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?

- Whole Person Approach
- System-Wide Integration
- HIV/HCV/STD Program Integration
- Efficiencies
- SF Leadership
- Challenges Ahead
Integrated Planning Can Help Us Optimize the HIV-Neutral Continuum of Care in SF

**HIV-POSITIVE**

- **Linkage to HIV-inclusive primary care**
- **Screen for risk factors and barriers**
- **Retention in care and services**
- **Prescribe HIV treatment**
- **Undetectable viral load**

**HIV-NEGATIVE**

- **Linkage to primary care**
- **Screen for risk factors and barriers**
- **Retention in care and services**
- **Continued risk reduction, PrEP, PEP**
- **Remain HIV-negative**

- HIV risk screenings, linkage case management for high-risk individuals, ACA navigation
- Screen for STIs, mental health issues, drug use, domestic violence, trauma
- Case management and linkage to housing and other ancillary services
- + Regular HIV testing and reevaluation of risk factors; adherence support

[www.treatmentaccessgroup.org](http://www.treatmentaccessgroup.org)
Additional DPH HIV Integration Team Members

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Draft 2018 Timeline & Outcomes

- **Feb - May**: Get input from HCPC and other stakeholders, using focus question and other tools.
- **May - Jun**: *Internal DPH process* Assemble and build upon all input, to create a draft of the Strategic Framework.
- **Jun - Jul**: Get input from HCPC and other stakeholders on Strategic Framework draft.
- **Jul – Sep**: *Internal DPH process* Integration Team will collaborate around upcoming Requests for Proposal (RFPs).
- **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?

* 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.