Pilot Implementation and Evaluation of HIV Support Source™ Distress Screening and Referral Program for People Living with HIV

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**BACKGROUND**

Addressing the psychosocial well-being of people living with HIV (PLWH) can impact health outcomes. While depression and substance use screening is practiced widely, few tools screen for and respond to broader distress and unmet needs. We evaluated the feasibility, acceptability, and short-term outcomes of HIV Support Source (HIVSS), an electronic psychosocial distress screening and referral program for PLWH.

**METHODS**

25 clients ages 18+ receiving HIV services at a community clinic in Chattanooga, TN, were invited to take part in the HIVSS pilot program. Staff documented program delivery at time of screening and at clients’ subsequent primary care visit. Clients were invited to complete an online feedback survey 1 month after screening; a subset (n=6) also completed interviews. Clinic staff (n=6) took part in a focus group.

**SCRENNING AND REFERRAL PROCESS**

Clients completed psychometrically validated 17-item HIVSS

Clients offered an automated, tailored care plan and informational materials based on responses

Staff receive report on concerns and risk flags

Staff facilitate and track referrals and follow-up

**WORKFLOW AND SCREENING RESULTS**

Recruitment and baseline screening of 25 PLWH completed within 4 weeks

- Providers reviewed HIVSS results with 24 clients, followed up with 79% (15/19) who rated any concerns seriously or very seriously, and provided support for 69% (13/19) based on responses (e.g., pain management, antidepressant, emotional support, health behavior counseling).
- 53% (10/19) of clients were referred internally for additional support needs (e.g., housing, financial assistance, other resources).

**EVALUATION RESULTS**

Among clients completing the feedback survey (n=15):

- 87% (13/15) reported that HIVSS was easy to use and covered their concerns
- 93% (14/15) agreed that HIVSS helped staff better understand their concerns

- The questions were not invasive at all. I think it made you think a little bit, but it wasn’t to the point where I felt uncomfortable answering the questions.

- HIVSS covered each area that I would have a concern about. And, it was fairly easy, very understandable, not too long, but covered enough bases to let you know that this concern is in this area and to make sure that things are taken care of.

- Staff felt well-equipped to administer HIVSS

- Honestly, it worked out really well, once we…figured out…the best flow. It went well really. I was concerned a little bit in the beginning. I thought “how are we going to do this?” But…it was smooth.

- Nobody took [HIVSS] and asked questions about it…nobody took it and needed assistance…we had a good variety of age ranges that took it, so I think the…simplicity…of [HIVSS] was probably the best part.

HIVSS gave staff insight into tailoring and improving support

- It helped me to ask questions differently than I may have asked before…sometimes I just kind of do the basic “any issues or concerns?” and they always say no and then on hour later they call and say, oh…by the way, I don’t have housing and I don’t have my meds and all of that. So, it did help me to ask more specific questions.

- I see this with a lot of our patients, “I don’t want to be a burden, somebody else is going to need me to…ask more specific questions.”

HIVSS data informed care delivery and clinic resource allocation

- Rather than just a verbal – you saying, “hey, we’re seeing patients all day long that have this problem.” [HIVSS] actually gave us data to say, “look, there are out of, you know, ten patients coming in, three of them are struggling with homelessness.” So I think that that was very valuable.

As a result of the pilot study, the site was able to enhance case management by reallocating staff from administrative roles to providing direct client services.

**CONCLUSIONS AND IMPLICATIONS**

- HIV Support Source administration was efficient, effective, and highly acceptable to clients and staff.

- The multidimensional HIV Support Source screener highlighted concerns that otherwise would not have been recognized, and clients received support services and referrals that corresponded with their needs.

- The benefits of HIV Support Source screening and referral can be optimized when implemented with a strong case management system.

**REFERENCES**


