PrOTEC AL: PrEP Optimization through Enhanced Continuum Tracking

Alabama Quality Management Group, Alabama Department of Public Health and UAB CFAR collaborative
Study Team and Partners

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UAB
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Goals of AQMG

1. Collect, prioritize, and analyze agreed upon data using approved CQI methodologies.
2. Identify and promote effective CQI strategies through training opportunities.
3. Enhance understanding and local application of CQI knowledge, methods, and tools directed toward improving patient care.
4. Assist Ryan White grantees in meeting HRSA’s QM requirements.
5. Assist with the establishment and implementation of the state quality management plan.
In 2019, Alabama had 14,399 individuals living with HIV.

AQMQ provided services to 8,610 individuals living with HIV; approximately 59.8% of individuals living with HIV in Alabama in 2019.
PrOTECT AL Study Aims

• **Aim 1**: Determine necessary steps to adapt the D4C data management system, with subsequent dashboard development to track and analyze client-level PrEP care continuum data (PrOTECT AL) across the state of Alabama through focus groups utilizing nominal group techniques with key informants currently participating in D4C.

• **Aim 2**: Beta test the PrOTECT AL data transmission platform and dashboard at D4C sites providing PrEP services in a one-arm open pilot to assess usability as well as acceptability through explanatory mixed methods.
Implementation Mapping

**Phase I – Conduct Needs and Assets Assessment and Identify Implementers and Adopters**
- Key-informant Interviews (Qual)
- Surveys (quan)

**Phase II – Identify Adoption Performance Objectives and Change Objectives**
- Specific to each Site and Individual Role

**Phase III – Choose Theoretical Methods and Design Implementation Strategies**
- Organizational Level
- Individual Level

**Phase IV – Produce Implementation Protocols and Materials**
- Pretest and Refine Content, and Produce Final Materials

**Phase V – Implement and Evaluate PrOTECHT (Beta)**
- Emergent Mixed Methods Design

**Figure 2 Legend**
- Qualitative (Qual) and quantitative (quan). Capitalization represents prioritization within the phases, with overall equal importance of data type in evaluation of intervention.

- **Phase 1 – Needs Assessment**
  - AQMG members – 76-item PrEP utilization survey and Key-informant interviews grounded in CFIR
  - PrOTECHT AL organizations – Focus groups to develop a data dictionary for the dashboard

- **Phase II – Focus groups**
  - Identification of implementation strategies

- **Phase III – Development of Implementation Strategies**
  - Beta Test of Data Dashboard
Implementation Research Logic Model

**Implementation Strategies**
- Conduct local consensus discussions
- Assess for readiness
- Promote Adaptability
- Identify and prepare champions
- Develop educational materials
- Make training dynamic
- Conduct ongoing training
- Use data warehousing techniques
- Provide technical assistance
- Centralize technical assistance

**Moderators:** CFIR-specified Determinants

**Change Mechanisms**
- Develop skill set on data capture/entry within organization
- Create shared goals among organization
- Identify inequities and gap
- Establish shared mission and goals
- Dedicated technical support staff to assist with data system use

**Preconditions for Mechanism of Action:**
Support from Leadership and

**Implementation Outcomes**
- Acceptability of Intervention Measure (AIM)*
- Intervention Appropriateness Measure (IAM)*
- Feasibility of Intervention Measure (FIM)*
- Fidelity
- Effectiveness (PrEP prescriptions over time; PrEP adherence)

**Intervention Impacts**
- Increase PrEP uptake and adherence
- Lower HIV incidence
- Decrease HIV inequities

*Note: AIM, IAM, FIM are abbreviations for specific measures commonly used in implementation research.
PrOTECT AL
Website and Dashboard

Prevent. Provide. Protect.
Working together to end the HIV epidemic.

Ending the HIV Epidemic
The Ending the HIV Epidemic in the U.S. (EHE) initiative aims to reduce new HIV infections in the U.S. by 90% by 2030. Learn more about the aims of EHE.
READ MORE

Find PrEP Services Today
Pre-exposure prophylaxis, or PrEP, is a pill or injection to help keep you HIV negative. Find PrEP services in your area today!
READ MORE

Notice
U.S. federal agencies are working to end the HIV epidemic by focusing on vulnerable populations and geographic hotspots across the country. Emphasis has been placed on preventing HIV infections among higher risk populations through the use of highly effective biomedical prevention tools like PrEP. With consistent adherence to PrEP, the likelihood of acquiring HIV can be decreased by up to 96%.
AIM, IAM, FIM Survey Results

Seems Easy to Use
Seems Doable
Seems Possible
Seems Implementable
Good Match
Seems Applicable
Seems Suitable
Seems Fitting
"I Welcome"
"I Like"
Appealing
Meets Approval

0 1 2 3 4 5 6 7 8

- Completely Disagree
- Disagree
- Neither Disagree nor Agree
- Agree
- Completely Agree
SUS Survey Results

- Needed to learn a lot before use
- Felt confident using
- Cumbersome/awkward to use
- People could learn quickly
- Too much inconsistency
- Functions are well integrated
- Would need assistance to use
- Easy to use
- Unnecessarily complex
- Would use frequently
# SUS Survey Results

Average SUS Score 79%

<table>
<thead>
<tr>
<th>#</th>
<th>Survey Question</th>
<th>P1</th>
<th>P2</th>
<th>P3</th>
<th>P4</th>
<th>P5</th>
<th>P6</th>
<th>P7</th>
<th>P8</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1. I think that I would like to use this website frequently.</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>5</td>
<td>2</td>
<td>5</td>
<td>4</td>
<td>4</td>
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<tr>
<td>2</td>
<td>2. I found this website unnecessarily complex.</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>3. I thought this website was easy to use.</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>4</td>
<td>4. I think that I would need assistance to be able to use this website.</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>5</td>
<td>5. I found that the various functions in this website were well integrated.</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>6</td>
<td>6. I thought there was too much inconsistency in this website.</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>7</td>
<td>7. I would imagine that most people would learn to use this website very quickly.</td>
<td>4</td>
<td>5</td>
<td>3</td>
<td>4</td>
<td>2</td>
<td>5</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>8</td>
<td>8. I found this website very cumbersome/awkward to use.</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>9</td>
<td>9. I felt very confident using this website.</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>10</td>
<td>10. I needed to learn a lot of things before I could get going with this website.</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>4</td>
<td>2</td>
</tr>
</tbody>
</table>

SUS Score by Participant:

|          | 75 | 100 | 73  | 98  | 65  | 100 | 50  | 70  |

Values between 1-5 with 1 being "Strongly Disagree" and 5 being "Strongly Agree"
Discussion: Getting to the Next Level

• Future Directions
  • Refine Implementation Strategies
  • Refine Dashboard
  • Implement Type III implementation trial
    • Assess implementation strategies
    • Evaluate utilization of data to inform EBIs

<table>
<thead>
<tr>
<th>Table 1: ProTECT AL Program Implementation Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Stage</strong></td>
</tr>
<tr>
<td>Adoption</td>
</tr>
<tr>
<td>Adoption</td>
</tr>
<tr>
<td>Implementation</td>
</tr>
<tr>
<td>Maintenance</td>
</tr>
</tbody>
</table>


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Best Practices and Lessons Learned

• Major Challenges
  • Conveying and supporting participation of ASOs earlier in the PrEP Care Continuum
  • Data capture being driven by HRSA funding metrics
  • Data entry and cleaning
  • Different resources in regards to data management at sites

• Potential Paths Forward
  • Trainings and infusion of resources to produce some equity in resources
  • Dissemination of findings to support champions
  • Advocacy of policy changes regarding data capture for PrEP services
Acknowledgements

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