



# Evaluation of a High Intensity, Comprehensive, and Individualized Linkage to Care Pilot Intervention in an Emergency Department HIV Screening Program

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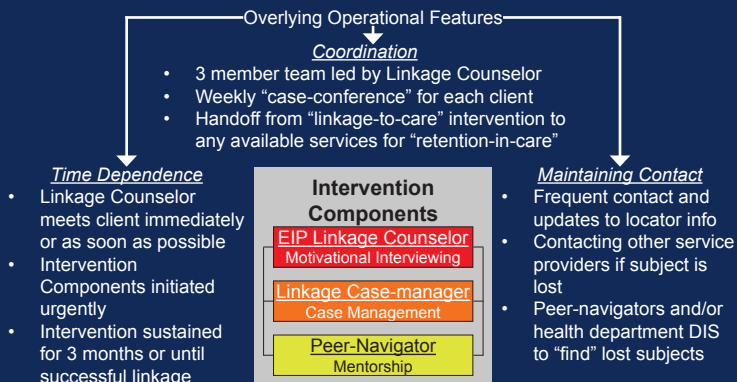


## OBJECTIVE

- Linkage to HIV medical care is often difficult, particularly for disadvantaged populations.
- Emergency departments (EDs) commonly encounter disadvantaged populations without other access to healthcare, including
  - those newly diagnosed with HIV and
  - those previously diagnosed and not in care.
- We tested the acceptability and feasibility of a linkage program that was designed to overcome the multitude of barriers inhibiting linkage to care. It was:
  - multi-component,
  - comprehensive, and an
  - individualized linkage intervention

## METHODS

- Evaluation conducted May to November 2012 in a lower prevalence urban academic medical center ED with 90,000 visits annually, and an infectious diseases clinic serving 1,800 patients.
- Program evaluation included
  - Survey of HIV+ individuals' perceptions of the proposed intervention
  - Focus groups with HIV+ persons
  - Focus group on training program for HIV peer navigators
  - Linkage outcomes with from a pilot intervention
- The pilot intervention, summarized in Table 1, included a comprehensive needs assessment of client barriers to accessing care, including inability or unwillingness to access care.



## RESULTS

Surveys:

- 71 HIV+ individuals (68 actively in care) completed surveys. Age range was 21-63; 63% were black.
- Thinking about the time of their diagnosis, respondents indicated that they would have chosen to participate in:
  - Motivational Interviewing (81%)
  - Case Management (98%)
  - Peer Navigation (79%)

Focus Groups with HIV+ persons:

- 3 focus groups, including an AIDS Clinical Trials Unit community advisory board (9), a black MSM support group (10), and a women's support group (4).
- Highly supportive of the proposed program

Focus Group with Peer Navigators

- 6 peer navigators (4 men, 2 women; 4 African American, 1 White) completed 2 hour training program and follow up focus group on the training.
- Navigators reported feeling well-prepared to work with pilot patients.

Pilot Intervention

- 10 patients participated in the intervention. Patient characteristics and outcomes are summarized in Table 1.

**Table 1. Pilot Intervention Patient Characteristics**

Demographics	Diagnosis	Duration	Services				Potential Linkage Barriers	Intervention & Linkage Details
			MI	CM	PN	Linked		
18y,AA,MSM	new	113d	Y	Y	Y	N*	homeless, <HS education, unemployed; family conflicts	refused PN (knew previously), missed intake d21, moved from area
23y,AA,MSM	new	27d	Y	N	N	Y	unemployed, many prior ED STDs, great worry stigma & disclosure	1st session of MI in conjunction with post-result notification;
44y,AA,F	new	15d	Y	N	Y	Y	employed, prior sex worker, substance use, tested due to illness	multiple PN contacts, 1 MI session
27y,AA,M	new	20d	Y	Y	N	Y	unemployed, prior prison, substance use, many prior ED STDs	multiple CM visits, 2 MI sessions
45y,AA,F	prior	100d	N	Y	N	N#	unemployed, homeless, psychiatric, jail, & substance use	keeping contact difficult, CM transferred medical care to other city, but then patient didn't move
54y,AA,F	prior	35d	Y	Y	Y	Y	psychiatric, jail, substance use	CM contact, PN initiated, 2 MI sessions
24y,AA,MSM	prior	26d	Y	Y	Y	Y	<HS education, unemployed, sex work, many prior ED STDs	3 session MI, CM, multiple PN contacts
22y,AA,MSM	prior	25d	Y	Y	N	Y	substance use, jail, no prior linkage, medical bills great concern	phone contact only for CM, no show for MI session
26y,W,MSM	prior	6d	Y	N	Y	Y	substance use	PN contact not initiated, No show for MI session
34y,AA,MSM	prior	9d	N	N	Y	Y	substance use, previous dx out of state, no prior linkage	keeping contact difficult, unable to link w/PN, refused MI & CM

AA = Black, MSM = Men Sex with Men, ED=emergency department. Services agreed to: MI = Motivational Interviewing, CM = Case-Management, PN = Peer-Navigation

\* Partially linked in second city: visited MD, labs drawn, not yet discussed lab results with MD. # As of 12/22/11 the duration was 100 days CM is attempting to re-establish contact

## CONCLUSION

- Intensive and comprehensive linkage approaches may be efficacious for newly and previously diagnosed people living with HIV.
- However, linkage must be individualized as patients differ in their needs and acceptance of different linkage intervention elements.

## ACKNOWLEDGEMENTS

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**Figure 1 Enhanced Linkage Intervention Structure & Content**