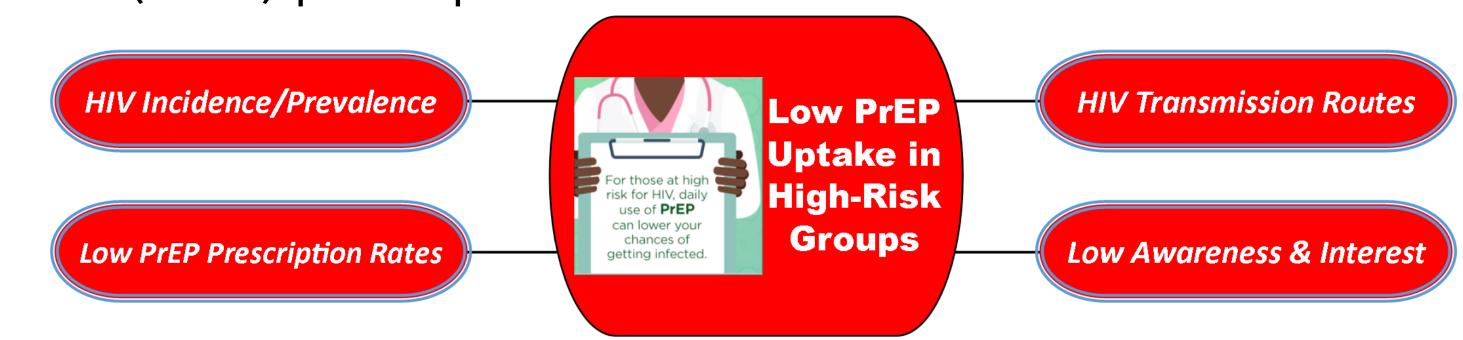
Improving the Care Cascade of HIV Preventative Services: A Quality Improvement Project

David A. Perez, BSN, RN • Jason E. Farley, PhD, MPH, ANP-BC, FAAN, FAANP, AACRN



Situational Brief

- HIV a global health epidemic
- High-risk populations: MSM, PWID
- Pre-exposure Prophylaxis (PrEP): preventative to reduce risk the chances of acquiring HIV.
- PrEP can reduce risks of HIV acquisition from sexual transmission by 99%; 74% among PWID.
- Screening for and initiation of PrEP severely lacks nationwide
- 2015: estimated 1.1 million Americans "at-risk;" 90,000 (8.2%) prescriptions were filled. (Allen et al., 2019)



- PrEP intervention deterred by health literacy, cost, insurance coverage, adherence, provider competency/bias, geographic location, and stigma.
- PrEP use not prevalent enough to affect HIV incidence.

Purpose

Current Model

















Pilot an improved PrEP care cascade within a communitybased pharmacy in Baltimore, Maryland.

Aims

- Aim #1: increase PrEP uptake to 50% among individuals at high-risk for HIV infection.
- Aim #2: Quantitative screening tool (Denver HIV Risk Score Tool) to improve self-identification risk for HIV
- Entire care cascade within a single encounter.

Methods

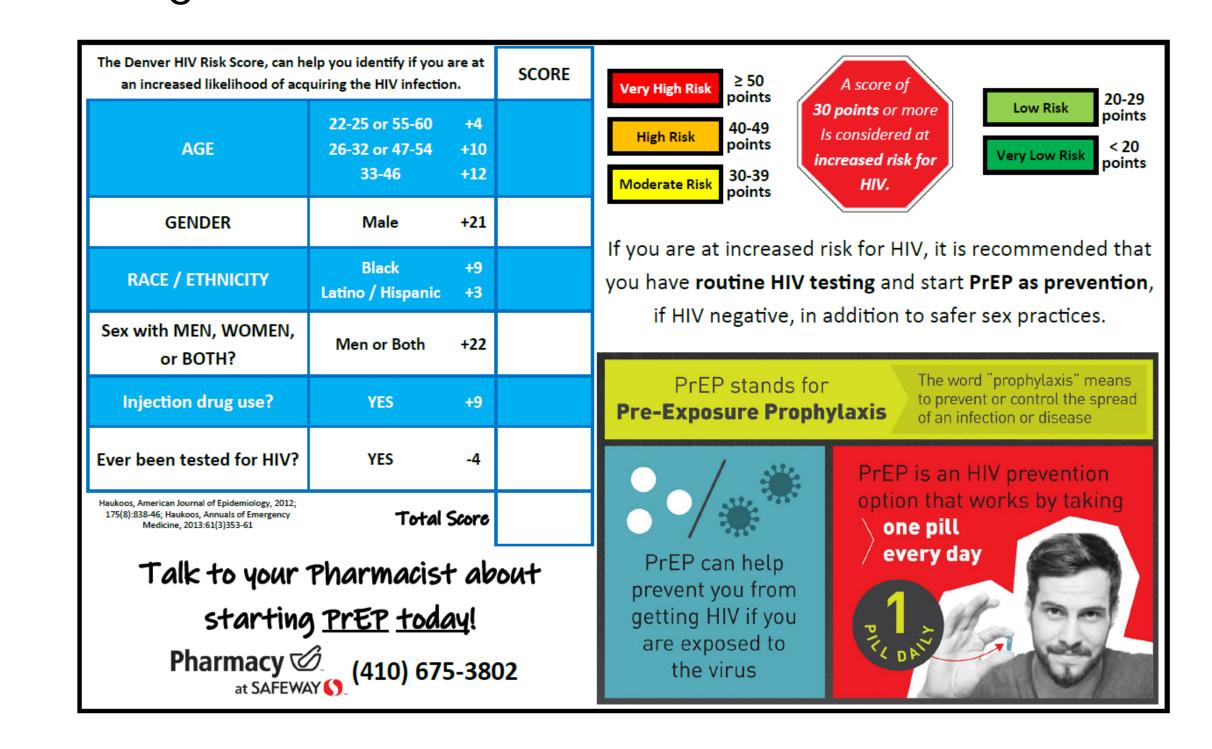
Enhanced PrEP care cascade delivery model within a TAKE THE TEST & community-based pharmacy

TAKE CONTROL

TESTING*

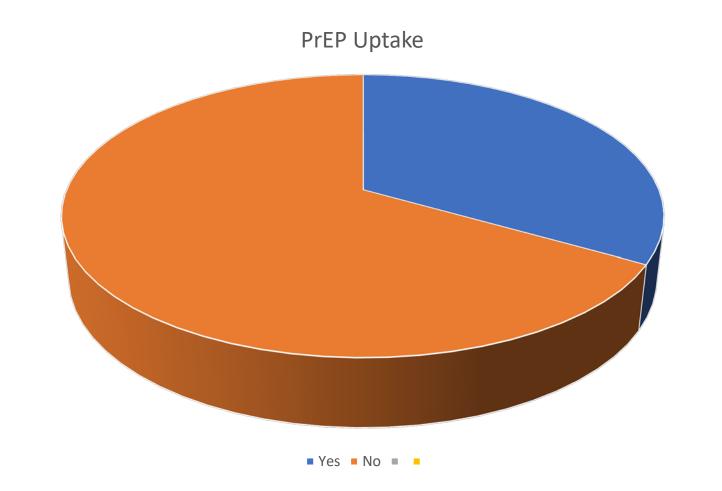
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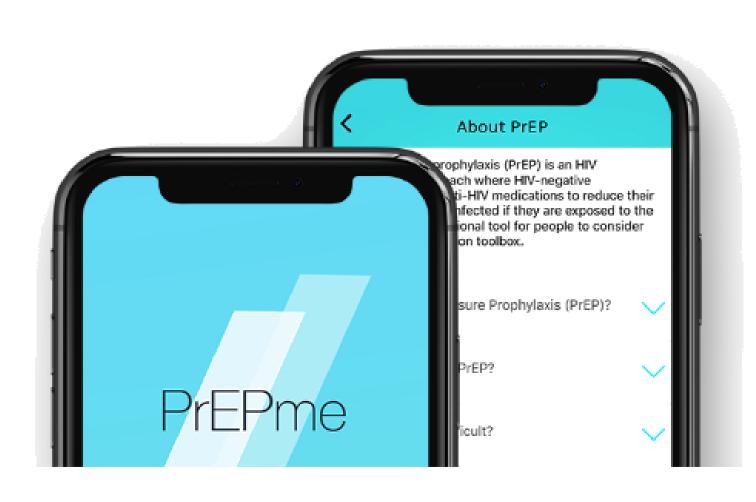
- Promotional signage, social media, screening tool
- Self-Risk vs Denver Risk Tool
- High-risk screening -> Telehealth
 - Mail-in Testing Kit
 - Interim PrEP prescription
 - Refill authorizations
 - Sign-up for PrEP*me* app
 - End goal: effective initiation of PrEP



Results and Conclusions

- GOAL: 50% increase in PrEP uptake
- 75% seeking HIV testing; 25% actively seeking PrEP
- Aim #1 Results: 33.3% achieved successful PrEP uptake
- Defer reasons: time, availability of providers, and indecisiveness
- All engaged with PrEPme app





- Aim # 2 Results: 45% perceived as high risk; 100% scored as high-risk
- Moderate improvement in PrEP uptake by minimizing the duration of PrEP initiation and abating barriers and obstacles
- Need for an all-encompassing PrEP care cascade evident
- Need: Policies increasing Pharmacists' scope of practice to initiate and monitor PrEP
- Need: feasibility of PrEP uptake targeting low health literacy populations

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