

CDC's Enhanced Comprehensive HIV Prevention Planning (ECHPP) Project: Updates from Baltimore, Philadelphia, and Washington DC

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Outline of Presentation

- ❑ **What ECHPP is**
- ❑ **ECHPP update from Baltimore**
- ❑ **ECHPP update from Philadelphia**
- ❑ **ECHPP update from Washington, DC**

Lisa Belcher, PhD

WHAT IS ECHPP?

Enhanced Comprehensive HIV Prevention Planning

- ❑ ECHPP demonstration project in 12 MSAs that represent 44% of total US AIDS cases
 - ❑ 1 year to create comprehensive local plan & realign resources; 2 years to implement plan (2012-2014)
 - ❑ Effective & scalable prevention w/ high & lasting impact
 - ❑ ECHPP puts National HIV/AIDS Strategy into action
- 1. Reduces new HIV infections**
 - HIV testing, partner services, condom distribution
 - 2. Increases access to care & improves outcomes for HIV positives**
 - Linkage/retention in care, adherence, policy changes
 - 3. Reduces HIV-related disparities & health inequities**
 - Community-level strategies & campaigns for high-risk groups
 - 4. Achieves more coordinated national response to HIV epidemic**
 - Coordinate implementation & reporting among federal, state & local partners; shift funds to fill gaps & reduce duplication

Lisa Belcher, PhD

ECHPP UPDATE FROM BALTIMORE

Overview of Baltimore, MD

- ❑ **Baltimore's ECHPP Plan was developed by State of Maryland, Infectious Disease and Environmental Health Administration**

- ❑ **Significant Increases in:**
 - Routine HIV screening in clinical settings
 - Targeted HIV testing in non-clinical settings
 - Initial and ongoing HIV/STI partner services
 - Activities to support linkage to care, retention in care, and adherence to antiretroviral treatment
 - Risk reduction interventions for PLWH

- ❑ **Decrease and redirect resources for:**
 - Intensive behavioral risk reduction interventions for HIV-negative persons

Baltimore, MD

❑ Reduces new HIV infections

- Partnering with the AIDS Education and Training Center (AETC) at the University of Maryland to promote routine HIV screening among providers
- Working with emergency departments to establish reimbursement protocols to maximize the number of HIV tests routinely provided to emergency department patients
- Partnered with local health departments to develop strategies to increase HIV testing among high-risk populations through the development outreach plans based on local epidemiology
- Expanded condom distribution in partnership with local health departments, community-based organizations, HIV care providers, social service organizations, and other agencies that serve high-risk persons

Baltimore, MD

- **Increases access to care & improves outcomes for HIV positives**
 - Conditions of awards for HIV testing programs were refined to reinforce immediate linkage to HIV care. Work has also begun on the development of linkage to care protocols which will be incorporated in HIV Testing Policies and Procedures Manual.
 - Funding for case management increased from \$577,430 in FY11 to \$1,589,392 in FY12 to increase linkage-to-care, retention, and treatment adherence activities
 - Increased funding for non-medical case management by 175% to increase the capacity of the funded vendors to conduct to assist clients with treatment adherence.

Baltimore, MD

- ❑ **Reduces HIV-related disparities & health inequities**
 - Released Request for Proposals (RFP) for three new outreach testing programs (one targeting African American MSM, one targeting injection drug users, and one targeting high-risk heterosexuals).
 - Maryland's "HIV Stops With Me" social marketing campaign is targeted to African American MSM
 - Implemented CDC's *Testing Makes Us Stronger* campaign targeting American MSM



Baltimore, MD

- ❑ **Achieves more coordinated national response to HIV epidemic**
 - Enhanced collaboration between HIV prevention and care
 - Identified priority areas to increase coordination and integration across the HIV and STI prevention, care and treatment continuum
 - Enhanced partnerships with local health departments to develop and implement HIV prevention activities based on local epidemiology, experience and capacity
 - Increased national and local partnerships across funding sources
 - Developed plans to enhance public/private partnerships

Mary Spink Neumann, PhD

ECHPP UPDATE FROM PHILADELPHIA

Philadelphia, PA

❑ Reduces new HIV infections

- Ambitious condom distribution for youth (local branded condoms, advertising campaign, on-line mail ordering, advertise locations for free condoms); championed by Mayor & Health Commissioner
- Scaled up HIV screening in clinical settings & HIV testing in non-clinical settings
- Used analysis from CDC pilot-tested HIV prevention resource allocation tool to help develop an RFP to redistribute funds for High Impact prevention



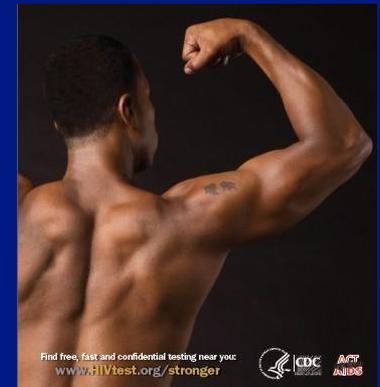
Philadelphia, PA

- **Increases access to care & improves outcomes for HIV positives**
 - Integrated behavioral health services into HIV prevention & care system w/ SAMHSA-funded behavioral health care consultants (new partners)
 - Targeting primary care providers in private settings to increase testing & linkage to care
 - Collaborating w/ Pennsylvania's ADAP on retention in care activities

Philadelphia, PA

❑ Reduces HIV-related disparities & health inequities

- Geo-mapped HIV/AIDS prevalence & clinical sites w/ HIV testing, condom distribution venues, & HIV care and treatment sites to shift resources to high need populations (MSM, Blacks, Latinos, IDUs)
- Social mobilization project in ZIP code 19143 collaborates w/ faith-based organizations; sponsored by Gilead Sciences w/ Health Department consultation
- Ran *We > AIDS* campaign targeting Blacks in June 2012; Will run *Testing Makes Us Stronger* campaign targeting Black MSM this summer



Philadelphia, PA

- ❑ **Achieves more coordinated national response to HIV epidemic**
 - Expanding integration of 16 HIV funding streams to develop PWP programs at Ryan White-funded clinics
 - Expanded prevention activities w/ School District & organizations serving pre-teens, adolescents, & young adults
 - Re-bidding entire prevention portfolio for services on a rolling basis starting in 2012

Mary Spink Neumann, PhD

ECHPP UPDATE FROM WASHINGTON, DC

Washington, DC

❑ Reduces new HIV infections

- Partnering w/ private pharmacy to offer HIV & Hepatitis C screenings; pharmacy reports test results & refers positives to DC's linkage to care system
- Integrated HIV/STD partner services & surveillance to increase number of partners receiving Partner Services
- Obtained police data on prostitution & drug arrests to identify neighborhoods for condom distribution, HIV testing, & syringe exchange; used city's map of small businesses to identify new partners & venues

Washington, DC

- **Increases access to care & improves outcomes for HIV positives**
 - Created *Red Carpet Entry Program* at 8 locations to link persons to care w/in 48-72 hours after HIV diagnosis
 - Advocating “patient-centered medical home (PCMH)” model to improve coordination & linkages between non-clinical CBOs & medical providers for comprehensive coverage
 - Expanded linkages to other medical & social services for HIV-positive persons
 - Developing new *Prevention With Positives* guide for community medical & service providers w/ promotional materials for HIV positives; will pilot materials in Fall 2012

Washington, DC

- ❑ **Reduces HIV-related disparities & health inequities**
 - Created interactive website & ad campaign (*Rubber Revolution*) at social networking locations & websites to promote condom use to general public



- Used mobile advertising (truck billboard) to reach Hispanics & supplied driver w/ condoms to meet requests
- Establishing real & virtual PCMH in high risk Wards and Census Tracts

Washington, DC

- ❑ **Achieves more coordinated national response to HIV epidemic**
 - Collaborates w/ other health department units to link MSM, at-risk heterosexuals, & STD clinics' youth clients to appropriate support services & to refer IDUs to substance abuse & mental health services
 - Incentivizes provider reporting by analyzing their data & sending them "report cards" of their own data
 - Uses proportion of virally suppressed HIV case load as "evidence-basis" to advocate for PCMH

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Comments? Questions?

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