



PROGRAM SUMMARY REPORT

Seattle/King County, WA

PROGRAM:**Expanding Low-Barrier Care Clinics**

INTRODUCTION:

The Expanding Low-Barrier Care Clinics initiative is a critical component of the Ending the HIV epidemic (EHE) plan in King County, WA. The program seeks to address the critical gaps in HIV prevention and care services by creating more easily accessible, geographically distributed, and inclusive healthcare options. Prior to this initiative, HIV-related services were largely centralized in downtown Seattle, leaving communities in north Seattle and south King County underserved. The program also prioritizes reaching marginalized populations, particularly people who are unhoused, people who inject drugs, and racial/ethnic minorities disproportionately impacted by HIV, ensuring they have easier access to the services they need.

TARGET POPULATION:

This initiative serves a diverse and key vulnerable populations:

- Men who have sex with men (MSM)
 - Black/African American
 - Hispanic/Latinx
 - People who inject drugs
 - People living with HIV (PLWH)
 - Spanish Speakers
 - Women, youth, and aging populations
 - Transgender and nonbinary individuals
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KEY STAKEHOLDERS AND COLLABORATORS:

The program is supported by a broad coalition of stakeholders who work collaboratively to deliver comprehensive care.

- Private healthcare providers and hospitals
 - Federally Qualified Health Centers (FQHCs)
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- Mental health and substance use treatment providers
 - State and local health departments
 - Community- Based Organizations (CBOs)
 - Social service agencies
 - Criminal justice system partners
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PROGRAM DURATION:

The initiative is planned to run for 1-2 years, with ongoing evaluation to assess its impact and sustainability.

PROGRAM GOALS AND KEY ACTIVITIES:

The primary goal of this initiative is to expand access to low-barrier HIV prevention and care services in underserved areas of King County. Low-barrier services are designed to meet clients where they are, offering walk-in access to sexual health services, PrEP, HIV care, social services, mental health, and substance use support. Some sites also provide incentives to encourage clients to engage in HIV prevention or care, particularly when addressing immediate basic needs poses a challenge.

Key activities under the initiative include:

- Harborview Medical Center (HMC): Providing status-neutral, whole-person care through a walk-in, low barrier model. Clinical services offered include primary care, wound care, STI/HIV prevention and treatment, substance use services, mental health services, and patient coordination.
 - CBOs (Aurora Commons and Catholic Community Services): Offering outreach, housing support, case management, psychosocial support, and drop-in day center services.
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PROGRAM CHALLENGES:

Existing partnerships between Community Health Centers (CHCs) and CBOs have helped to accelerate the program's launch, reducing conflicts, and facilitating smooth collaboration. However, high staff turnover, particularly in south King County, has posed challenges due to the stress and demands of serving a high-needs population.

Additionally, the vast scope of needs, such as basic wound care and primary care, often obscures HIV prevention and treatment, which are lower on the priority list for many clients.

COMMUNITY ENGAGEMENT AND DEVELOPMENT:

The development of Low-Barrier Clinics (LBCs) was driven by input from a community advisory board, ensuring that the services provided align with the needs of the community. LBC staff participate in various local collaboratives and working groups, fostering ongoing engagement with other community organizations, and ensuring that the clinics are fully integrated into the broader health and social services landscape.

The planning process, guided by the EHE initiative, identified the need for low-barrier services in north Seattle and south King County. After securing funding, PHSKC released an RFA to foster partnerships between CBOs and health systems to establish clinical services within community-based settings. Although north Seattle saw a successful applicant, there was a need for additional outreach to secure a partnership in south King County. Once established, funding was allocated for space renovations and team development, laying the groundwork for clinical delivery.

DATA COLLECTION AND MONITORING:

Data collection is managed through monthly reports from Harborview Medical Center (HMC) and partner CBOs. These reports track service units, performance measures, and outcome measures. Regular check-ins, both monthly and at federal data review touchpoints, help ensure progress and goals achievement.

KEY METRICS AND OUTCOMES:

The program tracks a range of key performance indicators to measure its success:

- Number of unique clients served
 - Number of visits per provider/visit type (broken out by HIV status)
 - Number of HIV tests conducted
 - Outreach efforts by CBOs
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These metrics provide insight into the reach and impact of the program, allowing for adjustments and improvements as needed.

CONCLUSION:

The expanding Low-Barrier Care Clinics initiative represents a vital step in addressing the disparities in HIV prevention and care across King County. Through collaborative partnerships, community engagement, and data-driven service delivery, the program is well-positioned to improve health outcomes and reduce barriers. By focusing on marginalized populations and fostering strong community partnerships, the program is breaking down barriers to care. This initiative is an essential part of the broader effort to end the HIV epidemic in the region.