SFDPH HIV/HCV/STD ROADMAP

Presentation to Health Commission
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HIV Roadmap Design Team:
- Create an SFDPH HIV Roadmap to further coordinate and leverage services across PHD and the SFHN.
- Engage all Department leads to understand the vision and inform the work of Getting to and Staying at Zero.

- Community Health Equity & Promotion Branch
- Disease Prevention and Control
- HIV Surveillance, ARCHES (Applied Research, Community Health Epidemiology & Surveillance)
- Population Health Division Leadership
- HIV Health Services, Primary Care
HIV is at a Crossroads / Current Situation

- Improved HCV and HIV treatment, testing, U=U, PrEP
- Effective, innovative programs
- Improved health outcomes
- Opportunities for integration of HCV/STD

- Persistent inequities
- Level or decreasing funding
- Lack of biomedical interventions for STD
- More intensive efforts towards “high acuity” populations to test, link, and maintain in care
- Workforce development
Opportunities and Actions

**ENGAGE** program staff, community partners and agencies, clinicians, researchers, and DPH leaders to help us in Getting to Zero and staying there

**INNOVATE/INTEGRATE** programs and data
Take a whole person approach – in addition to HIV, strengthen integrated service models that also address hepatitis C, STDs, chronic disease and other health issues

**ALIGN** resources and programs
Use RFPs to help manage the funding process, integrate programs, further address disparities, and implement innovations

**PRIORITIZE** when we can’t do it all
Prioritize based on impact and other critical considerations

Enact these opportunities within a unified “whole Department” framework
Goal & Plan

By Summer 2018, build a 5-year San Francisco roadmap for Getting to Zero and Staying at Zero which incorporates:

- Broad community input
- Options to adapt to fiscal and political realities
- Integration of population health and primary care innovations
- Health equity emphasis

“We see the future…as something we can shape for the better through concerted and collective effort.” – Barack Obama

- Overall 94% of PLWH are aware of their HIV status
- New diagnoses decreased 5% between 2016-2017
- Number of deaths is level and may be slightly increasing
- Survival is improving; 65% of PLWH >50yrs
- Late diagnoses declined from 21% in 2012 to 11% in 2016
STD Increases Continue Even as HIV Diagnoses Decline
Hepatitis C in San Francisco

- 926 newly confirmed cases reported to SFDPH HCV surveillance in 2016.

End Hep C SF Prevalence Estimate
- 2.5% of SF population (22,000) have been infected with HCV.
- 12,000 SF residents currently infected with HCV.
Roadmap Development Process

Operational Planning
- What is needed to move our strategies and actions forward? “How”

Data Collection
- What is our current reality and future considerations?

Focus Question
- What is the problem we are trying to solve?
- What outcomes do we want to achieve?

Scenario Development
- What are four scenarios that reflect critical uncertainties and describe possible futures? “What if”

Stakeholder Input
- What is the communities’ input on plausibility and needed action?

Strategy Development
- What actions / strategies will we take to address future scenarios? “What”
Draft 2018 Timeline & Outcomes

**Community Engagement**

- **Feb - May**: Get input from HCPC and other stakeholders, using focus question and other tools

**Strategic Framework Development**

- **May - Jun**: *Internal DPH process* Assemble and build upon all input, to create a draft of the Strategic Framework

**Community Feedback**

- **Jun - Jul**: Get input from HCPC and other stakeholders on Strategic Framework draft

**Operational Planning**

- **Jul - Sep**: *Internal DPH process* Integration Team will collaborate around upcoming Requests for Proposal (RFPs)

**Implementation**

- **Oct & Beyond**: Release RFPs, resulting in contract awards and services beginning in 2019. Ongoing reassessment based upon emerging issues.
Focus Question

What systems of prevention, testing, care, and treatment do we need in SF to ensure that new HIV, HCV, and STD transmissions are rare, and every person needing assistance for HIV, HCV, or STDs will have timely access to patient-centered state-of-the-art care?
Roadmap Stakeholder Engagement

Emerging Themes/Guiding Principles

- Community-Centered Approach
- Partnerships for Impact and Accountability
- Integrated Services
- Sustainability Strategies
“Health Access Points”

Goal: Reduce disparities by addressing vulnerabilities through focused community investment.
“Health Access Point” Attributes

- Stigma-free, welcoming, culturally appropriate environment
- “Status neutral”
- Population-specific
- Baseline standard of care, for all populations
- Low barrier access:
  - Mobile and field-based work
  - Consistent services offered at the same time, same place, same teams
  - Frequent recurring contacts
- Interdisciplinary
- Clinical and community-based elements
- Single location, multi-location network, or other approach
- Shared data, risk assessment, & care plans

Essential for sustainability:
- Accountability
- Workforce development
- Organizational capacity-building