BE FASTER Community of Practice for Increasing Rapid ART in Houston: A Qualitative, Longitudinal Study

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• Speakers have no conflicts of interests

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Background

- Rapid ART* is key for Ending the HIV Epidemic
- Houston ranks #9 in rate of new HIV diagnoses in the US
- In Houston, 75% of PWH* receive care at 1 of 5 Ryan White Part A agencies
- Ending the HIV Epidemic in Houston will require a coordinated effort among these agencies

*ART: Antiretroviral therapy; PWH: Persons with HIV
Background

- We evaluated the acceptability and feasibility of the Baylor College of Medicine ECHO Facilitating Antiretroviral StART Earlier (BE FASTER) program
- BE FASTER used the ECHO* model to establish a community of practice to initiate Rapid ART

*ECHO: Extension for Community Healthcare Outcomes
Our Community of Practice

- Baylor College of Medicine-Houston AETC *(Hub)*
- EHE RW Part A Clinics *(Spokes)*
  - AIDS Healthcare Foundation
  - Avenue 360
  - Legacy Community Health
  - St. Hope Foundation
  - Harris Health System/Thomas Street Health Center
BE FASTER Program
Monthly 1 hour virtual Zoom sessions

- 15 min didactic by *Hub team*
- 45 min case presentation by a spoke clinic with discussion

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*12 sessions; 71 unique participants; Average attendance: 24 participants/session
Methods

- **BE FASTER**: January 2022 - January 2023
- Semi-structured interviews:
  - 2 healthcare professionals from the Rapid StART team at each clinic
  - baseline, 3-months, and 9-months
- Data analyzed using rapid qualitative methods
Analyses Revealed 5 Themes

• Variability in Rapid ART protocols
• Participants had little to no prior interactions with other agencies
• Case presentations were most useful
• Intake processes were streamlined, but long-term retention remained a challenge
• Participants reported an improved sense of community
Variability in Rapid ART protocols

"...Our providers give them a 30-day access with a three-month refill"

"The patient normally is given 14-day supply..."
Participants had little to no prior interactions with other agencies

"... I'm not sure who I would call... they're not people that I know, or that I feel comfortable asking any questions..."
Case presentations were most useful

"So I do always love the case presentations for sure … we all just hypothesize and provide solutions..."
Intake processes were streamlined, but long-term retention remained a challenge.

"Of course, we have patients who are homeless. It's very hard to get them to comply with taking medicine and coming in because they don't have a stable living situation or transportation."
Participants reported an improved sense of community

"It's an excellent program to educate people, and to connect...they make you feel maybe a little bit more comfortable reaching out."
Conclusion

• Participants found the BE FASTER Program valuable and reported a positive impact on their cross-agency interactions

• ECHO can be an effective tool in creating cross organizational networks for Rapid ART programs

• This model can be useful in other *Ending the HIV Epidemic* initiatives
Special Thank You to all of our partners!

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THANK YOU!