

NURSES AT THE FOREFRONT; A new service model for people who inject drugs (PWIDS) in Glasgow

Glover, Claire ¹; Curtis, Stewart ²; Kirkwood, Stuart ¹; McGinness, Patricia ¹; Anderson, Patricia ¹
Gartnavel Hospital, Glasgow Brownlee Centre Glasgow UK (1)
Hunter Street Homeless Health Centre Community Addictions Team Glasgow UK (2)

Background

There is an ongoing outbreak of HIV amongst homeless PWIDs in Glasgow –133 to Aug 2018. The traditional model of care for people living with HIV is a centralised hospital based service, which can be a barrier to accessing care and can impact on engagement in care and adherence to antiretrovirals (ARVs). Hospital based Blood Borne Virus (BBV) clinical nurse specialists (CNS) have developed a new outreach model of care for this group.

Results

An outreach nursing model was initiated in November 2015. This service has adapted to suit their multiple complex needs by providing the following:

1. A weekly drop-in nurse led clinic within the Homeless Health Centre, offering treatment of HIV, hepatitis C (HCV) and hepatitis B (HBV)
2. Working with pharmacies to support ARVs dispensed via community pharmacies alongside opiate replacement therapy (ORT)
3. Liaison with other NHS teams (addictions, sexual health, GPs, inpatient specialty teams, rehabilitation centres) involved with the cohort
4. Links with social work, prisons and third sector organisations
5. Assertive 'street' outreach actively seeking out patients in the most deprived conditions e.g. rough sleeping and temporary Accommodations
6. Supporting the wider HIV multidisciplinary team

Effectiveness of the service was measured using the following surrogate markers

- 69/104 (66%) of cohort using outreach service
- remaining 35/104 (33%) of cohort exclusively attending hospital care(also supported by outreach nurses)
- 12 additional HIV patients (out with outbreak cohort) attending outreach service
- 99/104 (95%) treated with ARVs, with 41/104 (39%) ARVs via community pharmacy with ORT and 16/104 (15%) ARVs dispensed by CNS(deliver to hostel, community/rehab site, or patient collects in outreach clinic)
- 13 patients commenced on HCV treatment

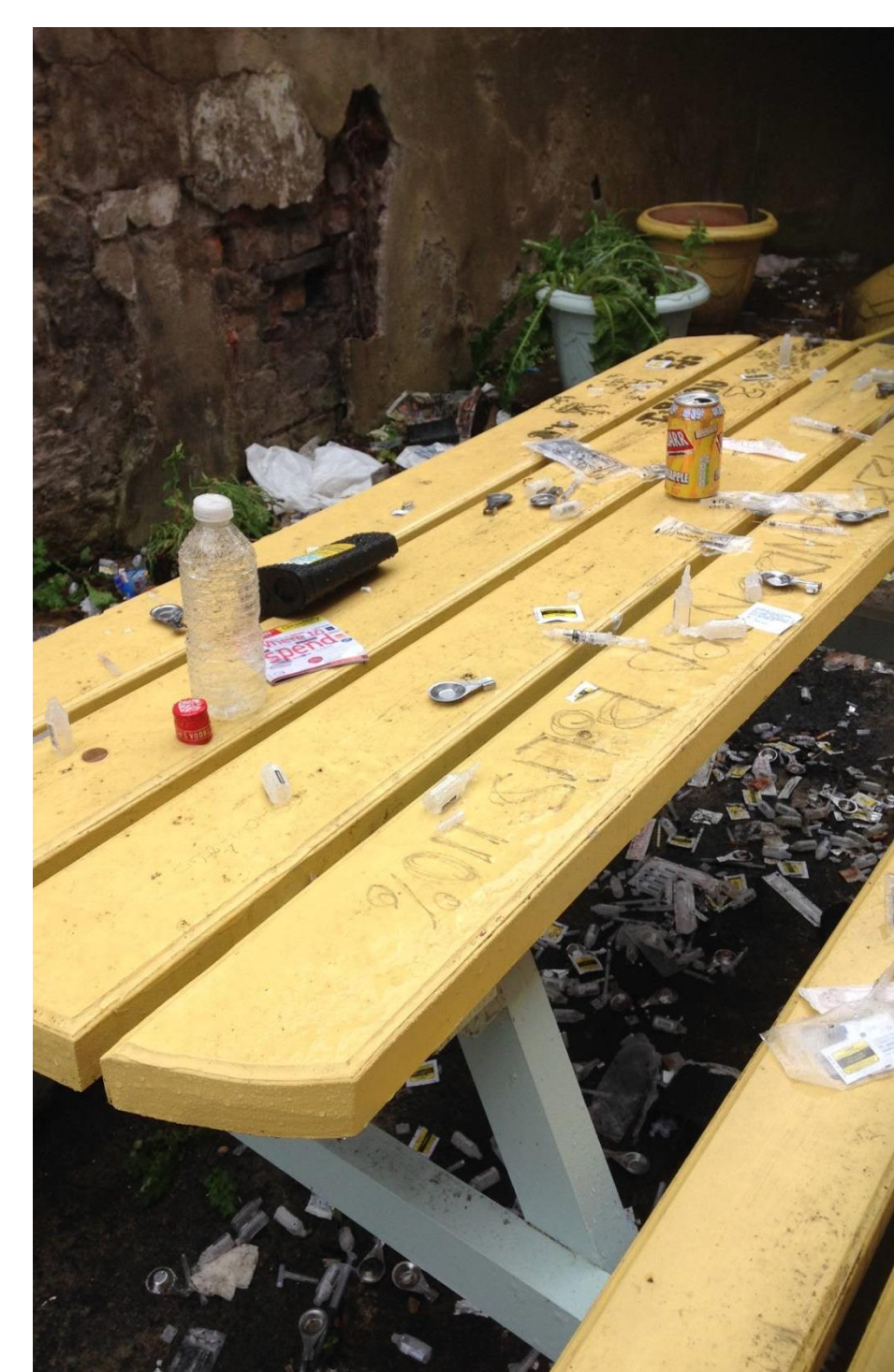
Conclusion

People with multiple complex needs require an innovative and flexible model of HIV care. Nurses are integral to outreach work and key in supporting and advocating on behalf of underserved populations. Nurses are highly trained and experienced in communication skills, negotiation skills and compassion, which is essential in supporting this vulnerable group and the many services which they are linked with. Assertive outreach and adapting clinic setting has achieved better links with support services and improved provision and retention of care for Homeless PWIDs in Glasgow.

Materials and Methods

A review of electronic records of 104 in current cohort (excluding deaths, those that had moved and those without more than 3 months clinical information) was conducted to achieve the following aims:

1. Describe the innovative nursing approaches and interventions implemented to engage with patients and support them into HIV care
2. Illustrate the effectiveness of the role of the CNS in the complex needs of these patients using surrogate markers.



Typical areas of public injecting sites with used equipment



Assertive outreach, showing CNS with backpacks for their equipment, Homeless Health Centre, Simon Community HUB, all sites where CNS deliver healthcare