A Statewide System of Patient Navigation for Improving Linkage and Re-Engagement in HIV Care: The Virginia Experience

VIRGINIA DEPARTMENT OF HEALTH
Division of Disease Prevention

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Outline

• Background on SPNS/CAPUS Patient Navigation

• Implementation of Models/Linkage to Care

• Evaluation

• Challenges

• Sustainability/Future
Background

• Virginia received funding through two federal grant programs to help link and retain persons living with HIV (PLWH) in HIV medical care.

• Special Projects of National Significance (SPNS) Systems Linkages grant (2011-2015) from the Health Resources and Services Administration (HRSA)

• Care and Prevention in the U.S. (CAPUS) grant (2012-2016) from the Centers for Disease Control and Prevention (CDC)
## SPNS - Systems Linkages & Access to Care Strategies in Virginia

<table>
<thead>
<tr>
<th>GOAL</th>
<th>STRATEGY</th>
<th>CARE CONTINUUM TARGET</th>
<th>Implementation Sites</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase linkage within 90 days of dx</td>
<td>Active Referral</td>
<td>Linkage to care</td>
<td>All Local Health Districts/Testing Sites</td>
</tr>
<tr>
<td>Facilitate entry into care, support retention</td>
<td>Patient Navigation</td>
<td>Linkage to care</td>
<td>3 Medical Care Sites</td>
</tr>
<tr>
<td>Address MH needs of HIV-positive clients</td>
<td>Mental Health</td>
<td>Retention in care</td>
<td>1 Medical Care Site</td>
</tr>
<tr>
<td>Facilitate access to meds and care for persons recently released from incarceration</td>
<td>Care Coordination</td>
<td>Retention in care</td>
<td>Statewide, housed at VDH</td>
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# CAPUS in Virginia

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<tr>
<td>Increase awareness of HIV Status</td>
<td>HIV testing at pharmacies, social media</td>
<td>Diagnosis</td>
<td>Walgreens, VDH, social media sites</td>
</tr>
<tr>
<td>Facilitate entry into care, support retention</td>
<td>Patient Navigation</td>
<td>Linkage to care Retention in care Viral suppression</td>
<td>3 Medical Care Sites</td>
</tr>
<tr>
<td>Increase re-engagement, linkage to care</td>
<td>Use of surveillance data</td>
<td>Linkage to care Retention in care Viral suppression</td>
<td>Local Health districts Community-based organizations</td>
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<td>Improved structural and support factors for persons living with HIV</td>
<td>Housing</td>
<td>Retention in care Viral Suppression</td>
<td>Community-based organization</td>
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Patient Navigation in Virginia

**SPNS Patient Navigation**

- Use of Motivational Interviewing and client centered communication, linkage, retention and transition plans
- PN programs co-located at medical sites
- Sites located in the Central and Southwest regions of the state

**CAPUS Community Health Workers**

- Use of Community Health Worker model
- Funded both medical sites and community based organizations
- Sites located in the Northern, Northwest and Eastern regions of the state
Patient Navigation Sites in Virginia

Legend
- Red circle: SPNS Patient Navigation
- Blue circle: CAPUS Patient Navigation

Inova Juniper Program: CAPUS

Northern
Fairfax City
Falls Church
Arlington
Manassas Park
Manassas
Prince William
Fauquier
Stafford
Norfolk
Hampton Roads
Chesapeake
Norfolk
Portsmouth
Lucas
Hampton
VIRGINIA DEPARTMENT OF HEALTH
Protecting You and Your Environment

0 25 50 75 100 150 200 Miles
Active Referral to Care Process

1. Testing Personnel complete Part 1 of CCSA
2. PN completes Part 2 of CCSA
3. PN (or medical site)
4. Confirm attendance at appt
5. Make Medical Appt
Evaluation: CAPUS and SPNS PN

• Collect client-level data on services provided, demographics, referrals and outcomes

• Linked data to Care Markers database at VDH, which includes outcome data from surveillance, Ryan White, Medicaid, and other available databases

• Active Referral data forms also collected centrally at VDH
PN Clients Served
9/1/2013-8/31/2014 (n=457)

- **Gender:**
  - Male, 73.1%
  - Female, 26.9%

- **Age Distribution:**
  - <25
  - 25-34
  - 35-44
  - 45-54
  - 55+
  - Deceased

- **Transmission Risk:**
  - Male-to-Male Sexual Contact (MSM)
    - 53.4%
  - Injection Drug Use (IDU)
    - 5.8%
  - MSM & IDU
    - 3.9%
  - Heterosexual Contact
    - 21.4%
  - Pediatric
    - 1.5%
  - No Risk Factor Reported or Identified
    - 14.0%

- **Ethnicity Distribution:**
  - Black, Non-Hispanic, 66.1%
  - White, Non-Hispanic, 22.1%
  - Hispanic, 8.8%
  - Other, 3.0%
Retention and Viral Suppression Rates among SPNS and CAPUS PN Clients Served 9/1/2013-8/31/2014 in Virginia

- **Retained in HIV care in 2014**: Having at least two or more HIV care markers (CD4 or viral load test, HIV medical care visit, or antiretroviral (ART) prescription) in CY 2014 at least 3 months apart
- **Virally suppressed in 2014**: Last viral load measurement in CY 2014 was <200 copies/mL
Challenges

• Trainings for different models of PN

• Data reporting requirements differed among funders

• Some silos still existed between HIV Care and HIV Prevention
Sustainability

- Patient Navigation continues to be funded under Ryan White and HIV Prevention

- Ongoing evaluation of data is being utilized for a Request for Proposals to determine components of a statewide PN program
Thoughts/Wrap Up
Acknowledgements

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