



SYNC
2019

HEP C TREATMENT ACCESS FOR PEOPLE WHO USE DRUGS

Paris De La Rosa, Program Manager
Isabel Chavez, Case Manager



CONFLICT OF INTEREST DISCLOSURE PARIS DE LA ROSA

No conflicts to disclose.





ACCESS SUPPORT NETWORK

San Luis Obispo &
Monterey Counties





ASSUMPTIONS

PWID are at greatest risk for Hep C Infection

PWID are less likely to have Access To Care

PWID deserve HCV Treatment

PROGRAM LOCATION

Monterey County

3,800 sq mi

435,000 population

3 hospitals

Largest city: Salinas



San Luis Obispo County

3,600 sq mi

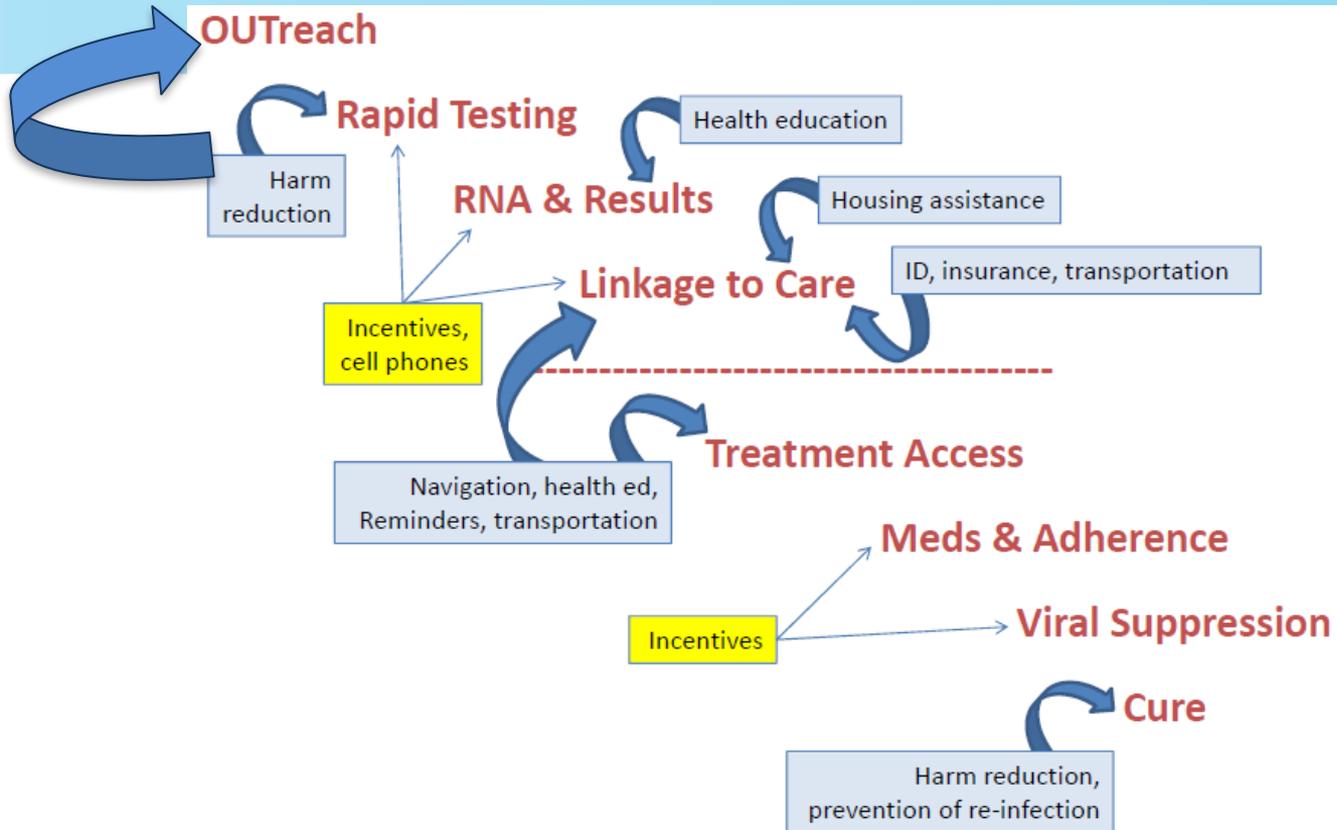
280,000 population

3 hospitals

Largest city: SLO



ASN'S HEP C CARE CASCADE





DEMONSTRATION DATA HIGHLIGHTS

MONTEREY & SLO COUNTIES

FEB 2016-JUNE 2018

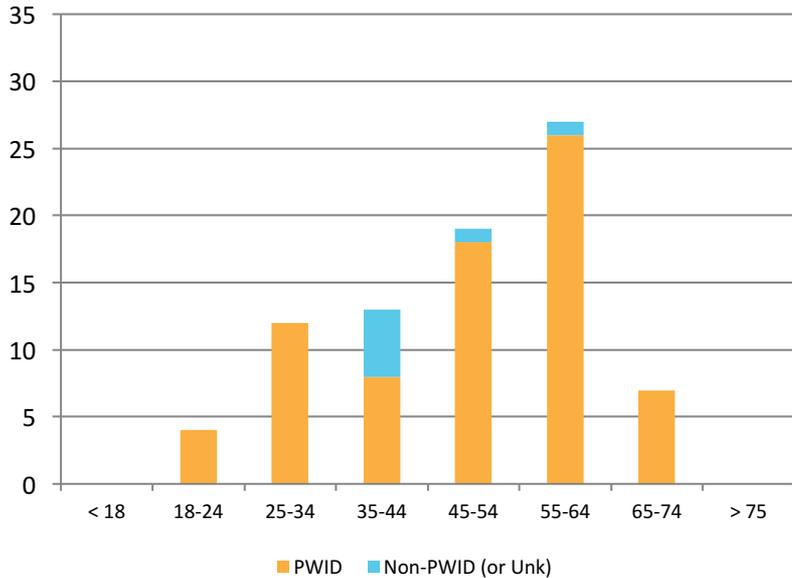
- 1600+ people tested for Hep C & HIV in each county
- Nearly half (46%) reported IV drug use
- 25% Hep C Antibody Reactive
- 2/3 completed RNA testing (*challenge = no on-site phlebotomist*)
- 70% of RNA+ clients attended first medical appointment



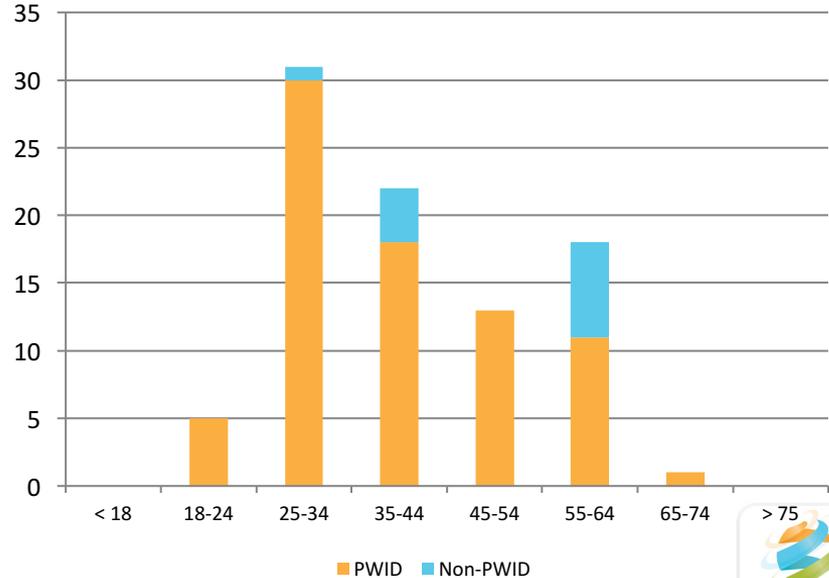


DEMOGRAPHICS OF HCV RNA+ CLIENTS

Age: Monterey



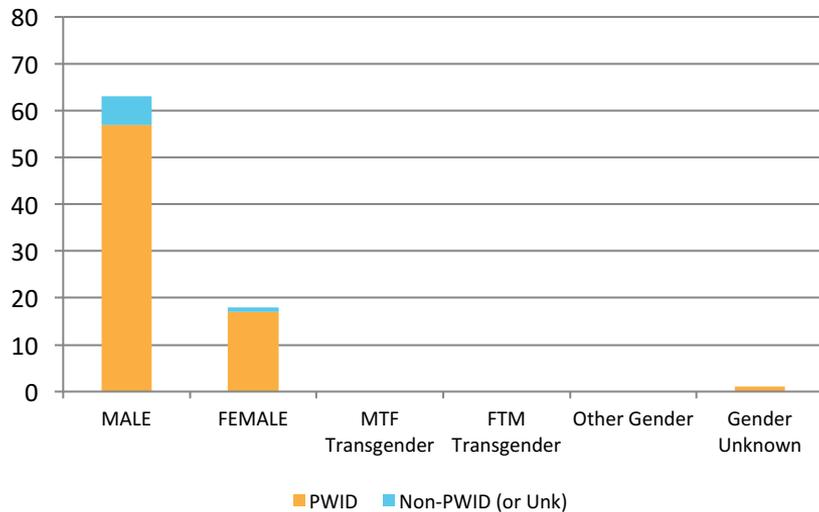
Age: SLO



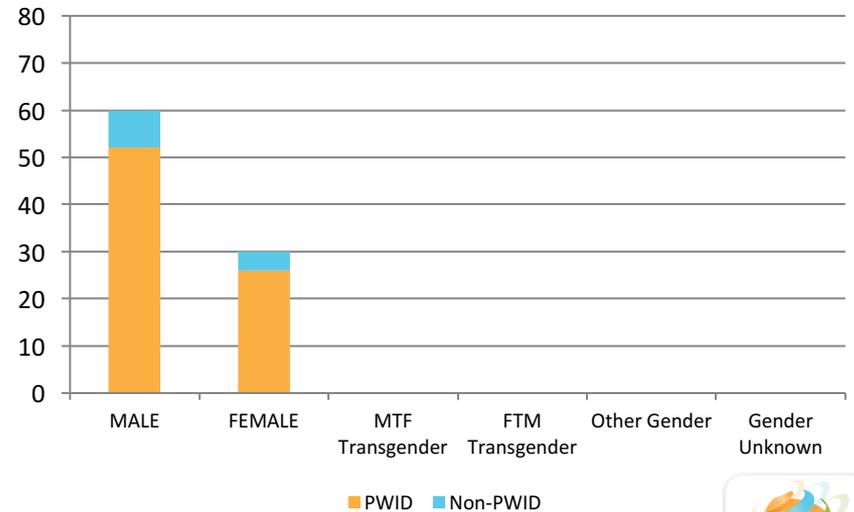


DEMOGRAPHICS OF HCV RNA+ CLIENTS

Sex: Monterey

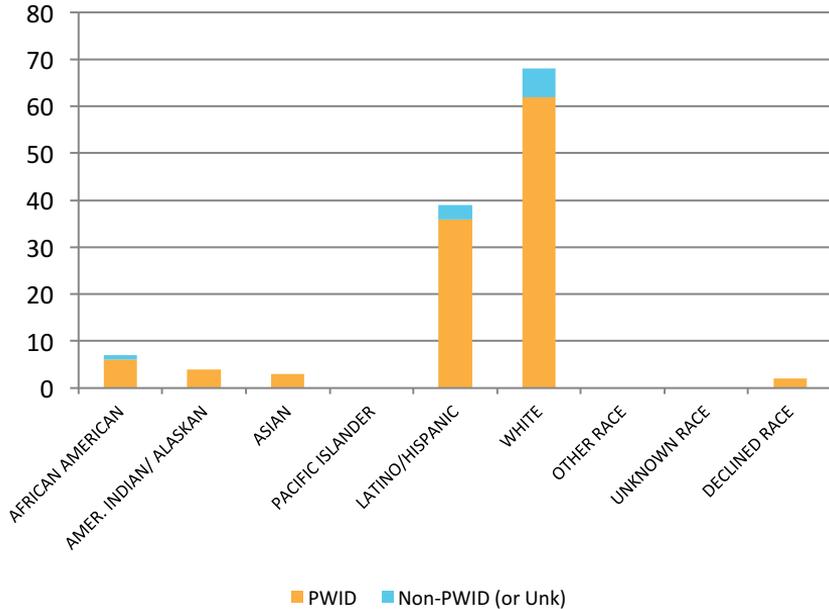


Sex: SLO

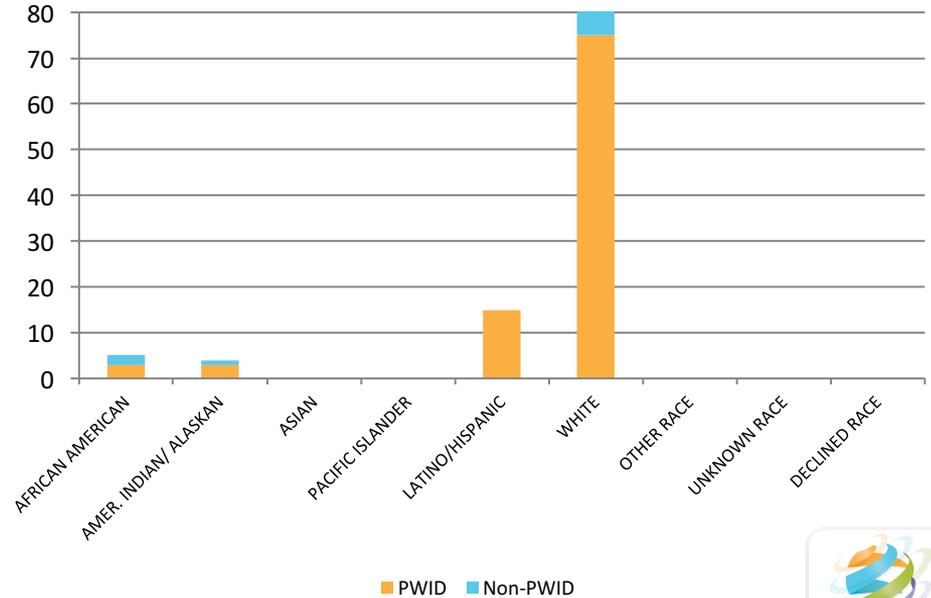


DEMOGRAPHICS OF HCV RNA+ CLIENTS

Race: Monterey



Race: SLO





DEMONSTRATION DATA HIGHLIGHTS

MONTEREY & SLO COUNTIES

FEB 2016-JUNE 2018

- 80% on Medi-Cal
- >50% incarcerated during past year
- 70% homeless or unstable housing
- Only 1 HIV co-infected client

***** Importance of PATIENCE & CONTINUITY!**

From screening to Linkage can take a year or more...





STRATEGIES FOR IMPROVING HCV TREATMENT ACCESS AMONG PWID

1. Outreach
2. Engagement
3. Mobile Phlebotomy
4. Wraparound Services
5. Partnership between CBOs and clinics



STRATEGIES FOR IMPROVING HCV TREATMENT ACCESS AMONG PWID

Outreach Locations

Syringe exchange

Encampments

Drug treatment programs

Soup kitchens

Shelters

Most important: demeanor, incentives, dispel fear & stigma





STRATEGIES FOR IMPROVING HCV TREATMENT ACCESS AMONG PWID

Engagement

Address Immediate Needs (socks, food, hygiene, smile)

Gift Cards for Testing & Linkage to Care

Treatment Access is Possible

Food Pantry

Nice Person to Talk To



STRATEGIES FOR IMPROVING HCV TREATMENT ACCESS AMONG PWID

Mobile Phlebotomy

Phlebotomist as first impression of health system

Must be highly experienced (5+ years, including hospital is best)

Interest in health access & health equity

Ask client/patient about their veins

Coaching & teamwork can help

★ PWID value quality care





STRATEGIES FOR IMPROVING HCV TREATMENT ACCESS AMONG PWID

Wraparound Services

Health information

Transportation

ID

Insurance Navigation

Housing Assistance

Navigation of Health Services

Appointment Reminders





STRATEGIES FOR IMPROVING HCV TREATMENT ACCESS AMONG PWID

Partnerships

Clinics & CBOs are complementary!

Case Managers Need Working Relationships with Providers

Point Person at Each Clinic

Share Information, Track Progress

Deploy Outreach to Locate Clients & Re-Engage with Them





PREDICTION:

Hep C Elimination will require
Going beyond the walls of the clinic





NEXT STEP:

Co-Location of Services

Syringe Exchange	Drug Recovery	MAT/Bup/ Methadone
Testing & Linkage	Testing & Linkage	Testing
MAT initiation		Treatment