Country policy development brief

Example policy 6

Building blocks for differentiated PrEP service delivery components

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The building blocks for the components of differentiated PrEP service delivery are outlined in Table 2. These building blocks (WHEN - service frequency, WHERE - service location, WHO - service provider, and WHAT - package of services) may be utilized to adapt an existing model or build a new model appropriate to a target population or geographical context.

The right-hand "continuation" section of the table defines building blocks for people using PrEP beyond a short duration and who are assessed as suitable (see Section 5 above).

When someone is not suitable for less intensive differentiated PrEP service delivery during the continuation phase at the time of assessment, they should be offered extended PrEP refills combined with clinical consultations. Unless clinically indicated, they should not be required to make frequent clinical visits. Oral PrEP or dapivirine vaginal ring refills with a clinical consultation should be three-monthly and, for those receiving long-acting injectable cabotegravir, two-monthly combined visits. Additionally, clients should be reassessed for suitability for less intensive differentiated PrEP service delivery models at every visit.

This policy example is linked to the publication, "IAS - the International AIDS Society. *Key considerations in developing policy guidance for differentiated PrEP service delivery: Country policy development brief.* July 2022." available at https://www.differentiatedservicedelivery.org/Resources/Resource-Library/DSD-PrEP-policy-2022

Table 2: Building blocks for differentiated service delivery for assessment, initiation and early follow-up (0-3 months) and PrEP continuation (>3 months)

ANC - antenatal care; ART - antiretroviral therapy; FP - family planning; HIVST - HIV self-test; HTS - HIV testing services; MCH - maternal and child health; NCD - non-communicable disease; OPD - outpatients department; PEP - post-exposure prophylaxis; PNC - perinatal care; STI - sexually transmitted infection

	PrEP assessment, initio	ation and early follow-up (0-3 months)	PrEP continuation (for people suitable for less intensive PrEP service delivery). Where unsuitable, people should as a minimum be offered combined clinical consultations and PrEP refills 3-monthly (oral/ring) or 2-monthly (injectable).		
	PrEP assessment (after negative HIV test result)	PrEP initiation/re-initiation ^c	Initial clinical follow-up	PrEP refill/injection only	Clinical consultation
I WHEN	Immediately after HIV testing (or can be offered at time of demand creation for HIV testing to PrEP- eligible population)	Same-day initiation following PrEP offer acceptance if available on site If not possible for person to attend PrEP initiation site on the same day, within 7 days of HTS	<u>Oral/ring:</u> 1 month post-initiation IN PERSON OR 1 month post- initiation VIRTUAL and 3-month post-initiation IN PERSON <u>Injectable:</u> 1 month post- initiation IN PERSON (can be monthly until month 3 to allow for monthly lead-in injections)	3 monthly (2 monthly for injectable) (<u>Oral only:</u> 6 monthly for prolonged duration assessed as suitable)	6 monthly (<u>Oral only:</u> 12 monthly for prolonged duration assessed as suitable)
X WHERE	All HIV testing locations – community or facility	Community outreach location Specified facility HTS services (FP service or OPD-HTS service or STI service, if standalone from OPD, or ANC-MCH service or ART service ^a) Community pharmacy or drug shop	Virtual or community points supported by outreach services Facility service where initiation took place	Community-based: Community point (e.g., pharmacy, drop-in centre, mobile outreach or home delivery) Facility-based: Service designated for fast-track refill collection and/or injection administration (e.g., family planning or pharmacy, if HIVST)	Community point supported by outreach services Facility service where initiation took place Service package components can also be provided virtually through telemedicine approach
• who	All healthcare workers providing HTS, including lay healthcare workers (or peers distributing HIVST kits)	Outreach nurse ^b Facility-based nurse ^b (FP nurse, OPD designated nurse supporting HTS service, STI nurse, ANC nurse, PNC nurse or ART nurse) Private sector pharmacist	In person: Outreach nurse ^b or facility-based nurse ^b Virtual only: Trained and supervised lay healthcare worker	Trained lay healthcare worker, pharmacy worker or peer (for injectable - stipulate authorized provider to administer injection)	Outreach nurse⁵ or facility- based nurse⁵

	PrEP demand	Confirm PrEP eligibility assessment	Virtual and in person	HIV testing	Follow PrEP clinical
	creation	Screen for PEP eligibility (with plan for	HIV testing (can be HIVSTª)	(can be HIVSTª for home	guidelines
	PrEP initial eligibility	transition to PrEP upon PEP completion and	Screen for acute HIV infection	use with demonstration and quidance on what to	HIV testing
	assessment based on	HIV re-testing)	Ring only: check on insertion	do if screen HIV positive)	Screen for acute HIV
	country criteria	Screen for acute HIV infection		Effective use and	infection
	PrEP offer	Effective use and discontinuation	Address side-effects	discontinuation check-in <u>Oral:</u> 3-6-month refill <u>Ring:</u> 3-month refill <u>Injectable:</u> 1 x PrEP injection	Screen for and address
	Immediate referral	counselling ^{c2}	Brief review of effective use		side-effects
WHAT	and navigation to nurse for PrEP initiation (if available on site or person can attend initiation site elsewhere)	counselling ^{c1}	Discuss PrEP discontinuation and		Brief review of effective use
			if client chooses to discontinue: guide on discontinuation		and sexual risk counselling
		Assessment of intended PrEP use duration	0		STI screen and treatment
			Virtual only		<u>Oral only:</u> Cr clearance
		Assess and offer appropriate methods (daily	Recall to facility if abnormal	Condoms and lube	(eGFR): >50 years, co-
	Alternatively, offer PrEP initiation site	oral, event-driven oral, ring or injectable) ^{c2}	results and/or suboptimal fit for ring	Referral if necessary	morbidity or previous result of <90 mL/min:
	options and schedule	Depending on timing of in-person initial follow-up:	In person only		Discuss PrEP
	appointment within 7 days	lollow-up.			discontinuation and
		<u>Oral or ring:</u> 1- or 3-month script and refill (and HIVST kit for home use)	Oral only: >30 years or co-		if client chooses to
			morbidity: Cr clearance (eGFR)		discontinue: guide on
		Injectable: 1-month injectable script and	HBV vaccine if uninfected and unvaccinated		discontinuation
					Manage NCDs and other
		The following package components can	If client chooses to continue PrEP: Suitability assessment		co-morbidities
		visit if initiated in community: Hepatitis B surface antigen (HBsAg) ^{c1} STI screening and treatment Urine pregnancy test	and offer for less intensive PrEP		For women: FP assessment
			continuation		and aligned script
			6-month script		6-12-month PrEP script
			Oral/ring: 2x3-month refills		Oral: 2x3-6-month refills
			Injectable: 3x 2-monthly		Ring: 2x3-month refills
			injections		Injectable: 3x2-monthly
		Condoms and lube	Condoms and lube		injections

- a Service location/s should be considered from the PrEP user's perspective. Only providing PrEP services at the ART services is frequently reported to be undesirable among PrEP users.
- b All nurse cadres can prescribe and manage PrEP after PrEP orientation training and do not require comprehensive ART management training.
- c Re-initiation package components that need 1) not be repeated or 2) can be abbreviated.
- d HIVST endorsed for use in PrEP includes XXX (insert country approved HIVST for PrEP use).