

# SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

ENDING THE HIV/HCV/STI EPIDEMICS

Hanna Hjord Montica Levy Bill Blum

October 25, 2021

## ETE/EHE Agenda

| 1  | 2                            | 3                | 4                                     | 5  | 6   |
|--|------------------------------|------------------|---------------------------------------|--|---|
| EHE & ETE:<br>What is the<br>difference? | Update of<br>SFDPH<br>Awards | ETE<br>Oversight | CDC<br>Component<br>A Update:<br>CHEP | CDC<br>Component<br>C Update:<br>SF City<br>Clinic | HRSA<br>Update:<br>HIV Health<br>Services |







## Ending the HIV Epidemic Initiative (EHE)

- ❖ 10-year initiative that aims to end the HIV epidemic in the United States by 2030
- Funding from CDC and HRSA

## Ending the HIV/HCV/STI Epidemics (ETE)

- In San Francisco, we added goals of elimination of hepatitis C (HCV) and reducing sexually transmitted infections (STIs)
- ❖ We are also including overdose prevention and COVID-19 services
- Addressing syndemics

# **ETE/EHE Update on SFDPH Awards**





Treatment dollars, HRSA-20-078: "Ending the HIV Epidemic: A Plan for America — Ryan White HIV/AIDS Program Parts A and B"

- HIV Health Services, SFDPH
- ❖ 5 years starting March 1, 2020
- ❖ Year 2 award: \$1.67M

Prevention dollars CDC, PS20-2010: "Integrated HIV Program for Health Departments to Support Ending the HIV Epidemic in the United States"

- ❖ 5 years starting August 1, 2020
- ❖ Comp A: \$2,290,288 Community Health Equity & Promotion (CHEP), SFDPH
- ❖ Comp C: Year 2 award: \$800K
- \* Project Expand and Elevate (ExEl) San Francisco City Clinic (SFCC)



## **Program Oversight - Steering Committees**

## Monthly Meetings: 3<sup>rd</sup> Wednesday 3-4pm

Strategic planning, Community leadership, Collective Impact, Resource & information sharing. Key leader on CHLI and development of industry standards













Black/African American Health Initiative BAAHI

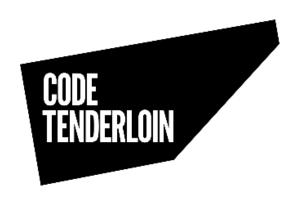


OTI works with community and the City to advance equity for transgender and gender nonconforming people.

## **Program Oversight - Community Advisory Process (CAP) Grantees**

## Monthly Meetings: 1st Wednesday 2-3pm

Expanded community engagement, workforce development, collaborative strategies













## Program Oversight - SFDPH EHE Leadership Group

# Grants management and oversight, priority setting, budget and planning

HIV Health Services (HHS) - Community Health Equity & Promotion (CHEP) - Disease Prevention and Control (DPC) - ARCHES - City Clinic - Jail Health - Gender Health - Street Medicine - Bridge HIV - Center for Learning and Innovation (CLI)



## **CDC Component A Updates**

## Update from CDC PS20-2010 Recipient Meeting

- Key Focus Areas
  - Ensuring Health Equity is Prioritized
  - Expanding Self-Testing Efforts
  - Strengthening Syndemic Collaborations
  - Employing Models of Status Neutral Care
  - "Innovative and Community-Driven Solutions are at the heart of EHE"

FY22 federal budget request

| Program                               | Amount        |
|---------------------------------------|---------------|
| CDC-support to 57 focus jurisdictions | \$275,000,000 |
| HRSA-Health Centers                   | \$152,000,000 |
| HRSA-Ryan White HIV/AIDS Program      | \$190,000,000 |
| IHS-HIV/HCV Activities                | \$27,000,000  |
| NIH-Implementation Research           | \$26,000,000  |
| TOTAL-EHE Initiative                  | \$670,000,000 |



## San Francisco AIDS Foundation Mobile Contingency Management



#### Successes:

- On-site medical provider for health referrals, medication assistant treatment, abbess/wound care
- Narcan and fentanyl test strip access
- Establishing community trust and buy-in
- Many follow-ups and phone check-ins
- Some have come to syringe access services for additional in-person counseling
- Interactions with the community, conversations and referrals for healthcare related issues
- Outreach and referrals to 34 clients and 4 clients have enrolled

#### Challenges:

- COVID-19, staffing changes, adapting to mobile-based setting
- Difficulty getting in-person follow up appointments

#### Ward 86 Prevention Hub



- ZSFG-based Clinical Champion: innovative workflow for routine optout HIV testing
- Registered Nurse: lead clinical support for STI, PrEP, and prevention
- Inpatient PrEP e-consult
- Workflow to triage and respond to new PrEP referrals from inpatient team
- PrEP Coordinators: cross trained to coordinate and navigate HCV referrals from inpatient setting

Main challenge: Expanded testing on the inpatient end has resulted in HIV testing being conducted on HIV positive patients.

## TakeMeHome HIV/STI Self-Testing Program

- Free HIV/STI home testing program launched in Feb 2021
- Designed and developed through collaborative partnership with Building Healy Online Communities, SFAF, Emory University and NASTAD'FREE HIV tests (lab based), STI tests, and PrEP panel tests (where available) that clients can take in the privacy of their own home
- SF priority populations; Black and Latino men who have sex with men
- Eligibility: resides in SF and has not been tested for HIV an STIs in prior 3 months

#### Take Me Home: February 2021-August 2021

#### 144 kits ordered:

- 36% White, 19% Latinx, 15%
   Asian, 8% Black, 7% multi-race
- 81% cis male, 10% cis female, 9% trans or non-binary

61 (42%) kits returned

#### 6 (10%) clients had ≥ 1 positive STI:

- · 2 new syphilis infections
- 4 rectal infections (1 GC, 3 CT)
- 3 pharyngeal CT infection
- · 1 urethral CT infection
- 0 new HIV diagnoses

#### **Community Engagement:**

Havegoodsex.org: Social media ads, comcast 30sec commercial, YouTube,









## **Community Advisory Process**

#### GM consulting group (GMCG)

- Hosted 3 bilingual, virtual charlas (talks) with 25 promotores
- Developed pamphlet, made by and for the Latino community:
  - ETE project details, educational information, and a list of community services
- Intended to reach those hardest to engage due to the stigma
- Planned Community Forum with Mpact, Facente Consulting, and SFDPH

#### MPact's Latinx CAP

- Community advisory group: 10 individuals who work with Latinx communities
- Toolkit/curriculum:
  - Materials and techniques to pursue a public health career and engage in advocacy
  - Secret Client Methodology.
- 25 community members participated in six, 2-hour virtual trainings
- 12 in Spanish-language training and 9 in Portuguese- language training
- 10 trained in implementation of the Secret Client Methodology year 2 activities includes clinic visits









## **Community Advisory Process**

#### WISE Health implemented Equity Design Workshops

- Topics: Black seniors living with HIV, increasing HIV education in Black communities, engaging Transgender and Homeless populations, and building capacity for testing and treatment in special populations
- 5 pilot community challenge workshops, 4 in-person and 1 virtual
- Collaborative space where innovative ideas to address HIV in the Black community were developed

## The Empowering Black Youth (EBY) CAP is a collaboration between Code Tenderloin, Independent Arts and Media, and consultant, Antwan Matthews

- Cohort of six African American youth interns between the ages of 13-20
- 27 zoom workshops on public health topics and the use of technology platforms to create public health campaigns
- Public health toolkit and forty pieces of content, 2 blogs, and abstract accepted to a global conference
- Demonstrating that Black Youth view themselves as agents of change in their communities





"Ending the HIV Epidemic in the African American
Community- Best Praticies From Community Engagement
Pilot Programs"

Register: https://lnkd.in/gMCfzweX

FOR MORE INFORMATION: Antwan@Codetenderloin.or



## **Community Advisory Process**



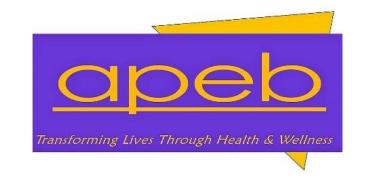
#### San Francisco Community Health Center: "Leading from Within" for Trans Women

- Designed re-launch of the Kiki Lounge and Social Network Strategy,
- Identified possible peers & gatekeepers to participate in both initiatives
- SHE boutique, a once a month "drop-in" style shopping experience for transgender women and Gender non-conforming folks; includes access to services
- Planned trainings

#### SFCHC: "Leading from Within" for People Experiencing Homelessness and Housing Instability

- 16- week community development program
- Community experts with lived experiences with houselessness and substance use
- Career preparation and development, direct outreach experience
- Feedback from the ETE community-based assessments guided additional linkages to medical services
- COVID-19 partnership: SFAF, Curry Senior Center, and Code Tenderloin

## **Community Advisory Process**



The AIDS Project of the East Bay (APEB) created a community focused program called "Ending the Epidemic University"

- Engaged 10 community stakeholders in virtual monthly classes
- Public health knowledge and workforce development skills to help empower others in their community who are not reachable through traditional public health channels
- Post tests showed specific participant engagement in the topics of HIV and Biomedical interventions



## Year 1 CDC Comp A Updates

Community Health Leadership Initiative (CHLI)

- Develop and support a highly skilled sexual and drug user health workforce, cross-trained in HIV, HCV, and STIs, that reflects the populations served, has low turnover rates, and is valued and supported
- Focused on racial equity, health equity and harm reduction
- Formative research and development of Sexual and Drug-User Health Pilot Program (12-week pilot launched in October with 11 participants and 13 mentors)
- ❖ SFDPH workforce equity focus: hiring, recruiting, and supporting staff from ETE priority communities

## CDC Comp A

## Key Upcoming Activities

#### Expanded status-neutral services (jointly funded by HRSA and CDC)

- Jail Health Post-Incarceration Navigator
- Gender Health Navigator
- Expanded Street Medicine Team

#### Expanded drug-checking services

- Address overdose crisis and fatalities
- Incorporated into SFAF's PWUD Health continuum of care
- Gateway to care
- For communities with health disparities (Black/African American, Latinx, people experiencing homelessness, people who use drugs (injection, smoking, and inhalation), and people who have been incarcerated)

#### **CHEP Youth Advisory Council**

## CDC Comp A

## Key Upcoming Activities

#### EHCSF inpatient HCV navigation pilot at ZSFGH

- Inpatient treatment and connection with appropriate community-based HCV treatment
- Advance San Francisco's progress toward HCV elimination, address racial disparities and leverage hospitalization

#### Latinx Harm Reduction Community Needs Assessment

- Address the risk and significant increase in overdoses and overall harm reduction needs for unhoused and at risk people who use drugs (PWUD) in the Latinx and Mayan communities
- Interviews with key Latinx and harm reduction SF leadership and behavioral health professionals
- Incentives to compensate for the lived expertise

#### **CHLI Sector Standards**

- Develop quality sexual and drug user health standards that employers in the sector agree to adopt, with the goal of creating a sustainable workforce
- ETE Steering Committee is leading effort with Facente Consulting

## **Key Upcoming Activities**

## Develop Regional PrEP Approach with Alameda County

#### Truth & Justice Reconciliation initiative

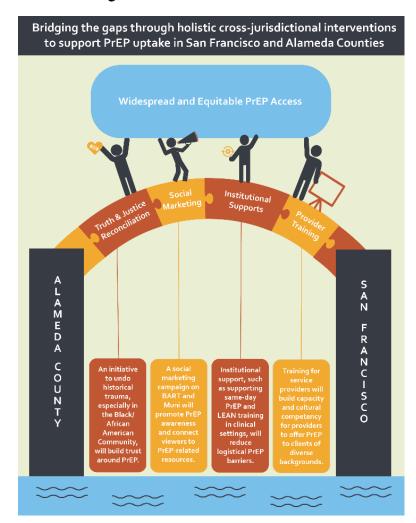
- Undo historical trauma
- Address structural racism, medical mistrust and stigma

## Social marketing campaign Institutional support

• Same-day PrEP and LEAN training at clinics to reduce logistical barriers

#### Provider training

 Build capacity and cultural competency for providers



## **Update on Comp C**

Funding August 1, 2020 thru July 31, 2025 "Scaling Up HIV Prevention Services in STD Clinics"



## **Update on Comp C**

Key Successes: San Francisco City Clinic Project Expand and Elevate (ExEl)

- Relaunched a phone-based PrEP Express Visit program
- Launched express visits for asymptomatic screening
- Research and planning toward implementing VL testing to help identify non-virally suppressed PLWH
- PrEP retention survey (low response rate but 1/3 of respondents said they were still on PrEP, in October 2020)
- Pursued EHE partnerships in the form of resumed sexual health public health detailing and TA to other agencies and clinics
- Positions approved by HR!

## **Update on Comp C**

Results: One Third of lost to follow up patients Still

on PrEP



846 eligible survey recipients

130 (15%) responded meaningfully

42 (32.3%) still on PrEP

88 (67.7%) not on PrEP



#### Common Reasons for PrEP Disuse

- COVID-19 related changes in sex life (32% of responses)
- Side effects (18%)
- Need to take a daily pill (8%)
- Free text responses:
  - o Cost
  - Risk compensation



## **Update on Comp C**

Key Upcoming Activities: Project Expand and Elevate (ExEl)

- Hire!
  - HPC III\* to manage our Project ExEl programming, grant and serve as clinic practice manager
  - RN to expand capacity for express visits
  - NP to perform public health detailing
  - Data analyst to provide backbone staffing for quality improvement work
- Epic EHR implementation, working with consultant
  - Get our PrEP program ready for Epic, and Epic ready for the PrEP program
  - PrEP registry alignment with SF Health Network (also on Epic)
- Community perspectives assessment, on views of clinic in SF Black communiti identify opportunities for clinic improvement
- Continuous quality improvement of clinic scheduling system to optimize acces wait times
- Explore creation of a sexual health e-consult feature in Epic



## ETE/EHE HRSA/HHS

## Organizational Structure



**EHE Grantee Agency** 

San Francisco Department of Public Health

London Breed. Mayor Grant Colfax, MD, DPH Director



San Francisco Board of Supervisors



Administrative Program for HRSA/HAB EHE Services

SFDPH HIV Health Services

Bill Blum, Director Dean Goodwin, Assistant Director



Administrative Program for CDC EHE Services SFDPH Community Health Equity & Promotion (CHEP) Partnership

**EHE Steering Committee** 



**EHE Providing Services** 

**UCSF Alliance Health** *Mental Health for POP-UP* 



**EHE Providing Services** 

SFGH Ward 86 POP-UP



**EHE Providing Services** 

San Francisco AIDS Foundation Contingency Management



**EHE Providing Services** 

San Francisco Community Health Center HHOME Trans Access

## **HRSA/HHS** Update

Programs Funded by Year

| YEAR ONE  | YEAR TWO  |
|---|---|
| 2020-2021   | 2020-21   |
| ✓ UCSF POP-UP ✓ AHP POP-UP ✓ SFCHC HHOME ✓ SFCHC Trans Access | <ul> <li>✓ UCSF POP-UP</li> <li>✓ AHP POP-UP</li> <li>✓ SFCHC HHOME</li> <li>✓ SFCHC Trans Access</li> <li>✓ SFAF Contingency Management (8/2021)</li> <li>✓ Westside Mobile Blood Draws (11/2021)</li> <li>✓ HIVIS / Jail Health (1/2022)</li> <li>✓ Gender Health</li> <li>✓ Street Medicine</li> </ul> |



Trans Access provides medical and behavioral support services within an integrated community-based transgender services program to Trans women who are out of care and service avoidant. Services include:

- Medical Case Management
- Care Navigation
- Support Groups
- Ambulatory Outpatient
   Health Services provided in kind, on-site by SFDPH
   clinical staff from Tom
   Waddell Urban Health Clinic

#### TRANS ACCESS

Number of Clients Served in 20-21 33

96%

Percentage of Trans Access clients who are Trans Women of Color

Percentage of Trans Access clients who were virally suppressed



HHOME (HIV Homeless Outreach Mobility & Engagement) deploys a mobile multidisciplinary, multi-agency team that serves the hardest to serve HIV-positive homeless individuals in San Francisco to help link and retain them to care.

Services include:

- Medical Case Management
- Care Navigation
- Ambulatory Outpatient
   Health Services provided in kind, mobile and on-site by
   SFDPH clinical staff from
   Tom Waddell Urban Health
   Clinic and SF DPH Street
   Medicine Team

#### **HHOME**

Number of Clients Served in 20-21

73

53%

Percentage of HHOME clients who are Trans Women or Women

Percentage of HHOME clients who are virally suppressed

WARD 86

POP-UP

POP-UP (Positive-health Onsite Program for Unstably-housed Populations), a new medical program at Ward 86 at SFGH provides flexible, comprehensive, and patient-centered care. POP-UP specifically aims to reduce health disparities among homeless and unstably housed individuals living with HIV in San Francisco.

- Medical Case Management
- Ambulatory Outpatient Health Services
- Warm hand-off from ED and Urgent Care units at SFGH

Number of Clients Served 58

 $50^{\circ}$  Identify as people of color

Percentage of POP-UP clients who are virally suppressed

## **HRSA/HHS** Update



Alliance Health Project (AHP) provides mental health and substance use services to support POP-UP clients in remaining engaged in primary care and in maintaining HIV viral load suppression

- Substance Use Case Management
- Psychiatric Encounters
- Psychiatric Consultations with medical providers at Ward 86

## ALLIANCE HEALTH PROJECT @ POP-UP

Number of Clients Served in 20-21 15

96 Units of Service delivered

Percentage of AHP clients who are virally suppressed

## HRSA/HHS Update

| Ending          |
|-----------------|
| the             |
| HIV             |
| <b>Epidemic</b> |



| 2019-               | -2020                 | 2020-2021                    |                              |  |
|---------------------|-----------------------|------------------------------|------------------------------|--|
| ART<br>Prescription | Virally<br>Suppressed | ART<br>Prescription          | Virally<br>Suppressed        |  |
| 76.2%               | 47.6%                 | 72.7%                        | 48.9%                        |  |
| 87.5%               | 59.7%                 | 78.1%                        | 35.6%                        |  |
| 89.0%               | 28.8%                 | Data not<br>yet<br>available | Data not<br>yet<br>available |  |

| Epidemic |                     | rrescription | Suppressed | rrescription                 | Suppressed                   |
|----------|---------------------|--------------|------------|------------------------------|------------------------------|
| Program  | Trans Access        | 76.2%        | 47.6%      | 72.7%                        | 48.9%                        |
|          | HHOME               | 87.5%        | 59.7%      | 78.1%                        | 35.6%                        |
|          | POP-UP (SFGH & AHP) | 89.0%        | 28.8%      | Data not<br>yet<br>available | Data not<br>yet<br>available |

# How EHE activities differ or build upon successes in San Francisco's Ryan White HIV/AIDS programs

- ❖ Investing targeted resources to reach the hardest to engage populations with the greatest disparities in health outcomes
- Providing an even lower threshold for accessing services
- Providing warm hand-off for out of care patients presenting at Urgent Care and Emergency Services.

## ETE/EHE HRSA/HHS Successes

- ❖ Improved stability of medical care of dozens of individuals previously living on the streets of San Francisco (All Programs)
- Successful in providing validating, Trans-affirming care to dozens of Trans women (All Programs)
- ❖ Fortified trusting relationships which have led to viral load suppression and healthy and satisfactory gender affirming care and surgery outcomes (Trans Access)
- ❖ The shift to remote service delivery in response to COVID has worked for some clients, reducing barriers to engagement in services such as transportation costs (Trans Access)
- ❖ While many services during COVID shifted to TeleHealth and online/phone based services, each of our EHE programs continued to provide on-site, for clients desiring face-to-face services (All Programs)

# ETE/EHE HRSA/HHS Challenges

- Working with some of San Francisco's most vulnerable and traumatized people (HHOME)
- San Francisco's traditional systems of care are not set up to adequately address all of the needs of those experiencing homelessness (POP-UP)
- The high proportion of methamphetamine use and mental health diagnoses among patients (All Programs)
- ❖ The Trans community continues to experience the harsh reality that trans-inclusive care is difficult to find (Trans Access)
- \* Rates of viral suppression remain lower than the general HIV community and those served by Ryan White programs (All programs)
- Successfully developing innovative new programs with EHE funding as RWPA funding is consistently reduced each year

## ETE/EHE HRSA/HHS Innovations

- ❖ Low threshold drop in services; more referrals from ER and Urgent Care; higher-staffing ratios; real-time availability of remote psychiatric consultations (POP-UP)
- Trans-specific clinic days/times; Trans leadership within program; onestop shop model with onsite dental; hormone therapy as primary care (Trans Access)
- ❖ Mobile-based medical services with street medicine overlap; support services in place to assist with keeping client housed (HHOME)
- Home-based mobile blood draws (Westside)
- ❖ Outreach and outpatient substance use treatment at homeless encampments; includes overdose prevention and service engagements (San Francisco AIDS Foundation)



## Questions, Comments, & Feedback

