



Nurse-led pre-exposure prophylaxis (PrEP): a non-traditional model to provide HIV prevention in a resource constrained, pragmatic clinical trial

Schmidt HM J¹, [McIver R](#)², Houghton R², Selvey C³, McNulty A², Varma R², Grulich A⁴, Holden J¹

1. Centre for Population Health, NSW Health
2. Sydney Sexual Health Centre
3. Health Protection NSW, NSW Health
4. The Kirby Institute, UNSW

Background

- Prior to subsidisation, PrEP was mainly available through “access-trials”
- EPIC-NSW is a time-limited public health intervention to dramatically reduce HIV transmission
- Flexible models of care needed for rapid scale-up
- Legal instrument issued to allow for nurses to supply PrEP



A model for nurse-led PrEP

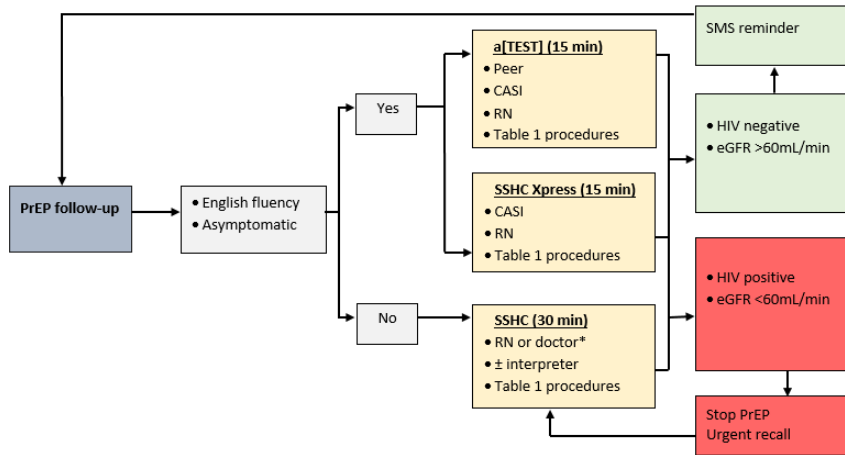
- Trained and authorised registered nurses at public clinics
- Delegated under the EPIC-NSW protocol to screen, educate, clinically assess, order tests and manage results
- Supply daily TDF/FTC PrEP in-clinic under a standing order
- Countersigned by a doctor within 24 hours
- At least annual medical review



| Behavioural and clinical assessments and procedures | Visit | | |
|--|----------|----------|-----------|
| | Baseline | 1-month | 3-monthly |
| HIV risk assessment ¹ | x | x | x |
| Medical history | x | x | x |
| Signs or symptoms of acute HIV infection | x | x | x |
| Current medications including nephrotoxic drugs | x | x | x |
| HIV serology ± point of care test | x | x | x |
| Renal monitoring ² | x | x | x |
| Sexually transmissible infection screen ³ | x | | x |
| Hepatitis A and B screening ⁴ | x | | |
| Hepatitis C screening ⁵ | x | | |
| PrEP education ⁶ | x | x | x |
| Adherence support | x | x | x |
| Pregnancy test ⁷ | x | x | x |
| Adverse events assessment | | x | x |
| SMS reminder for next visit | x | x | x |
| Supply of TDF/FTC PrEP ⁸ | 1 month | 2 months | 3 months |

¹ EPIC-NSW behavioural eligibility criteria ² eGFR ± other renal monitoring tests ³ syphilis, chlamydia and gonorrhoea ⁴ ± vaccinations; ± chronic hepatitis B monitoring ⁵ at baseline and 12 monthly ⁶ indication, dose, instructions, adherence, safety, tolerability, missed dose protocol, continued condom use ⁷ for people of childbearing potential ⁸ daily tenofovir/emtricitabine

Nurse-led model for PrEP follow-up



a[TEST]: Oxford Street location
 SSHC: Sydney Sexual Health Centre
 Peer: Peer-led education and health promotion
 CASI: Computer assisted self-interview
 RN: Registered Nurse

*according to clinic scope of practice

Benefits

- Streamlines access for clients
- Builds on existing nursing workforce capacity
- Conserves limited doctor's time for complex presentations
- Empowers clinicians to work to full scope of practice
- Embeds PrEP provision and follow up into routine service delivery
- Broad support from clinicians, government and partners

Challenges

- Extensive scoping and planning
- Ensuring acceptability to clients, clinicians and partners
- Regulatory barriers to implementation
- Service reorientation
- Competency frameworks and training



Future directions

- Adapt model for non-research settings
- Expand nurse-led and other non-traditional models
- Formal evaluations



Acknowledgments

- The EPIC-NSW study participants
- ACON and the a[TEST] peers
- The EPIC-NSW study group, study coordinators and staff at participating clinics
- EPIC-NSW is funded by the NSW Government



Disclosure of interest

- AG has received research funding from BioCSL Ltd., Viiv and Gilead Sciences, as well as conference travel funding and honoraria for educational presentations from Merck
- The other authors have no conflicts of interest to declare

