

Rapid, discreet care for those at risk of HIV

D.C. clinics offer 'red carpet' treatment to people who may have become infected

BY LESLIE TAMURA

Raped by a stranger and possibly infected with HIV, the law student in her late 20s came to the Washington Hospital Center for help in July.

Nurses from the District government's Sexual Assault Nurse Examiner Program, housed at the hospital, treated her and collected forensic evidence to send to the D.C. crime lab.

It was too early to determine if she was HIV-positive — that test could not be done effectively for two to eight more weeks — but because she had been exposed to the assailant's bodily fluids, SANE nurses got her a prescription for

the standard menu of drugs that have been shown to reduce the risk of infection. The key was that she had to begin the regimen immediately, and stick to it.

After a couple of days, however, the woman struggled with the drugs' side effects: nausea, diarrhea, vomiting and general malaise. Distraught, she was at risk of quitting the meds — and possibly becoming another entry in the District's lengthy roster of AIDS victims.

So SANE sent her to the Whitman-Walker Clinic in Northwest Washington and told her, "Just ask for the red carpet."

She did, and though HIV and AIDS were never mentioned, staff members knew exactly why she was there. They quickly led her to a private room and began setting up meetings with the appropriate care providers.

RED CARPET CONTINUED ON E5

To stem HIV epidemic, patients get expedited care

RED CARPET CONTINUED FROM E1

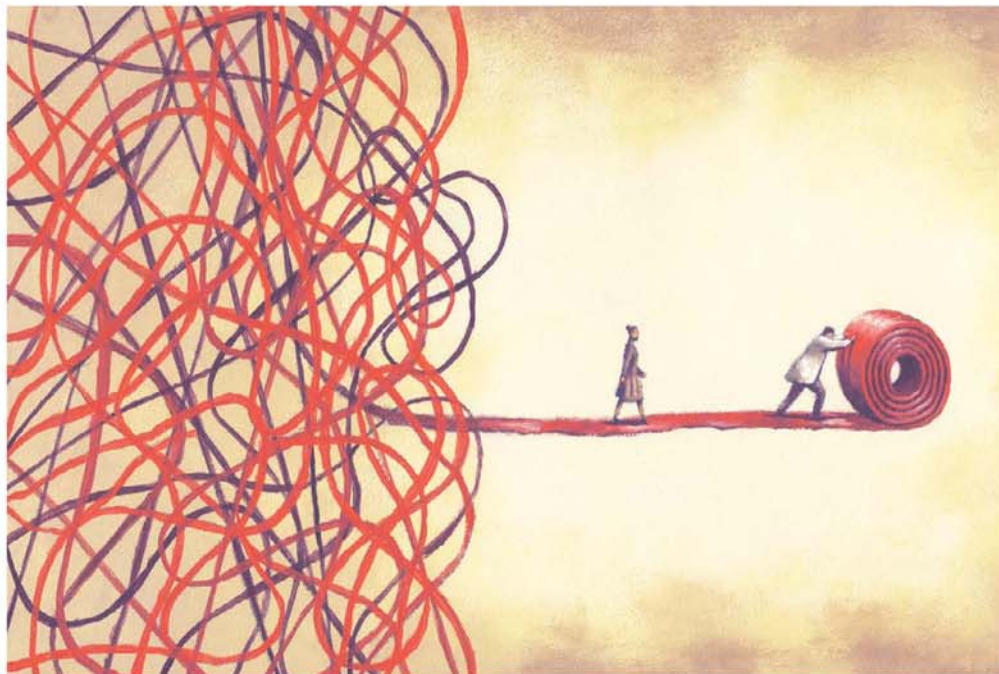
"She was crying," said Justin Goforth, the clinic's community health director. "The waiting area is no place to sit and cry after you've had this traumatic incident."

In quick succession, a primary-care doctor conducted a physical exam, answered her medical questions and started her on a new drug regimen. "She wanted to switch her meds," Goforth said. "She was immediately seen and prescribed one pill, once a day — she tolerated that."

Other staffers informed her about insurance options, how to pay for the new drugs, further tests and overall care. A nurse/case manager, who would be her advocate throughout her treatment, addressed her questions about future sexual relations, mental health therapy and what to tell her friends and relatives. Within two hours of her arrival, she had a more personalized plan to reduce her chances of developing HIV, including a scheduled follow-up appointment.

"This is rolling out the red carpet," said Erin Loubier, Whitman-Walker's director of public benefits. "We want you to seamlessly move through ... because we want you in care."

The District is struggling to contain an HIV/AIDS epidemic that involves more than 16,000 people; more than 3 percent of the population older than age 12 is living with the virus or the full-blown disease. Rapid-enrollment programs such as the "red carpet" one at Whitman-Walker have already resulted in more voluntary HIV testing, early diagnosis and early linkage to care, all of which



JAMES FRYER FOR THE WASHINGTON POST

on washingtonpost.com

 **Find a clinic** An interactive map shows sites offering expedited HIV treatment. www.washingtonpost.com/redcarpetclinics

are key to reducing the spread of the disease.

"We've made a lot of progress in D.C.," said Nnemi Kamanu Elias, the interim director of the District's HIV/AIDS, Hepatitis, STD and TB Administration. "We've shortened the amount of time that people get into care after they've been diagnosed."

The Whitman-Walker Clinic launched its program in 2008. "We built from scratch," Loubier recalled. "We basically flipped everything on its head in an effort to really try to ensure that ... there weren't barriers to care."

When the D.C. Department of Health learned about the program in 2009, Goforth said, it be-

gan pushing other clinics to adopt similar models aimed at anybody in danger of developing HIV/AIDS or spreading the disease: victims of rape or other assault, newly diagnosed patients, patients transferring from other providers and those who have stopped getting treatment.

"We all benefit from this," said A. Toni Young, executive director of the Community Education Group, a nonprofit that provides public health services and refers people to "Red Carpet Entry" clinics.

This spring, the health department established a set of criteria for such clinics, including an offer of primary-care appointments within 24 hours of first contact and access to a case manager who can arrange care. In addition, because the stigma often attached to HIV/AIDS makes some people hesitant to ask for treatment, the clinic must provide a password for new clients to use when they arrive for their appointment: At Whitman-Walker, it's "red carpet"; at Children's National Medical Center, it's "youth connec-

tions"; at the Carl Vogel Center, it's "Dr. White."

"Everybody knows what you're talking about," Loubier said, "and you've never mentioned HIV."

Besides Whitman-Walker, several area institutions now have programs publicized by the health department: AIDS Healthcare Foundation/Blair Underwood Healthcare Center, Andromeda Transcultural Health, Children's National Medical Center, Carl Vogel Center, Family and Medical Counseling Services, the Regional Addiction Prevention Calvin Rolark Center and 11 Unity Health Care Centers.

The system greatly shortens an intake process that used to involve hours of paperwork and separate appointments with a social worker, mental health specialist, nurse and doctor over a span of several weeks, Goforth said.

"You're already at the point where you're barely able to walk through that door," he added. "If you have to keep coming to all these appointments ... you're out and you're not coming back because we've scared you off with the process."

Patients are no longer expected to make several different appointments to address HIV-related concerns, says Katrina Jones, operations director of the Vogel center. "Now it's a bundled service as soon as they come in."

"We've learned that the immediacy of our response is tied to our success of patients," said Angela Fulwood Wood, the chief operations officer of Family and Medical Counseling Service. "The more that we engage people early is our best chance at changing behavior."

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RAPID, DISCREET CARE FOR THOSE AT RISK OF HIV by Leslie Tamura

I did not know much about the HIV/AIDS epidemic in the District—outside of what I had learned during the Kaiser intern orientation briefing—so when a local health clinic reached out to *The Washington Post* claiming to offer a unique HIV/AIDS service model for its patients, I was excited and a little nervous. I knew writing about an HIV/AIDS program for an area with the highest HIV/AIDS case rate in the country would be a challenging opportunity.

But what looked like a tricky job turned out to be a chance for me to develop my skills as a reporter and a web producer. This was the first time I was able to use both my web and writing backgrounds.

The initial story was that this local health clinic had streamlined its model of HIV/AIDS care. Patients who had fallen out of care, those recently diagnosed and those who thought they might have been exposed to the disease could come to this local clinic, ask for “red carpet service,” and be able to meet with their entire health care team within hours. No one had to mention, “HIV/AIDS.”

The little story about a single health clinic, however, turned into a larger story because several other clinics offered similar programs. Nonetheless, it was a worthwhile story educating the community about what options were available to getting HIV/AIDS care.

A week before the story was scheduled for publication, my editors asked me if there were any photos or graphics to go with the piece. I had nothing, but I offered to make a Google Map, pinpointing all of the clinics offering the service.

I thought it would be an easy task: I would use GoogleMap technology to just submit all of the clinics’ addresses.

It wasn’t so easy. *The Washington Post* was changing its content management system, and there was some concern about how my map would work on the website.

Collaborating with a couple web producers and using what little HTML coding experience I had, however, I was able to create a GoogleMap, embed it with my article as well as develop my own page featuring this map of “Red Carpet” clinics.

The Washington Post has done extensive reporting on the District’s HIV/AIDS epidemic, and I’m happy to have contributed a story and an interactive map to the overall coverage.

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View Interactive Map here:

<http://www.washingtonpost.com/wp-dyn/content/article/2010/09/13/AR2010091304496.html>