Leveraging Implementation Science to End the HIV Epidemic

January 25th, 2021
Objectives of the Webinar:

Describe the role of NIH and ISC3I in the EHE initiative
Identify the HIV IS Consultation Hubs and their areas of expertise
Describe the landscape of current EHE CFAR/ARC supplement projects

Agenda:

History of ISWG/ISC3I activities (15min)
Y1 Findings and Y2 Overview (10 min)
Introductions of IS Hubs (25 min)
Q & A (10 min)
Established in 2018 through CFAR supplement to Third Coast (Mustanski and Benbow) and Johns Hopkins (Baral) CFARs to host working on HIV implementation science.

Goals and objectives identified through interviews and surveys of CFAR leaders, calls with planning group (now steering committee), and 3 in person meetings.

Steering committee comprised of 23 members from 9 CFARs, 3 federal agencies (5 NIH ICs, CDC, USAID), and 1 foundation (AmFar). Executive Committee: Benbow, Mustanski, Baral (Co-Chairs); Geng, Sherr, Smith (members).

Initially funded through CFAR meeting supplement with ongoing administrative support provided by TC CFAR. Continuing with support of ISC³ supplement (TC CFAR) and training supplement (JHU).
CFAR Implementation Science Working Group

Purpose and Mission

1. Advance **training** in HIV implementation science (training institute).
2. Create and disseminate **tools** to support implementation science at CFARs (website with articles, talks, slide deck).
3. **Convene** HIV implementation science researchers, research and services funders, and implementation partners (e.g., health departments, large health systems) to exchange knowledge about new scientific developments, identify gaps and opportunities, forge collaborations, and help train new investigators (workshop, conference).
4. **Explore infrastructure** that could support nimble, cost-effective, and high impact HIV implementation science.
Overarching Goals

1. **Support high-quality implementation science** in funded *Ending the HIV Epidemic* projects by providing technical assistance from experts on IS designs, frameworks, strategies, measures, and outcomes.

2. **Create opportunities to develop generalizable knowledge from local knowledge** by encouraging the use of shared frameworks and harmonized measures, synthesizing data across projects, and encouraging cross-project collaboration.
65 Planning Projects in EHE Year 1
ISC$^3$I Summit

- Kickoff for both ISC$^3$I and EHE
- Two days in Chicago, IL
- 173 attendees, including
  - 63/65 projects
  - Federal partners from 6 agencies
- Objectives:
  - Introduce IS concepts and provide examples from HIV
  - Facilitate co-development of an implementation research logic model
  - Foster cross-project dialogue
Welcome to the ISC3I Community of Practice

Upcoming Events:

Stay tuned for future events!

The full virtual meeting schedule and link to the meeting room can be accessed on the Our Community page.

Community of Practice

- Reading course
- Discussion board
- Webinars
- Coaching
- Virtual groups
- Resources

https://isc3i.isgmh.northwestern.edu/
Implementation Research Logic Model

Smith, Li, & Rafferty, 2020, https://doi.org/10.1101/2020.04.05.20054379
https://isc3i.isgmh.northwestern.edu/irlm/
## Y1 Technical Assistance Metrics

| Community of Practice                          | • 344 non-internal (i.e., not ISC³I staff) users  
|                                               | • 357 unique visits per month (in 8.5-month lifespan) |
| Coaching                                       | • 7 coaches – 3 internal, 4 external  
|                                               | • 34 sessions with 25 project teams  
|                                               | • Most covered topics:  
|                                               | • implementation research logic model (79% of sessions)  
|                                               | • study designs (71% of sessions)  
|                                               | • implementation strategies (68% of sessions)  
|                                               | • 95% rated “very helpful” (5) on a 5-point scale |
| Webinars                                       | • 5 webinars:  
|                                               | • academic–community partnerships  
|                                               | • federally qualified health centers  
|                                               | • implementation research logic model  
|                                               | • study designs  
|                                               | • implementation strategies  
|                                               | • Live attendance = 16–70 participants |
| Virtual Groups                                 | • 6 groups of 11–12 projects x 4 sessions per group  
|                                               | • 87 unique participants (average attendance = 7)  
|                                               | • 47 projects participated in at least one meeting |
Year 2 Context

• Fewer, more diversified projects
  • 12 2-year projects (selected from Year 1 cohort)
  • 22 1-year projects: 7 targeting cisgender, heterosexual women for PrEP; 6 for data-driven communication strategies; 9 team-initiated IR
  • 14 researchers new to ISC3I; 20 participated last year
  • All have IRLMs in hand at launch (developing was big focus of year 1)

• New structure
  • 1 national coordinating center (ISC³I) and 5 regional hubs
  • Opportunity for more in-depth and specialized consultation

• ISC³I able to shift to greater focus on coordination
  • Harmonization of measures and creation of decision-making tools
  • Identification of best practices
  • Training and support for IS tailored to implementation partners
Implementation Science Consultation Hubs

Mid-Atlantic CFAR Consortium Plus
Directors: Sheree Schwartz and Stefan Baral

UCLA Rapid, Relevant and Rigorous (3R) IS Hub
Director: Alison Hamilton

San Diego IS Hub
Directors: Borsika Rabin and Nicole Stadnick

UAB CFAR EHE IS Hub
Directors: Michael Mugavero and Robin Lanzi

Rigorous, Rapid & Relevant Evidence aDaptation and Implementation to EHE
Director: Donna Spiegelman
Activities for Year 2

 ISC3I

• Coordinate Data Collection/Progress Reporting
• Maintain Online Community of Practice and Biweekly Newsletter
• Host national HIV IS Webinar Series
• Conduct systematic Reviews to inform field and begin creating decision-support tools
  • Topics: Barriers/facilitators, Implementation strategies for HIV
• Criterion-based review of best practices
• Guest edit JAIDS supplement
• Host “Fishbowl” feedback groups by topic area
• Develop trainings in IS tailored to needs of implementation partners
• Provide ongoing coaching with year 1 projects
• Support executive committee

 The Hubs

• Assigned 6-7 projects based on both project and hub preference
• Offer tailored consultations to projects throughout the year
• Assist projects with progress reporting and implementation of decision-support tools
• Host webinars and/or meetings with assigned projects
• Contribute to global planning through the ISC3I Executive Committee
• Contribute to creation and refinement of decision-support tools
Findings from Year 1

• Many projects were in the exploration phase and focused on identifying barriers and facilitators

• Most awardees were HIV researchers, but few reported having formal implementation science training

• Impact of COVID-19
  • Delivery of technical assistance (already virtual) not impacted by COVID-19
  • Projects reported COVID-19 related delays, but most were able to achieve at least some of their aims
  • Activities delayed by COVID: Participant recruitment/enrollment and collaboration with implementation partners

• Project teams would have benefitted from thinking about outcomes (where they are going) and/or strategies (what they are testing) early on

• Preliminary analysis suggests that engagement with ISC3I activities was associated with a greater chance of getting funded in Year 2

• Developed many resources for the Community of Practice and are available publically in the “Resource Hub” - https://isc3i.isgmh.northwestern.edu/resource-hub/
Most Common Barriers Identified in Y1 projects (n=45)
Most Common Facilitators Identified in Y1 (n=45)

- Evidence Strength and Quality
- Networks and Communications
- Readiness: Leadership Engagement
- Planning
- Engaging: Formal Internal Imp. Leaders
- Patient Needs and Resources
- Knowledge/Beliefs about Intervention
- Engaging: Opinion Leaders
- Engaging: Champions
- Relative Advantage
- Adaptability
Year 2 Ending the HIV Epidemic CFAR/ARC Projects (N=34)

*CFARs/ARCs with an affiliated IS Hub are marked with blue text
Pillars* Addressed by Ending the HIV Epidemic CFAR/ARC Planning Projects

Which of the EHE pillars does your supplement project **primarily** address?

- Prevent: 24, 70%
- Treat: 6, 18%
- Respond: 1, 3%
- Diagnose: 3, 9%

*Planning projects might have selected more than one pillar focus*

Which **other** EHE pillars does your supplement project **secondarily** address?

- Diagnose: 16
- Treat: 10
- Prevent: 10
- Respond: 6
What stage of implementation (as defined by EPIS model) is the intervention?

Year 1
- Exploration: 46%
- Preparation: 28%
- Implementation: 21%
- Sustainment: 5%

Year 2
- Implementation: 29%
- Preparation: 59%
- Exploration: 12%
What is (are) the clinical or prevention intervention(s) (i.e., program, pill, practice) that you are trying to implement in your EHE supplement?

- PreP: 22
- Linkage to Care: 10
- Patient/Peer Navigation: 7
- HIV Testing: 5
- Behavioral Intervention: 3
- Social Media Marketing Campaign: 2
- Data2Care/Improved surveillance data: 1
- Cluster Detection and Response: 1
- Condom Distribution Programs: 1
- nPEP: 1
- Partner Services: 1
- Other: 2
What type of organization is (are) your implementation partners(s)?

- Community-based organization
- Health department
- FQHC/community-based clinic
- Hospital system
- College or university
- Private sector partner
- Health department clinic
- Public programs
- Local media
- Other
- Faith or spiritual organization
Does your EHE supplement specifically target any of the following HIV priority populations?
Mid-Atlantic CFAR Consortium Plus (MACC+) IS Hub

- Johns Hopkins University CFAR Investigators
  - Co-Project Directors – Schwartz & Baral
  - Co-Is – Hoffmann, Beres, Hansoti, Owczarzak

- Collaborating CFARs – DC CFAR, Penn

- Center for Dissemination & Implementation (Elvin Geng)

- Patrick Sullivan (Emory)

- Inter-CFAR Fellowship Alumni
MACC+ Hub Approach

**Methods**
Improve scientific rigor through high quality technical assistance in implementation science to EHE awardees

**Collaboration**
Strengthen relationships between CFARs, Health Departments and community, coordinate with ISC3I, support cross-site analyses

**Mentorship**
Enhance IS skillsets amongst EHE, CFAR and Health Dept. investigators through didactic and applied training opportunities
Our services

- Coaching related to your project
- Review and feedback of tools, frameworks and questions pertaining to ongoing grants
- Support for new grant development
- Support for coordination of outcomes & cross-site knowledge generation
- Didactic and/or applied case study webinars, discussion of new or underutilized IS methods and frameworks

Consultations can be booked online via Acuity
R3EDI - Rigorous, Rapid, & Relevant Evidence aDaptation & Implementation to EHE

Core team

Project Director Donna Spiegelman, ScD*

Implementation Science analyst: Raul Hernandez-Ramirez

Quantitative analyst: Debbie Humphries

Qualitative analyst: Christine Simon

Program Administrator: William Tootle

*Director of CIRA’s Interdisciplinary Research Methods Core; Director of the Center for Methods in Implementation and Prevention Science (CMIPS)
Additional R3EDI Team Members

Co-investigators - Yale Faculty and Affiliates:

- Former CIRA PI: Paul Cleary, PhD
- CIRA PI Trace Kershaw, PhD
- Dean Sten Vermund, MD, PhD
- Steve Bernstein, MD
- Luke Davis, MD, MS
- Laure Forastiere, PhD
- Ashley Hagaman, PhD
- Marcella Nunez-Smith, MD, MHS
- Elizabeth Rhodes, PhD (Postdoc)
- Xin Zhou, PhD
- CIRA Daniel Davidson
- Brian Mittman, PhD (Kaiser Permanente)
- Inbal Nahum-Shani, PhD (University of Michigan)
- Rachel Nugent, PhD (RTI International)

• Consultants:
Aims/plans

Provide technical assistance, coaching, training, and consultative services to EHE project teams and collaborate with the EHE coordinating center, creating opportunities to generate generalizable knowledge. *Hands-on technical assistance is available and welcomed.*

Areas of expertise

- IS methods, frameworks, strategies, measures and outcomes in HIV/AIDS research
- Design and management of experimental and observational studies
- Quantitative, qualitative, and mixed-methods analytic approaches for sampling and data collection and analysis; and economic analysis
- Partnership formation and community-based participatory research

Potential contributions to EHE and/or IS

Publications advancing methodological areas as well as highlighting common gaps/challenges of served EHE projects, with recommendations for addressing them; new grants to assess scale-up, sustainability, and adaptation to new contexts.
SD CFAR IS HUB

ISC$^3$I Executive Committee Meeting
September 9, 2020
Team Introductions

**IS Coaches**

- **Borsika Rabin, PhD, MPH, PharmD**  
  Project Director, Senior IS Coach, ISC3I EC Rep
- **Nicole Stadnick, PhD, MPH**  
  Project Director, Senior IS Coach, ISC3I EC Rep
- **Gregory Aarons, PhD**  
  Senior IS Coach
- **Lauren Brookman-Frazee, PhD**  
  Senior IS Coach
- **Jessica Montoya, PhD**  
  Assistant IS Coach
- **Clare Viglione, MPH, RD**  
  Hub Manager, Shared Measures Manager, Assistant IS Coach

**HIV Coaches**

- **Maile Karris, MD, MPH**  
  HIV Science Coach
- **Laramie Smith, PhD**  
  HIV Science Coach
- **Yordanos Tesfai**  
  Assistant Hub Coordinator, Assistant Shared Measures Manager

**IS+HIV Consultants**

- **Cathleen Willging, PhD**  
  Expert IS Consultant
- **Sylvie Naar, PhD**  
  Expert IS Consultant
**IS Expertise**
- Application of IS frameworks (e.g., RE-AIM/PRISM, EPIS)
- Development of multi-level IS strategies & pragmatic measures
- EBP implementation in behavioral health domestically and globally
- Development and sustainment of community academic partnerships to support implementation and sustainment
- Advancing measurement and evaluation of adaptations, core components and tailoring for context

**HIV Expertise**
- Collaborative qualitative, quantitative, and mixed-methods research in HIV intervention development, evaluation
- Implementation of HIV prevention & treatment programs, especially with vulnerable and diverse populations
- Clinical HIV and infectious disease expertise
- Translational HIV research
- Development of partnerships with community stakeholders and HIV practitioners

**IS & HIV**
- Expertise in designing, adapting & implementing multi-site studies of complex, multilevel HIV interventions especially with paraprofessionals
- Expertise in mixed-methods approaches to understand impacts of programs & policies in HIV
SD CFAR IS Consultation Hub Logic Model

Objectives

1. Adapt and implement a consultation and technical assistance program to provide multi-method coaching and training to EHE projects on IS designs, frameworks, strategies, measures, outcomes, and community-academic partnerships.

2. Develop and implement a multi-modal process for coordination between the ISCT and the SD CFAR IS Hub to facilitate translation of local knowledge to generalizable knowledge.

3. Using mixed methods, evaluate the impact of the SD CFAR IS Hub on proximal individual and hub outcomes (e.g., increased HIV investigator knowledge of IS methods, advancement of IS methods and tools), and identify indicators of SD CFAR IS Hub sustainability.

Activities

Technical Assistance
- Kick off and Meet & Greet
- Tiered individual consultation
- Bimonthly group coaching
- Methods & design focused consultations

Training and Resources
- Implementation Science Seminar
- IS Works in Progress and Journal Club
- IS Design Workshop
- Mixed Methods Workshop
- IS Methods Bootcamp
- IS web tools
- EHE Scientific Working Groups
- O-K Reviews
- Organized Writing Leagues
- SD CFAR Community Advisory Boards

Knowledge Sharing
- Data collection and shared measure reporting
- Active participation in ISCT Executive Committee
- Dissemination and product development

Evaluation
- Ongoing, mixed methods evaluation of SD CFAR IS Hub using QI approach
- Assessment of proximal and long-term outcomes and impact

Outputs

Collaborative Agreement signed with each EHE project on:
- On-site consultation and technical assistance sessions overall and per EHE project
- Group consultation and technical assistance sessions overall and per EHE project
- Cost of consultation and technical assistance overall and per EHE project

Training and resource list tailored to SD CFAR IS Hub needs and EHE projects:
- EHE projects and IS Hub members participating across each training activity

Data collection and shared measurement platform:
- Shared measures reported overall and per EHE project
- ISCT Executive Meetings attended by SD CFAR IS Hub representatives
- Products (publications, presentations, toolkits, policy briefs, etc.) developed overall and per EHE project

Impact and ROI/value-added

- Advancements to the field of IS and the EHE initiative through local and national coordination, consultation and collaboration
- Solidified long-term partnerships between the UC San Diego DISC and SD CFAR
- Expanded reach to additional EHE projects nationally
- Expanded reach to geographically prioritized regions for EHE research (e.g., counties of San Diego, Orange, Los Angeles, Riverside, San Bernardino, San Francisco, Alameda Sacramento, Marin, and Clark)
- Development of HIV research-relevant web-based IS tools, educational materials and methodological decision aids
UAB CFAR Implementation Science Hub

Michael Mugavero, MD, MHSc (MPI)
SOM
UAB CFAR Co-Director & Clinical Core Director

Robin Lanzi, PhD, MPH (MPI)
SOPH
UAB CFAR Behavioral & Community Sciences Core Co-Director

Aadia Rana, MD
SOM
UAB CFAR Ending HIV in Alabama SWG Co-Director

Greer Burkholder, MD, MSPH
SOM
UAB CFAR Clinical Core Co-Director: Database & Informatics

Alfredo Guzman, MEng
SOM
Database & Informatics Director

Dustin Long, PhD
SOPH
UAB CFAR Clinical Core Co-Director: Biostatistics

Bertha Hidalgo, PhD
SOPH
&
Larry Hearld, PhD
SHP
D&I Science

Edward Jackson & Kalani Upshaw
Community Engagement

Edward Jackson & Kalani Upshaw
Community Engagement

Tom Creger, PhD
Program Evaluation

Kaylee Burgan, MA
Program Evaluation

Claire Estep, MA
Qualitative & Mixed Methods Research

Samantha Whitfield, MPH
Project Coordinator
UAB CFAR Implementation Science Hub

• Interface with Inter-CFAR working groups
  • HIV in the South, Faith & Spirituality & CNICS

• Multi-site coaching, consultation, collaboration with RW HIV Clinics
  • Client-level data collation and evaluation of care continuum outcomes

• Multi-site collaboration with public health / eHARS data
  • Road to Zero R01 (Rana PI)

• Community engaged science and partnership formation
  • Local, statewide, regional and national networks

• Program evaluation and IS frameworks, measures & methods
  • Support for awardees with specific teams assigned based on areas of need, content, and expertise
Next Steps

• Establish consulting team for each project
  • Team of 3 – 4 UAB Hub members for each grantee

• Quarterly all-site meetings
  • February, May, August

• Coordination with ISC³I and other grantees
  • Shared measures, group consultation(s) to streamline resources

• Shared folder for grantee aims and other supplemental materials
  • OneDrive or SharePoint
UCLA Rapid, Rigorous, Relevant (3R) Implementation Science Hub Overview
The UCLA 3R Hub Team

• CHIPTS/ARC PI: Steve Shoptaw, PhD
• Hub PI: Alison Hamilton, PhD, MPH
• Hub Co-Is: Norweeta Milburn, PhD, Chunqing Lin, PhD, Sung-Jae Lee, PhD
• Hub Consultants: Ana Baumann, PhD, Matthew Chinman, PhD, Geoff Curran, PhD, Erin Finley, PhD, Russ Glasgow, PhD
• Hub Project Directors: Elena Rosenberg-Carlson, MPH, & Uyen Kao, MPH
<table>
<thead>
<tr>
<th>Project Director, Site</th>
<th>Project</th>
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<tbody>
<tr>
<td>Ronald Brooks, UCLA CHIPTS</td>
<td>Telehealth to optimize PrEP care continuum outcomes among cisgender</td>
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<td>Black and Latina heterosexual women</td>
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<td>Larry Brown, Providence/Boston CFAR</td>
<td>Exploring PrEP implementation strategies tailored for African American</td>
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<td>cisgender women living in Mississippi</td>
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<td>Susanne Doblecki-Lewis, Miami CFAR</td>
<td>Adaptation of the mobile PrEP implementation strategy for equitable</td>
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<td>Latesha Elopre, UAB CFAR</td>
<td>PrOTEC AL: PrEP optimization through enhanced continuum tracking</td>
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<td>Roxanne Kerani, UW CFAR</td>
<td>Data driven messaging to increase engagement in molecular cluster</td>
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<td>investigations</td>
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<td>Kim Koester, UCSF CAPS</td>
<td>Connecting resources for rural and urban sexual health: CRRUSH-</td>
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<td>Sacramento</td>
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<td>Bisola Ojikutu, Harvard CFAR</td>
<td>Addressing unmet PrEP needs among diverse Black women</td>
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UCLA 3R Hub Aims

• Provide implementation science training and ongoing coaching and technical assistance to EHE grantees, with a focus on cutting-edge 3R methods, strategies, models, theories, and frameworks

• Accelerate HIV research impacts by interfacing with and contributing to the EHE Coordinating Center and identifying resources and opportunities for advancing evidence-based interventions through the implementation pipeline

• Provide and promote a platform for multidisciplinary collaborations in support of HIV-related implementation research
UCLA 3R Hub Core Activities

For EHE awardees:
• Tailored, modular IS training
• Consultation, coaching, and technical assistance
• Expert roundtable feedback focused on aims, manuscript drafts
• Lecture series (Beachside Chats w/consultants)
• Resources and opportunities

Within the hub and across hubs:
• Evaluation
• Collaboration, e.g., with UCSD Hub
• Contributions to ISC$^3$I
Thank You!

For more information, please contact:

ucla3rhub@mednet.ucla.edu
Any questions?

1) Type your questions into the Q&A Box for the moderators to read.

2) Request to the Host to be unmuted.