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Implementation of Florida's Infectious Disease Elimination Act (IDEA): Translating Research Evidence into Policy and Community Implementation

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AT THE INTERSECTION: Stories of Research,
Compassion, and HIV Services for People Who Use Drugs

WHAT IS HARM REDUCTION?

- **IDEA Miami SSP**

- *The Infectious Disease Elimination Act (IDEA) of 2016 allows the University of Miami and its affiliates to operate a five-year pilot syringe services program (SSP) in Miami-Dade County. The IDEA Exchange SSP opened December 1, 2016, and was the first legal syringe services program in the State of Florida.*
- *Expansion of this law by the Florida Legislature in 2019 allows each county in the state to set up a syringe services program within its borders. Both the pilot program and the expansion bill stipulates a one-to-one syringe exchange and forbids the use of state or county funding to pay for the exchange of syringes.*

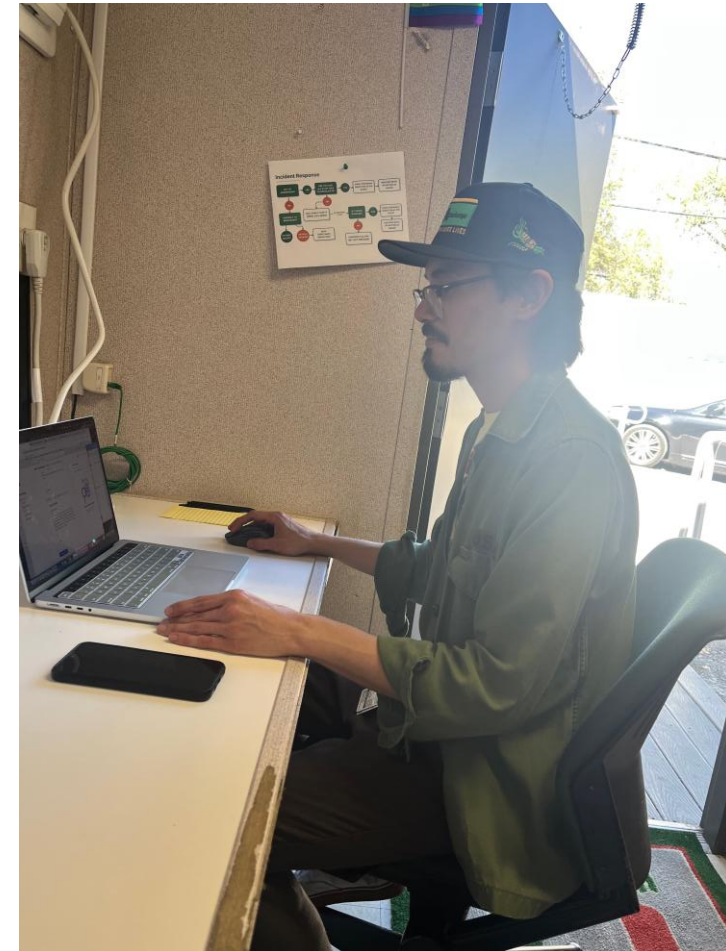
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VISIT US AT THE IDEA EXCHANGE

Reducing harm related to injection drug use across Miami-Dade County & spreading love and support beyond.

- **IDEA Miami SSP**
- *The **IDEA Exchange** provides anonymous harm reduction services for enrolled participants within Miami-Dade County, FL. Services include one-to-one syringe exchange, distribution of other clean harm reduction equipment and routine anonymous HIV and HCV rapid testing.*
- *The **UM Pathways to Wellness Clinic** provides confidential linkage to care services at the IDEA Miami fixed site and mobile unit locations. Confidential services include HIV and HCV testing and linkage to care; STI testing and treatment; vaccination for seasonal influenza, COVID-19, hepatitis A and B; medication management; buprenorphine induction; wound care; referral to UM research studies, and navigation to partner agencies for services not provided by IDEA Miami.*



Fixed Site – UM Medical Campus in Overtown community, Miami

- Monday/Wednesday/Friday (10am-4pm)
- Tuesday/Thursday (10am-6pm)



- Launched in May 2017
- Extends the program's services throughout Miami-Dade County
- Including Backpacking throughout the community
- Locations include:
 - Florida City/ Homestead
 - Liberty City/ Hialeah
 - Miami Gardens/Opa-Locka
 - Miami Beach



Mobile Unit

- Monday-Friday (Hours/Locations change over time based on need)



IDEA Miami SSP – enrollment through August 25, 2024

| | Totals as of 08/25/2024 |
|---|--|
| Participants enrolled | 2,471 |
| Gender | Male 71.2%; Female 27.4%; Trans M-F .9%; Trans F-M .4% |
| Ethnicity/race | Hispanic 38.1%; non-Hispanic white 47.7%; non-Hispanic Black 11.2% |
| Mean age | 39.3 |
| Number of exchanges | 38,840 |
| Used syringes received | 2,088,732 |
| New syringes exchanged | 2,072,340 |
| HIV tests at enrollment/quarterly assessments/clinic visits | 4,025 |
| HCV tests at enrollment/quarterly assessments/clinic visits | 3,508 |
| HIV positive | 8.5% of those who tested at enrollment |
| HCV positive | 39.4% of those who tested at enrollment |
| Narcan distributed | 7,444 |
| Narcan reversals reported | 4,036 |

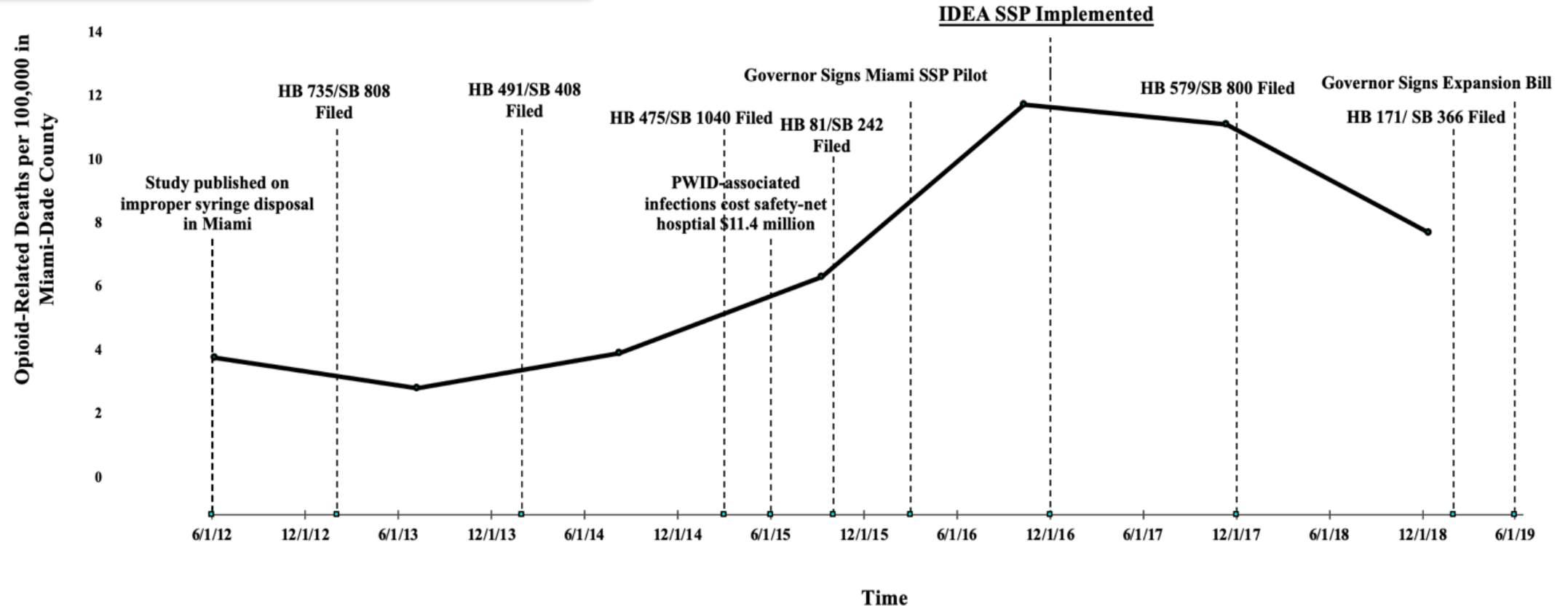
The University of Miami Infectious Disease Elimination Act (IDEA) Syringe Services Program

A Blueprint for Student Advocacy, Education, and Innovation

Tookes, Hansel MD, MPH; Bartholomew, Tyler S.; St. Onge, Joan E. MD, MPH; Ford, Henri MD, MHA

[Author Information](#)

Timeline of SSP Legislation in Florida



IDEA Miami SSP provides NARCAN training and free doses to:

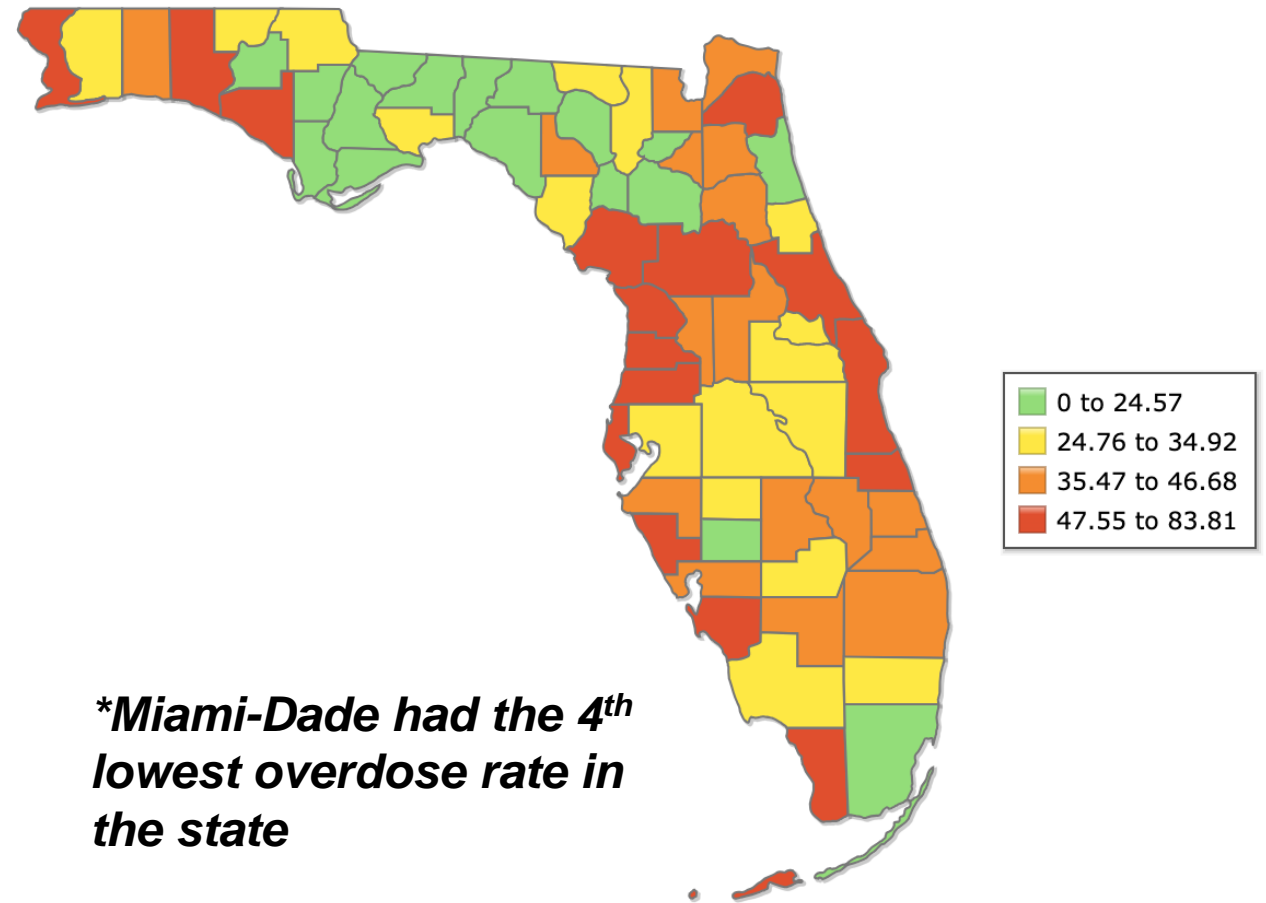
- IDEA SSP participants
- Family and friends of participants
- Law enforcement partners

08/2024

Narcan distributed: **12,004**

Narcan reversals: **3,415**

Age-adjusted Deaths From Drug Poisoning, Rate Per 100,000 Population, 2021



- Anonymous testing for HIV/HCV
- Syringe exchange and access to equipment
- Free condoms and first aid kits
- Narcan distribution and education
- Weekly free clinic open to the community
- Medication management in pill lockers onsite
- Onsite buprenorphine inductions
- Linkage to methadone treatment
- Linkage to medically supervised detox
- Linkage to residential treatment



Tasked by DCF to provide services to those experiencing Opioid Use Disorder, the team at IDEA formed BRITE.

The project started February 2021.

The BRITE Team Consists of:

- Medical Doctors
- Psychologist
- **Our Peers at IDEA lead our interventions**

BRITE IDEA Clinic

Buprenorphine Initiation and Treatment Experience



BRITE IDEA Clinic

Buprenorphine Initiation and Treatment Experience



- Total BRITE participants since programs inception: 502
- Percentage of BRITE participants uninsured or underinsured: 78%
- Total BRITE participants insured: 22%



> [Ann Med.](#) 2023 Dec;55(1):733-743. doi: 10.1080/07853890.2023.2182908.

Adaptation of the Tele-Harm Reduction intervention to promote initiation and retention in buprenorphine treatment among people who inject drugs: a retrospective cohort study

Edward Suarez, Jr ¹, Tyler S Bartholomew ², Marina Plesons ³, Katrina Ciraldo ⁴, Lily Ostrer ³, David P Serota ⁵, Teresa A Chueng ⁵, Morgan Frederick ⁵, Jason Onugha ⁶, Hansel E Tookes ⁵

- pilot paper 3 month retention: 59%
- telehealth and increasing doses associated with higher retention.
- stimulant use at baseline resulted in lower retention
- need for integration of stimulant use disorder treatment



UM-DOCS students
facilitate BRITE via IDEA
Wellness Clinic

Student-Run Free Clinic at a Syringe Services Program, Miami, Florida, 2017–2019

Margaret E. C. Ginoza BA, Jasmine Tomita-Barber MSc, Jason Onugha MS, Corinne Bullock MS, Tyler S. Bartholomew BS, Hansel E. Tookes MD, MPH, and David P. Serota MD, MSc

[+] Author affiliations, information, and correspondence details

Accepted: April 01, 2020 Published Online: June 10, 2020

[First Page](#) [Full Text](#) [References](#) [PDF/EPUB](#)

AJPH PERSPECTIVES

Student-Run Free Clinic at a Syringe Services Program, Miami, Florida, 2017–2019

In the midst of the ongoing opioid crisis in the United States, there is a growing need to incorporate harm-reduction practices into medical education and clinical practice. Partnerships between student-run free clinics and harm-reduction programs such as syringe services programs (SSPs) provide a unique avenue to address two key issues: the need for low-barrier medical care tailored to the needs of people who inject drugs (PWID), and the need to produce new gen-

HCV transmission.² In addition to complex medical issues, in-transigent stigma and bias toward PWID in the health care system are barriers to care and result in poor health outcomes in this population.³

More than 75% of US medical schools operate one or more student-run free clinics,⁴ where medical students, supervised by volunteer physicians, provide low-barrier medical care to underserved patients. These clinics provide a range of medical ser-

students from UMMSM originated and implemented a weekly student-run wound care clinic in collaboration with the SSP.

The IDEA Clinic is a medical student-run initiative implemented at the SSP in collaboration with the UMMSM Mitchell Wolfson Sr. Department of Community Service. The weekly walk-in clinic, colocated at the SSP, is open to any person seeking care, with no specific eligibility criteria. The clinic

PWID to receive quality medical care while providing medical students early exposure to a vulnerable population with unique medical needs. To our knowledge, the IDEA Clinic is the only SSP-affiliated, medical student-run clinic primarily serving PWID in the United States.

LOW-BARRIER MEDICAL CARE

Among our community, soft tissue infections are the most common cause of hospitalization from injection drug use.⁵ The IDEA Clinic offers early intervention for skin and soft tissue infections, as prompt wound care has been shown to decrease emergency department visits and





Drug and Alcohol Dependence Reports

Available online 5 December 2023, 100209

In Press, Journal Pre-proof [?](#) What's this? [↗](#)



Short communication

Prevalence of xylazine among people who inject drugs seeking medical care at a syringe services program clinic: Miami, Florida, 2023

Maia H. Hauschild¹, Peyton V. Warp¹, Hansel E. Tookes², Ella Yakir¹,
Bharat Malhotra¹, Subul Malik¹, Cyrus Owens², Edward Suarez Jr³,
David P. Serota², Tyler S. Bartholomew⁴ [?](#) [✉](#)

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Limited acceptance of buprenorphine in recovery residences in South Florida: A secret shopper survey

[Madison R. Guido](#) ^a  · [Maia H. Hauschild](#)^a · [Hansel E. Tookes](#)^b · [Tyler S. Bartholomew](#)^c · [Edward Suarez, Jr](#)^d

[Affiliations & Notes](#) ▾ [Article Info](#) ▾



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Reprints



Show Outline

Highlights

- Patients taking buprenorphine in South Florida have limited access to recovery residences.
- Of 100 recovery residences surveyed, 53 % completely prohibited buprenorphine.
- 16 % permitted buprenorphine with a maximum acceptance of 20 % by county and level.
- 31 % had conditional policies primarily related to stipulations in dosing.
- Housing discrimination due to medication use violates federal policies.

- The BRITE Clinic gave us insight into disparities occurring among women who use drugs.
- Which gave us the idea to take on a new project: The Women's Engagement Initiative

IDEA Exchange

Anonymous engagement of women who inject drugs (WWID)
July 1, 2022 – June 30, 2024

| | Fixed | Mobile | Overall |
|-----------------------------------|------------|-----------|------------|
| Enrollments | 288 | 112 | 300 |
| Encounters | 1,784 | 1,318 | 3,102 |
| Unique participants | 133 | 58 | 191 |
| HIV Tests | 190 | 37 | 227 |
| Negative | 167 (9.4%) | 37 (2.8%) | 204 (6.6%) |
| Positive | 23 (1.3%) | 0 (0%) | 23 (0.7%) |
| Women of childbearing age (18-44) | 75.9% | 74.1% | |



UM Pathways to Wellness Clinic

Confidential linkage to care of women who inject drugs (WWID)

July 1, 2022 – June 30, 2024

Women's Clinic

91 unique women were successfully navigated by an outreach worker to the Women's Clinic and offered testing for HIV and STIs. Of these women, 63 unique women of childbearing age (18-44) were also offered testing for pregnancy.

315 clinical visits were completed during this period with these 91 WWID (some visiting more than once during this 24-month period)

UM Pathways to Wellness Clinic

July 1, 2022 – June 30, 2024

Women's Clinic

During these 315 clinical visits:

- 19 of the 91 women (21%) tested positive for HIV, with 2 of these women newly diagnosed with HIV during this period
- All the women testing positive for HIV were linked to HIV care at the IDEA Wellness Clinic and are currently in treatment

UM Pathways to Wellness Clinic

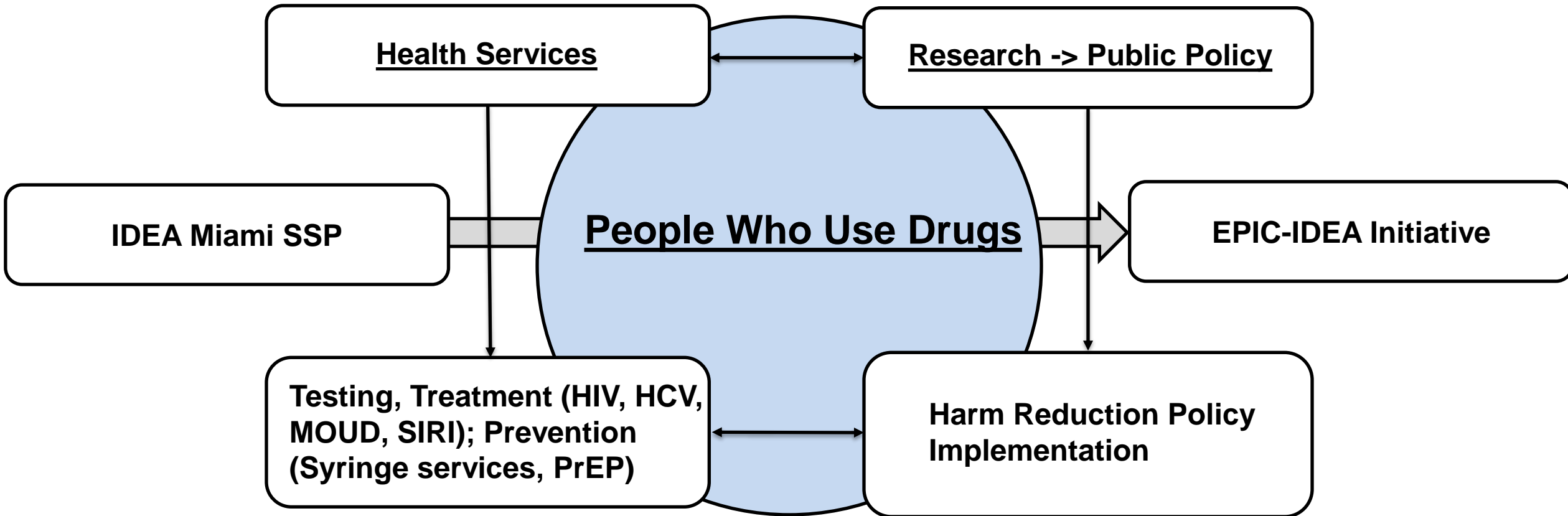
July 1, 2022 – June 30, 2024

Women's Clinic

Staff began offering reproductive health counseling in March 2023

- Depo-Provera was made available on site from February 2024
 - 8 women currently receive Depo-Provera every 3 months
- Nexplanon was made available on site in June 2024
 - No women have received the Nexplanon implant to date

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The logo of the University of Miami, featuring a stylized 'U' in orange and green.

AIDS and Behavior (2020) 24:246–256
https://doi.org/10.1007/s10461-019-02680-9

ORIGINAL PAPER



Rapid Identification and Investigation of an HIV Risk Network Among People Who Inject Drugs –Miami, FL, 2018

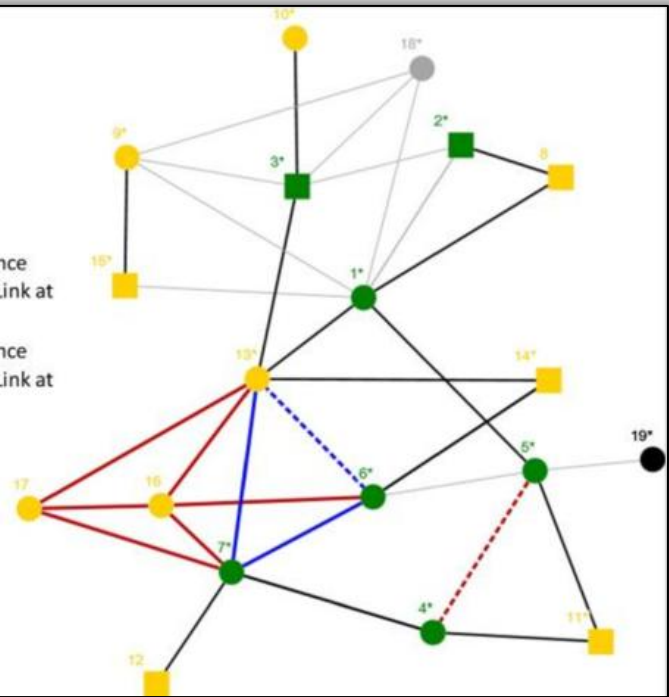
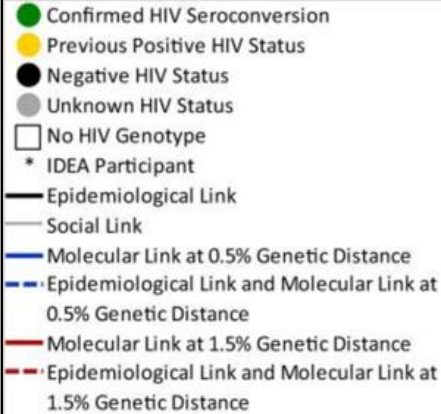
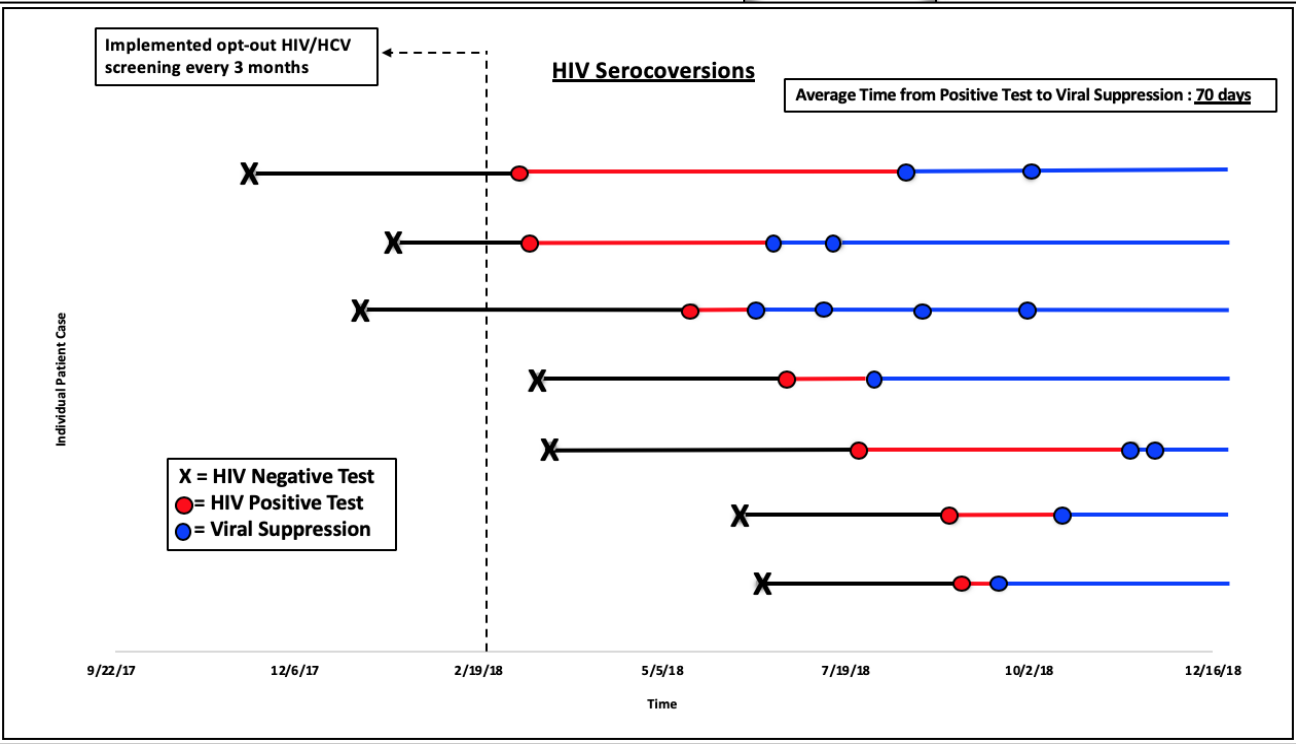
Hansel Tookes¹ · Tyler S. Bartholomew¹ · Shana Geary² · James Matthias^{3,2} · Karalee Poschman^{4,2} · Carina Blackmore² · Celeste Philip² · Edward Suarez¹ · David W. Forrest¹ · Allan E. Rodriguez¹ · Michael A. Kolber¹ · Felicia Knaul¹ · Leah Colucci¹ · Emma Spencer²

Published online: 25 September 2019
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Abstract

Prevention of HIV outbreaks among people who inject drugs in Florida, USA. The first legal syringe services program was implemented in Miami, FL, in 2018. We conducted an epidemiologic investigation. All seven acute HIV seroconversions were identified. Analysis of the HIV genetic distance. We identified a risk network with community-based methods or molecular analyses alone. Providing linkage and patient navigation, could be

Keywords People who inject drugs · HIV · Miami



> [Drug Alcohol Depend.](#) 2021 Oct 27;229(Pt A):109124. doi: 10.1016/j.drugalcdep.2021.109124.
Online ahead of print.

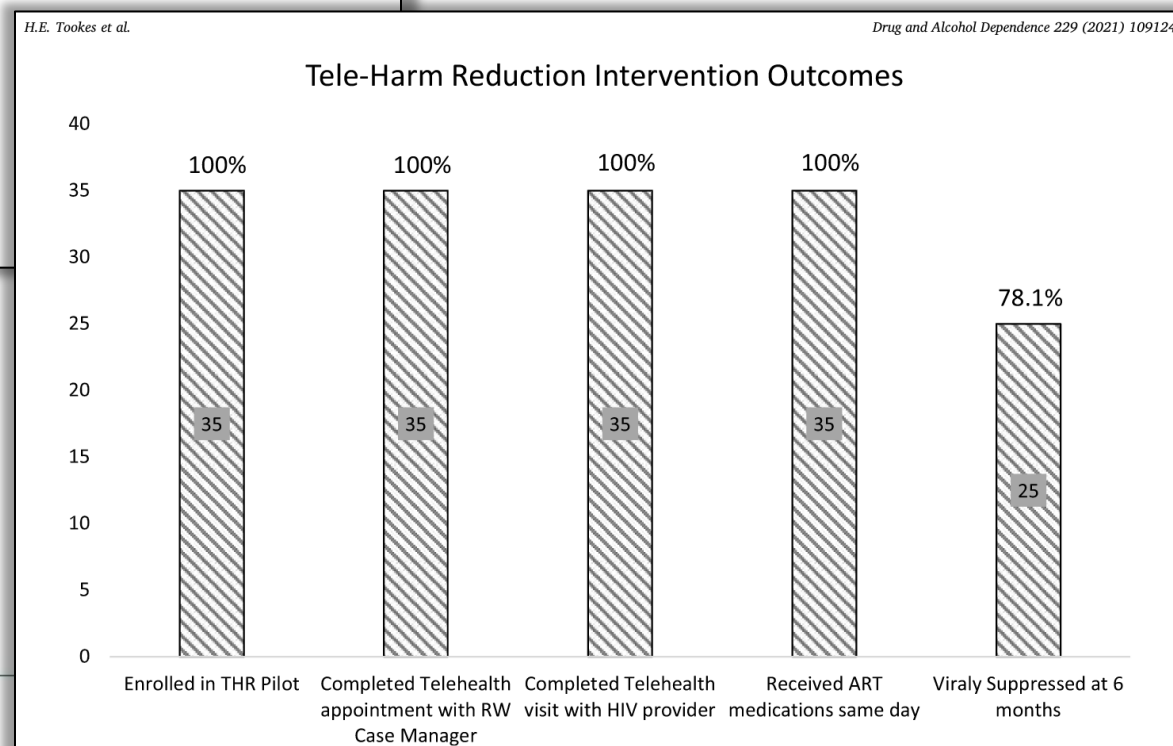
Acceptability, feasibility, and pilot results of the tele-harm reduction intervention for rapid initiation of antiretrovirals among people who inject drugs

Hansel E Tookes¹, Tyler S Bartholomew², Edward Suarez³, Elisha Ekowo¹, Margaret Ginoza¹, David W Forrest⁴, David P Serota¹, Allan Rodriguez¹, Michael A Kolber¹, Daniel J Feaster⁵, Angela Mooss⁶, Derek Boyd⁶, Candice Sternberg¹, Lisa R Metsch⁷

Affiliations + expand

PMID: 34781096 DOI: [10.1016/j.drugalcdep.2021.109124](#)

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Long-Acting Injectable Prep for People Who Inject Drugs at a Syringe Services Program: A Qualitative Acceptability and Feasibility Study

Original Paper | [Open access](#) | Published: 09 January 2025

(2025) [Cite this article](#)

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[Edward Suarez Jr.](#), [Hansel E. Tookes](#), [Marissa Coppola](#), [Marina Plesons](#), [David Serota](#), [Sara M. St. George](#) & [Tyler S. Bartholomew](#) 

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Changing State Policy

Successful Dissemination Strategies:

1. Localized Data
2. Student Advocates
3. Testimonials
4. Tailored messaging

Florida Infectious Disease Elimination Act (IDEA): HB171/SB366

The **IDEA Exchange** is a pilot syringe exchange program authorized by the 2016 IDEA that combats the rising opioid and HIV epidemics in Miami-Dade.



----- **85%** use opioids/opiates

----- **42%** test Hepatitis C Positive vs. 0.8% in the US population

----- **8%** test HIV Positive vs. 0.3% in the US population

Since opening its doors in December 2016, the **IDEA Exchange** has seen more than:

1,100 Opioid overdoses reversed with Narcan

275,000 used syringes taken off the streets of Miami

HB171/SB366 will replicate the success of the **Miami IDEA Exchange** by legalizing syringe exchanges statewide

Syringe Exchange Programs Work!

According to the CDC, SEPs are proven to be a cost-saving preventive intervention, saving the healthcare system over **\$400,000** for a lifetime of HIV medications, **\$94,000** for one course of the new Hepatitis C medications, and Jackson Memorial Hospital **\$11.4 million** in healthcare costs associated with PWID in one year (while only spending **\$0.9 cents** per syringe). SEPs also:

1. **Increase entry into treatment for Substance Use Disorders**
2. **Reduce the number of overdose deaths**
3. **Reduce HIV and Hepatitis C transmission rates**





SHOTS - HEALTH NEWS



Key Florida Republicans Now Say Yes To Clean Needles For Drug Users

June 27, 2019 · 11:21 AM ET
Heard on [Weekend Edition Saturday](#)

State News

House Panel Greenlights Bill To Replicate Miami Needle Exchange Program

KHN

COVID-19

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Florida Is The Latest Republican-Led State To Adopt Clean Needle Exchanges

By Sammy Mack, WLRN
JULY 2, 2019

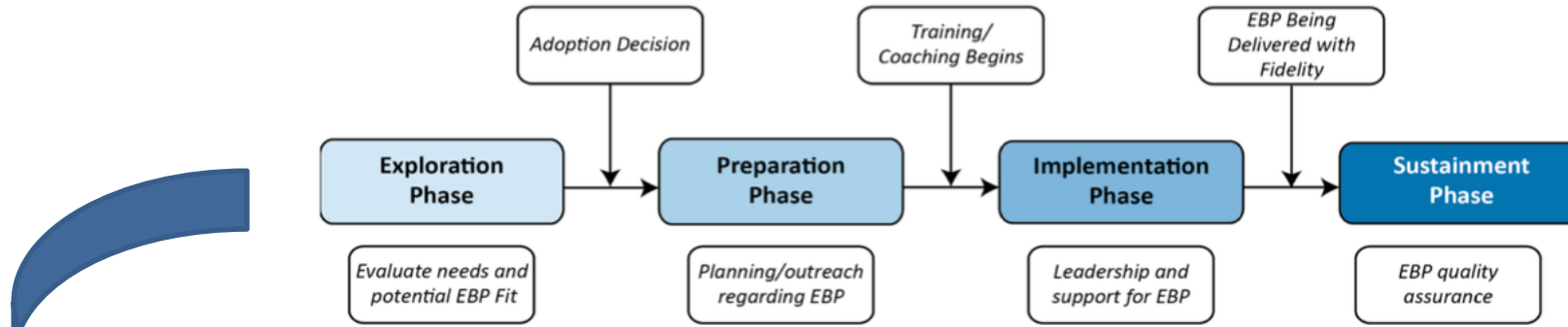
REPUBLISH THIS STORY
DISPONIBLE EN ESPAÑOL



This year, when Bradley heard discussion of the needle exchange bill again, he had a different response.

“I just want to say, when I started my career in the Senate, I voted against the pilot project — and I was wrong,” he said as he voted for the bill this time. “And the results speak for themselves. It’s very good public policy.”





Exploration

Preparation

Implementation

Collaborative Sustainment



EPIC-IDEA Initiative

Results of the 12 counties that have engaged in the focus group discussions.

**Note. These results are subject to change based on ongoing efforts from our team to move counties across these identified stages.*



| County | Exploration | Preparation | Implementation | Sustainment |
|--------------|-------------|-------------|----------------|-------------|
| Miami-Dade | | | | X |
| Hillsborough | | | X | |
| Pinellas | | X | | |
| Orange | | X → | X | |
| Broward | | X | | |
| Palm Beach | | | X | |
| Duval | X → | X | | |
| Nassau | X | | | |
| Leon | | X | | |
| Putnam | X | | | |
| Lee | X | | | |
| Manatee | | X | | |

Clinical Infectious Diseases

BRIEF REPORT

Hospital Costs of Injection Drug Use in Florida

Austin E. Coye,¹ Kasha J. Bornstein,^{1,✉} Tyler S. Bartholomew,¹ Hua Li,² Stanley Wong,³ Naveed Z. Janjua,³ Hansel E. Tookes,⁴ and Joan E. St Onge⁵

¹University of Miami Miller School of Medicine, Miami, Florida; ²Department of Public Health Sciences, Division of Biostatistics, Biostatistics Consulting Core, University of Miami Miller School of Medicine; ³BC Centre for Disease Control, Vancouver, British Columbia, Canada; ⁴Medicine, Division of Infectious Diseases, University of Miami; ⁵Medicine, Miami, Florida, USA, and ⁵Department of Medicine, University of Miami, Miami, Florida, USA

People who inject drugs (PWID) experience injection-related infections (IRIs) at significant health burden. In this study used and validated an algorithm based on the *Classification of Diseases, Tenth Revision*, to estimate PWID populations, assess the total statewide economic burden among PWID, and calculate associated costs of care.

Keywords. people who inject drugs; injection-related infections; skin and soft-tissue infections; bacterial endocarditis.

Economic Burden, FY 2017

\$380 million

| | Total |
|----------------------|--------------------|
| Total Charges | \$2 110 786 677.00 |
| Total Cost | \$379 788 290.62 |
| Insurance Status | Total Charges |
| Federal | \$668 234 450.00 |
| State, County, Local | \$589 698 411.00 |
| Uninsured | \$537 206 811.00 |
| Private Insurance | \$299 770 362.00 |

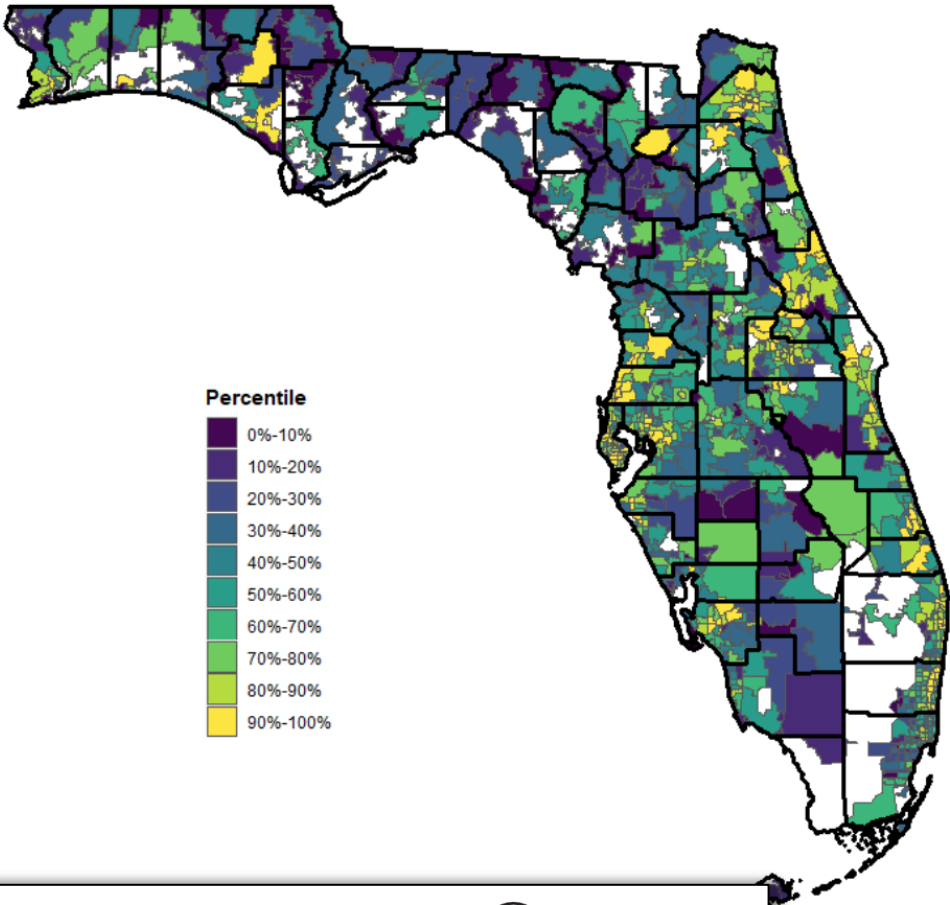
Cost by County, FY 2017

| | | |
|--------------|------|-----------------|
| Pinellas | 1855 | \$38,124,268.64 |
| Hillsborough | 1841 | \$45,014,789.60 |
| Broward | 1628 | \$37,356,299.28 |
| Palm Beach | 1528 | \$32,062,620.34 |
| Duval | 1436 | \$27,970,817.48 |
| Miami-Dade | 1187 | \$33,858,254.14 |
| Pasco | 1056 | \$17,782,643.99 |
| Orange | 993 | \$29,534,001.46 |
| Brevard | 820 | \$19,034,011.55 |
| Volusia | 730 | \$11,797,633.43 |
| Lee | 710 | \$13,596,447.55 |
| Alachua | 554 | \$14,355,983.23 |
| Sarasota | 481 | \$16,200,536.10 |
| Seminole | 445 | \$9,041,561.42 |
| Clay | 412 | \$7,440,121.41 |
| Escambia | 380 | \$7,505,638.95 |
| Manatee | 365 | \$9,045,761.67 |
| Polk | 347 | \$5,923,539.75 |
| Marion | 319 | \$6,353,370.84 |



Table 3.
Descriptive statistics of Florida counties containing high-priority ZCTAs*

| County | Number of ZCTAs identified as high priority |
|--------------|---|
| Pinellas | 13 |
| Duval | 8 |
| Palm Beach | 8 |
| Pasco | 8 |
| Broward | 7 |
| Orange | 7 |
| Volusia | 6 |
| Lee | 6 |
| Hillsborough | 5 |
| St. Lucie | 4 |
| Hernando | 3 |
| Bay | 2 |
| Brevard | 2 |
| Clay | 2 |
| Manatee | 2 |
| Miami-Dade | 2 |
| Sarasota | 2 |
| Seminole | 2 |
| Osceola | 2 |
| Charlotte | 1 |
| Escambia | 1 |
| Martin | 1 |
| Okaloosa | 1 |
| St. Johns | 1 |
| Sumter | |
| Union | |
| Washington | |
| Total | |



ANNALS OF MEDICINE
2022, VOL. 54, NO. 1, 2137–2150
<https://doi.org/10.1080/07853890.2022.2105391>

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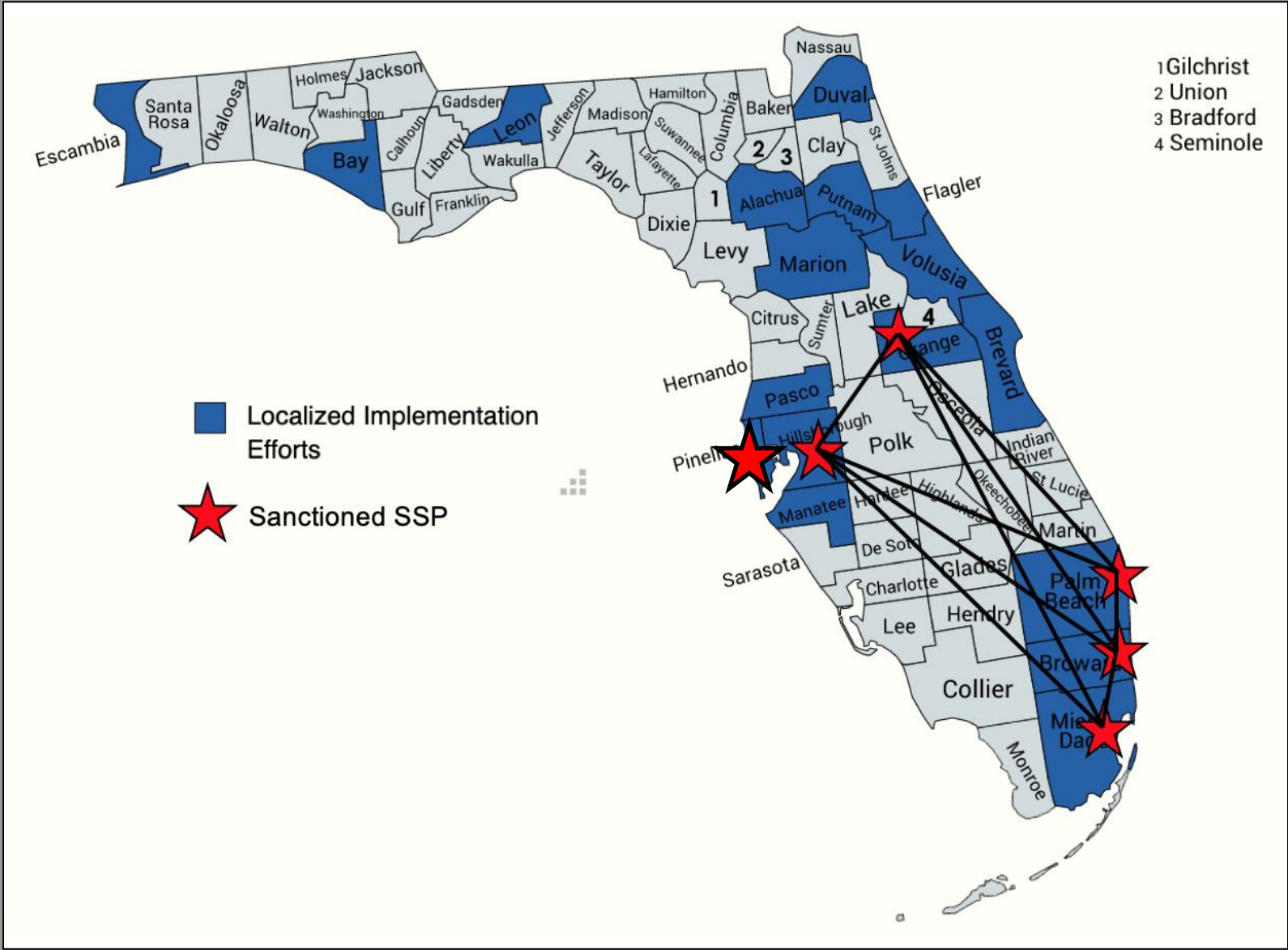
ORIGINAL ARTICLE

 OPEN ACCESS  Check for updates

Application of machine learning algorithms for localized syringe services program policy implementation – Florida, 2017

Tyler S. Bartholomew^a , Hansel E. Tookes^b , Emma C. Spencer^c and Daniel J. Feaster^a

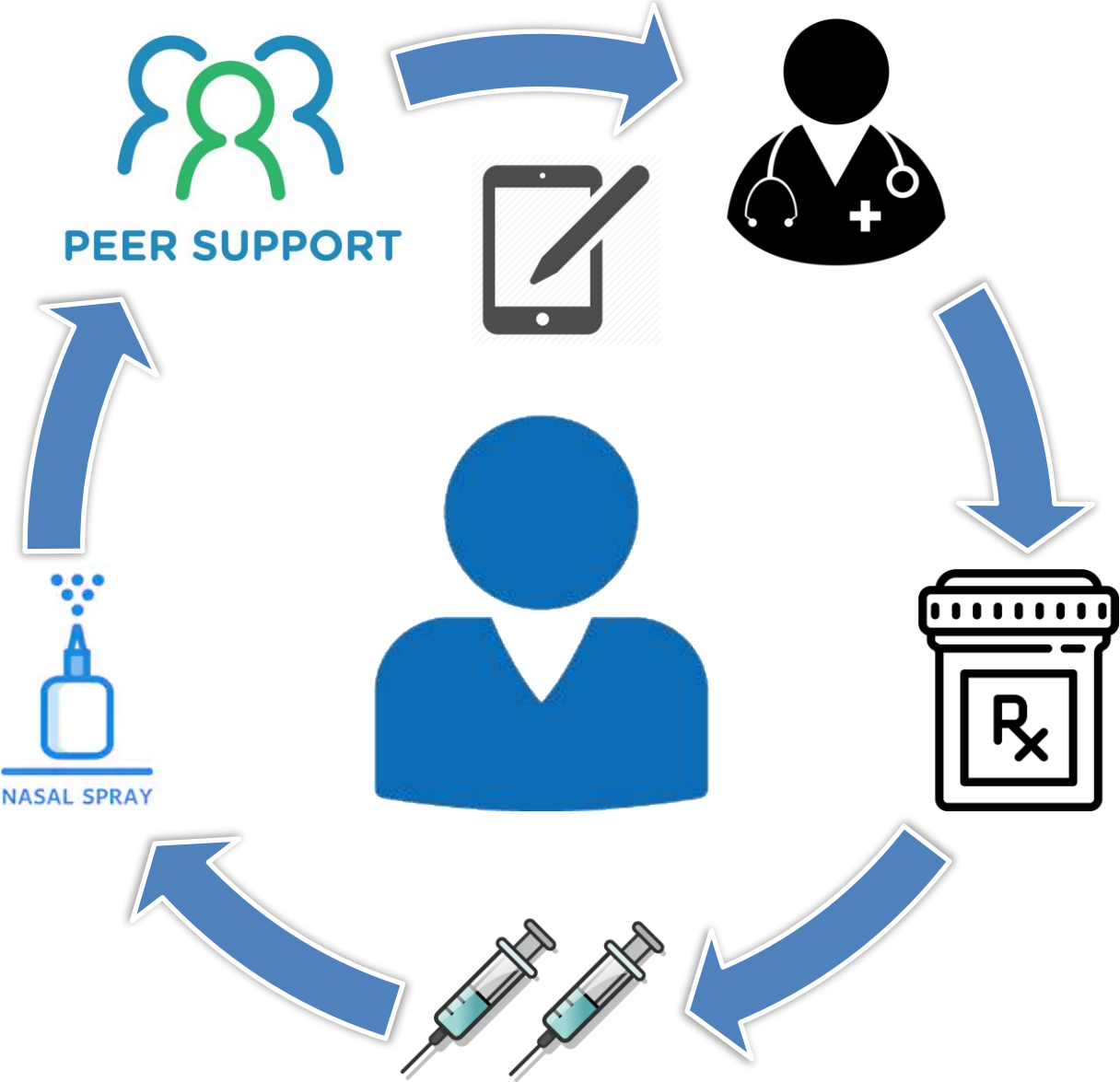
by the LASSO model.
boundary; white space



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What's Next?



- 3 SSP sites: IDEA Miami, IDEA Tampa, The SPOT Broward
- Sample Size: 240 (80 per site)
- 2 arms: *Tele-Harm Reduction* or patient navigation
- Primary Hypothesis: *Tele-Harm Reduction* superior to patient navigation in HIV viral suppression at 3, 6 and 12 months
- Secondary Hypotheses: *Tele-Harm Reduction* superior for MOUD initiation/retention and HCV cure
- Cost-effectiveness analysis



Project T-SHARP: study protocol for a multi-site randomized controlled trial of tele-harm reduction for people with HIV who inject drugs

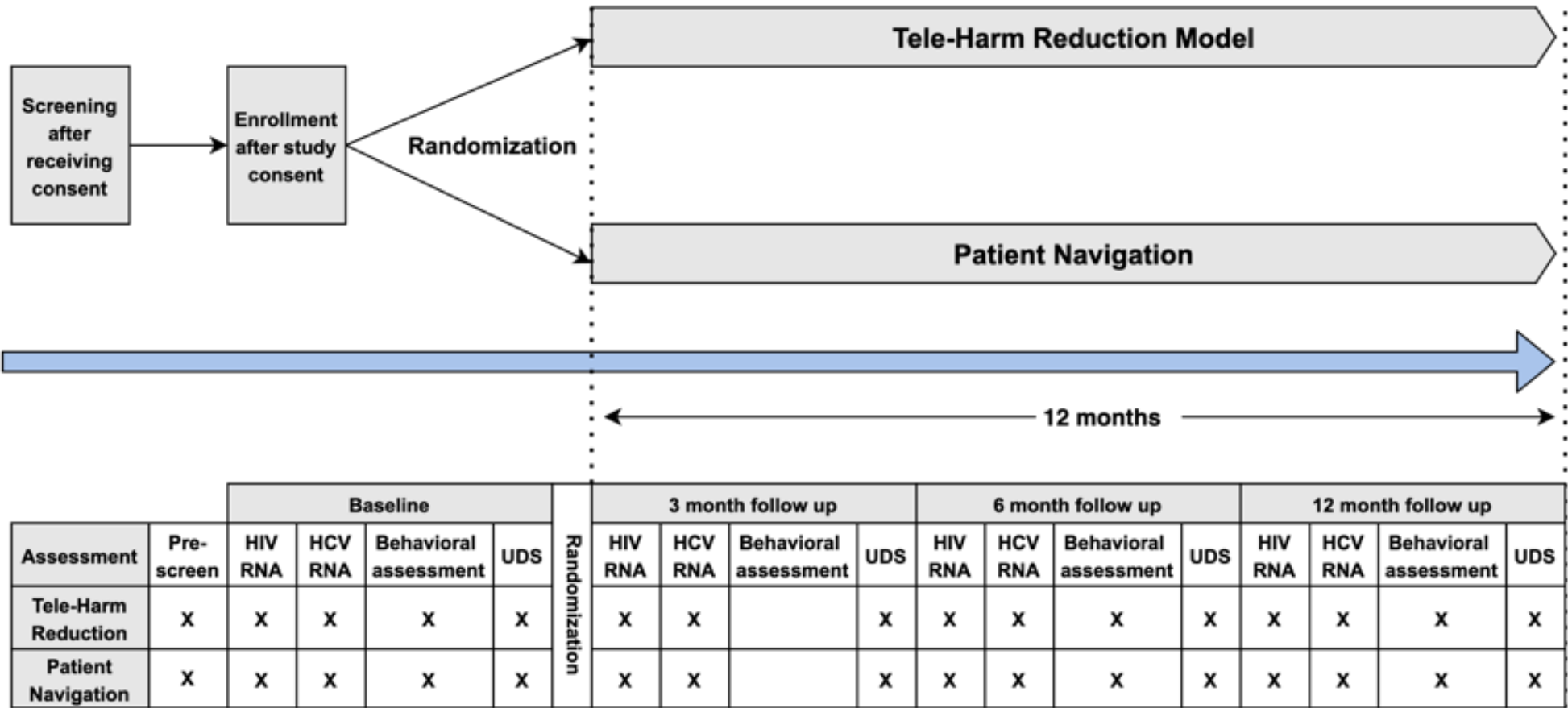
Hansel E. Tookes^{1*}, Asa Oxner², David P. Serota¹, Elizabeth Alonso³, Lisa R. Metsch⁴, Daniel J. Feaster⁵, Jessica Ucha³, Edward Suarez Jr.⁶, David W. Forrest⁷, Kathryn McCollister³, Allan Rodriguez¹, Michael A. Kolber¹, Teresa A. Chueng¹, Sheryl Zayas⁸, Bernice McCoy², Kyle Sutherland¹, Chetwyn Archer¹ and Tyler S. Bartholomew³

USF Health Tampa Bay Street Medicine Helps Launch Florida's Second Needle Exchange Program

Written by Kristin... November 10, 2020 @ 12:00 pm Filed under College of Public Health, News & the Latest from USF Health, Hot News, OPEP, Monarch College of Medicine, Multimedia, News Releases, Splash Page, USF Health Local Story



Figure 2. RCT Study Flow and Assessment Schedule



1 R01-DA058352-01 (MPI Tookes & Bartholomew)

Title: *In pursuit of a one-stop shop: a hybrid type 1 effectiveness-implementation trial of comprehensive tele-harm reduction for people who inject drugs*

Setting: IDEA Miami SSP (fixed and mobile)

Primary Aim: Evaluate the effectiveness of C-THR on PrEP and MOUD initiation and retention

Secondary Aim: Cost, cost-effectiveness and long-term clinical impact of C-THR

Secondary Aim: Assess implementation process and scalability of C-THR

RESEARCH

Open Access



"We want everything in a one-stop shop": acceptability and feasibility of PrEP and buprenorphine implementation with mobile syringe services for Black people who inject drugs

Tyler S. Bartholomew^{1*}, Barbara Andraka-Cristou^{2,3}, Rachel K. Totaram², Shana Harris^{3,4}, Susanne Doblecki-Lewis⁵, Lily Ostrer⁵, David P. Serota⁵, David W. Forrest⁶, Teresa A. Chueng⁵, Edward Suarez⁷ and Hansel E. Tookes⁵

Abstract

Introduction: A recent surge in HIV outbreaks, driven by the opioid and stimulant use crises, has destabilized our progress toward targets set forth by *Ending the HIV Epidemic: A Plan for America* for the high-priority community of people who inject drugs (PWID), particularly Black PWID.

Methods: In order to ascertain the acceptability and feasibility of using a mobile syringe services program (SSP) for comprehensive HIV prevention via PrEP and medications for opioid use disorder (MOUD), our mixed methods approach included a quantitative assessment and semi-structured qualitative interviews with Black PWID ($n = 30$) in Miami-Dade County who were actively engaged in mobile syringe services.

Results: Participants felt that delivery of MOUD and PrEP at a mobile SSP would be both feasible and acceptable, helping to address transportation, cost, and stigma barriers common within traditional healthcare settings. Participants preferred staff who are compassionate and nonjudgmental and have lived experience.

Conclusions: A mobile harm reduction setting could be an effective venue for delivering comprehensive HIV prevention services to Black PWID, a community that experiences significant barriers to care via marginalization and racism in a fragmented healthcare system.

Keywords: PrEP, Medications for opioid use disorder, Syringe services program, Black people who inject drugs

ANNALS OF MEDICINE
2021, VOL. 53, NO. 1, 1960–1968
<https://doi.org/10.1080/07853890.2021.1993326>

 Taylor & Francis
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ORIGINAL ARTICLE

OPEN ACCESS

Check for updates


Harm reduction for the treatment of patients with severe injection-related infections: description of the Jackson SIRI Team


David P. Serota^a, Hansel E. Tookes^a, Belén Hervera^a, Babley M. Gayle^b, Cara R. Roeck^b, Edward Suarez^a, David W. Forrest^c, Michael A. Kolber^a, Tyler S. Bartholomew^c , Allan E. Rodriguez^a and Susanne Doblecki-Lewis^a


^aDivision of Infectious Diseases, Department of Medicine, University of Miami Miller School of Medicine, Miami, FL, USA; ^bJackson Memorial Hospital, Jackson Health System, Miami, FL, USA; ^cDepartment of Public Health Sciences, University of Miami Miller School of Medicine, Miami, FL, USA

Open Forum Infectious Diseases


MAJOR ARTICLE

 IDSA
Infectious Diseases Society of America

 hivma
hiv medicine association

 OXFORD


Integrated Infectious Disease and Substance Use Disorder Care for the Treatment of Injection Drug Use–Associated Infections: A Prospective Cohort Study With Historical Control

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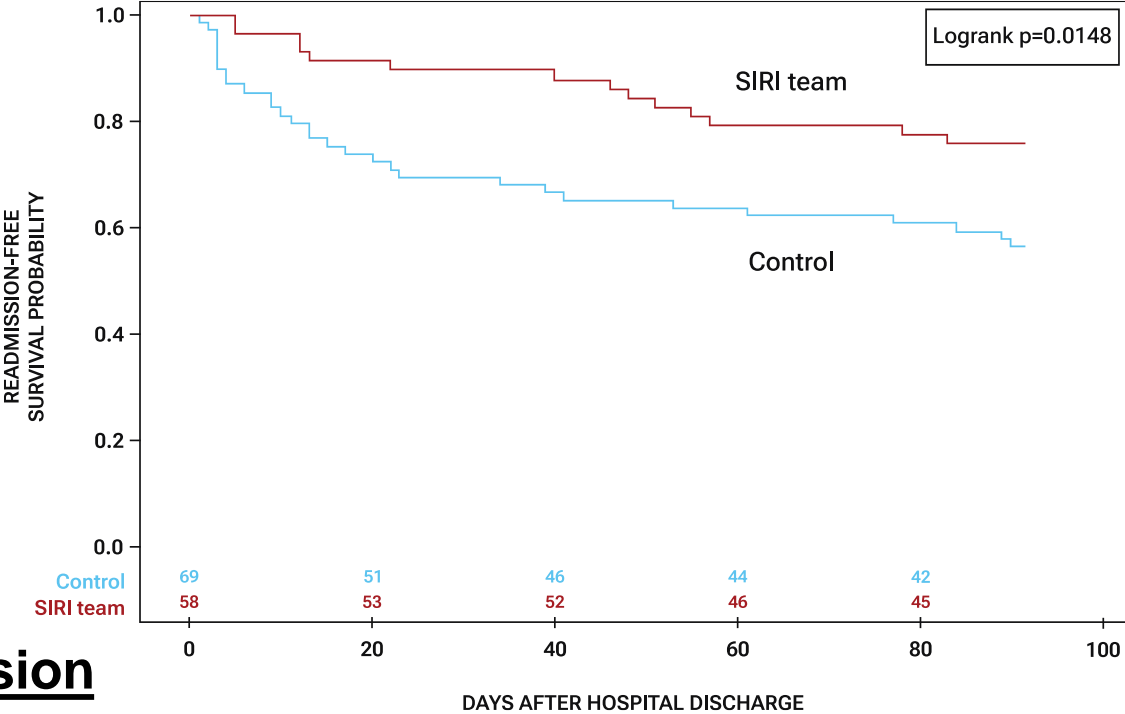
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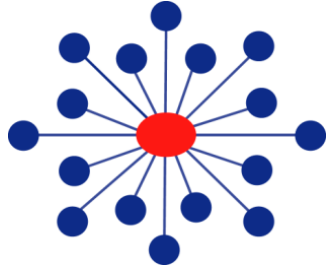
Implementation of an integrated infectious disease and substance use disorder team for injection drug use-associated infections: a qualitative study

Belén Hervera¹, Grace Seo¹, Tyler S. Bartholomew², Teresa A. Chueng¹, Edward Suarez¹, David W. Forrest¹, Salma Hernandez¹, Allan E. Rodriguez¹, Hansel E. Tookes¹, Susanne Doblecki-Lewis¹ and David P. Serota^{1,*} 



90-day death or readmission

|  | SIRI team | Control | aRR | 95% CI |
|--|-----------|----------|------|------------|
| | 14 (24%) | 30 (44%) | 0.55 | 0.32, 0.95 |



NIDA Clinical Trials Network

CTN-0121: HOLISTIC INTERVENTION FOR SEVERE INJECTION-RELATED INFECTIONS

HI-SIRI Study



**U.S. Department of
Health and Human Services**
Centers for Disease
Control and Prevention

Compendium of Evidence-Based Interventions and Best Practices for HIV Prevention



Structural Interventions

Best practices that use structural
approaches to improve HIV outcomes



OPT-OUT HIV/HCV SCREENING

Evidence-Informed Structural Intervention

INTERVENTION DESCRIPTION

Intended Population

- People who inject drugs (PWID) participating in a syringe services program (SSP)

Goals of Intervention

- Increase HIV testing
- Increase Hepatitis C (HCV) testing

Brief Description

Opt-Out HIV/HCV Screening is a structural intervention designed to provide access to HIV/HCV testing in an acceptable venue for PWID. The intervention involves a change from an opt-in testing policy to an opt-out testing policy where participants are informed that bundled HIV/HCV testing is part of routine care upon their enrollment at the SSP. Participants can decline testing. If clients accept the testing, both results of each test are recorded. Point-of-care tests for both HIV/HCV are offered using a blood sample collected via fingerstick. Results are reported to the participant immediately with appropriate post-test counseling and education. For those who tested reactive, active linkage to care is offered.

Theoretical Basis

- None reported

Intervention Duration

- Ongoing

Intervention Settings

- Syringe services programs (SSP)

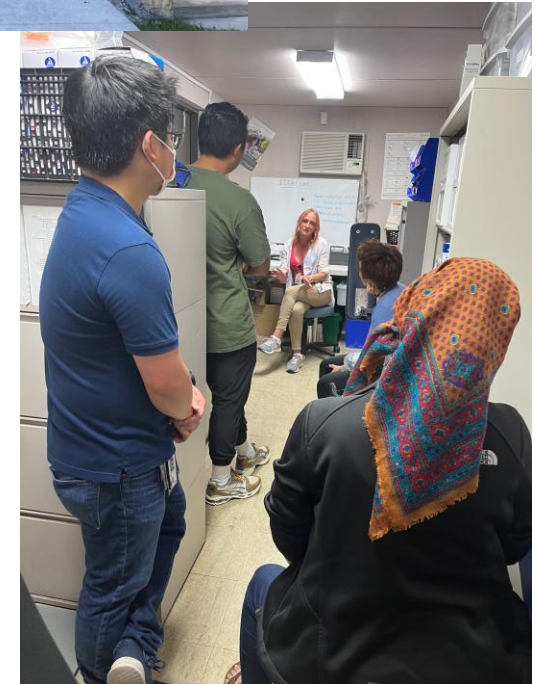
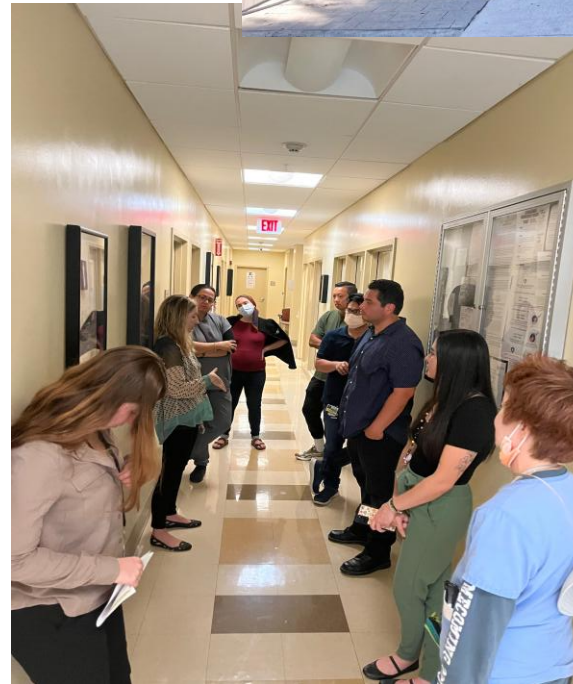
Deliverers

- SSP staff

Structural Components

- Access – HIV testing
 - Increased access to HCV/HIV testing and linkage to HIV medical care
- Policy/Procedure – Institutional policy/procedure
 - Implemented opt-out HCV/HIV testing in SSP

COMMUNITY PSYCHIATRY ROUNDS!



POS 27 – CMS Billable Encounter for Street Medicine – my next project!

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Gratitude

IDEAExchange



To the people listening who have supported our patients in the hospital and have provided compassionate care. I and the rest of the IDEA Team thank you.

As Faculty advisor for Miami Street Medicine, I want to thank the physicians and providers that support our medical students street runs on Saturdays. CMS has approved a new place of service code for street medicine encounters. Huge!



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Acknowledgements

IDEA PARTICIPANTS

IDEA FACULTY

IDEA STAFF

Drs. Hansel Tookes & Tyler Bartholomew for helping me put the presentation together 🙏

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