



Early Intervention Services

Service Definition

Early Intervention Services (EIS) are a combination of four components that aim link people living with HIV to care and support services. EIS may be especially important for individuals who are newly diagnosed, returning to care after a prolonged treatment interruptions of six months or more, or who are new to the area and/or HIV medical care.

The four components of EIS are:

- Targeted HIV testing provided through [Counseling, Testing and Referral](#) (CTR) services.
- Referral services provided through [Partner Services](#) (PS).
- Access and linkage to care provided through [Linkage to Care](#) (LTC).
- Outreach, health education, and risk reduction provided through [Peer Navigation](#) services as well as [Registered Nurse Case Management](#) (RNCM) services for infants born to people living with HIV.

The goals of EIS are to assist clients with:

- Developing acceptance of their HIV status.
- Preventing perinatal transmission of HIV.
- Identifying personal strengths to use to overcome barriers to enter or re-enter to HIV medical care.
- Identifying both individual and system barriers to enter or re-enter into HIV medical care.
- Developing and carrying out a plan for overcoming barriers to enter or re-enter into HIV medical care.
- Progressing onto the next level of support, ranging from:
 - Independent engagement in care.
 - Limited support for engagement in care.
 - Medical or non-medical case management to maintain engagement in care.

Standard 1: Targeted HIV testing provided through EIS must be delivered in accordance with the Counseling, Testing, and Referral (CTR) Protocol.

Providers are responsible for being familiar with and meeting the requirements of CTR services outlined in the [HIV Counseling, Testing, and Referral Protocol](#).

Documentation

The client record must follow documentation expectations outlined in the CTR Protocol linked above.

Standard 2: Referral services provided through EIS must be delivered in accordance with the Wisconsin HIV Partner Services (PS) Practice Standards and Policy Manual.

Providers are responsible for being familiar with and meeting the requirements of PS outlined in the [Wisconsin HIV PS Practice Standards and Policy Manual](#).

Documentation

The client record must follow documentation expectations outlined in the Wisconsin HIV PS Practice Standards and Policy Manual linked above.

Standard 3: Access and linkage to care provided through EIS must be delivered in accordance with the Linkage to Care (LTC) Standards and LTC Specialist (LTCS) Program Manual.

Providers are responsible for being familiar with and meeting the requirements of LTC services outlined in the [LTC Standards](#) and [LTCS Program Manual](#).

Documentation

The client record must follow documentation expectations outlined in the LTC Standards and LTCS Program Manual linked above.

Standard 4: Outreach, health education, and risk reduction provided through EIS must be delivered in accordance with the Peer Navigator for People Living with HIV Manual.

Providers are responsible for being familiar with and meeting the requirements of Peer Navigation services outlined in the [Peer Navigator for People Living with HIV Manual](#).

Documentation

The client record must follow documentation expectations outlined in the Peer Navigator for People Living with HIV Manual linked above.

Standard 5: Outreach, health education, and risk reduction provided to prevent perinatal transmission through EIS must be delivered in accordance with the Registered Nurse Case Management (RNCM) Standards of Care.

Providers are responsible for being familiar with and meeting the requirements of RNCM services outlined in the [RNCM Standards of Care](#).

Documentation

The client record must follow documentation expectations outlined in the RNCM Standards of Care linked above.

Standard 6: EIS providers must make referrals for other services as needed.

Referrals must be made to key points of entry that are accessible and acceptable to the client.

Other needed services might include:

- Medical case management.
- Non-medical case management.
- Partner services.

- Medication adherence services.
- Partner or couple's HIV testing.
- Screening and treatment for sexually transmitted diseases (STDs), hepatitis, and/or TB (tuberculosis).
- Reproductive health services.
- Counseling and services for mental health, substance abuse and/or domestic violence.
- Housing services.
- Insurance benefit services.
- Any other social and behavioral services.

Documentation

The client record must include documentation of referral(s) to other needed services, follow up, and result(s) of referral(s).
