# Ryan White HIV/AIDS Program Rapid ART Services National Environmental Scan Findings - Program Characteristics and Potential Implications for Adherence

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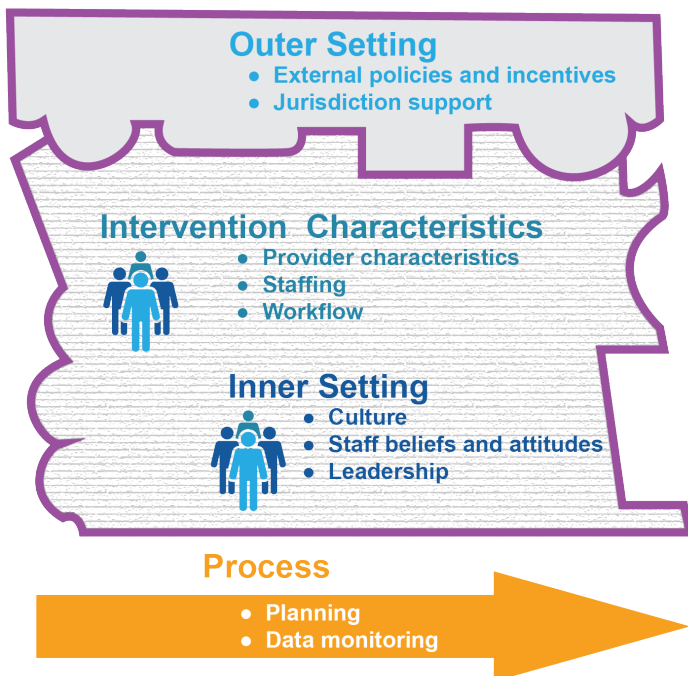
## Background

The Rapid ART Dissemination Assistance Provider (DAP) is a 3-year project funded by HRSA's HIV/AIDS Bureau and administered by Cicatelli Associates Inc (CAI), in partnership with UCLA, National Association of City and County Health Officials (NACCHO), and Mission Analytics Group to identify and describe core components of rapid ART models across the country and foster dissemination and replication of effective and representative rapid ART models throughout Ryan White HIV/AIDS Program (RWHAP) settings.

## Year 1 Goal

Conduct comprehensive environmental scan to identify and catalogue components of promising and effective rapid ART models throughout the U.S. and analyze findings using the Consolidated Framework for Implementation Research (CFIR) framework.

## Methods

### Fig. 1 *Adapted CFIR Framework to Organize Environmental Scan Findings



Outer Setting
- External policies and incentives
- Jurisdiction support

Intervention Characteristics
- Provider characteristics
- Staffing
- Workflow

Inner Setting
- Culture
- Staff beliefs and attitudes
- Leadership

Process
- Planning
- Data monitoring

- **Literature review conducted** to identify rapid ART interventions implemented since 2015
- Documents uploaded to MAXQDA for **qualitative analysis**
- The Consolidated Framework for Implementation Research (CFIR) categorized findings in **4 domains**: Intervention Characteristics, Inner Setting, Outer Setting, and Process

*The Consolidated Framework for Implementation Research, CFIR Research Team-Center for Clinical Management Research, https://cfirguide.org/

## Results

### Fig. 2  States where Rapid ART Identified

**128** rapid ART interventions identified
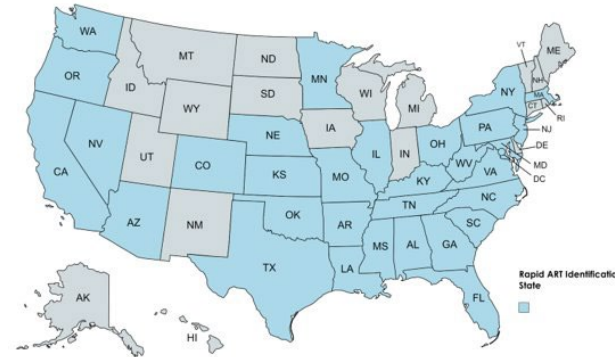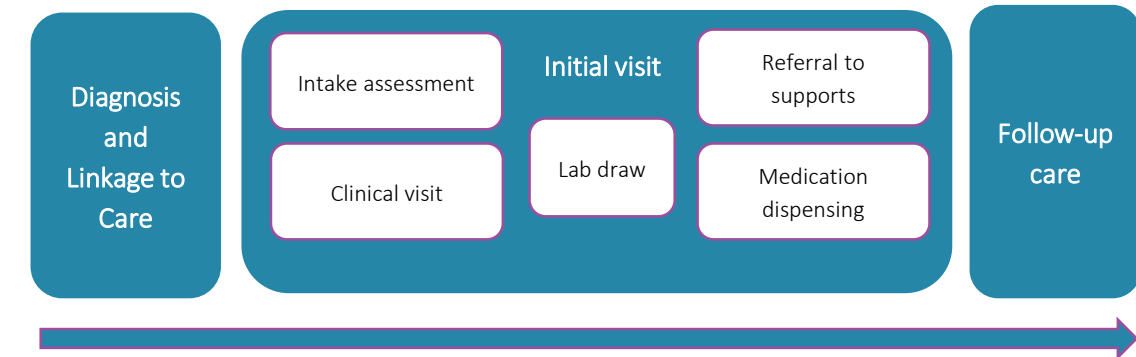
**45** programs participated in an outreach call



### Fig. 3  Universal Rapid ART Components



Diagnosis and Linkage to Care

Initial visit
- Intake assessment
- Clinical visit
- Lab draw
- Referral to supports
- Medication dispensing

Follow-up care

### Specific Adherence Supports Identified through CFIR Domains

**Intervention Characteristics:**
- ART starter packs, typically 7-to-14- day supply
- Onsite pharmacies established to fill same-day Rx and warm handoffs utilized
- Walk-in model
- Medication storage for homeless or unstably housed
- Services to address SDOH (e.g., transportation, food)
- Behavioral health services co-located in clinic setting

**Inner Setting:**
- Staff culture and acceptance of rapid ART: *"We'll figure out how to pay [for] it. Just make it happen."*

**Outer Setting:**
- Streamlined ADAP enrollment
- Jurisdiction support to make rapid ART standard of care

## Recommendations

1. Future efforts should prioritize strengthening systems to address the specific needs of **re-engaged clients** to improve adherence rates following rapid ART initiation.
2. The **CFIR framework** is useful in guiding organization and analysis on the provision of rapid ART in diverse settings.
3. Using an **implementation science framework** can be helpful in identifying and describing **components of an intervention** for dissemination including key adherence supports needed for a successful Rapid ART model.