



HIV/HCV Linkage to Care

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BCHD HIV/HCV Linkage To Care

- Started in 2005; HCV linkage integrated 2016
- Modeled from our existing HIV care linkage program to address the complex needs of those in our city who are burdened with these diseases
- 8 professionally trained Care Linkage Specialist, 2 Disease Reactor Coordinators, 1 Outreach Worker
- “Disease Intervention Specialist model” to record search clients, field visit homes, and probe when necessary
- Transport clients to first two appointments
- Two \$5 gift cards incentives
- Includes health education, insurance assessment, partner referrals, and advocacy



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HIV and HCV Linkage to Care Results, Baltimore City 02/2016- 07/2018

	HIV			HCV		
	2016	2017	2018*	2016	2017	2018*
Linked	85 (24%)	106 (19%)	69 (26%)	212 (39%)	202 (39%)	109 (26%)
Unable to Locate	143 (40%)	224 (39%)	—	139 (25%)	128 (24%)	—
Already in Care	32 (24%)	104 (18%)	—	93 (17%)	72 (14%)	—
Did Not Attend	26 (7%)	41 (7%)	—	58 (11%)	55 (11%)	—
Other**	149 (5%)	95 (17%)	—	48 (8%)	67 (12%)	—
Total	350	570		550	524	

*As of July 2018

**Other includes deceased, moved out of jurisdiction, and refusals



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Finding Clients

- Find rate
 - HIV** – 55%
 - HCV** - 70%
- Public Internet Sources
 - Maryland Judiciary Case Search
 - True People Search
 - Vine link



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Challenges & Best Practices

Linkage Obstacles

- Transient population
- Insurance hurdles
- Education in the Community
- Gaining Rapport/Medical Mistrust
- Pre-existing Health Conditions
- Stigma

Best Practices

- In-depth record searching prior to field investigation
- Access: Same-Day Appointment Slots
- Highly Motivated Team
- Partnering with Providers
- Building rapport
- Updated surveillance reports



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Community Partners

- Our BCHD Clinics
- John G. Bartlett Clinic
- University of Maryland Center for Infectious Disease
- Healthcare for the Homeless
- Jai Medical
- Total Health Care



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