, the department began a microcredit program for SAI clients whose goal is to help clients achieve economic independence and improved quality of life through the creation of small businesses. At the



end of the year, the department had granted varied forms of support 2,640 times to both new and long-term clients; of these, 807 were granted to men and 1,833 to women.

## Psychology and Counseling

At the end of 2016, given the growing number of consults, the psychology and counseling department hired a third psychologist. They provide psychology consults and mental health to children, adolescents, or adults. During the year, the consults increased 69% (686) compared to 2015, with 43% new clients. Of the total number of clients with psychology consults, 73% were enrolled in the HIV care program (See Graph 1). In 2016, the department implemented several new forms, including a form for external referrals, two forms for self-assessment, and a psycho-emotional questionnaire about adherence.



New this year, the department began a pilot project called "Opening Doors" with a transgender client, with the purpose of understanding the emotional state and impact of a HIV diagnosis on vulnerable populations. For these interventions, the department used a model made up of eight different modules as well as relaxation and self-awareness sessions. Thanks to these interventions, the client was able to overcome various crises in her personal life and continue to be conscious of the importance of remaining adherent to her medications, to the point that her viral load is nearly undetectable.

Clínica de Familia offers counseling before and after each HIV test. By the end of December 2016, and through the HIV pre-test counseling services, the department

performed 4,996 HIV tests, and for those who attended post-test counseling, provided 4,986 results; ten women left before concluding the pre- and post-test counseling sessions. The tests identified 270 individuals with positive results, 51 of who were previously enrolled in the SAI or who did not wish to enroll in HIV care. Given the consistent increase in demand for HIV testing, at the end of the year, the department hired a second, part-time counselor thereby expediting the client flow and ensuring the quality of the pre- and post-test counseling. Furthermore, during this year, the department created a database for tracking HIV test data in order to guarantee the correct documentation of key populations. This database served as a model of quality of care at the national level for other non-governmental organizations.

In the adherence counseling program, a number of changes took place to ensure that clients know their rights and responsibilities related to living with HIV as well as the importance of attending all medical appointments and adhering to antiretroviral treatment. The department implemented and updated several departmental forms to offer better service and collect more precise client information about the barriers and/or limitations that prevent clients from remaining adherent in order to offer more opportune solutions. In 2016, the department created a new position of client navigator, and hired two individuals to provide support in the active search and recovery of clients lost to follow-up as well as to offer ongoing support once those clients were re-enrolled in the clinic. The navigator's role is to ensure clients' retention in the program as well as to offer support to new enrollees.

The department also facilitated monthly support groups for adults living with HIV, covering a variety of topics, as well as continued to implement the HIV disclosure protocols with children.





## Community Health Promotion Program

Since its beginnings in 2006, the Community Health Program has conducted home visits with clients with HIV in order to provide palliative care and support. The team is comprised of one supervisor and five health promoters who support treatment adherence, educate and make referrals, and, in some cases, accompany clients to these referrals both at the Clínica de Familia and elsewhere.

In 2016, the community team provided community-based services to 345 clients, of whom 127 were new clients. The team conducted 2,266 visits to new and long-term clients in the city of La Romana, bateyes and surrounding areas. The team conducted 316 visits to clients in fragile conditions including clients with tuberculosis who required palliative care and visits to children in the nutrition program (see Table 2).

This year we continued with the kitchen garden program for clients living with HIV and their families, achieving enrollment of 10 more families, for a total of 30 families enrolled in the program. This project is supported by the Dominican Ministry of Agriculture and the World Food Programme who provide gardening tools, dirt, and seeds as well as conduct monitoring visits to evaluate progress of the gardens. This year, with collaboration from these organizations, the community health program conducted

two trainings: how to cultivate and nourish oneself with the products cultivated in one's garden and how to make natural, homemade insecticides.

## Support Groups



During the year, the Psychology Department and the Social Work Department, with the support of the Community Health Promotion Program, conducted 18 support group activities, 12

support groups for HIV-positive adults and six for the families of adults living with HIV; 414 clients participated in these support groups, representing a 10% increase from 2015. These activities are intended to allow clients and/or family members to balance their emotional and physical circumstances with that of their current health status in a manner that is respectful and responsible to both themselves and others. The support groups touch on themes such as: family, adherence, HIV and STIs, self-esteem, and other topics in order to promote better comprehension, acceptance, and involvement in their HIV care, using a framework of positive, personal empowerment. The support groups also offered social activities, one of which was a trip to a nearby river, intended to strengthen friendships and mutual supports formed within the group.

In 2016, we conducted 11 support group sessions for adolescents in which, on average, 20 youths between ages 12 and 22 participated each month. Topics included adherence, drugs and alcohol, self-esteem, discrimination, pain and loss, and gender and sexuality, among others. Each session also touched on adherence to reinforce this vitally important topic and to improve adherence among the participants. At year's end, the adolescent support group conducted an evaluation and brainstorming session for next year's groups. According to this survey, the most impactful themes from 2016 were adherence, team work, and solidarity with others.

Table 2. Summary of the Community Health Program, 2016

Indicators	No.
Total clients	345
New clients	127
Contacts with clients	2,266
Contacts with female clients	1,208
Contacts with male clients	714
Contacts with senior clients	211
Contacts with adolescent clients	231
Contacts with pediatric clients	165
Clients with tuberculosis diagnosis	33
Fragile clients	199
Contacts with fragile clients	283
Total family members reached	1,046



## Activities for Children with HIV

### Camp for Children with HIV

In its twelfth year, Camp Hope and Joy 2016 received 35 boys and girls ages 6-10 in its first week and 37 adolescents ages 11-17 during its second week for fun activities including sports, arts and crafts, nature activities, and life skill development. The motto of this year's camp was "The Best Part of your Life is You" with a nautical theme. Each activity and group focused on topics related to personal development, self-esteem, and adherence. The camp was located in Jarabacoa at the Mount of the Transfiguration camp and included dormitory spaces, activity rooms, a large, recreational green space, a cafeteria, and nearby river. As in years past, the campers were divided in their dormitories by sex and age, and the dormitories were clean and comfortable.

The camp had 32 volunteers including 21 camp counselors, four activity leaders, and two assistants. We were also assisted by one Peace Corps volunteer and received medical assistance from two doctors and two nurses.

This year's activities placed special emphasis on the camp's theme by using a Ricky Martin song which also



focused on "the best part of your life is you". Camp activities focused on the camp's principal values: love, respect, and security, and at the welcome event, the volunteers dressed as sailors, according to this year's camp theme, and simulated a port with a bridge at which they welcomed the campers. During the day, the campers participated in area rotations in groups, again

divided by age, where they learned about marine life as well as how to respect and care for the environment. As part of the daytime activities, the children had the opportunity to explore their environment, going out into the community and visiting the Environmental School of Jarabacoa. During this community visit, the children had the opportunity to get to know and walk through the forests where they learned about plant species and the importance of rainfall. Every night there was a special activity such as a bonfire, a theater performance, a movie night, etc. Beyond promoting self-esteem and healthy fun for each camper, these activities served to uphold the camp's motto and placed a special emphasis on the idea that the most important things in the world are the campers themselves. One night, a ceremony and small presentation was given in remembrance of the life of Luisana, our beloved Activities Coordinator, who passed away in April 2016.

New this year, two former campers, who are now 18 years old, were given awards for being models of adherent adolescents and were invited to spend two days at camp. Their presence was invaluable and served as motivation for the older campers during the second week. In their welcome address, these two adolescents urged the campers to maintain good adherence so that they too could come back to visit camp after they "graduate". Finally, during the closing ceremony, in addition to their arts and crafts, the campers took away two special souvenirs of their time at camp: a DVD with video and photos from the week as well as a camp t-shirt. Clínica de Familia gave each camper a donated backpack full of school supplies, candy, and books at the end of camp.

The majority of the camp's financing came from individual donations from the United States. Local Dominican individuals and businesses contributed 15% of this year's budget.



## Excursions and Christmas Party

This year, 26 boys and girls from the pediatrics program at Clínica de Familia La Romana went on an excursion to the Children's Trampoline Museum in Santo Domingo, where they enjoyed a full day of adventures. The first experience of the day was a trip through the universe to the center of the earth followed by a guided trip through



various rooms where the children learned about the Paleo world, energy, ecology and the importance of caring for our planet, Dominican national parks, and humanity and the diversity of cultures and society in the Dominican Republic. In each of the rooms, the children had the opportunity to listen to the guides – who told stories, engaged the children in participatory activities, and ensured that the information they shared was fully understood.

In the month of December, we celebrated our customary Christmas party where 27 children had the opportunity

to enjoy themselves, take photos, participate in activities with clowns, participate in competitions, win toys and bicycles, eat and be visited by "El Torito" (the mascot of the La Romana baseball team, the Toros del Este). At the end, all of the children received a Christmas gift and ice cream.



For the adolescents, we held a Christmas party where 31 adolescents enjoyed singing and sharing their memories from the year. All received gifts and special prizes were awarded to those who maintained good adherence to their medications in 2016.

## Community HIV Testing Program

In October 2016, within the framework of the new "test and start" project financed by APC/USAID, we began community prevention and HIV testing activities focused on, but not exclusive to, key populations including: men who have sex with men (MSM), transgender individuals, and sex workers. The project's principle objective was the detection of new cases of HIV within these communities in La Romana in order to enroll individuals in the Clínica

Table 3. Rapid HIV tests performed by population and testing site, 2016

Place	Population	HIV Pre-Test Counseling	HIV Post-Test Counseling	Negative Results	%	Positive Results	%
Clínica de Familia La Romana	Men	1,617	1,617	1,477	91	140	9
	Women (not pregnant)	3,111	3,101	2,983	96	118	4
	Women (Pregnant)	268	268	256	96	12	4
	<b>Total</b>	<b>4,996</b>	<b>4,986</b>	<b>4,728</b>	<b>95</b>	<b>270</b>	<b>5</b>
Maternal-Infant Health Annex, MAMI	Men	14	14	14	100	0	0
	Women (not pregnant)	161	161	160	99.4	1	0.6
	Women (Pregnant)	1,175	1,175	1,173	99.9	2	0.1
	<b>Total</b>	<b>1,350</b>	<b>1,350</b>	<b>1,347</b>	<b>99.8</b>	<b>3</b>	<b>0.2</b>
Community Operatives	MSM	350	350	348	99.5	2	0.5
	Sex Workers	215	215	211	98.2	4	1.8
	Trans	1	1	1	100	0	0
	<b>Total</b>	<b>566</b>	<b>566</b>	<b>560</b>		<b>6</b>	



and offer them health services and treatment. For this project, we have a team of seven trained health promoters who recruit members of the key populations from sites that have been previously identified, where our promoters make referrals for HIV testing and provide pre- and post-test counseling as well as information about HIV and its prevention.

## **Women's Health Program**

The Women's Health Program was created to reduce the prevalence of sexually transmitted infections and HIV among female sex workers through a diverse package of primary care services in order to improve the quality of life of this group of vulnerable clients. This program takes place in two environments: in the community and in the Clínica de Familia, beginning with education and recruitment from community establishments.

The team is comprised of a supervisor, a coordinator, and a health promoter, in addition to the clinical team. In 2016, the team performed 1,586 consults for sex workers, of whom 37% were new to the Clínica, and diagnosed 145 cases of STIs, 55.4% fewer than in 2015. Beginning in October 2016, in order to provide better services to the entire sex worker population, the program began focusing on recruiting women who not only worked in brothels, but also who worked independently and who, because of their economic condition and primarily street-based work, are at greater risk of experiencing violence, discrimination, and generally have less access to health services.

During the year, as part of the educational component, we implemented 46 group interventions both in the brothels and in the Clínica de Familia, with an average of 40 participants per intervention. These groups discussed topics such as the importance of HIV testing, STIs, negotiation of correct and consistent condom use, violence reduction (domestic, gender-based, family, social, and structural), self-esteem, family planning, the use and abuse of drugs and alcohol, the importance of annual pap-smears, and self-care. Thanks to these

activities, in 2016, we had 176 clients who came to the Clínica to have a pap-smear (50% more than in 2015).

Another component of the women's health program are the home visits, both in established homes and in brothels where these women work and reside. These visits are conducted in order to monitor the women's work-place situations and overall health. The team tends to any and all issues the women face and provides appropriate guidance, primarily by motivating them to seek medical services at the Clínica de Familia, including psychological support, for which there is high demand.

## **Men's Comprehensive Health Program**

Since 2014, Clínica de Familia has offered sexual health services specifically for men with a focus on the prevention, diagnosis, and treatment of STIs and urologic infections. The program also provides education about risk reduction, prevention of HIV and other STIs, condom use, HIV testing and counseling, family planning, and psychology referrals as necessary. In 2016, we began providing male circumcisions, and conducted a total of seven circumcisions this year.

This year we continued to receive financial support from APC/USAID; with this assistance, we created the Health Promotion Department at the end of the year, and hired five health promoters in charge of coordinating, planning, and organizing strategies that promote health and HIV and STI prevention as well as work to minimize stigma and discrimination among key populations including the gay and transgender communities and men who have sex with men. The department offers primary care services, education, recruitment for HIV testing, and STI testing, as needed. Thanks to this new strategy, the department increased the number of individuals from these key populations who have come to Clínica de Familia for medical care by 7% since 2015. The department also modified its schedule, in order to better serve the target populations. Only 30 cases of STIs were diagnosed in the program, 62.5% less than in 2015. In addition, the department hosted an educational



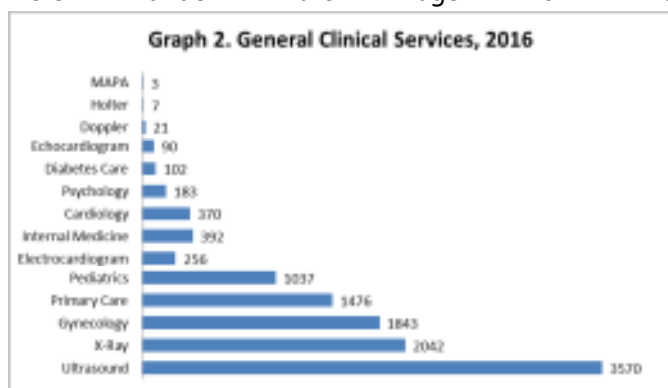


lecture for the tourism police (CESTUR) which included information about the Clínica de Familia and our STI prevention services.

Table 4: Men's Health Program, 2016	Total
Total consults	250
Consults with men who have sex with men	99
Consults with male sex workers	148
Consults with transgender clients	2
First time consults	160
Subsequent consults	90
Circumcisions	7
Lubricants distributed	6,435
Condoms distributed	16,802

## General Clinical Services

Clínica de Familia offers a variety of clinical services open to the general public. These include primary care, gynecology, obstetrics, pediatrics, diabetes care, cardiology, family planning, and psychology. Imaging services include: ultrasound, Doppler, X-ray, echocardiogram, electrocardiogram, holter, and MAPA. This year, 7,284 clients sought a variety of consults and services, an 8.3% increase over 2015, and of whom 281 were under the age of 18.

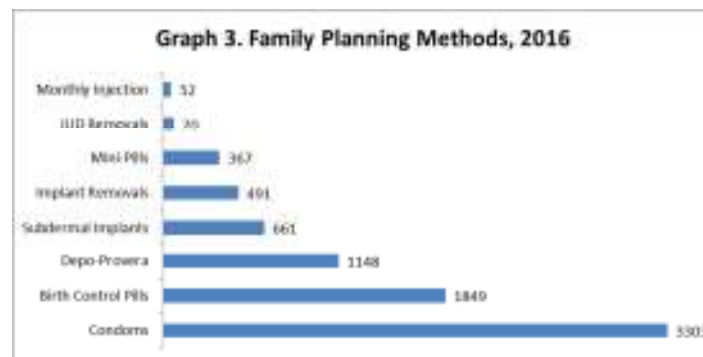


## Family Planning

The family planning program meets the needs and demands of our clients seeking birth control methods. The department offers counseling and education to each client seeking a method as well as information about family planning, helping them to choose the method that best aligns with their health and needs. Our center

offers several birth control methods including: the pill, the mini-pill, injections (both three and one month options), intrauterine devices (IUD), subdermal implants (Implanon), as well as condoms and lubricant. The department also offers emergency contraception.

In 2016, the department assisted 3,671, 42% of whom came in for the first time. The most frequently elected method was the pill, with 1,849 provided over the year. The department also placed 661 implants. The department conducted 49 educational talks in which 1,584 clients participated. These talks discussed topics such as correct condom use and other family planning methods. In 2016, clients showed a greater preference for the IUD than in years past (with 32% more placements than in 2015).



## Laboratory

In 2016, the laboratory attended 19,437 clients, 69% more than in 2015, and conducted 81,632 tests. Our laboratory offers CD4 testing and, beginning in August 2016, we now use a FACSpresto machine. In addition, beginning in October 2016, the lab now utilizes a GeneXpert machine for viral load and tuberculosis testing. The most widely sought tests in 2016 were complete blood counts (7,577) and HIV tests (5,608). This year the lab received technical assistance from the U.S. Centers for Disease Control and Prevention to improve the quality of the HIV tests. In 2016, both national and international organizations visited the lab to provide assistance using the newly installed equipment and ultimately to improve our services. A new nurse also joined the lab team.



## Pharmacy

The pharmacy at Clínica de Familia is in charge of the medications donated by the Ministry of Public Health and other organizations as well as those purchased by Clínica de Familia. Antiretroviral medications are donated by the Ministry of Public Health. Painkillers, antibiotics, and medications for opportunistic infections, among others, are purchased by Clínica de Familia or donated by other organizations.



The pharmacy works with the Social Work Department to purchase medications for clients in the HIV program. They utilize two inventory systems (SUGEMI-1 and MONICA) to control the movement and ordering of medications and supplies. The departments also utilize Kardex to manually control medications and supplies; supplies are provided by the Ministry of Public Health. The most used medications are antiretrovirals, painkillers, antibiotics, and medicines for opportunistic infections.

In November 2016, the pharmacy received training from the Ministry of Public Health to strengthen its internal processes.

## Research Department

In mid-2016, there was a leadership change in the Research Department. Currently, we are concentrating on developing our own research agenda as well as assuring that Clínica de Familia is prepared to be a multi-study collaborator in both national and international

studies. Our interdisciplinary projects are focused on improving our clients' health.

In 2016, we are continuing with the Study of the Prevalence of STIs in Key Populations (EPIC, for its Spanish title) which began in 2015 and is a collaboration with Columbia University. This year, STI testing was conducted with both pregnant adolescents and female sex workers. In 2017, we hope to finish the study working with men who have sex with men and batey residents.

At the beginning of 2016, there was a Zika outbreak in several countries in Latin America and the Caribbean, including the Dominican Republic. As the effects of the virus on babies born to mothers who had Zika during pregnancy are still largely unclear, we began a collaborative study with Columbia University to monitor 200 mothers and their babies during the first 18 months of the baby's life. We will evaluate the babies during these 18 months to observe their growth and the development of their neurologic and cognitive systems in order to better understand the effects of the Zika virus.

We have several other studies at different stages of development in both the Clínica and in MAMI. We published three articles in 2016 about studies conducted at the Clínica de Familia in order to contribute to the international literature.

Table 5: Rapid HIV Tests Conducted by the EPIC Study during 2016

Population	HIV Pre-Test Counseling	HIV Post-Test Counseling	Negative Results	%	Positive Results	%
Men	0	0	0	0%	0	0
Non-Pregnant Women	57	32	30	96.5	2	3.5
Pregnant Women	0	0	0	0	0	0
<b>Total</b>	<b>57</b>	<b>32</b>	<b>30</b>	<b>96.5</b>	<b>2</b>	<b>3.5</b>





## **Medical Records**

The medical records department maintains all medical records from Clínica de Familia's different programs. 2016 was a year of growth for the department, which began utilizing new methods and tools to simplify its internal processes and allowing the department to combine records from the medical specialties. The department also began keeping records for the Men's Comprehensive Health Program. At mid-year, the medical records department transitioned to the supervision of the Medical Director, thus separating itself from the data entry department. This change led to improvements both in departmental performance and in communication with the clinical team; at the same time, the department hired two new office assistants to support with records keeping and work flow.

## **Data Entry**

The Data Entry department is in charge of entering all information pertaining to each SAI client's visits into both an internal database (which, at the beginning of the year, was initiated through "REDCap") and in the database of the Ministry of Public Health. Due to the same volume increase which impacted the SAI this year, the data entry department also underwent year-end changes in which the departmental office was expanded and the team hired a second, full-time data entry person.

## **Reception & Billing**

The Reception and Billing Department is in charge of receiving all Clínica de Familia clients upon their arrival and registering them for their appointment. In 2016 the department began using the REDCap system to register all appointments in order to improve our services by providing telephone appointment reminders to reduce the number of missed appointments. We also created a new protocol to help clients remember their appointments. Each client, after seeing the doctor and receiving her/his next appointment date, must pass through reception to confirm the appointment date and to receive a reminder about the importance of keeping that date. This year, the department hired a full-time

receptionist as well as added ARS Reservas, ARS Humano, and Primera ARS de Humano to the platform of accepted insurances.

## **Maternal-Infant Health Annex (MAMI)**

The Maternal-Infant Health Annex (MAMI) is the adolescent unit of Hospital Francisco Gonzalvo, with the support of Clínica de Familia. During 2016, MAMI continued its successful sexual and reproductive health programming in schools both in La Romana and in the bateyes, delivering talks on pregnancy, family planning, STIs, and HIV. Before the beginning of the 2016-2017 school year, the education team revised and updated its school-based material, improving the information and increasing opportunities for student



participation. The family planning department conducted 2,909 consults, which was less than the previous year due to problems with lack of supply of methods (see Table 7).

In 2016 we conducted several sessions for pre-adolescent students ages 9 to 13. This curriculum also underwent revision in 2016 with technical assistance from Planned Parenthood of the Great Northwest and Hawaiian Islands, who helped improve the lessons.

MAMI also began conducting pre- and post-test evaluations of the school-based talks to determine the impact of these talks on the adolescents. A group of peer educators, students from various local schools, showed interest in giving similar health talks to their communities. After three months of training, these individuals conducted a variety of educational activities including school-based educational sessions and



community outreach activities in parts of La Romana such as Barrio George and Caleta.

During 2016, MAMI strengthened its internal education program for adolescents receiving services on-site by implementing daily talks about topics including prenatal care, nutrition, breast-feeding, newborn care, and HIV and STI prevention. For Day of Nonviolence Against Women (November 25), a guest psychologist gave a talk about how to prevent violence and how to manage violent situations. Two support groups for pregnant adolescents were also initiated with approximately 30 participants.

For the fourth consecutive year, MAMI, together with Clínica de Familia, and with the



support of the Provincial Health Office and the Ministry of Education, commemorated World AIDS Day on December 1st with a Scientific Symposium where students from seven schools presented topics related to HIV. Prizes were awarded to the best presentations and over 100 people were in attendance – primarily students from various middle and high schools. This year approximately 40% more individuals participated compared to the previous, and a special prize was awarded to the presentation voted to be the audience's favorite.

The family planning program has continued successfully, despite several months of supply stock-outs from the Ministry of Public Health. One of the department's accomplishments is the constant increase in the number of clients who request methods and who have never been pregnant. The department also created a new database in REDCap to transfer family planning clients' records from physical to electronic versions, which will ultimately facilitate better reporting and statistics.

## Student Program

In 2016, the student program received a total of 65 students and health professionals (a 22.6% increase from 2015). It is important to note that the number of Dominican students and/or medical residents (28) increased 311% from 2015, while the number of international students and/or health professionals decreased by 17.8%. The majority of program participants were medical, nursing, and public health students, medical interns, medical residents, and volunteers. Students from the United States conducting medical rotations came from Columbia University (schools of medicine, public health, and nursing), Northwestern University, the University of Michigan, the University of Texas Medical Branch at Galveston, the University of Massachusetts, and the University of Illinois in Chicago. For the fourth consecutive year, six medical interns from the Universidad Pedro Henríquez Ureña (UNPHU) in Santo Domingo rotated at the Clínica. For the first time, four students from the Instituto Tecnológico de Santo Domingo (INTEC) and three students from the Pontífica Universidad Madre y Maestra (PUCMM) completed their social medicine rotations at Clínica de Familia. Finally, the program received four nursing students from the vocational school, Luis Heriberto Payan, who completed their nursing internships.

Beyond clinical rotations and observations, students and medical residents conducted public health projects and/or



research studies. Several projects have included program evaluations in the HIV counseling program and the adherence and patient education program as well as assistance with the EPIC study. For the first time, Clínica de Familia received a medical student from the Global Health Research Program, a one-year training program



in global health which represents a collaboration between IFAP and the Office of Global Programs at Columbia University. Three graduate volunteers (from Dartmouth, Vanderbilt, and Wellesley Universities) and eleven medical residents from Columbia University also participated in the program.

In March, Clínica de Familia La Romana also established a collaboration with Project Pyramid at the Owen School of Management at Vanderbilt University. This program sent four multidisciplinary students to facilitate a market study and conduct an analysis for future clinical services. These results contributed to the Clínica's strategic plan.

Finally, and representing the program's largest accomplishment this year, memorandums of agreement were signed between the Clínica, PUCMM, and medical and nursing faculty of the University of the Americas – Puebla, Mexico.

## Quality Improvement

In 2016 Clínica de Familia formed the Infection Control Committee with the goal evaluating and improving infection control at the clinic. This brought the Clínica's total number of committees to ten. Each committee works to achieve its unique mission while improving the clinic's quality, efficiency, equity, and security and simultaneously ensuring that clients are well-informed and providers efficient. Each committee is made up of groups of between five and twenty team members who work to accomplish the committees' goals through activities and monthly or bi-monthly meetings in which they develop their committee action plans as a team.

**Committee for Continuous Quality Improvement:** This committee works to improve service quality at the clinic and is focused on actively searching for solutions to problems that arise through a variety of methodologies, in order to ensure that our clients are well-informed and our providers efficient. In June 2016, the committee created a procedural manual for conducting a cascade analysis, which was later put into practice by two students, as well as created and implemented new forms for the Community Program and Adherence Counseling.

Finally, the committee conducted an audit of all medical records for clients in the SAI program in December 2016 in order to identify and re-enroll clients lost to follow-up.

**5S Committee:** Created in 2015, this committee has continued creating a culture of organization, specifically of the physical spaces in the Clínica. During 2016, several of the Clínica's personnel applied the Japanese model of the 5Ss, and prizes were awarded by the committee to all those who completed this piece of the committee's action plan. Half of the Clínica's 31 consulting rooms and offices received this prize.

**Industrial Safety Committee:** Also created in 2015, this committee covered topics such as: occupational risks (accidents, occupation-related, biologic), security signage, safety regulations, form-creation (inspection, auditing, and accident inquiry), utilization of proper ergonomics, and bi-monthly trainings by INFOTEP.

**Gender Committee:** In 2016, the committee finished a manual for use in the Clínica on approaching gender-based violence. The committee also identified institutions in La Romana who comprise a list of references for clients facing gender-based violence. A screening form to identify violence among Clínica clients was also finalized and an anti-violence poster was designed. At the end of 2016, the committee began formally registering reported cases of violence and subsequent accompaniment of those clients. The committee also visited Nucleo de la Mujer in Santiago as part of a collaborative strategy for the defense of clients' rights; as the fruit of this collaborative network, the Clínica received two trainings from Profamilia and Planned Parenthood of the Great Northwest and Hawaiian Islands about gender-based violence.

**Women's Health Program:** This multidisciplinary team works to offer appropriate and efficient services while looking to improve service quality and resolve challenges with the Women's Health Program. In April 2016, the committee conducted an audit of the program's medical records to identify gaps and verify that the new medical histories were correctly filled out.



**Men's Health Program:** This multidisciplinary team works to offer quality health services through a package of services in a secure space which permits better client retention. The manager of the SAI joined the committee this year.

**Pediatrics:** This team works to expand interdisciplinary communication, look for new ideas and solutions to problems, and monitor the department's progress in order to improve the health of our pediatric clients. During 2016, the committee created a template for the pediatric and nutrition program databases and identified all clients with incomplete vaccine records in order to locate those clients to complete their vaccinations.

**Family Planning:** The goal of the committee's quarterly meetings is to improve techniques, reinforce knowledge and clarify any uncertainties about the methods. The committee also discusses relevant advances or other topics of interest to the department. In 2016, a new doctor joined the committee who helped provide support during the consults.

**Maternal-Infant Health Annex (MAMI):** The Clínica's goal is that all MAMI personnel share in the Clínica's monthly events and activities, are informed of relevant cases to inform development of clinical areas at MAMI, are recognized for their accomplishments, and share any other relevant information in order to improve its adolescent programs.

**Cultural Competency Committee:** Created in March 2015, the goal of this committee is to familiarize its members with other cultures in order to diminish barriers related to prejudice, stigma, discrimination, and racism between clients and Clínica staff. During 2016, the committee continued its work sharing in cultural activities.

**Social Committee:** This committee was founded with the staff members' well-being in mind; the committee plans activities outside of the work environment in order to release some of the daily stress of work as well as to provide opportunities for staff members to get to know one another better. In this spirit, the committee organized various activities in 2016 including a cookie

competition, baseball game, celebrations for Mother's and Father's Days, karaoke night, baby showers for pregnant staff, and the annual December staff party, among others.

**Infection Control Committee:** This committee was created in September 2016 to provide ideas and strategies for preventing and controlling the spread of infections within the Clínica itself. The committee is made up of seven members. The committee accomplished numerous goals in 2016 including: the strategic placement of fans to improve ventilation and as such prevent infection transmission, the creation of an information packet on infection prevention within consults for the Clínica staff, and the placement of posters which indicate correct coughing hygiene, hand-washing techniques, and evacuation routes. The committee also ensured that all Clínica personnel completed a PPD screening (for tuberculosis diagnosis), that the bathrooms were kept clean and sanitary, and that safety masks were available in strategic locations for all individuals. Finally, the committee provided educational talks and brochures about infection control to both Clínica staff and clients and distributed protective goggles to appropriate staff.

## Informatics

In 2016, Clínica de Familia La Romana underwent important infrastructural changes, primarily the re-modeling of several new work spaces. Along with new infrastructure, the Clínica acquired several new pieces of equipment this year. The physical expansion permitted installation of new phone lines and technological equipment including servers, computers, connectors, IP telephone and wireless segments, a punch clock, and security cameras at the entrances.

## Administration and Human Resources

At the end of 2016, the Clínica began readying several new work spaces. The administration team helped ensure this process was completed within just two





months. The Department of Human Resources prepared a collective introduction for all new staff members, who increased the number of Clínica staff to 116, including a new Human Resources assistant. This year, the department presented to the entire Clínica staff a new policy on workplace sexual assault and the finalized code of ethics. The department also coordinated six staff trainings, with collaboration from INFOTEP, and signed an agreement with a private company in order for staff to be able to form part of a cooperative.

## Public Relations and Fundraising

Numerous developments occurred in the Public Relations Department in 2016. Among these noteworthy achievements is the acquisition of PayPal and T-Pago platforms for the receipt of national and international donations.

In 2016, the department continued its promotional work through an exchange with the Michelli Group and its media networks, the clinic's webpage, and written publications in the national press. The most significant development this year has been the September publication of the clinic's first quarterly news bulletin, intended to keep donors and supporters up to date on everything happening at Clínica de Familia.

In relation to fundraising, the department created a donor database this year and also achieved an increase in donations, primarily for Camp Hope and Joy 2016. For the first time, the department implemented several direct marketing techniques to fundraise for the camp both in local grocery stores, such as Almacenes Iberia, and throughout La Romana utilizing banners, audio clips, and individual representatives at various local functions. The department also began a new fundraising project by placing donation containers in the reception and billing areas to collect donations from Clínica de Familia clients.

This year, the department strengthened several important partnerships, including with the Alianza ONG, and organized a variety of trainings for non-

governmental organizations in the eastern region. A further departmental success this year was the addition of ARS Humano and ARS Reservas to the existing health insurance companies accepted at Clínica de Familia.

Finally, the department worked with the Japanese International Cooperation Agency (JICA), the Ministry of Economics, Planning, and Development (MEPaD), and the Japanese Embassy in the Dominican Republic to welcome in November a graphic designer volunteer who helped to create brochures, posters, and other promotional materials.

## Accounting

In 2016, the Accounting Department administered Clínica de Familia's financial resources and adequately distributed resources to each program, according to an assigned budget. This distribution was handled according to generally accepted accounting norms. The department grew in 2016, adding three new employees.

It should be noted that the largest source of income came from donations and specific projects, which contributed 74% of the year's total income. New services and health insurances also contributed. The Clínica's income in 2016 was stable, with respect to its various sources of income (see Table 7).

**Table 7: Financial Data**  
(values expressed in U.S. Dollars)

	2016	Variation
<b>Income</b>	1,326,931	-11.43%
<b>Funds Spent</b>	1,394,727	+0.48%
<b>Sources of Income</b>	<b>Participation</b>	
National Donations	8,387	0.63%
International Donations & Grants	976,926	73.62%
Self-Generated Income	341,618	25.74%
Government Subsidy	0	

