

Seattle/King County, WA



PROGRAM:

EHE Emergency Department Collaborative (EDC)

INTRODUCTION:

To address the challenge of reaching the final 10% of people living with undiagnosed HIV, the EHE Emergency Department Collaborative (EDC) was established. This initiative targets expanding HIV screening in non-traditional healthcare settings, particularly in Emergency Departments (EDs) across King County, WA. The program focuses on populations that are often unstably housed, experiencing co-occurring mental health, substance use disorders, and those who do not regularly seek healthcare services.

TARGET POPULATION:

The EDC program serves individuals who are:

- Unhoused or experiencing housing instability
- Co-occurring behavioral health conditions
- Population which seldom seeks healthcare services

KEY STAKEHOLDERS AND COLLABORATORS:

The EDC involves a range of key stakeholders who collaborate to ensure successful implementation and care continuity:

- Hospitals
- Community- Based Organizations (CBOs)

PROGRAM DURATIOIN:

The initiative is expected to operate for 3-5 years, providing sufficient time for data collection, evaluation, and necessary changes.



PROGRAM GOALS AND KEY ACTIVITIES:

The primary goal of the EDC is to identify and diagnose individuals with HIV who are not accessing regular healthcare, including people who have not been diagnosed with HIV yet and those who have fallen out of care. By re-engaging these individuals in treatment, the program aims to improve their health outcomes and prevent further transmission of HIV.

- Identifying and supporting champions within the health systems to push forward HIV screening efforts.
- Establishing relationships with higher-level administrators to facilitate EMR systems and workflow updates.
- Proving seed funding for necessary structural updates.

PROGRAM CHALLENGES:

The Emergency Department Collaborative has faced several considerable challenges since its launch in 2020, particularly due to COVID-19 pandemic, which shifted ED priorities to pandemic-related responses. High turnover among ED staff has made it difficult to maintain momentum and implementing opt-out HIV testing via Electronic Medical Record (EMR) systems has been a significant barrier. While progress has been made, it has been slow and relies heavily on educating providers and gaining their commitment, which has been difficult to sustain.

COMMUNITY ENGAGEMENT AND DEVELOPMENT:

Some EDs have successfully partnered with local Community-Based Organizations (CBOs) to provide seamless care management and linkage to care, ensuring a continuum of services for individuals who test positive for HIV.

The program began with outreach to various health systems in King County to identify champions willing to lead the initiative. Since then, quarterly collaborative meetings have been held to review progress and address challenges.



DATA COLLECTION AND MONITORING:

Monthly data for the program is collected from all participating emergency departments.

KEY METRICS AND OUTCOMES:

The program tracks several key performance indicators to measure its success:

- Number of patients seen in emergency departments
- Number of patients screened for HIV
- Number of positive test results

CONCLUSION:

The EHE Emergency Department Collaborative (EDC) represents a critical initiative aimed at closing the gap in HIV diagnosis, particularly among high-risk populations who are less likely to seek regular healthcare services. By fostering partnerships with emergency departments and CBOs, along with addressing barriers to care, the program intent to close the gap in undiagnosed HIV cases in King County, WA.

