STEP (Structured HIV Transition Empowerment Program)

Evidence-Informed for the Linking and Retention in HIV Care Chapter
Evidence-Informed for the Structural Interventions Chapter

POPULATION
- Young people with HIV transitioning from pediatric to adult HIV care

KEY INTERVENTION EFFECTS
- Improved retention in HIV care
- Improved viral suppression

BRIEF DESCRIPTION

STEP (Structured HIV Transition Empowerment Program) is a multidisciplinary health care transition (HCT) program that includes a health care transition clinic, pediatric/adolescent and adult HIV care providers, clinic and transition staff, and HCT navigators that aid in the transfer of pediatric HIV care to adult HIV care via individualized transition plans. The STEP team works with patients to prepare them for the transition to adult HIV care. Transfer from pediatric care to adult care occurs once patients have completed an adult HIV clinic visit and includes:

- Individualized transition plans agreed upon by both the STEP team and the patient
- Assessment of patient transition readiness before complete patient care is transferred to adult HIV care team
- Preparation of transfer to adult care by the pediatric STEP team to the adult STEP team at a linkage visit
- Data sharing between patients and providers that allows for tracking of pre- and post-transition retention
- Collaborative tracking of patient care engagement status indefinitely post-transfer of care

DURATION: 12 months or 2 completed HIV care visits with adult HIV care provider
SETTING: Baltimore City, Maryland (University of Maryland clinics)
STUDY YEARS: 2017 – 2019
STUDY DESIGN: Retrospective cohort
DELIVERERS: Health care workers
DELIVERY METHODS: Case management, Patient navigation

STUDY SAMPLE

The STEP cohort sample of 34 patients was characterized by the following:

- 94% Black or African American persons
  6% White persons
- 71% male persons, 29% female persons
- Median age at linkage = 28 years

STRUCTURAL COMPONENTS

Access – HIV medical care
- Increased access to adult HIV medical care

Capacity Building – Technology
- Staff trained to collaborate with HIV providers and HCT navigator via updated database

Physical Structure – Integration of services

- The health care transition clinic is embedded in the Pediatric/Adolescent HIV clinic to build trust between the patient and adult HIV medical care team, and to assist in preparation for transition from pediatric HIV clinic services to adult HIV clinic services

Policy/Procedure – Institutional policy/procedure

- A transition program policy and protocol were implemented for both patients and providers transitioning from pediatric HIV care to adult HIV care

KEY INTERVENTION EFFECTS (see **Primary Study** for all outcomes)

- A greater percentage of intervention participants were retained in adult care at 12 months compared to control participants (95% vs 50%, p = 0.0004).
- The percentage of participants with viral suppression was greater for intervention participants compared to control participants (78% vs. 34%, p = 0.0002).

CONSIDERATIONS

- None reported

ADVERSE EVENTS

The author did not report adverse events.

FUNDING

- Author did not report funding for this study.

PRIMARY STUDY

Ryscavage, P., Herbert, L., Roberts, B., Cain, J., Lovelace, S., Houck, D., & Tepper, V. (2022). Stepping up: Retention in HIV care within an integrated health care transition program. *AIDS Care, 34*(5), ofaa369. doi: 10.1080/09540121.2021.1909696.

PLEASE CONTACT STUDY AUTHOR FOR TRAINING AND INTERVENTION MATERIALS.

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