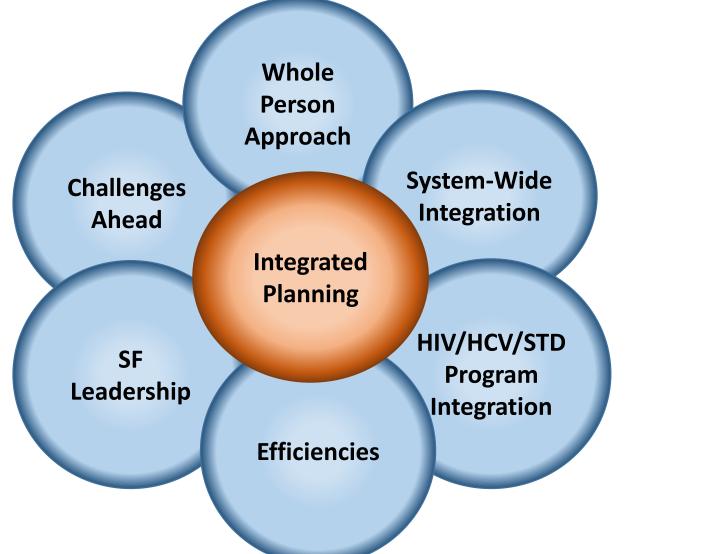
HIV, HCV, and STD Integrated Planning

Introduction: Bill Blum and Tracey Packer

Presentation: Dean Goodwin, Jose Luis Guzman, Darpun Sachdev



Why Is DPH Doing Integrated Planning?



Integrated Planning Can Help Us Optimize the HIV-Neutral Continuum of Care in SF

Linkage case management, ACA navigation, red-carpet entry programs

Screen for STIs, mental health issues, drug use, domestic violence, trauma

Case management and linkage to housing and other ancillary services

+ Adherence support

Linkage to HIV-inclusive primary care

Screen for risk factors and barriers

Retention in care and services

Prescribe HIV treatment

Undetectable viral load

HIV-POSITIVE

HIV-NEGATIVE

primary care

HIV risk screenings, linkage

case management for high-risk

individuals, ACA navigation

Linkage to

Screen for risk factors and barriers

Screen for STIs, mental health issues, drug use, domestic violence, trauma

Retention in care and services

Case management and linkage to housing and other ancillary services

Continued risk reduction, PrEP, PEP

Remain HIV-negative

+ Regular HIV testing and reevaluation of risk factors; adherence support



DPH HIV/HCV/STD Integration Team



Susan Philip
Director, Disease
Prevention & Control



DPC

(Disease Prevention & Control)



(Primary Care)



Bill BlumDirector, HIV Health Services
Director of Programs,
Primary Care

CHEP

(Community Health Equity & Promotion Branch)



Tracey PackerDirector, CHEP

Integration Team

HIV/HCV/STD prevention, testing, care & treatment

ARCHES

(Applied Research, Community Health, Epidemiology & Surveillance)

Susan Scheer
Director, HIV
Epidemiology



Additional DPH HIV Integration Team Members



Dean Goodwin HHS



Stephanie Cohen DPC



Darpun Sachdev DPC



Beth Neary HHS



John Melichar CHEP

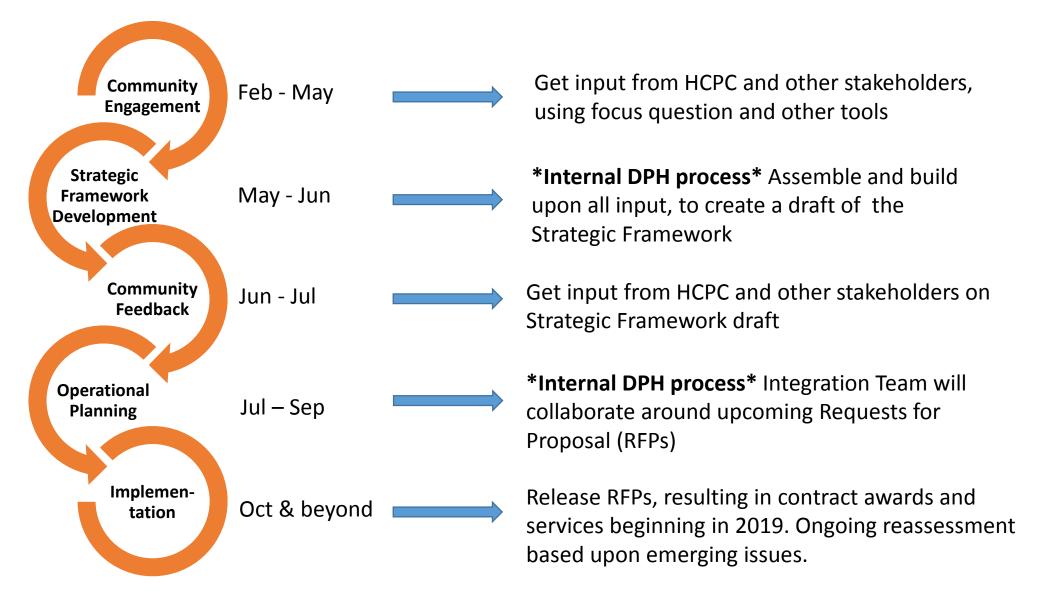


Christine Siador Population Health Division



Dara Geckeler CHEP

Draft 2018 Timeline & Outcomes



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?

^{*} By patient-centered, we mean welcoming, accepting, inclusive and affirming.

Next Steps

• DPH will work with Council Leadership to determine what the logistics of HCPC partnership will look like (work group, standing agenda items, etc.)

Questions?



Small Group Input

- Think about the landscape of HIV/ HCV/ STD prevention and health services
- Discuss the following two questions:
 - Which aspect, accomplishment or service are you most proud of?
 - What innovation would you most like to see?
- After discussion, each person use the index cards to write one answer to each question. Hand cards in.

