



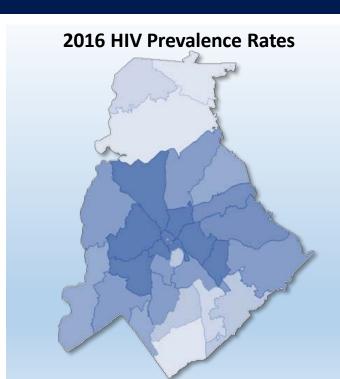
### Getting to Zero Mecklenburg

A Community Plan to Reduce
New Cases of HIV in Mecklenburg County

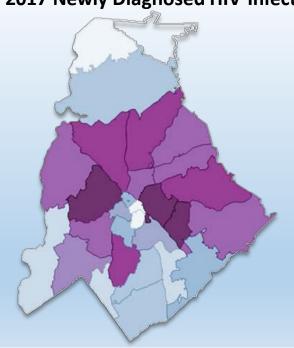
Gibbie Harris
Health Director
Mecklenburg County Public Health
June 2018

## Snapshot of HIV in Mecklenburg



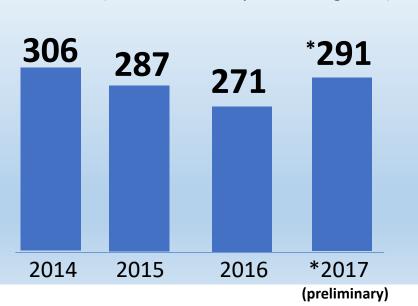


**2012- 2017 Newly Diagnosed HIV Infections** 



Number of Newly Diagnosed HIV Infections by Year of Diagnosis

(based on County of 1st Diagnosis)



More than **6,630** people in Mecklenburg are living with HIV

291\*

people were newly diagnosed in 2017

Source: NC DHHS, HIV/STD Prevention and Care Unit. Mecklenburg County Data Prepared by: Mecklenburg County Public Health, Epidemiology Program 6/2018

## Plan Development Process



- HIV Community Planning group developed a comprehensive, staged plan
- Inclusive representation of community involved in development of the plan, including:
  - Faith Community, Public Health, Medical Providers,
     Community Based Organizations, Consumers
- Ad Hoc Committees worked to develop tactical approaches for each strategy:
  - Education and Testing
  - Pre-Exposure Prophylaxis PrEP
  - Treatment as Prevention TasP

## Community Planning Partners



- 15th St Church of God
- APHI-UNCC
- Ballantyne Family Medicine
- Black Aids Institute
- C. W. Williams Community Health
- Carolinas Care Partnership
- Atrium Health
- Charlotte Community Health Center

- Charlotte Mecklenburg Schools
- Faith CME Church
- MeckPAC
- Myers Park Internal Medicine
- Novant Health
- Powerhouse
- Quality Home Care Services
- R.A.I.N
- Rockwell AME Zion Church

## Getting to Zero Mecklenburg



Goal: Continuous reduction in new cases of

HIV in Mecklenburg County



## Best Practices for Addressing HIV



- Three principal strategies addressed:
  - 1. Education and Testing
  - 2. Pre-Exposure Prophylaxis (PrEP)
  - 3. Treatment as Prevention (TasP)
- Each strategy contains multiple objectives and answers these questions:
  - 1. Why is this important?
  - 2. How are we doing?
  - 3. How will we achieve this objective?
  - 4. What are the best practices?
  - 5. How will we measure our success?

Strategy	Why Important	Objectives	How we will achieve these objectives
Education and Testing Strategy	<ul> <li>Persons with unknown HIV positive status account for substantial proportion of new infections.</li> <li>Early detection and connection to treatment results in preventing new infections.</li> </ul>	<ol> <li>Educated community</li> <li>"Opt-out HIV testing" as a standard of care</li> <li>Current, accurate HIV prevention information to schools and colleges</li> <li>Current, accurate information on HIV to the medical community</li> <li>Current, accurate information on HIV to the faith community</li> <li>Testing availability in non-traditional locations and times</li> </ol>	<ol> <li>Contract with vendor to design and implement media campaign; collaborate with faith leaders to expand messaging to affected population</li> <li>Work with health providers on "opt out" testing strategy</li> <li>Partner with CMS and charter schools to conduct CDC-based analysis of current curriculum and make recommendations; develop standards for college activities</li> <li>Partner with faith leaders</li> <li>Partner with medical societies, statewide resources to provide continuing medical education on HIV topics</li> <li>Identify need based on geographic areas and funding to expand testing locations and hours</li> </ol>

Strategy	Why Important	Objectives	How we will achieve this objective
Pre- Exposure Prophylaxis (PrEP) Strategy	<ul> <li>PrEP prevents infection</li> <li>PrEP is underutilized in County</li> <li>Increasing PrEP is keystone of plan</li> </ul>	<ol> <li>Access for uninsured by sustaining and expansion of pilot PrEP project</li> <li>Collaborative of PrEP providers</li> <li>Increased awareness and utilization of PrEP</li> <li>Social support services to increase PrEP compliance</li> </ol>	<ol> <li>Continued community support and funding for PrEP</li> <li>Project manager to support PrEP providers and coordinate activities with HIV community resources</li> <li>Community education in English and Spanish; destigmatizing prevention; focused advertising; community empowerment</li> <li>Creation of centralized PrEP resource; social support to maintain PrEP adherence</li> </ol>

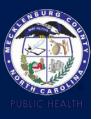
Strategy	Why Important	Objectives	How we will achieve this objective
Treatment as Prevention (TasP) Strategy	<ul> <li>Treatment saves lives; reduces costs</li> <li>Viral suppression eliminates transmission</li> <li>"Test and Treat" is effective</li> </ul>	<ol> <li>Ongoing community input in planning and implementation of HIV services</li> <li>Integrated HIV care</li> <li>Expansion of patient navigation services</li> <li>Newer models of linkage to care</li> <li>Identification of gaps in services</li> <li>Improvement in social determinants of health</li> <li>Data sharing agreements among partners</li> </ol>	<ol> <li>Ongoing community planning, implementation and evaluation of the plan</li> <li>Assess current state of treatment; opportunities for increased integration</li> <li>Inventory of available navigation resources; establish consensus on roles and responsibilities</li> <li>Needs assessment will identify linkage to care inefficiencies to develop test and treat standard of care</li> <li>Needs assessment will clarify opportunities to improve services</li> <li>Central coordinating body will direct local efforts at coordinated approach to complex issues</li> <li>Utilize experts in data collection, management and analysis to support</li> </ol>

## Strategic Priorities — Year 1

#### Year One Implementation Needs

- Governing Body for the Plan
- Project Manager for the Plan
- Needs Assessment
- Media Campaign (multi-year)
- Continuation of 2-year PrEP Pilot
- Resources for HIV testing follow up, partner notification, and care referral and support
- Robust Outcome Evaluation Plan

#### Status of PrEP Pilot



#### As of May 31, 2018

- Participating: 4 clinics
  - Contracts signed and pilot initiated:
    - Eastowne Family Physicians- 3/13/18
    - Amity Group Foundation- 3/29/18
    - C. W. Williams- 4/6/18
    - Quality Health Care- 5/17/18
    - Rosedale Medical- Pending
    - Charlotte Community Health- Pending
- Patients enrolled: 17 patients



## Immediate Next Steps



# With continued collaboration from the HIV Community Planning Group:

- Begin development of governance structure
- Hire or put in place a Project Manager to begin implementation
- Implement marketing efforts for PrEP
- Develop metrics for objectives
- Develop action plan for objectives
- Develop evaluation plan

## Questions?

