



PROGRAM SUMMARY REPORT

Austin Public Health

PROGRAM:**Rapid stART Initiative**

INTRODUCTION:

The Rapid stART Initiative, led by the HIV Resource Administration (HRA) at Austin Public Health (APH), addresses the critical need for swift linkage to Antiretroviral Therapy (ART) upon HIV diagnosis. Through this program, APH aims to provide timely treatment, empowering people living with HIV (PLWH) to achieve viral suppression more quickly and reduce HIV transmission rates.

TARGET POPULATION:

The program serves diverse and key populations, ensuring that high-risk and underserved groups receive targeted interventions.

- People living with HIV (PLWH)
 - Men who have sex with men (MSM)
 - Black/African American
 - Hispanic/Latinx
 - Transgender and nonbinary individuals
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KEY STAKEHOLDERS AND COLLABORATORS:

The program was made possible through collaborations with several key stakeholders, including:

- Federally Qualified Health Centers (FQHCs)
 - Local health departments
 - Community- Based Organizations (CBOs)
 - HIV Planning Council volunteers and representatives
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PROGRAM DURATION:

The Rapid stART Initiative is designed to operate over a 3-to-5-year period, allowing sufficient time to achieve meaningful improvements in treatment outcomes for the HIV-affected individuals in Austin.

PROGRAM GOALS AND KEY ACTIVITIES:

The Rapid stART Initiative aims to connect individuals diagnosed with HIV to an ART provider within 72 hours of diagnosis, maximizing the potential for viral suppression and minimizing transmission risks. HRA developed Rapid stART Service Standards to guide the initiative, established partnerships with leading HIV pharmaceutical companies (Gilead Sciences, ViiV Healthcare, and Johnson & Johnson), and facilitated free starter packs for eligible clients.

This partnership supports initial treatment access, transitioning to a 30-day prescription thereafter. Additionally, HRA launched an Ending the HIV Epidemic (EHE) media campaign in August 2024 to increase public awareness of the program, promote the benefits of early ART initiation, and support the message of “Undetectable=Untransmittable (U=U).” The campaign spans social media, YouTube videos, a dedicated website, and other media.

PROGRAM CHALLENGES:

The initiative has faced challenges in meeting the 72-hour treatment window, as PLWH are often referred to HRA sub-recipients from external sources, which delays treatment initiation. To overcome this, HRA is working on strengthening its referral network and collaborating closely with local emergency departments to streamline expedited referrals and ensure timely care.

COMMUNITY ENGAGEMENT AND DEVELOPMENT:

The Rapid stART Initiative was developed with input from the local community, especially the HIV Planning Council, which includes PLWH and other stakeholders. Their feedback helped shape the program to better meet community needs. HRA also regularly engages its EHE sub-recipients and local CBOs that provide direct care to PLWH, through ongoing discussions and technical assistance on implementing Rapid stART.

DATA COLLECTION AND MONITORING:

Sub-recipients track outcomes in viral load and linkage to treatment and report them monthly to HRA for Rapid stART. The data is housed in an online portal called PartnerGrants. This data goes through a quality review by HRA's EHE funding specialist, grant manager, and data manager.

The HRA data manager reviews the data and uploads it into the Provide Enterprise system. Quarterly and annual reports are also submitted, supporting HRA to monitor performance, address gaps, and provide technical support as needed.

KEY METRICS AND OUTCOMES:

HRA uses the following metrics to measure success in Rapid stART:

- Number of unduplicated clients who tested positive for HIV
 - Number of unduplicated clients linked to Antiretroviral Therapy within 72 hours
 - Number of unduplicated clients achieving viral suppression (viral load under 200 copies/mL)
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CONCLUSION:

The Rapid stART Initiative represents a crucial step toward rapid, accessible HIV treatment. By prioritizing early ART initiation and fostering strong community partnerships, the program aims to achieve quicker viral suppression and lower HIV transmission rates. Continued community engagement, ongoing technical support, and data-driven adjustments will ensure that the initiative adapts to overcome challenges and meet the needs of the affected population in Austin.