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IDENTIFYING OPTIMAL USES OF THE RAPID SYPHILIS TEST

RFA INFORMATIONAL WEBINAR

NACCHO
National Association of County & City Health Officials

September 30, 2016
2:00 PM - 3:00 PM EST

Presented by:
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Senior Program Analyst, HIV, STI, and Viral Hepatitis

Overview

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<u>To Ask a Question</u>

During the webinar, questions can be submitted through the **Chat box**, and will be answered during the Q&A period.

During the Q&A period, lines will be unmuted individually for participants to ask questions.

All lines will be muted until the Q&A period.

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Eligibility & Important Dates

- Eligible applicants: Local health departments (LHDs) that are dues-paying NACCHO members
- Application Submission Deadline:
  October 21, 2016 by 11:59 PM PDT
- Telephone Interviews (if necessary):
  October 24–November 11, 2016
- Anticipated Award Notification:
  November 21, 2016
- Anticipated Contract Start:
  January 2, 2017

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Project Background

- Syphilis is a prevalent and expanding public health issue, especially among MSM
- Lab-based testing has been the primary method used to screen for syphilis, but rapid syphilis tests (RST) have been recently introduced
- Some programs have started to use RST in community outreach settings or as part of partner services provided by Disease Intervention Specialists (DIS)
- Need for evaluation of RST performance in a variety of settings and information on which program contexts are optimal for use of the test

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Project Overview

- Selected LHDs will be awarded up to $60,000 each
- Project period expected to be between 6–10 months
- LHDs will:
  - Implement RST in nonclinical settings outside of STD clinics
  - Assess RST performance and implementation practices
  - Evaluate (collect and submit evaluation data) and document RST implementation
- Project aims to answer:
  - What are best practices for integrating RST into nonclinical STD program settings?
  - How effective is RST at identifying new syphilis cases?
  - What are the outcomes, barriers, opportunities, and costs associated with using RST in various STD program settings?
  - How do these factors vary across settings and local contexts?

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Project Settings

- RST should be implemented in at least 2 nonclinical settings, including:
  - In-field investigations of persons with syphilis and/or their contacts
  - Outreach efforts to communities experiencing an acute syphilis outbreak
  - Mobile or venue-based testing activities (e.g., community outreach events led by HIV program staff)
  - Correctional facilities (may be clinical setting)
- Applications proposing single setting will be considered
- Rationale should be provided for why the proposed setting(s) were selected, including the ability to conduct a meaningful number of RST

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Key Activities

- Finalize plan(s) to implement RST and collect evaluation data in accordance with the evaluation plan in collaboration with NACCHO and CDC/Division of STD Prevention (DSTDP)
- Test at least 200 unduplicated patients or clients (per selected setting) using RST
- Perform reference tests using standard treponemal and nontreponemal testing of all RST reactive samples, and up to 100 non-reactive samples from each setting
- Collect and submit data and qualitative information necessary to evaluate implementation process, outcome, and cost measures

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Key Activities

- Collaborate with NACCHO and CDC/DSTDP in analyzing, interpreting, synthesizing, and sharing findings, including participating in a webinar to discuss findings
- Participate in monthly project conference calls
- Work with NACCHO and CDC/DSTDP to plan an in-person site visit
- Provide relevant staff and sufficient staff time to manage the project and to participate in ongoing communication

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DELIVERABLES

- Final RST implementation, evaluation, and data collection plans
- Results from RST and laboratory reference tests
- Results from RST-identified case follow-up and field investigation
- Key inputs for a basic cost analysis
- Results from assessments of implementation activities (e.g., description of challenges identified, staff experiences, etc.)
- Final versions of standard operating procedures for implementing RST in each setting, which should include best practices and lessons learned through project implementation and evaluation activities

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SUPPORT & TECHNICAL ASSISTANCE

- NACCHO and CDC/DSTDP will provide support to awardees throughout the project period
  - Technical assistance via conference call and webinar to facilitate project planning, implementation, and data collection and reporting (including data cleaning, documentation standards, and reporting frequency)
  - In-person site visits to observe the program model, review and discuss implementation plans and evaluation data, and provide any needed technical assistance
  - Analysis of reported data
  - Summary reports synthesizing evaluation findings

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Selection Criteria

Out of 100 points:

- Past/current experience with RST or with the field evaluation of other rapid tests and rationale for evaluating the RST in the proposed setting(s) (20 points)
- Strength of proposed methodology to implement RST in the stated timeframe and at sufficient scale for a robust evaluation in the proposed setting(s) (25 points)
- Plans to collect appropriate data to facilitate evaluation of RST implementation for each of the required evaluation components of the project (25 points)
- Amount and relevant experience of key staff responsible for carrying out project activities (20 points)
- Appropriateness and completeness of proposed budget (10 points)

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Submission Instructions

- Applications should be submitted as a single PDF in an email to nparr@naccho.org
- Use as a Subject Line: "Rapid Syphilis Test RFA"
- Questions about the RFA or submission can be directed to:

Nicholas Parr, MPH
Senior Program Analyst, HIV, STI, & Viral Hepatitis
202-595-1121
nparr@naccho.org

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Q&A

- Can I apply if my health department is not a dues-paying NACCHO member?
  - Eligibility is limited to dues-paying member health departments. To find out more about membership, contact 877-533-1320 or membership@naccho.org
- Can I apply if my state health department pays dues?
  - Yes, as long as your local health department has direct affiliation with your state health department. Contact NACCHO's Membership team to ensure you are applying under the umbrella of your state's membership.

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Q&A

- Can multiple health departments apply together on one application?
  - Yes, up to two health departments can apply together, however one must be designated as the prime/lead, and reimbursement from NACCHO will only be provided to that single entity.
- Will training be provided to implementation staff on how to use RST/Syphilis Health Check?
  - Yes, training will be provided to all implementation staff. More information on the training will be made available post-award.
- Will the cost of test kits be reimbursable?
  - Yes, the test kits are a reimbursable project expense.

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Other Questions?

Please "Raise your hand" by clicking  before asking a question

- then -

When called on, press *7 to unmute.

*After asking your question, mute your line by pressing *6 and clicking*  *again to lower your hand.*

Q&A and the archived webinar will be made available following the call at:
http://essentialelements.naccho.org/archives/4483

Additional questions can be submitted to: nparr@naccho.org

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