



Knowledge Sharing across the Ryan White HIV/AIDS Program (RWHAP) using the RWHAP Best Practices Compilation to Optimize Care and End the HIV Epidemic in the U.S.

Demetrios Psihopaidas, PhD, MA

Natha Bakayoko, MPH

HIV/AIDS Bureau (HAB) Division of Policy and Data

JSI Contractor Team

Vision: Healthy Communities, Healthy People



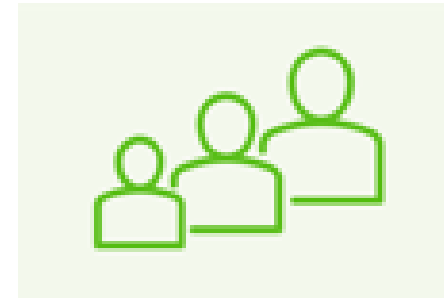
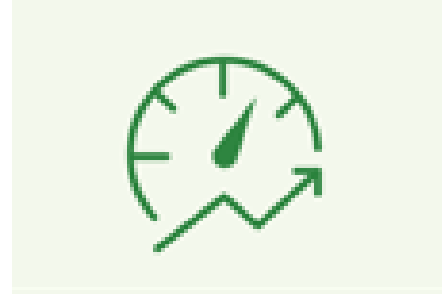
Agenda

- Welcome
- HAB Implementation and Dissemination Overview
- Best Practices Compilation Demo
- Question & Answer
- Closing

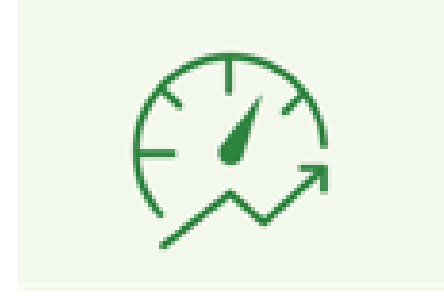
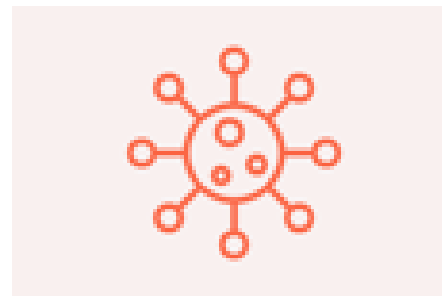
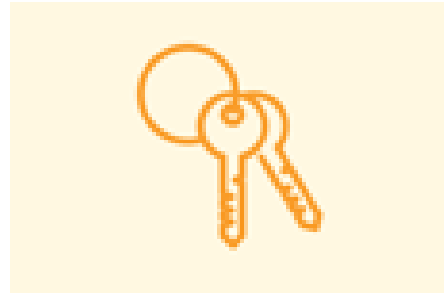
Learning Objectives

- Describe how Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) is using the HAB Implementation Science Framework to engage community and to improve health outcomes for people with HIV across the Ryan White HIV/AIDS Program (RWHAP).
- Describe how HRSA HAB is optimizing our dissemination products and strategy to support the work of HIV care and treatment providers across the RWHAP.
- Understand how to submit innovative programs developed by participant organizations for dissemination through the RWHAP Best Practices Compilation.

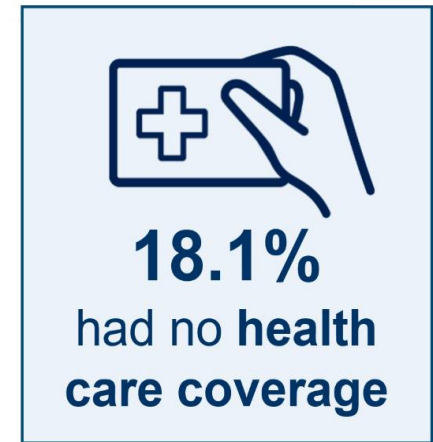
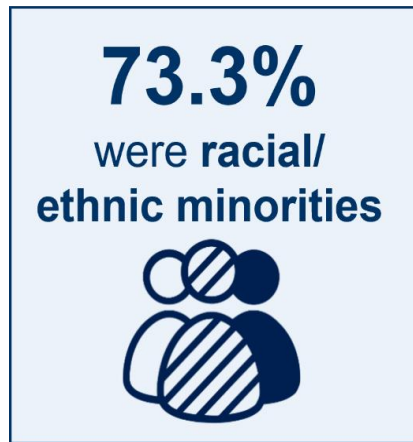
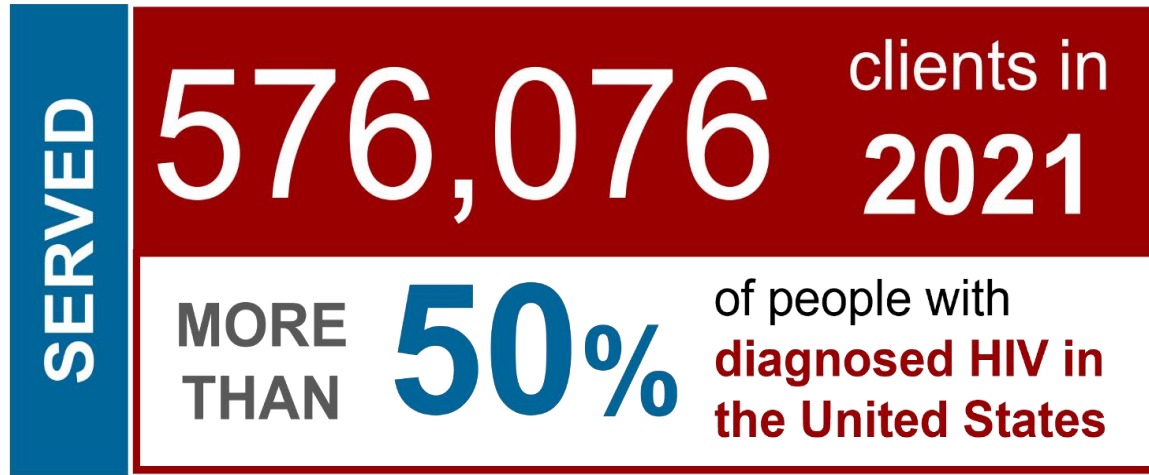




HAB Implementation and Dissemination Overview



In 2021, the RWHAP served more than half a million people in the United States and 3 territories^a



^a Guam, Puerto Rico, and the U.S. Virgin Islands.



RWHAP Outcome Measures

- **Viral suppression**

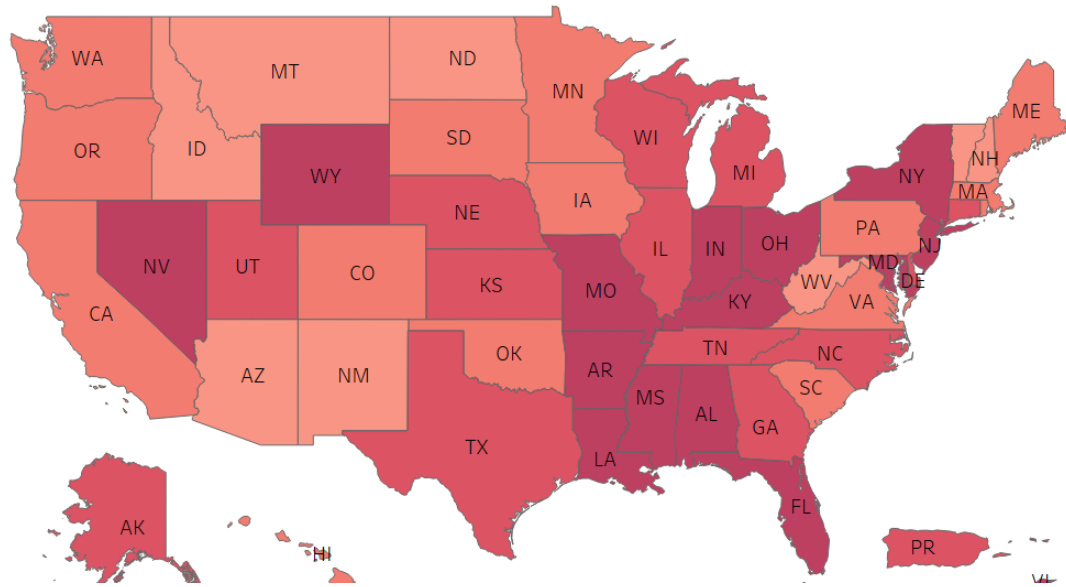
- Viral suppression was calculated among people with HIV who had at least one Outpatient Ambulatory Health Service (OAHS) visit and at least one viral load test during the measurement year. Viral suppression was defined as a most recent viral load test result of <200 copies/mL.

- **Retention in care**

- Retention in HIV medical care was defined as people with HIV who had at least one OAHS visit by September 1 of the measurement year, with a second visit at least 90 days after.



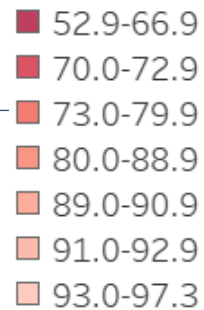
Viral Suppression among RWHAP Clients, by State, 2010 and 2021— United States and 2 Territories^a



IN 2010

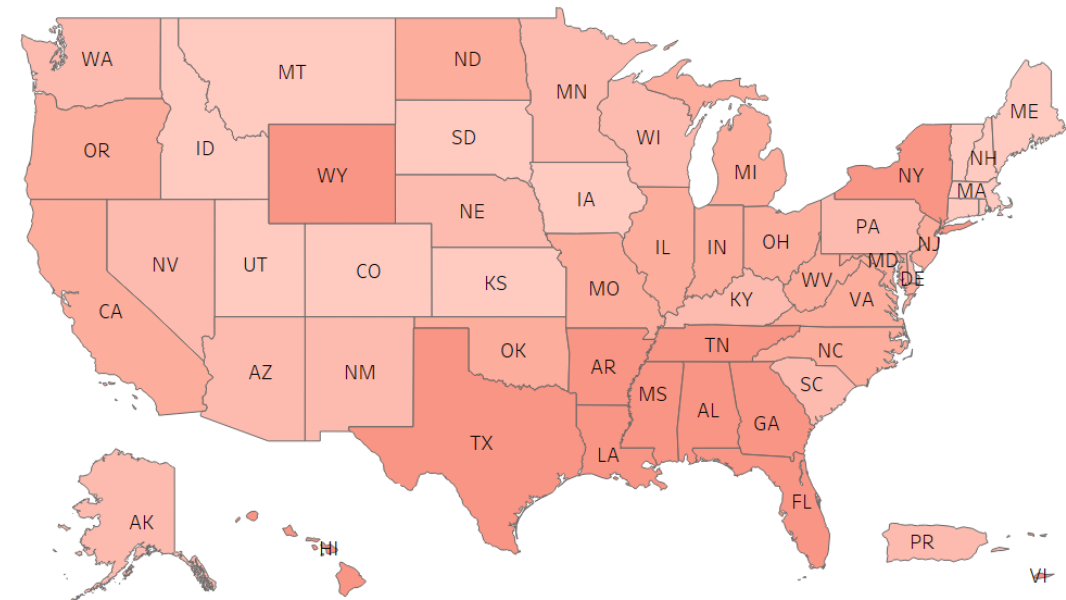
69.5%
VIRALLY SUPPRESSED

Viral Suppression (%)



IN 2021

89.7%
VIRALLY SUPPRESSED

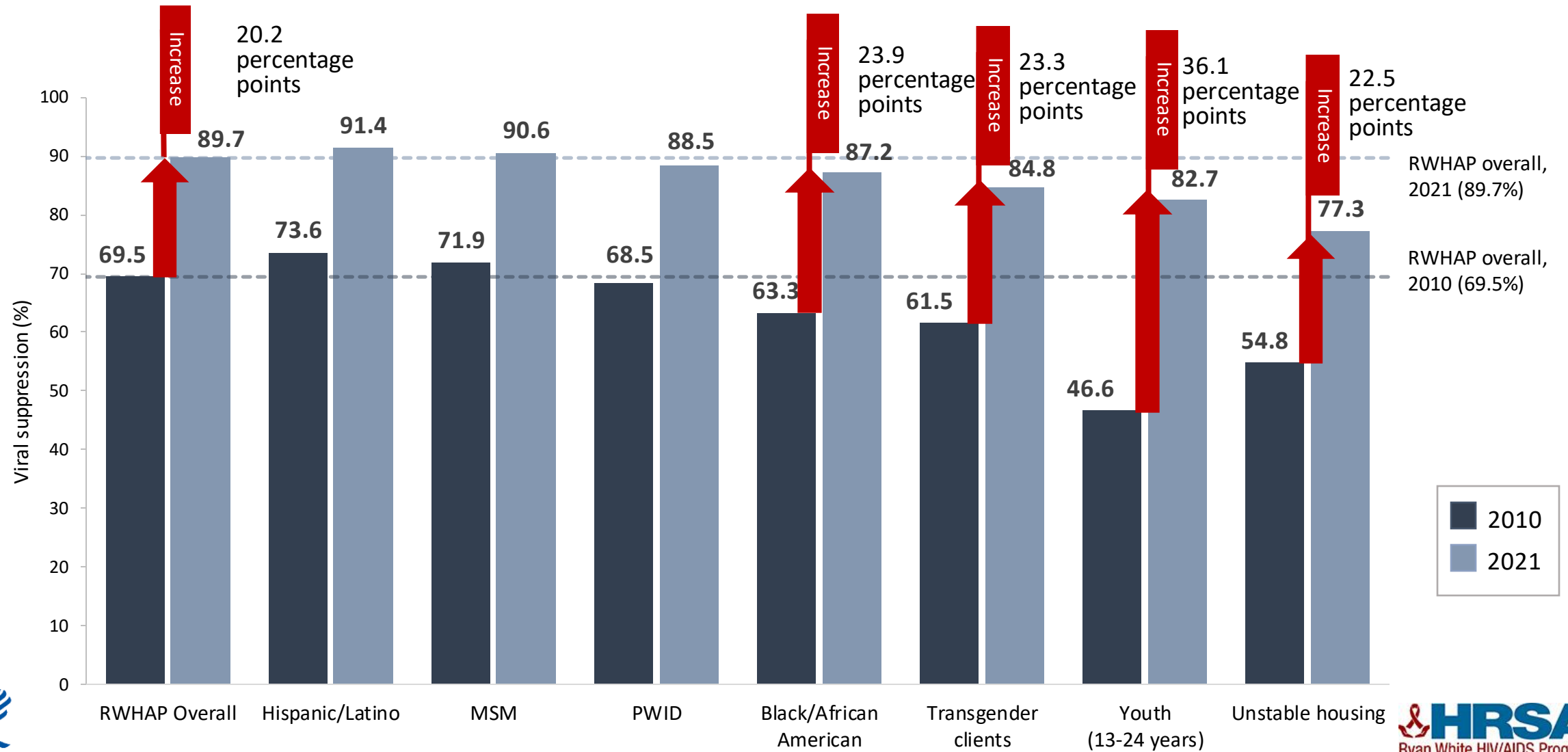


Viral suppression: ≥ 1 OAHS visit during the calendar year and ≥ 1 viral load reported, with the last viral load result < 200 copies/mL.

^a Puerto Rico and the U.S. Virgin Islands.



Significant progress has been made in viral suppression among priority populations, but inequities remain, particularly among Black/African American clients, transgender clients, youth aged 13–24 years, and clients with unstable housing.



Source: HRSA. Ryan White HIV/AIDS Program Data Report (RSR) 2021. Does not include AIDS Drug Assistance Program data.

Implementation Science for the Ryan White HIV/AIDS Program

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Implementation Science for the RWHAP (1)

This Issue Views 27,232 | Citations 0 | Altmetric 421 | Comments 1

Medical News & Perspectives

FREE

April 5, 2023

It Takes an Average of 17 Years for Evidence to Change Practice—the Burgeoning Field of Implementation Science Seeks to Speed Things Up

Rita Rubin, MA

Article Information

JAMA. 2023;329(16):1333-1336. doi:10.1001/jama.2023.4387

JAMA Medical News

Related Articles

Colorectal cancer screening with an at-home stool test is more convenient than with a colonoscopy, but an abnormal result on the former still requires a follow-up with the latter.



However, studies have shown that in safety-net health care systems, only around half of patients with an abnormal at-home stool test result get a follow-up colonoscopy within a year, University of Washington gastroenterologist Rachel Issaka, MD, MAS, noted in an interview with *JAMA*.

- ✓ Advance real-world implementation studies for HIV care innovations (implementation science)
- ✓ Reduce the lag between innovation and replication/scale up (dissemination science)

Implementation

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Implementation Science for the RWHAP (2)

For the RWHAP, implementation science is the scientific study of methods to promote or improve the systematic uptake of intervention strategies with demonstrated effectiveness into practice, program, and policy.



Implementation Science for the RWHAP (3)

WHAT?

Evidence-Based Interventions

Published research evidence supporting these interventions meets established Centers for Disease Control and Prevention (CDC) criteria for being evidence-based.

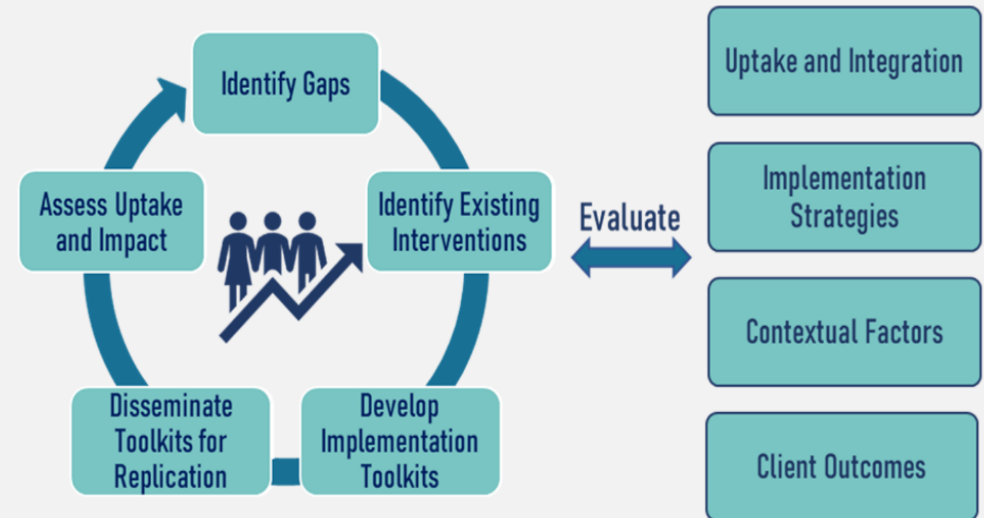
Evidence-Informed Interventions

Published research evidence meets HRSA HIV/AIDS Bureau evidence-informed criteria but does not meet CDC criteria for being evidence-based. May also meet CDC criteria for being evidence-informed.

Emerging Interventions

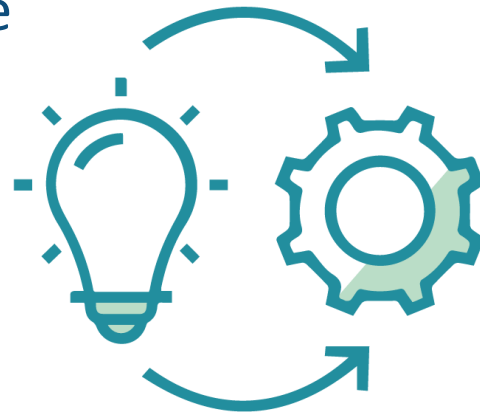
Innovative and responsive to emerging priorities. Real world validity and effectiveness demonstrated at least at the local level, but evidence has not yet been published.

HOW?



Implementation Science for the RWHAP (4)

Maximizing the **reach** and **impact** of the Ryan White HIV/AIDS Program.



"HAB IS" developed in collaboration with the Federal Implementation Science Workgroup.

PLOS MEDICINE


COLLECTION REVIEW

Implementation science and the Health Resources and Services Administration's Ryan White HIV/AIDS Program's work towards ending the HIV epidemic in the United States

Demetrios Paliopaidas^{1*}, Stacy M. Cohen¹, Tanchica West, Latham Avery, Antigone Dempsey¹, Kim Brown¹, Cortiss Heath¹, Adan Cajina, Harold Phillips¹, Steve Young¹, April Stubbs-Smith, Laura W. Cheever¹

United States Department of Health and Human Services, Health Resources and Services Administration, HIV/AIDS Bureau, Rockville, Maryland, United States of America

*dpaliopaidas@hrsa.gov

 Check for updates

Summary points

- Implementation science has emerged as an essential field for HIV treatment and prevention, promising to maximize the impact of effective intervention strategies to prevent transmission of the virus and to link and retain people with HIV in care.
- The Health Resources and Services Administration's (HRSA's) Ryan White HIV/AIDS Program (RWIAP) supports direct medical care and support services for more than half a million people with HIV—more than 50% of all people living with diagnosed HIV in the United States. Through grants to states, counties, cities, and local community-based organizations, the RWIAP supports the coordination and delivery of efficient and effective HIV care, treatment, and support services for low-income people with HIV.
- Since first authorized in 1990, the RWIAP has played a pivotal role in the implementation of effective intervention strategies for people with HIV. RWIAP client outcomes have improved significantly over time, particularly since 2010. However, implementation science frameworks and approaches have created new opportunities to maximize the impact of the RWIAP.
- HRSA's HIV/AIDS Bureau (HAB), which administers the RWIAP, has developed an approach to support the translation/adaptation of implementation science insights to real-world implementation and evaluation projects; this HAB implementation science approach (HAB IS) is guiding the bureau's work to maximize the impact of the RWIAP and achieve optimal outcomes for people with HIV along the HIV care continuum.
- In this article, we present HAB IS as a model for other public health agencies and/or faith- and community-based organizations looking to leverage implementation science frameworks and theories to advance their work toward ending the HIV epidemic.
- HAB IS involves 2 core components; the first is rapid implementation—a systematic process for identifying intervention strategies with demonstrated effectiveness at

OPEN ACCESS

Citation: Paliopaidas D, Cohen SM, West T, Avery L, Dempsey A, Brown K, et al. (2020) Implementation science and the Health Resources and Services Administration's Ryan White HIV/AIDS Program's work towards ending the HIV epidemic in the United States. *PLoS Med* 17(11): e1003128. <https://doi.org/10.1371/journal.pmed.1003128>

Published: November 6, 2020

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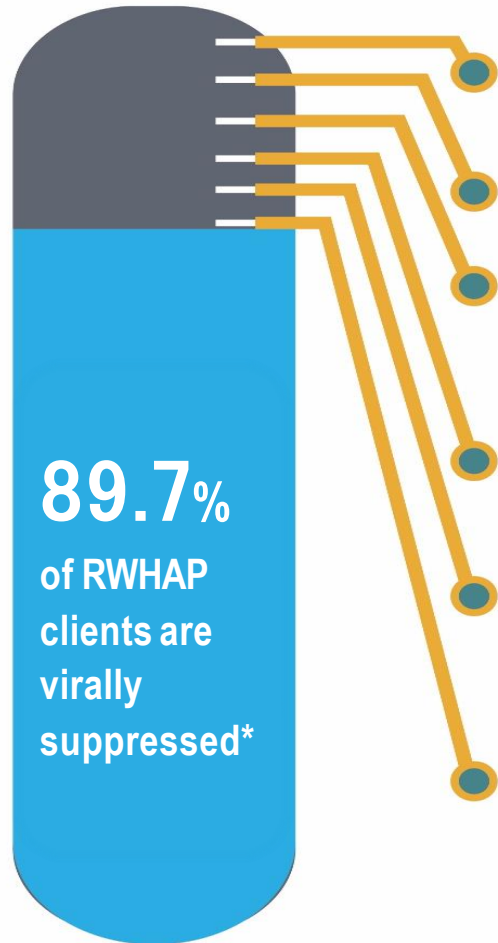
Funding: The authors received no specific funding for this work.

Competing interests: The authors have declared that no competing interests exist.

Abbreviations: CDC, Centers for Disease Control and Prevention; E2, Using Evidence-Informed Interventions to Improve Health Outcomes among People Living with HIV; Federal Workgroup, Federal Implementation Science Workgroup; HAB, HIV/AIDS Bureau; HAB IS, HAB implementation science approach; HAB Workgroup, HAB Implementation Science Workgroup; HRSA, Health Resources and Services Administration; NIMH, National Institute of Mental Health; PEP, post-exposure prophylaxis.

PLOS Medicine | <https://doi.org/10.1371/journal.pmed.1003128> November 6, 2020 1/15

Implementation Projects



Leveraging a Data to Care (D2C) Approach to Cure Hepatitis C – Leverage existing public health surveillance with clinical data systems to link people with HCV and HIV within RWHAP to care.

Building Capacity to Implement Rapid ART Start for Improved Care Engagement – Implement and evaluate rapid start or accelerated entry into HIV medical care and rapid initiation of ART for people with HIV who are newly diagnosed, new to care, or out of care.

Using Innovative Intervention Strategies to Improve Health Outcomes among People with HIV (2iS) – Reduce disparities and improve HIV-related health outcomes among people with substance use disorder, LGBTQ+ youth, people with incarceration experience, and by using telehealth services.

Improving Care and Treatment Coordination: Focusing on Black Women with HIV (BWF) – Design, implement and evaluate culturally-sensitive, evidence-informed interventions, for Black women with HIV.

Supporting Replication of Housing Interventions in RWHAP (SURE Housing) – Promote the replication of effective housing interventions to decrease health and housing disparities among LGBTQ+ persons, youth, and people with incarceration experience.

Emerging Strategies to Improve Health Outcomes for People Aging with HIV – strengthen the evidence base for clinical and psychosocial services that improve the lives and health outcomes of people with HIV who are aging.

Using Evidence-Informed Interventions to Improve Health Outcomes among People Living with HIV (E2i) – Reduce HIV-related health disparities and improve health outcomes for Black MSM, transgender women, integrating behavior health and addressing trauma among people with HIV.

*Health Resources and Services Administration. Ryan White HIV/AIDS Program Annual Client-Level Data Report 2021. ryanwhite.hrsa.gov/data/reports. Published December 2022.



Using Evidence-Informed Interventions to Improve Health Outcomes
among People Living with HIV (E2i) - YouTube



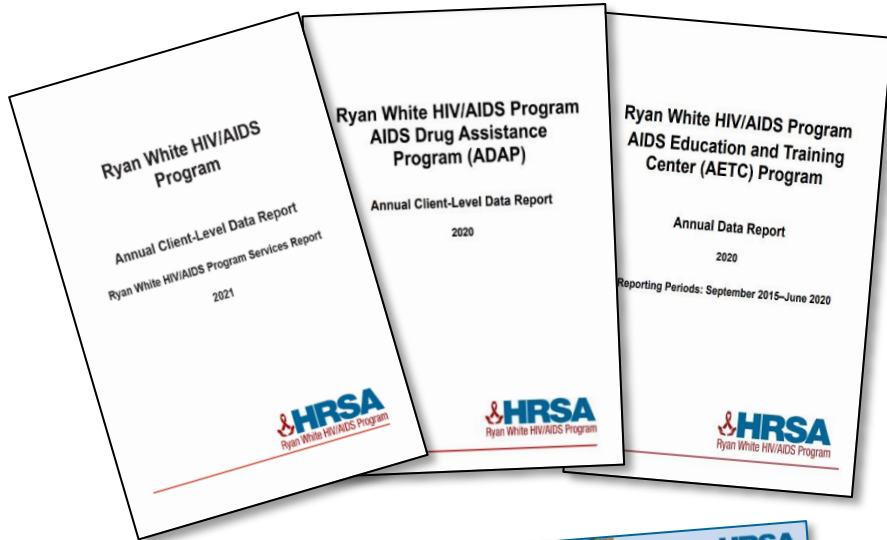
Dissemination

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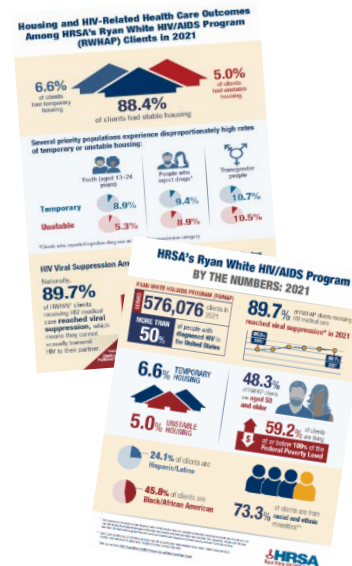


Data Dissemination Resources

Data Reports



Infographics



Impact of RWHAP	Characteristic of RWHAP Clients	Jurisdictional Performance	Age
Race/Ethnicity	Housing Status	Transmission Category	RWHAP Services Received
ADAP Client Characteristics			

Impact of the Ryan White HIV/AIDS Program

This screen provides a summary of viral suppression and retention in care by jurisdiction, year, and priority population for Ryan White HIV/AIDS Program (RWHAP) clients.

The RWHAP provides high quality HIV care, treatment, and support services to low income, uninsured and underserved people with HIV in the United States. Viral suppression and retention in care are key health indicators, or outcome measures, used to monitor the impact of the RWHAP for people with HIV.

Select Outcome: Viral Suppression Retention in Care

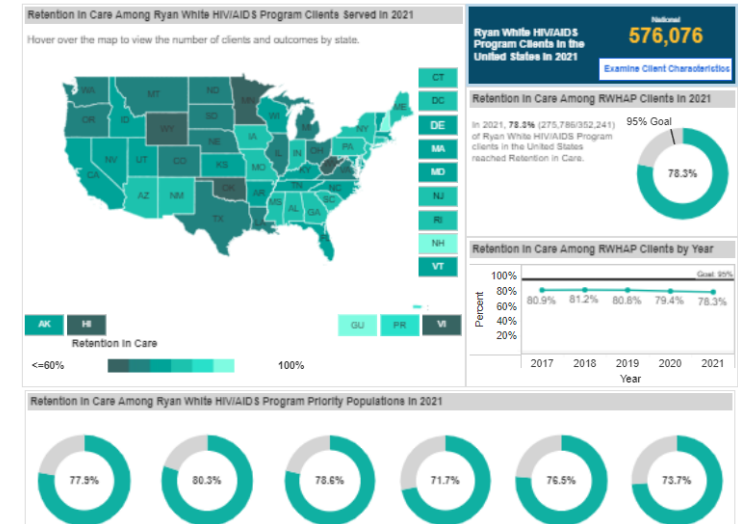
Select Year: 2021

Select Jurisdiction: State or Territory Metro Area

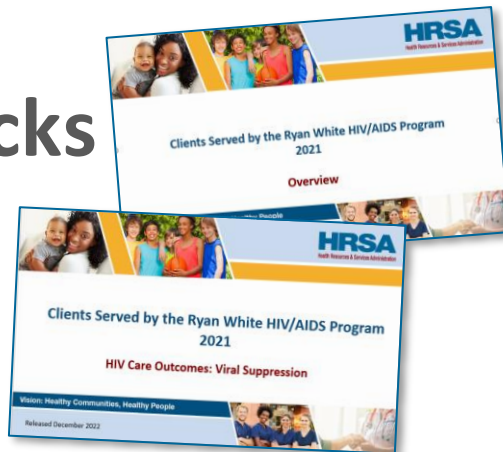
Select State/Territory: (All)

RESET

Note:
•Use the reset button before attempting to select a different type of jurisdiction
•Charts will not display if no clients meet the filters' requirements
•To ensure confidentiality, data have been suppressed for small client counts



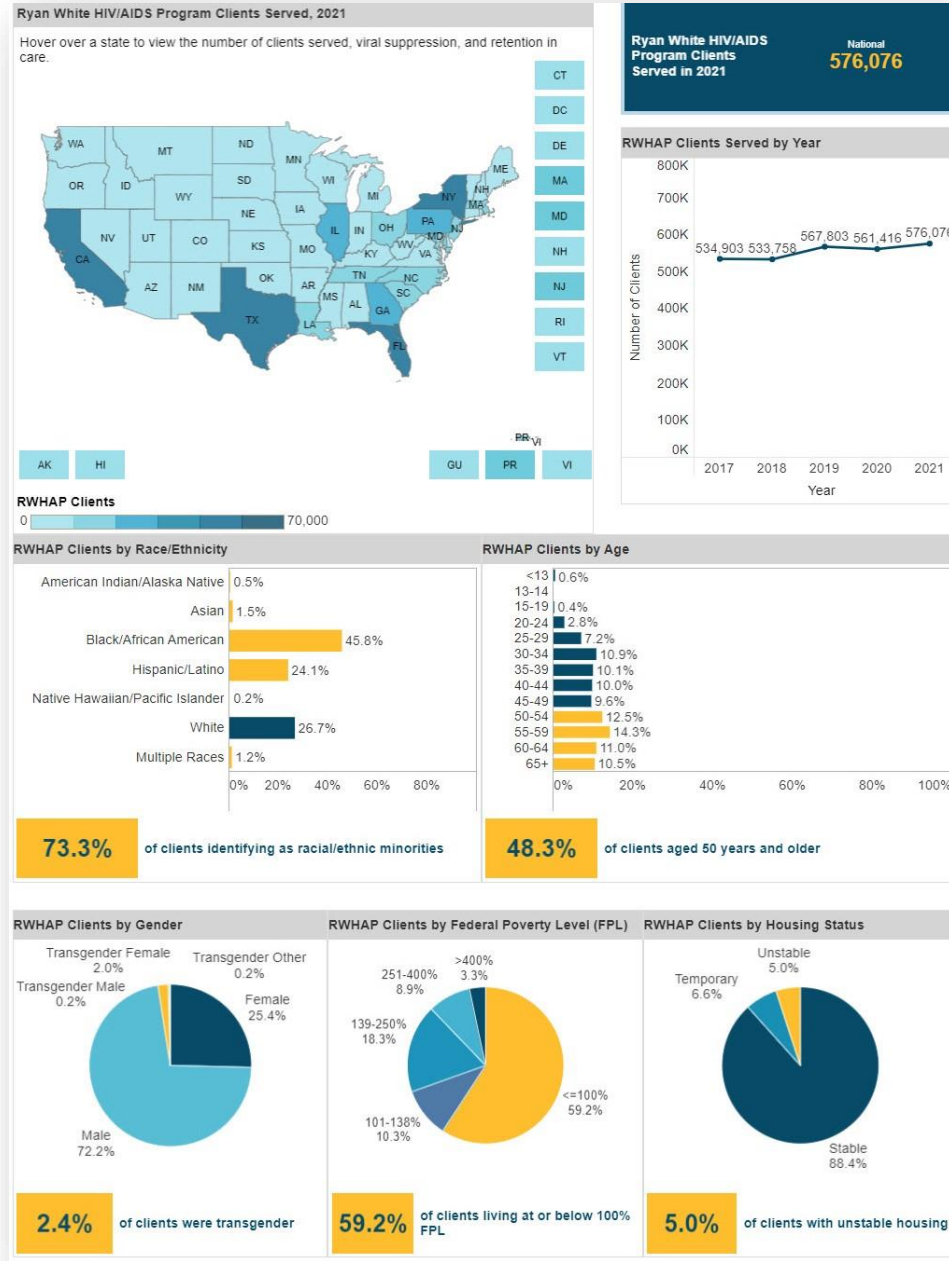
Slide decks



<https://ryanwhite.hrsa.gov/data>



Characteristics of RWHAP Clients



Dissemination Science for the RWHAP

Dissemination

- RWHAP Compass Dashboard
- RWHAP Best Practices Compilation
- Rapid Uptake of Dissemination Interventions in the Ryan White HIV/AIDS Program (RUDI)
- Coordination, Dissemination and Replication of Innovative HIV Care Strategies in the Ryan White HIV/AIDS Program (CRD)



The Ryan White HIV/AIDS Program (RWHAP) Best Practices Compilation

A hub for knowledge sharing across the HIV care and service community.

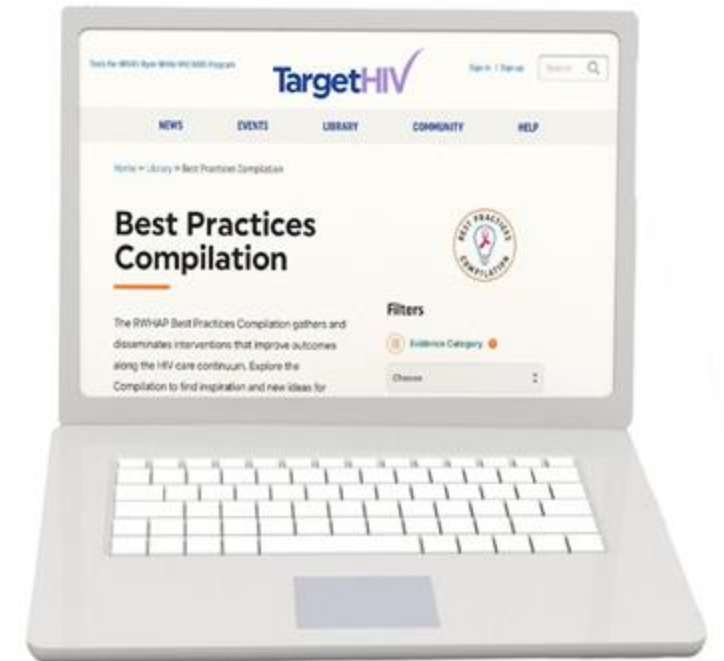
Julie Hook, MA, MPH, Project Director



Best Practices Compilation Purpose

We gather and share what works to improve care and services for people with HIV:

- Knowledge sharing across the RWHAP community is an important contribution to the ending the HIV epidemic in the United States.
- We systematically collect, catalog, and disseminate what works to improve HIV care and services to support replication by others.



targethiv.org/bestpractices

Best Practices Overview

Originally launched in October 2021 with 20 intervention approaches.

Currently reviewing materials on TargetHIV.org and rapidly developing profiles for existing approaches from previous HAB funded initiatives.

We now have 88 intervention profiles in the Compilation and continue to grow!

We are also accepting submissions on all types of approaches!



What kinds of interventions are included?

Effective approaches actively being used in RWHAP and other HIV-service delivery settings to achieve optimal health outcomes for people with HIV.

- Also known as intervention strategies or interventions
- Include either direct medical or support services, or both

Demonstrated effectiveness at improving client outcomes along the HIV care continuum and/or beyond (e.g., food and housing security, employment, other sexually transmitted infections, etc.).

- Some have published evidence, others have shown impact at the local level



Compilation Functions

The three main functions of the Compilation are:

- Search for approaches that may work for your organization.
- Share what works to improve HIV services and care for the clients you serve.
- Nominate an organization using a specific, innovative intervention or program to improve care and services for people with HIV.



Search

The Compilation is freely available to anyone including the RWHAP community and HIV care and service providers.

To search the Compilation visit targethiv.org/bestpractices/search.

Refine your search using a number of predefined filters, such as setting or focus population, or the keyword search field.



Best Practices Compilation Search

The RWHAP Best Practices Compilation gathers and disseminates interventions that improve outcomes along the HIV care continuum. Explore the Compilation to find inspiration and new ideas for improving the care of people with HIV. [Learn more about the Best Practices Compilation](#) and [submit your innovation today for possible inclusion](#).



Keyword Search

Search Results

Displaying 1 - 10 of 88

[Email Results](#)

JumpstART

JumpstART launched in 2016 as part of New York State's Ending the Epidemic initiative, changing the service delivery model of eight sexual health clinics to include an initial

New York City HIV Care Coordination Program

The New York City HIV Care Coordination Program is a structural intervention that combines multiple strategies, including

Filters

 Evidence Category 

Choose

 Focus Population 

Choose

 HIV Care Continuum 

Choose

Search Filters



Funding



Setting



Intervention
Type



HIV Care
Continuum





Population




Evidence
Category



Filters


 Evidence Category 



Choose 


 Focus Population 

Choose 


 HIV Care Continuum 

Choose 


 Intervention Type 

Choose 

 Setting 

Choose 

 Priority Funding 

Choose 

RESET



Intervention Profile Content (1)

Profiles include information on:

- Need addressed
- Core elements or activities that are essential to the approach
- Impact of the intervention approach
- Planning and implementation
- Sustainability
- Lessons learned
- Resources and Tools
- Articles on the intervention (if applicable)
- Contact information of original implementer or program
- References



On This Page

[Summary](#)

[Need Addressed](#)

[Core Elements](#)

[Outcomes](#)

[Planning & Implementation](#)

[Sustainability](#)

[Lessons Learned](#)

[Resources & Tools](#)

[Articles on the Intervention](#)

[Contact](#)

[References](#)

Intervention Profile Content (2)

Seeking Safety: E2i

[Search for more](#) [Email Page](#) [Print Page](#) [Login to Bookmark](#)

Seeking Safety helps people who have experienced trauma and/or substance use disorder gain safe coping skills through a flexible 12-session intervention. The University of California, San Diego Mother Child Adolescent HIV Program and the Multicultural AIDS Coalition implemented *Seeking Safety* as part of Using Evidence-Informed Interventions to Improve Health Outcomes among People Living with HIV (E2i), an initiative funded by the Ryan White HIV/AIDS Program (RWHAP) Part F Special Projects of National Significance (SPNS) program from 2017–2021. Participants had higher rates of retention in care and viral suppression after 12 months of the intervention.

Location(s): *San Diego, CA; Boston, MA*

 [Implementation Resources Available](#)

Evidence-Based Intervention

 Support service delivery model	 Retention in HIV medical care; Viral suppression	 Treat
 People with a history of trauma; People with substance use disorder	 RWHAP Part F SPNS	 RWHAP-funded clinic or organization; Community-based organization/non-clinical setting



Intervention Profile Content (3)

Core Elements

These features are key to this intervention's success.

+ Expand all

— Safety as the overarching goal

Safety always remains front-and-center during treatment. Clients are guided to identify what safety means to them, which may include reducing addiction, letting go of dangerous relationships (e.g., a violent partner), and gaining control over unsafe behaviors (e.g., cutting, burning, bingeing).

+ Integrated treatment

+ Guiding principles

+ Focus on topics in four domains

+ Attention to provider processes

Outcomes

Across the two implementation sites, 122 clients participated in this intervention. Participants in *Seeking Safety* had higher rates of retention in care and viral suppression after 12 months, but findings were not statistically significant.

Category	Information
Evaluation data	Surveys and medical chart review
Measures	Percentage of clients who: <ul style="list-style-type: none">• Attended at least one group session• Attended 12 group sessions Percentage of clients who were: <ul style="list-style-type: none">• Retained in care—at least two HIV care visits in the last 12 months• Virally suppressed—an HIV viral load test in the past 12 months AND a result of less than 200 copies/mL at the last viral load test
Results	<ul style="list-style-type: none">• 93% of clients attended one group session, and 23% attended all 12• Retention in HIV care increased from 63% to 70%• Viral suppression increased from 88% to 94%

Source: *Seeking Safety: E2i Implementation Guide*. Rockville, MD: U.S. Department of Health and Human Services, Health Resources and Services Administration, HIV/AIDS Bureau; 2021.

Share

Organizations can submit information about what has worked in their program to support replication by others.

To share your work visit targethiv.org/bestpractices/share.



Steps to Share




Information Needed to Share Approach

Need addressed—Why did you want to implement this intervention?

Description—What was the intervention that you implemented?

Impact—How did the intervention show success or impact your clients' lives? What methods did you use to measure the intervention's success?

Key features and activities—What features or activities are key to this intervention's success?



RYAN WHITE HIV/AIDS PROGRAM (RWHAP) BEST PRACTICES COMPILATION
SHARE YOUR WORK HERE!

We want to share the great work you are doing to improve the lives of people with HIV! The Best Practices Compilation gathers and shares what works in the field to support replication by RWHAP-funded and other HIV service organizations. **The Compilation includes a variety of interventions, including those that are well established and those that are emerging.**

Note: Although it is not required that you create and log in to your TargetHIV user account, we recommend that you do so. Some form fields will also autocomplete if you are logged in.

To start, please provide your contact information in case we have any questions on your submission. Questions marked with an asterisk (*) are required.

Name *	
Affiliation *	
Position/Role *	
Email Address *	
Phone Number *	
HRSA HAB Project Officer or Point of Contact *	

What RWHAP funding does your organization receive, either as a direct recipient or subrecipient?

* Select all that apply

Part A	Part B	Part C	Part D	Part F	None
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please answer the following questions:

1. Has this intervention been implemented in a RWHAP-funded setting? *	Yes <input type="radio"/>	No <input type="radio"/>
2. Has this intervention been implemented for at least 12 months, or if less than 12 months in response to a public health emergency (for example the COVID-19 pandemic)? *	Yes <input type="radio"/>	No <input type="radio"/>

Nominate

We encourage organizations and providers to nominate topics and/or innovative programs to the Compilation to help it grow.

To nominate a topic or program visit targethiv.org/bestpractices/nomination.

The screenshot shows the TargetHIV website interface. At the top, there is a navigation bar with links for NEWS, EVENTS, LIBRARY, COMMUNITY, and HELP. The main heading reads "¡Colabore para hacer crecer la Recopilación!". Below this, there are three questions in Spanish: "¿Hay algún tema que usted considere que necesita más atención o recursos?", "¿Hay alguna organización que utilice una intervención o programa específico e innovador para mejorar la atención y los servicios de las personas con VIH?", and "Nomine hoy una temática o un programa y contribuya al crecimiento de la Recopilación.". An illustration of a person holding a document is shown. A sidebar on the right contains a list of links: "Best Practices Compilation", "Best Practices Compilation Search", "Online Questionnaire: Share Your Work", "Share Your Work (PDF)", "Nominate a Topic or Program", "¡Colabore para hacer crecer la Recopilación!", and "Newsletter Archive". At the bottom of the main content area, there are two buttons: "+ Nomine un tema" and "+ Nomine un programa".



How we can help

The Best Practices Compilation team is available to support you!:

- How to search the Compilation
- How to share your work
- How to nominate a topic or program

The Best Practices Team

bestpractices@jsi.com





Q&A



What questions do you have for us?



Contact Information



The Best Practices Team
bestpractices@jsi.com

Natha Bakayoko, MPH
Public Health Analyst
nbakayoko@hrsa.gov

Demetrios Psihopaidas, PhD MA
Implementation Science Team Lead
dpsihopaidas@hrsa.gov

Connect with HRSA

Learn more about our agency at:

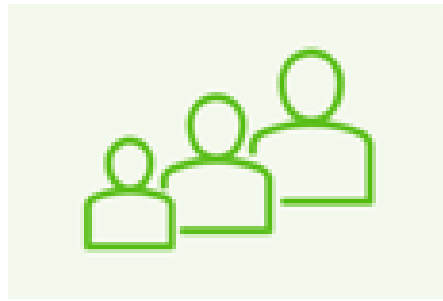
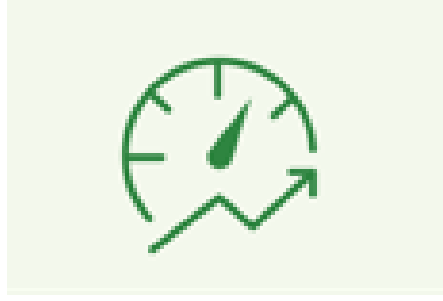
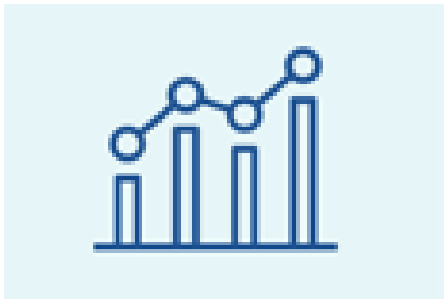
www.HRSA.gov



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