

TN CFAR EHE Hub

April 2024 Newsletter



We hope that you are enjoying the warmer weather and longer days as we transition into spring. April and I have been excited about the flurry of IS activity here at the TN CFAR. Our training program is in full swing. We have recently completed a multi-session training on qualitative methods and the Consolidated Framework for Implementation Research as well as a session highlighting the importance of Health Equity frameworks to strengthen implementation science research. In addition to our training components, we are also working to develop a Community of Practice with our PrEP in pharmacy groups to develop a single IRLM that incorporates common facilitators and barriers experienced across the U.S. and tie them to effective strategies designed to increase access to PrEP. We hope to encourage our EHE awardees to publish this work to facilitate access to PrEP nationwide. We will continue to provide monthly mentoring sessions with each EHE awardee as they continue their excellent pre-implementation data collection and begin implementing their pilot programs.

Carolyn Audet, Ph.D. and April Pettit, MD, MPH



Project name:

Implementation of Rapid HIV Testing and Linkage to HIV Treatment or Prevention Among Vulnerable Populations in Tennessee

Project goal:

Our overarching goal is to develop and evaluate the implementation of a sustainable HIV health service model for rapid HIV testing and linkage to HIV treatment in Memphis, Tennessee, a metropolitan statistical area that currently ranks 2nd in the US in HIV incidence.

IS Strategy:

Consolidated Framework for Implementation Research

Challenges:

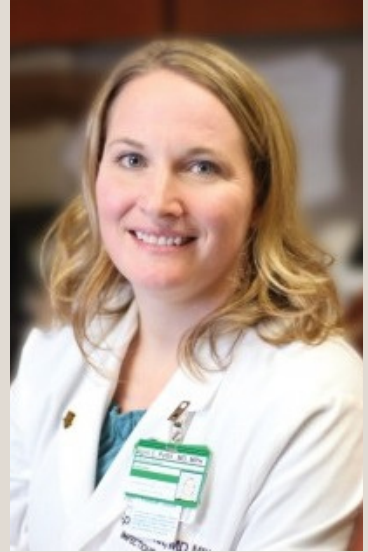
The main challenge for this project has been staff turnover at the participating HIV testing and treatment organizations-- including 5 participating sites with varying missions (the municipal health department, a community-based organization, a faith based FQHC, and two academic partners). An additional challenge includes a critical HIV funding policy change resulting in the state of Tennessee rejecting federal funds from the CDC for HIV testing.

Solutions:

To keep the project moving forward in the face of staff turnover, communication has been key. We conduct monthly virtual meetings separately with each individual site and quarterly in-person meetings with representatives for all of the participating sites.

Successes:

We are excited to have completed development of the multi-component rapid HIV testing and linkage model and are now moving into the implementation phase!



**April Pettit, MD, MPH
Vanderbilt University Medical Center**

IS Strategy:

We will implement four strategies to leverage community-based pharmacies as novel access points to PrEP care: (1) using status neutral HIV testing services; (2) delivering information on PrEP and local PrEP providers via informational pamphlets; (3) providing point-of-care PrEP education and counseling; and (4) giving pharmacists the ability to initiate/schedule PrEP appointments with local PrEP providers at the pharmacy counter or offering PEP as pharmacists can provide PEP in North Carolina.

Challenges:

We designed our program to overcome the current challenge that pharmacists in the South are currently unable to independently prescribe PrEP, unlike other regions in the United States. Our strategies address additional challenges that ours and others' research have identified such as logistical hurdles including administrative, time constraints, workflow when working with pharmacists practicing in large retail settings, and pharmacists' concerns on how to provide HIV counseling and referral to care should a new diagnosis of HIV be made in the pharmacy setting.

Solution:

Delivering these implementation strategies through community-based pharmacies is key. Our study collaborates with independent community-based pharmacies who already provide community health services and are committed to improving the wellbeing of their respective communities. We also partner with local health departments who will assist in providing HIV testing supplies and support for newly diagnosed persons with HIV.

Successes:

We have established partnerships with community-based pharmacies in three southern locations to evaluate the delivery of these implementation strategies: (1) The Premier Pharmacy and Wellness Center in the EHE jurisdiction of Charlotte, NC; (2) The McHugh Pharmacy Group in the EHE jurisdiction of Columbia, SC, and surrounding communities; and (3) The Florida A&M Pharmacies in Tallahassee FL. We look forward to our continued close collaboration for this project and into the future.

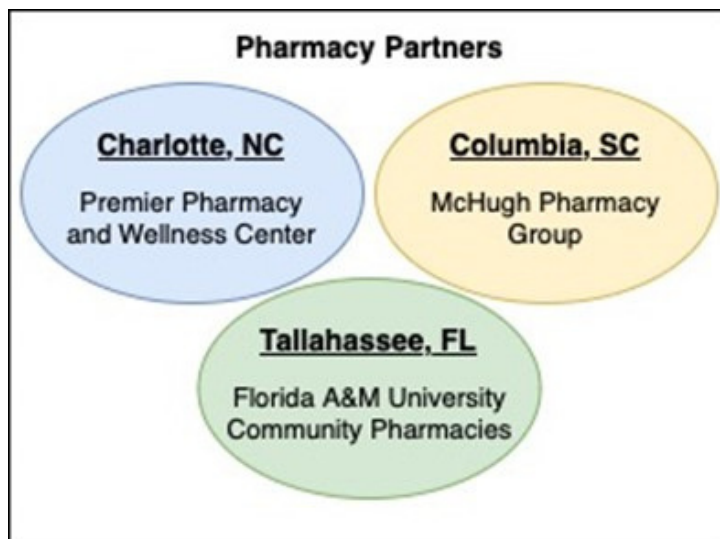
Leveraging Southern Community Based Pharmacies for PrEP Referrals

Project PI:

Charles Burns, MD
Assistant Professor
Department of Medicine –
Infectious Diseases
Duke University

Overview of Project RISE

The majority of new HIV diagnosis nationally occur in the southern United States. To improve HIV PrEP use in this region, we will leverage community-based pharmacies as novel access points to PrEP care. Our program empowers pharmacists to provide PrEP counseling and referrals to local PrEP clinics. Our goal is to make PrEP more accessible to persons who may benefit from it, but who are not aware of the potential benefits of PrEP, have inaccurate information about PrEP and/or are unaware of how to obtain PrEP services, particularly timely and low cost, or free PrEP services.



General Updates

The TN CFAR [website](#) has information on our new subawardees, a link to our a Youtube page, resources, and more information.

Webinars

Recordings of previous webinars can be found here

- [Health Equity Implementation Framework introduction and application](#)
- [Rapid Analysis Using the Consolidated Framework for Implementation Research CFIR](#)
- [The Consolidated Framework for Implementation Research \(CFIR\)](#)
- [Pragmatic and SMART Trial Designs for Implementation Research](#)

Upcoming Conferences & Workshops

- [National Ending the HIV Epidemic Partnerships for Research Meeting](#), April 15-16, 2024
- [Evaluating EHE Implementation Workshop](#), May 1-3, 2024
- [ACTHIV](#), May 2-4, 2024
- [National LatinX Conference on HIV/HCV/SUD](#), May 2-4, 2024
- [International AIDS Conference](#), July 22-26, 2024
- [National Ryan White Conference on HIV Care & Treatment](#), Aug 20-23, 2024
- [SIRC Conference](#), September 27-28, 2024

Grants

- [Notice of Pre-Application Webinar for PAR-22-153 “Infrastructure Development Training Programs for Critical HIV Research at Low-and Middle-Income Country Institutions \(G11 Clinical Trials Not Allowed\)”](#)
- [Request for Information \(RFI\): Inviting Comments and Suggestions on NIAID’s Strategic Plan](#)
- [Priority HIV/AIDS Research within the Mission of NIDDK](#)
- [Developmental AIDS Research Center on Mental Health and HIV/AIDS](#)
- [AIDS Research Center on Mental Health and HIV/AIDS](#)
- [Optimizing Health of Children and Adolescents with Perinatal HIV Exposure](#)
- [Strategies for Controlled Release of HIV Vaccines \(SCORE-H\)](#)
- [Limited Interaction Targeted Epidemiology: Epidemiology of Transmission and Treatment of HIV Among People Who Are at Increased Risk for HIV Infection in Latin America \(LITE-LA\)](#)
- [Interaction between ARVs and Hormones in HIV and Coinfections](#)

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