Facilitators

• Amanda Phi, MPH

• Patrick Padgen, MSW MPH
Objectives

• Discuss how a group of interdisciplinary partners can work together to bring a prevention service into a setting that was not previously providing that service

• Develop frameworks for establishing and maintaining cross-sector partnerships

• Identify gaps, opportunities, and resources, as well as potential partnerships which can be leveraged to improve the public’s health
Agenda

• New York Knows Introduction
• HIV Testing in NYC Pharmacies
• Developing and Maintaining Partnerships
• Activity
• Questions
New York Knows Introduction
New York Knows

New York Knows is one of the largest HIV testing and prevention initiatives in the nation.

It aims to help all New York City residents learn their HIV status and take full advantage of the city’s care and prevention services.
New York Knows Goals

- Provide a voluntary HIV test for every New Yorker who has never been tested.
- Make HIV testing a routine part of health care.
- Identify undiagnosed persons living with HIV and link them to medical care.
- Connect people who test negative for HIV to prevention services, including PrEP.
Guiding Principles

- Community engagement harnesses community voices and interests for better outcomes
- Together we can achieve more than alone
- HIV testing is the gateway to HIV treatment and prevention and is also a vital step in ending the epidemic.
New York Knows Partners

- Community-Based Organization, 42%
- Community Health Center, 15%
- Hospital, 12%
- Faith-Based Organization, 16%
- Government, 5%
- Business, 3%
- College/University, 3%
- Pharmacy, 2%
- Business, 3%
- College/University, 3%
- Government, 5%
Collective Impact Model

- Complex social or health problems cannot be solved by a single agency, department, or program

- Multiple, diverse organizations or partners from different sectors (government, business, community) are necessary

- Partners must align with common goals, indicators and efforts

Core Tenets of Collective Impact

- Common Agenda
- Shared Measurement
- Mutually Reinforcing Activities
- Continuous Communication
- Backbone Support

Successes

• Tested over 4 million people in NYC since 2008
• Sustained engagement for over 11 years
• Coordinated successful community events
• Conducted citywide and online campaigns
• Innovated pilot programs and projects (pharmacy testing)
PRESCRIPTION FOR A HEALTHY NYC

HIV Testing in NYC
Pharmacies: A Pilot Project
Origin Story

Getting testing out of clinical settings

• 2013 Pilot in the Bronx

• 2014 National HIV Testing Day

• 2015 Planning for Pilot in Manhattan

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Objectives

• To increase access to HIV testing outside of a traditional clinical or community based organization setting

• To decrease stigma for HIV and HIV testing

• To increase awareness on HIV and PrEP (a pill that can be used to prevent HIV)
Details

- Duration: One Year
  - March 2016 to March 2017
- Locations: Two in Manhattan, NYC
  - Hell’s Kitchen and Inwood
- Participants: Nine community partners
  - Pharmacy chain with two locations
  - Eight HIV service organizations
    - 5 Community-Based Organizations
    - 2 Community Health Centers
    - 1 Hospital
2015
- Pharmacy partner offered space for HIV Testing

2016
- NYK solicited interested participants
- NYK held pilot orientation
- Obtained licenses for in-pharmacy testing
- Development of testing schedule
- HIV testing, program monitoring, and data collection

2017
- Post pilot evaluation feedback call
Requirements

In order to participate the agency needs

• Waiver for off-site HIV testing

• For the pharmacy
  – Certificates of Insurance
  – Limited Use License Agreement

• For NYC Health Department
  – Pilot Orientation attendance
  – Expectations Agreement
Roles

- NYC Health Department
  - Coordinated project
  - Monitored progress

- Pharmacy
  - Hosted HIV testers
  - Promoted testing

- Participating Agencies
  - Promoted/provided HIV testing
  - Reported data
Overall Results

Between March 2016 – March 2017

• 191 total HIV tests conducted
• 5 reactive tests
• > 60% of individuals tested identified as Black and/or Latinx
### Pilot Results

<table>
<thead>
<tr>
<th>Demographics</th>
<th>Inwood (n=111)</th>
<th>Hell’s Kitchen (n=83)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSM</td>
<td>26, 23%</td>
<td>44, 53%</td>
</tr>
<tr>
<td>Non-MSM</td>
<td>58, 52%</td>
<td>35, 42%</td>
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<tr>
<td>Female</td>
<td>51, 46%</td>
<td>18, 22%</td>
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<tr>
<td>Male</td>
<td>59, 53%</td>
<td>64, 77%</td>
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<tr>
<td>Other</td>
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<tr>
<td>Asian</td>
<td>3, 2%</td>
<td>8, 10%</td>
</tr>
<tr>
<td>Black</td>
<td>33, 30%</td>
<td>20, 24%</td>
</tr>
<tr>
<td>Latino</td>
<td>60, 54%</td>
<td>11, 13%</td>
</tr>
<tr>
<td>White</td>
<td>16, 14%</td>
<td>41, 49%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>8, 10%</td>
</tr>
<tr>
<td>18-24</td>
<td>23, 21%</td>
<td>15, 18%</td>
</tr>
<tr>
<td>25-44</td>
<td>56, 50%</td>
<td>13, 16%</td>
</tr>
<tr>
<td>45-64</td>
<td>26, 23%</td>
<td>1, 1%</td>
</tr>
</tbody>
</table>
Challenges

- Communication
- Partner capacity
- Progress/process monitoring
- Planning for continuation of partnerships post-pilot
Successes

- Participant satisfaction
- 2.6% positivity rate (.9% in 2017 for CDC-funded sites)
- Regular and consistent provision of preventative health service in a non-traditional setting for the community
- Shared responsibility of work without overburdening agencies

CDC. (2018).
Next Steps

• Relaunch Pharmacy Testing in Bronx and Manhattan

• Continue collaborative testing model for events

• Tailor model based on partner feedback
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Developing and Maintaining Partnerships

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New York Knows Partners

- NYK has over 200 partners

- Partners must align with common goals, indicators and efforts
Collaborating Across Sectors

Traditional Partners, 69%

Faith-Based Organization, 16%
Government, 5%
Business, 3%
Pharmacy, 2%
College/University, 3%
Nontraditional Partners, 31%
Tips

• Building relationships and trust

• Shared ownership

• Clearly defined responsibilities and benefits

• Communication
Challenges

• Fostering collaboration
• Sustained engagement
• Capacity/Resources
• Leadership
Next Steps

Where do you want to go?

How can you get there?

Who can help you there?
Activity
Logic Models

Road map for achieving outcomes that can help:

• Plan program
• Coordinate activities
• Communicate effectively
• Measure your success
Tips for Modeling Logic

Work backwards, start with intended outputs

- Outcomes/impact should be SMART
  - Specific
  - Measurable
  - Achievable
  - Realistic
  - Time-bound
Tips for Modeling Logic

• Activities should connect to outputs and resources

• Iterative and collaborative process

• Be realistic
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Discussion
New York Knows Team

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- Donovan Jones
- Patrick Padgen
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- NYK Partners

There are far too many partners to list on one slide, but the New York Knows partner agencies are vital to the success of the initiative.
References

Centers for Disease Control and Prevention, Heart Disease and Stroke Prevention Program Evaluation Guides: Developing and Using a Logic Model [https://www.cdc.gov/dhdsp/docs/logic_model.pdf]


Innovation Network: Logic Model Workbook [https://www.innonet.org/media/logic_model_workbook_0.pdf]


Questions?