

Positive Impact Health Centers PrEP Clinic

PROPOSAL

Introduction:

Positive Impact Health Centers (PIHC) has a mission to provide “client centered care for the HIV community to have a life worth loving” with a vision of “creating a premier HIV system of care to better serve the community.”

The number of new cases of HIV infection continues to rise in metro Atlanta, and especially in the gay and bisexual community, among persons 18 to 29, with racial and ethnic minority youth most impacted. At the MISTER Center of PIHC in Midtown Atlanta, approximately 15 to 20 new cases of HIV are identified through the HIV testing program each month. Greater than 70% of those cases are found among young gay and bisexual men ages 18 to 29, primarily African American men who are uninsured or underinsured and experiencing poverty or financial difficulties. Recently, many of these persons testing positive for HIV reported that they would have started PrEP had they had access to the medical services needed to acquire the medication, but because of barriers (or perceived barriers) did not start Truvada and ultimately became infected with HIV.

Fulton County Health and Wellness recently launched their PrEP Clinic in an effort to address the growing need to provide access to at-risk persons seeking PrEP. In a recent conversation with Dr. David Holland, the director of the county’s PrEP Clinic, he indicated that the county is already nearly at capacity and that many more points of entry for clients seeking PrEP are needed in metro Atlanta.

PIHC has the infrastructure and the service delivery history, as well as access to the client population, to serve as one of those new points of entry for clients seeking access to PrEP. This need request is being submitted to Joining Hearts to provide funds to launch a one-year pilot project. During this 12-month cycle, the plan will be to enroll 30 individuals at highest risk for potential HIV exposure, get those persons started on Truvada as PrEP, provide HIV risk reduction education and ongoing support, and provide no-cost medical management, laboratory services and prescriptions to the persons in the program. During that 12-month period, the sustainability plan outlined below will simultaneously be implemented.

Goal of Project:

To reduce the number of new cases of HIV infection by increasing access to PrEP for at least 30 persons who are appropriate for PrEP but currently not accessing PrEP services, and who otherwise could not access PrEP.

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Objectives of Project:

- Screen potential participants to ensure PrEP is appropriate
- Enroll participants who will have pre-implementation laboratory workup, meet with the project coordinator and with the Nurse Practitioner (NP) to undergo brief physical assessment
- Once cleared per laboratory results and by NP, a 90-day prescription for Truvada will be given to participant
- Project coordinator will assist all participants to access financial support via co-pay card assistance and patient assistance programs through Gilead
- Conduct evaluation of the project by collecting baseline data, identifying the number of persons adherent to the medication, number of persons adherent to the medical visits, and the number of any new cases of HIV in the group of individuals who are consistently and appropriately taking Truvada
- Track participants through the program for a period of 12 months

Target Population Demographics for Project:

- Gay and bisexual males
- Ages 18 to 29
- Inclusive of all races and ethnicities, with emphasis on racial and ethnic minorities
- HIV-negative as of last HIV test
- Engaging in sexual activities that put them at risk for exposure to HIV (such as anal sex without consistent use of condoms)
- Not currently taking Truvada as PrEP

Costs for Project:

- Screening labs (including HIV testing, STI screening, Hepatitis panel, and complete metabolic panel) for 30 participants: $\$64.17/\text{person} \times 30 = \$1,925$
- Screening labs follow-up (including HIV testing, STI screening and creatinine profile) for 30 participants x 3 additional points throughout the year: $\$17.50 \times 30 \times 3 = \$1,575$
- NP lab review and prescription: $\$40 \text{ per person} \times 30 = \$1,200$
- Project Coordinator to facilitate financial assistance for access to Truvada: $\$10 \text{ per person} \times 30 = \300
- Total: \$5,000 to ensure 30 participants have access to PrEP (Truvada) for 12 months inclusive of medical visits, laboratory evaluations, supportive financial assistance to pay for the medication, and additional linkages to other wrap-around services as needed (such as mental health counseling).

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Sustainability for Project:

There are multiple levels of sustainability that are in place or will be put into place that will ensure longevity of impact beyond this one-time award.

Financially, PIHC has received a five-year cooperative agreement from the SAMHSA administration and a five-year cooperative agreement from the CDC. These funds currently support HIV testing, screening for additional sexually transmitted infections including hepatitis, and linkage to care services. Funds from Joining Hearts will be utilized to augment existing funding by provide no-cost medical support (including laboratory values and nursing care).

From an organizational infrastructure position, the agency will address system changes by redesigning the process for a client to access services, making it more seamless and barrier-free for the target populations of this project, and the forms will be available in English and Spanish to accommodate differences in language and culture. As well, the Informed Consent documents and client-level data collection tool will be redesigned to ensure they are readily and easily understood by young adults ages 18 to 29.

Sustainability will also be strengthened by engaging prevention staff in the project early and receive feedback from staff to garner buy-in and to increase their own awareness around what are the most successful messaging strategies to reach the target population and to advocate for the utilization of Truvada as PrEP in individuals at highest risk for HIV exposure.

Finally, the agency will work to ensure that the value of PrEP is clearly recognized by all those involved in the project, from the Executive Board to the CEO and senior leadership, front line staff and consumers. The relationship will be reciprocal, where the agency provides feedback to all key stakeholders and consumers and, in turn, will receive and incorporate feedback received from these same members of the broader metro Atlanta community.

Capacity of PIHC to Achieve Project Goal:

PIHC is a strategic alliance via merger of two highly successful Community Based Organizations (CBOs): AID Gwinnett (AG) and Positive Impact (PI). AG was founded in 1990 by a group of concerned parents and incorporated in 1991, providing HIV/primary medical care, HIV/STI testing, case management, medical transportation, mental health and substance abuse counseling, housing services, and prevention education services. PI was originally founded in 1992 and incorporated in 1993 to respond to the mental health care needs of Atlanta's low income and highly stigmatized at-risk communities, and provided HIV/STI testing and linkage to care services, mental health counseling, psychiatric care, substance abuse treatment, mental health case management, housing services and prevention education services.

AG and PI have had a mutually beneficial collaborative relationship since direct services began at PI in 1993, and on March 1, 2015 AG and PI formally merged to become Positive Impact Health Centers, Inc.

PIHC is fully accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), is a Georgia Core Service Provider (Medicaid), and is highly regarded as a central figure in metropolitan Atlanta's HIV services infrastructure. During the 2015 calendar year, the agency provided services to over 8,796 individuals in all HIV service programs; 720 HIV-infected consumers received mental health, substance abuse and psychiatric services, and 625 HIV-positive persons received HIV primary care services.

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PIHC has been continuously funded since 1994 through Ryan White to provide mental health, substance abuse and HIV primary care services to people affected by HIV. Since 1996, the agency has been continuously funded to provide HIV prevention services. All of these programs serve consumers in populations that will be reached by this effort. The agency has a long and successful history with similar projects, including SAMHSA, Ryan White and CDC funded programs, as well as foundational support such as the Elton John AIDS Foundation.

PIHC has been continuously co-locating behavioral health clinicians at other AIDS service organizations since 2000, and has been providing HIV testing services both onsite and in the community at nontraditional venues since 2008, including gay bars and sex clubs. The agency received its first cooperative agreement with the CDC in 2009, and subsequently has received three additional CDC five-year cooperative agreements to provide testing, linkage and HIV prevention services, and has consistently met or exceeded expected deliverables to date. The agency recently received a five-year cooperative agreement with SAMHSA to provide HIV, viral hepatitis and substance abuse prevention services to persons ages 13 to 29.

Cultural competence is central to all services. The agency has adopted the National Standards for Culturally and Linguistically Appropriate Services (CLAS standards) in Health and Health Care. These standards are set by the US Department of Health and Human Services, Office of Minority Health, and are intended to advance health equity, improve quality, and help eliminate health care disparities by providing a blueprint for individuals and health and health care organizations to implement culturally and linguistically appropriate services. This commitment is demonstrated in the trainings offered to the community (a Cultural Diversity Institute and 8 trainings per year on culture, addictions and sexuality), as well as the population-specific services (women's groups, prevention programs for men who have sex with men, and the Spanish phone line). Services are offered both in English and Spanish languages. The agency currently employs 59 FTE staff, and 23 of those are dedicated to the HIV and viral hepatitis prevention program and to the PrEP Clinic.

PIHC has extensive experience over many years of providing HIV testing and hepatitis screenings. During calendar year 2015, a total of 5174 HIV tests were conducted and 367 new cases of HIV were identified; 3104 individuals were screened for syphilis, gonorrhea and Chlamydia with more than 400 positive cases of at least one STI found; 180 persons were screened for hepatitis A, B and C and 32 persons were vaccinated against hepatitis A and B utilizing Twinrix; and 767 individuals participated in at least one HIV/VH effective behavioral prevention strategy. The agency participated in 47 offsite testing events, conducted community condom distribution of more than 80,000 free condoms, engaged in multiple social media marketing strategies utilizing Facebook, Twitter and Instagram, and was recently awarded a five-year cooperative agreement with SAMHSA to provide media literacy education and social norms marketing campaigns for youth and young adults ages 13 to 29. The agency is highly visible and well respected in the community and has ready access to many members of the target population for this project, and can fill a significant service gap among gay and bisexual men in metro Atlanta needing access to life-save PrEP education, medical care and medication.

Current Agency Services:

PIHC has four primary divisions: Prevention (providing HIV testing and linkage to care; STI screening and treatment for syphilis, gonorrhea and Chlamydia; viral hepatitis screening for A, B and C, and vaccinations for A and B; individual-level and group-level interventions for HIV and

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viral hepatitis risk reduction and substance abuse prevention; access to PrEP as an HIV prevention strategy; and social media and social norms marketing campaigning to change community norms around HIV, viral hepatitis, substance use and tobacco); HIV specialty care (providing comprehensive medical care for HIV-positive persons, both insured and those needing Ryan White care); Behavioral health (providing mental health counseling, psychiatry services, and substance abuse treatment and care services); and Training and education (providing staff trainings and skills development, cultural competency and diversity trainings, and community trainings for both clients and agency partners).

Monitoring and Evaluation:

PIHC has extensive experience collecting and reporting performance measures for many projects, including CDC, SAMHSA, Ryan White, as well as state and local projects, and the agency's evaluator actively participates in all funded projects of the department. Data collected for this project will be entered into a secure electronic database by project staff and closely monitored and reviewed by the evaluator. Data collected from clients will be documented and entered into the agency's electronic database. These data will include information about HIV status, enrollment in the program and data related to medication adherence, additional linkages and referrals, and continued medical monitoring. In addition, data related to hepatitis A/B vaccinations and additional STI treatments will be tracked and documented. PIHC is committed to ensuring that all staff will be trained in the requirements for data collection and will participate fully in any cross-site evaluation activities for this project. In all evaluation and performance monitoring efforts the team will work closely with Joining Hearts to optimize reliable and timely data collection and aggregate data dissemination to document programmatic progress and achievements.

The evaluator has over 20 years of experience working closely with local and Federal agencies and has developed several error checking and data management processes to optimize the reliability and validity of data collection. The evaluator will be responsible for ensuring the accuracy and timeliness of data entry and reporting. No identifying client information (e.g., name, address, phone number, etc.) will be retained with any datasets or files stored by the evaluator. As well, for all data collected in this project no personally identifiable information will appear on any data collection instruments including a client's name, social security number, or contact information. Instead, a unique project specific code will be assigned to each client to link their various types of data. The code matching the client's identifying information to the project ID number will be kept separate from the evaluation materials; the evaluation team does not need to access this code at any time.

Interpretation of data will follow standards and guidelines set by professional organizations such as the American Psychological Association and the American Evaluation Association. This includes not generalizing beyond what the data reasonably show, being sensitive to cultural domains, setting a plan for analysis ahead of time as much as possible, giving timely feedback to stakeholders, and maintaining high ethical standards at all times. The cultural context of the consumers will be considered in data interpretation and in the overall mental and physical health benefits over time. Data will be reported to Joining Hearts as required, to project administrators quarterly, and through formal presentations and publications that may result from this project.