Abstract

**Background and Purpose:** PrEP (pre-exposure prophylaxis) is a preventative approach for individuals at substantial risk of infection to reduce the prospects of acquiring HIV. Nevertheless, screening for HIV risk, disease, and initiation of PrEP is severely lacking nationwide. The complex navigation of the current PrEP care cascade deters potential candidates from PrEP uptake. A hybrid delivery model of the PrEP care cascade unified under a single encounter may eliminate barriers in the initiation and care continuum.

**Methods and Results:** The project encompassed an enhanced PrEP care cascade delivery model within a community-based pharmacy setting to increase access to PrEP uptake among individuals at substantial risk for HIV infection. This project design encompassed the entire care cascade within a single encounter. Of the participants, 33.3% achieved successful PrEP uptake, leaving the pharmacy with an active PrEP prescription. The evidence-based Denver HIV Risk Score Tool was utilized to improve the self-identification of high risk for HIV. Less than half of the participants perceived themselves as “high-risk,” though post-scores graded all participants as high risk. As the project evolved into a feasibility design, there was no pre- or post-intervention data – instead, a goal to increase access to PrEP.

**Conclusions and Implications:** Despite obstacles linked to the COVID-19 pandemic during this project, the need for an all-encompassing PrEP care cascade is evident. Although project goals were not met relative to target objectives, positive outcomes were realized. The interventions studied show promise for reaching higher levels of PrEP uptake. Further research is needed to appreciate the practical advantages of different approaches and the optimal means for implementation in clinical practice. Future studies should also test the feasibility of PrEP uptake in pharmacies targeting low health literacy populations. Close collaboration with local public health authorities is vital to procuring additional funding and expanding an enhanced care cascade in local community pharmacies.
Keywords: HIV/AIDS, HIV prevention, PrEP, PrEP implementation, Pre-exposure prophylaxis