

ACCEPTABILITY, APPROPRIATENESS, AND FEASIBILITY OF AN ON-SITE HCV "TEST AND TREAT" STRATEGY AT OPIOID TREATMENT PROGRAMS IN NORTH AMERICA

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Background: The population level effectiveness of oral direct-acting antiviral therapies depends on their reach. HCV treatment implementation strategies to improve adoption, implementation, and maintenance of HCV treatment at opioid treatment programs (OTPs) have the potential to increase HCV treatment uptake by people who use drugs (PWUD), advancing HCV elimination. Understanding perceptions of the acceptability, feasibility and appropriateness of these approaches is critical to support implementation

Methods: In preparation for the RAPID HCV study, a hybrid type 1 effectiveness-implementation randomized controlled trial evaluating the impact of HCV treatment at OTPs with peer support to increase HCV treatment uptake among PWUD, we assessed perceived pre-implementation feasibility, acceptability, and appropriateness to sustain and scale up HCV treatment in OTPs. We surveyed clinical leadership at five OTPs across Baltimore, Maryland, Birmingham, Alabama, San Francisco, California, and Toronto, Canada. Implementation outcomes were measured from August 2021-May 2022 utilizing the Acceptability of Intervention Measure (AIM), Intervention Appropriateness measure (IAM), and Feasibility of Intervention measure (FIM) 4-item scales which are considered leading indicators of implementation success.

Results: Clinical leaders at the OTP sites perceived that on-site HCV treatment was acceptable and appropriate with high scores for acceptability to staff (average score, 5/5) and appropriately meeting their OTP clients' needs and priorities (4.9/5). OTP staff scored the feasibility of implementation slightly lower, with an average score of 4.5/5. Potential barriers and concerns identified were: 1) Maintaining the momentum of HCV treatment in the face of competing priorities; 2) Coordinating new tasks to ensure smooth workflow integration and 3) Managing the politics and finances of a new on-site HCV treatment program.

Conclusion: Successful implementation of HCV treatment by OTP providers requires attention to contextual factors specific to the existing structure, finances, and workflow of the OTPs. Ongoing measurement of implementation outcomes will be critical to understanding strategy effectiveness.

Disclosure of Interest: None