

# Vancouver Seek & Treat for Optimal Prevention of HIV/AIDS: *Project Update*

Pacific AIDS Network  
December 8, 2011

Presented by: Chris Buchner, Scott Harrison

# Agenda

- Overview of Agenda
- Summary of Initiatives
- Key Implementation Achievements
- Update on Key Pilots
  - Routine Testing
  - Treatment, Care & Support
- Budget/actuals for 2011-12
- Key Challenges
- Sustainability

# Key Implementation Achievements

1. Population Level Indicators, monitoring/evaluation
2. Acute Care HIV Testing
3. DTES Peer HIV Testing
4. VCH Primary Care Clinics Testing
5. Partnership with PHC
6. Partnership with 1<sup>st</sup> Nations Health Council
7. Housing Continuum for HIV+ clients
8. Social Marketing Campaign across Vancouver

# Summary of Testing Initiatives

## Memorandums of Understanding

- Public health Dentists
- Downtown Eastside Women's Centre
- Health Initiative for Men (HIM)
- Portland Hotel Society DTES Testing
- Portland Hotel Society Clinic
- Ravensong Uninsured Clinic (completed)
- Spectrum
- STOP Outreach Team
- VANDU
- Vancouver Native Health Clinic

## Other Testing Initiatives

- Acute Care routine HIV testing
  - SPH, MSJ, VGH, UBC
- Testing in Targeted Settings
  - Primary care, Mental health, Addiction (VCH + SPH), Student Health, Youth, etc.
- Social marketing campaign

# Summary of Treatment & Support Initiatives

## Clinical Care/Follow-up

- CDC HIV Nurse
- Portland Hotel Society Clinic
- Spectrum
- Van Native Health Clinic (VNHS)
- STOP Outreach Team

## Self-management Support

- African Women's Group
- Positive Living BC
- VNHS – Season 4 Change
- VNHS – Positive Women, Positive Spaces

## Case Management Support

- AIDS Vancouver
- STOP Outreach Team
- VNHS – TAHAH
- St Paul's IDC

## ARV Support

- Downtown Eastside Women's Centre  
Dr. Peter Centre
- Maximally Assisted Therapy Program  
VNHS – Positive Outlook Program

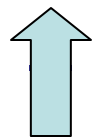
## Housing

- McLaren Housing
- Pacific Coast Apartments
- Raincity Housing

# STOP Project Update - Results

## At a Population Level in Vancouver HSDA

- Results to date: Sept, 2011



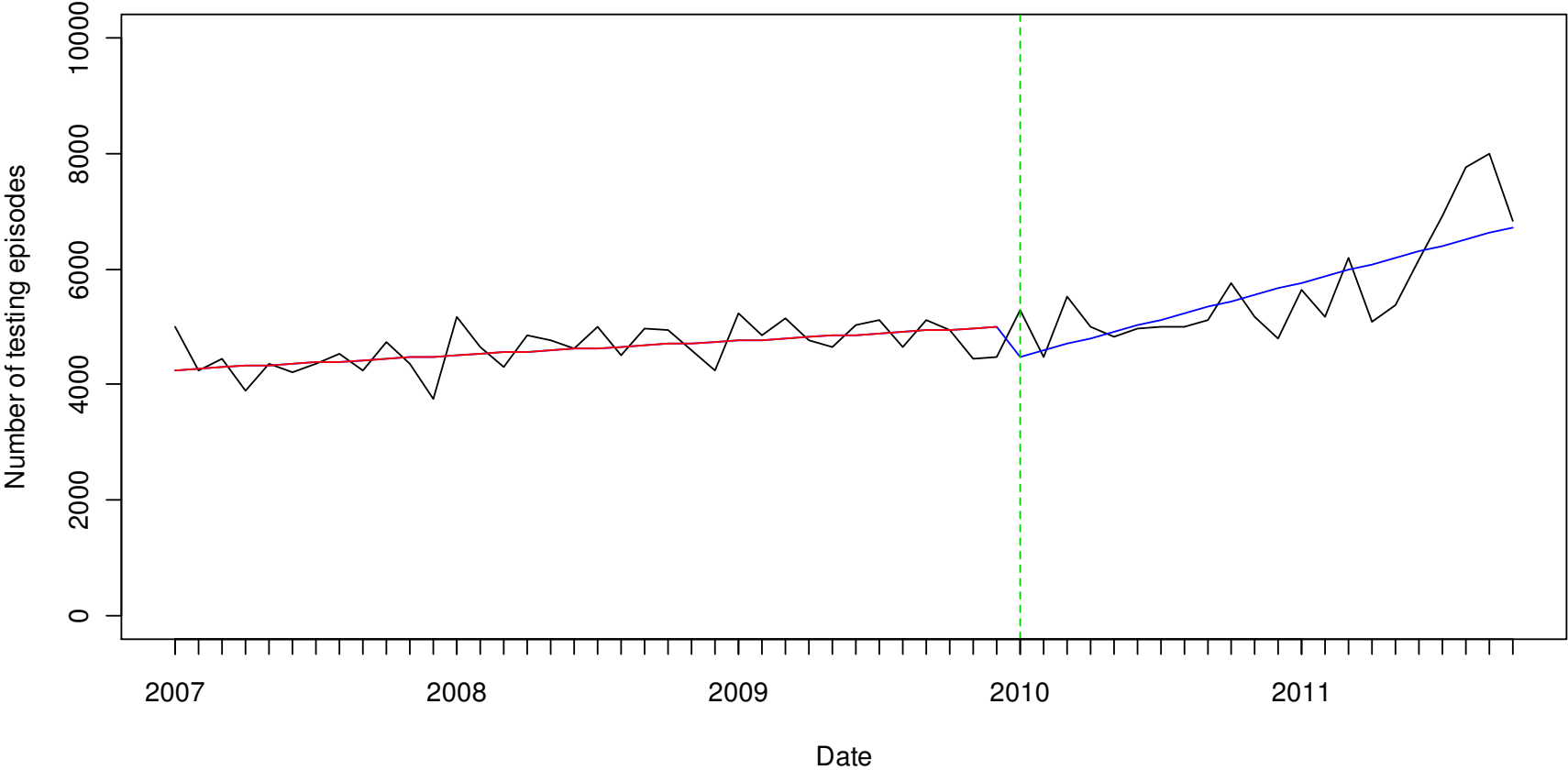
# of HIV tests & New HIV diagnoses



# of New Anti Retro Viral drug starts & re-starts

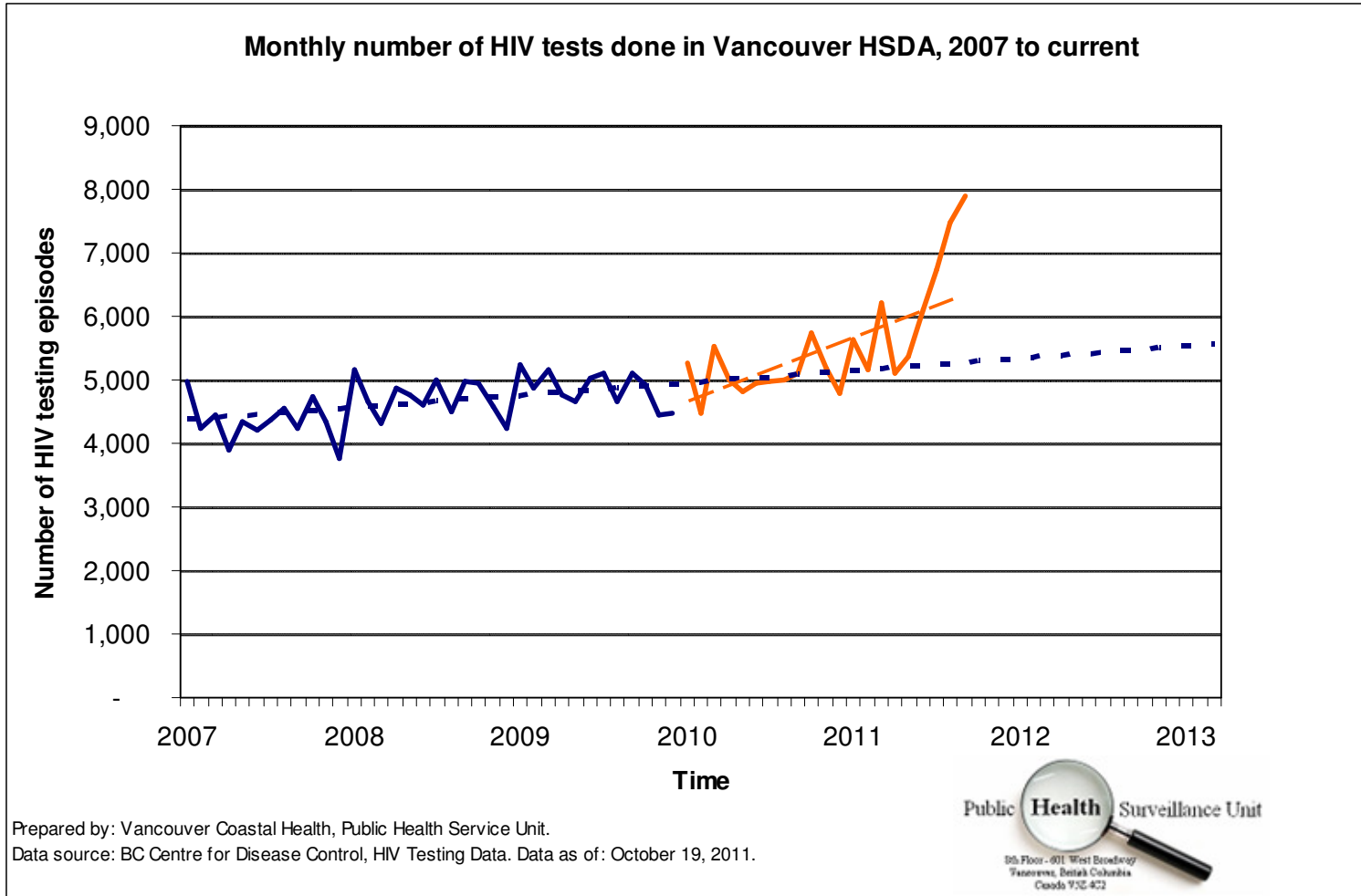
# Results to Date: Testing

Number of HIV tests done in Vancouver HSDA, 2007 to current (month)



\*

# Results to Date: Testing



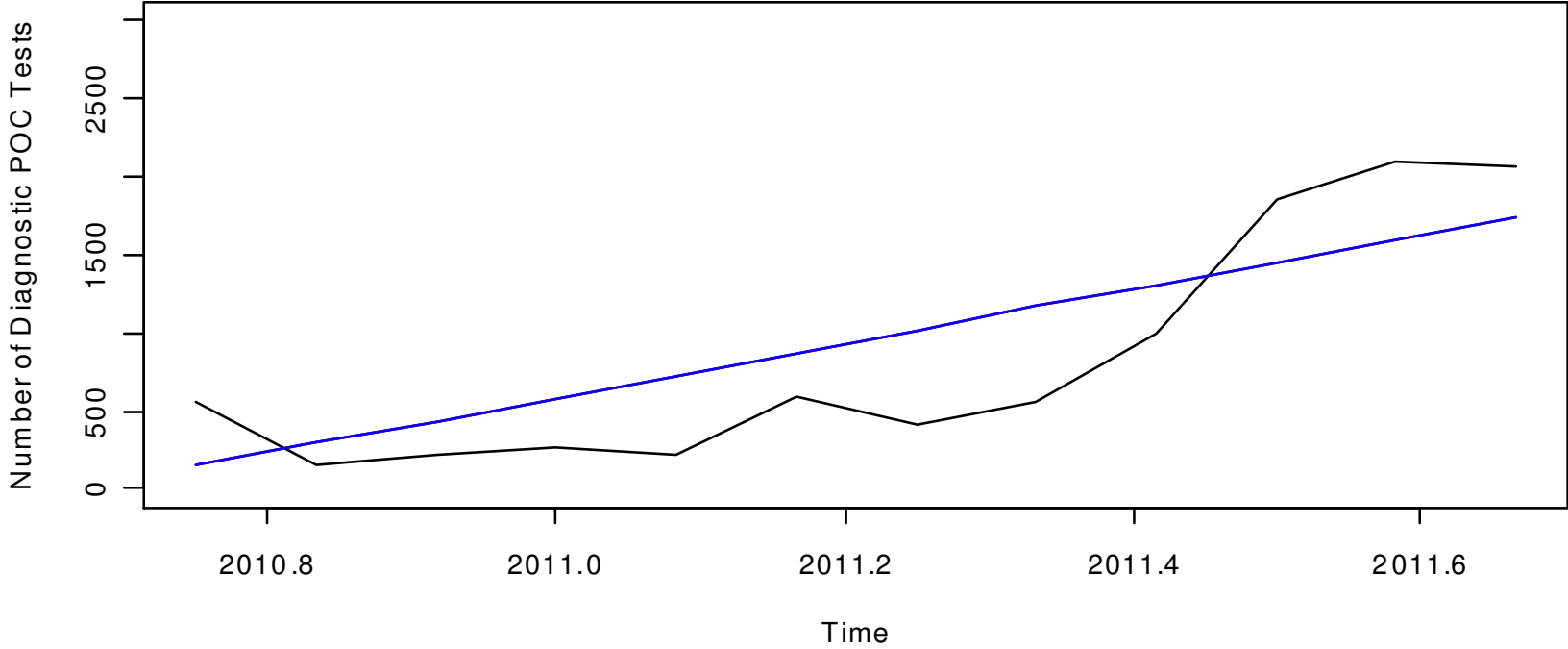
— Historical Counts  
- - - Historical Trend

— STOP HIV/AIDS Counts  
- - - STOP HIV/AIDS Trend



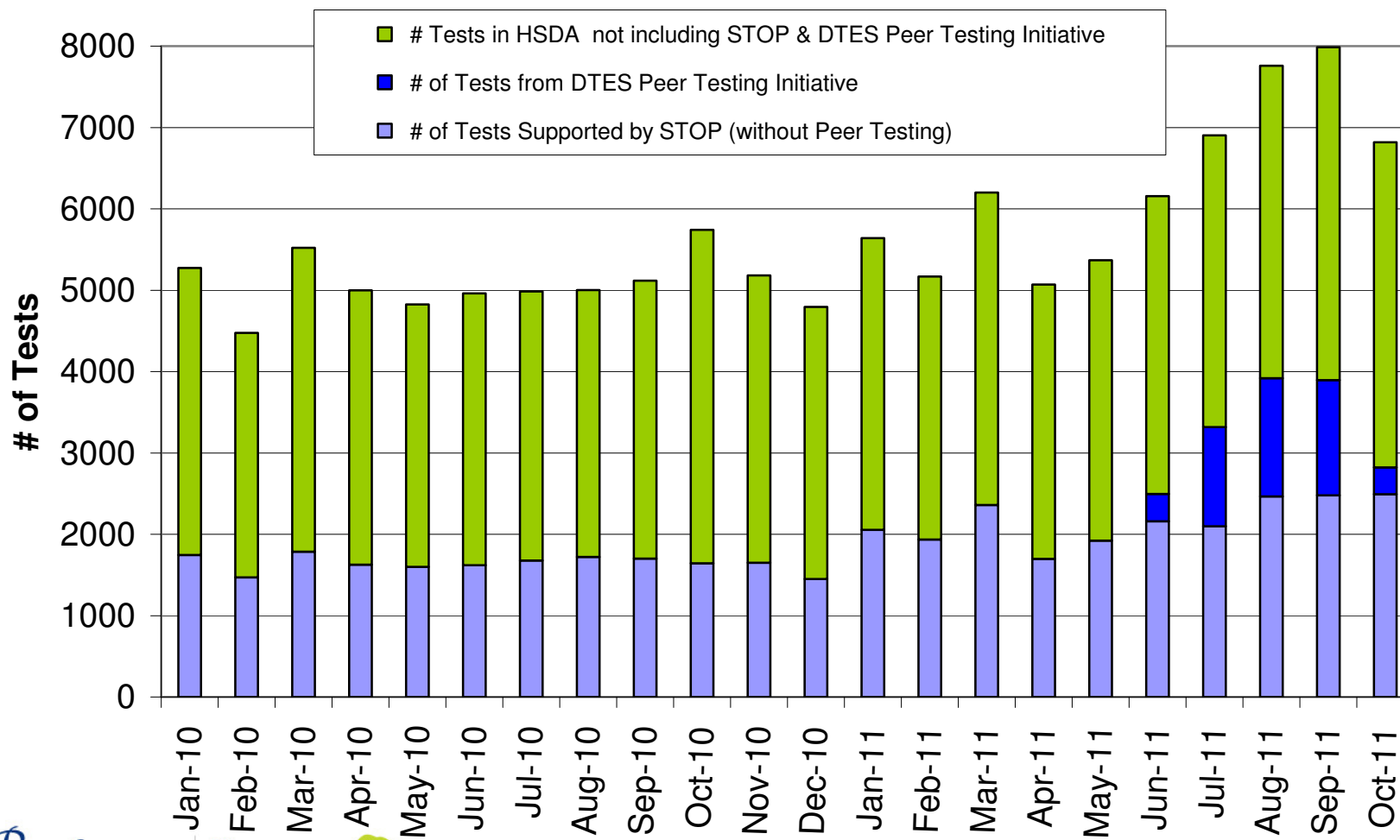
# Results to Date: Testing

Number of POC HIV tests done in Vancouver HSDA, 2010 to current (month)



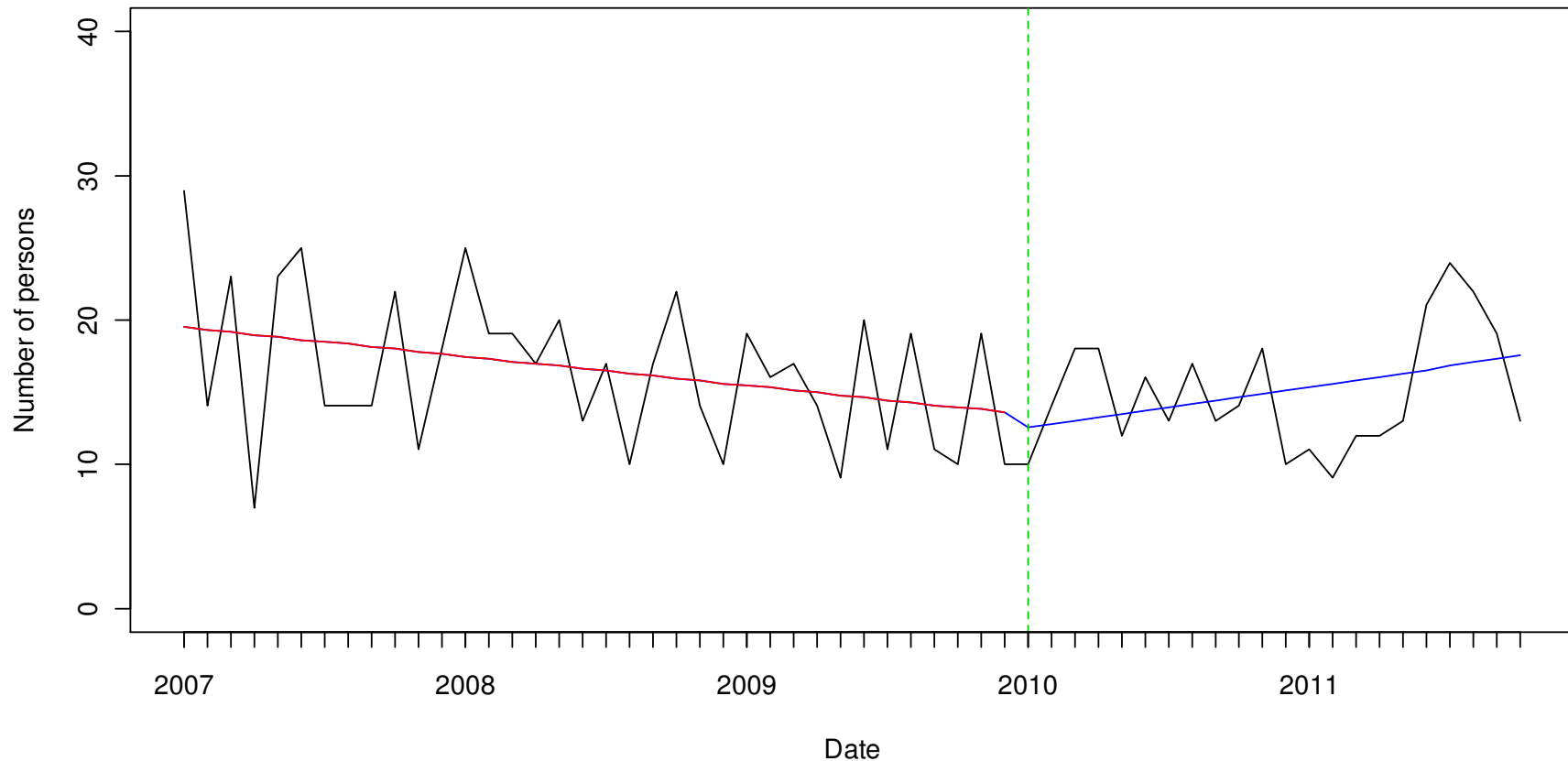
# Testing: Results

Total Number of HIV tests - Vancouver HSDA  
January 2010 to October 2011



# Results to Date: Diagnoses

Number of new HIV diagnosis by clinicians located in Vancouver  
HSDA, 2007 to current (month)



# Key Implementation Achievements

## 2. Acute Care Routine HIV Testing Pilot

- Partnership with PHC & VCH introducing routine HIV testing
- Approval from both VGH & PHC MACs
- Guided by joint VGH & PHC Advisory Group of physician & director leaders
- Physicians trained to offer HIV test to patients ages 18 & over through admissions to VGH, UBC, SPH & MSJ
- Media campaign launched with press release on Sept 23/11
- Testing implementation:
  - Oct 3<sup>rd</sup> at St. Paul's & Mount St. Joseph
  - Oct 31<sup>st</sup> for VGH Medicine Units
  - Early 2012 for all other VGH units & UBC

# Knowing is better

All admitted patients will be asked to have an HIV test with their regular blood-work

Health Canada estimates that one quarter of Canadians who are HIV positive don't know they have HIV. Like diabetes, there is no cure for HIV - but people with HIV who are diagnosed and treated can stay healthy. The only way to know for sure is to get the test. .

For more information on this project, please visit [www.stophiv aids.ca](http://www.stophiv aids.ca)



# Knowing is better

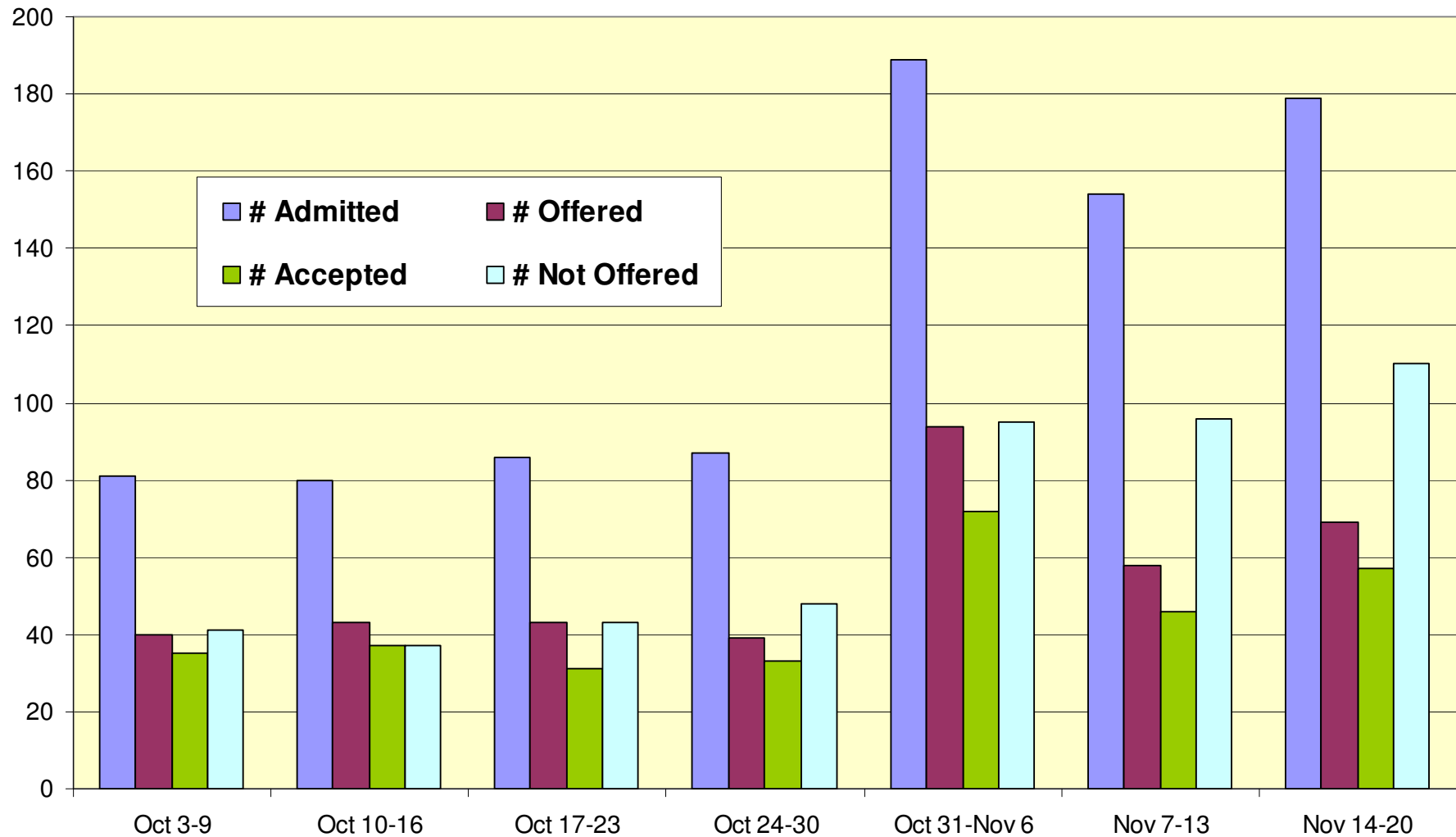
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# STOP HIV Acute Testing: All Sites Weeks 1-7



Oct 31 = VGH Go-Live date

# Key Summary of Achievements

## 3. DTES Peer HIV Testing

- POC HIV testing in DTES
  - Provided by peers/support staff from Portland Society
  - Supported by social marketing to encourage testing
- Outcomes to date - Jun – Oct/11 (Pilot ends Nov/11)
  - 4773 HIV POC tests across 26 sites – target 5000
  - 10 New HIV+ confirmed (0.2% positivity)
  - 324 previously HIV+ clients received HIV assessment, education, blood work & re-engagement in care via STOP Team
  - 18 previously HIV+ clients referred to STOP team for intensive case management & re-engagement in care
  - 227 clients tested more than once

# Key Summary of Achievements

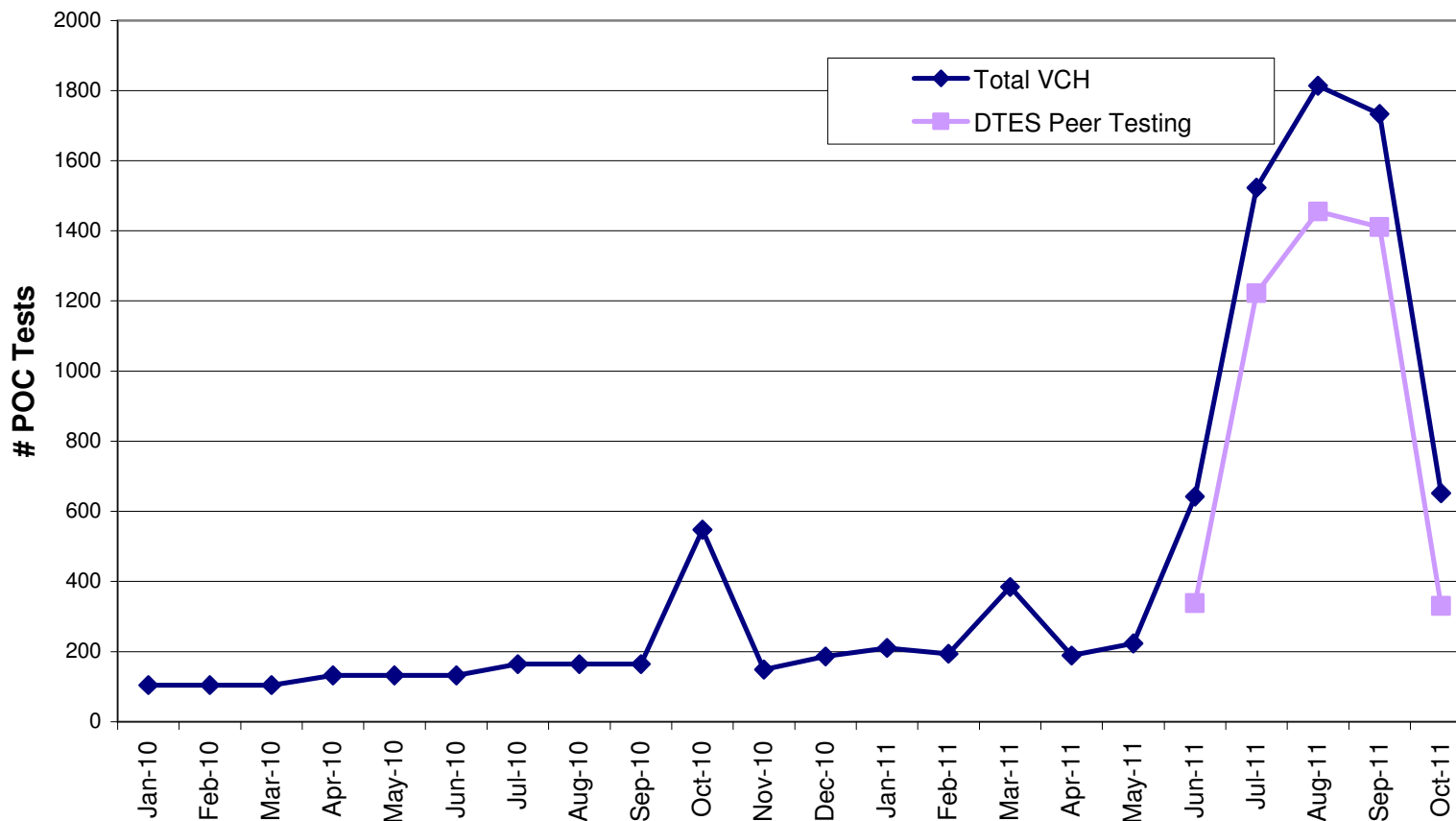
## 3. DTES Peer HIV Testing

- Lessons Learned:
  - Peers able to administer POC testing, but require intensive RN support
  - Incentivizing testing contributed to high uptake of testing in inner city
  - RN triage & providing incentives to all participants (regardless of HIV status) helps to reduce re-testing among known HIV+ clients
  - Events are opportunities to link new & re-link existing HIV+ clients to care
  - Increased awareness of routine testing thru social marketing in DTES



# DTES Peer Testing: POC Results to date

POC Tests by Month - VCH Total & DTES Peer Testing Initiative  
Jan 2010 to Oct 2011



\* The monthly data for January 2010 to Sept 2010 is not available (only the quarterly data is available). The monthly data for Jan 2010 to Sept 2010 was calculated based on the totally quarterly # of tests divided by three. The actual quarterly data for these months is:

Q1 2010: 312

Q2 2010: 396

Q3: 2010: 493



# What's your status?



***HIV doesn't care where you live.***

HIV doesn't discriminate. A new test makes it easy and accessible for everyone to know their status. So get tested, know your results in just 60 seconds and live a lifetime.

Treatments now keep people who are HIV positive alive for a lifetime and prevents the spread of new infections.

Go to [whatsyourstatus.ca](http://whatsyourstatus.ca) or call toll free **1 855.900.TEST** for more information and locations for testing in the DTES.

# status

*Know in 60 Seconds. Live a Lifetime.*

# Key Implementation Achievements

## 5. Partnership with PHC

Since February 2011

- Shared governance, funding & reporting for:
  - Planning & decision making on pilots projects
    - Testing - Acute Care, Gay Men
    - Clinical Outreach – STOP Team, Aboriginal people
    - Treatment & Support
      - Dr. Peter Centre
      - Peer Navigators
      - Housing
    - Social marketing campaigns – public, gay men
    - Evaluation & Monitoring
    - Project Team
  - Shared funding of \$4,134,400 out of \$9,600,000

# Key Implementation Achievements

## 6. Working Relationship - First Nations Health Council

Building strong relationship with FNHC including:

- Ongoing information sharing & discussions with Aboriginal Review Committee via Aboriginal rep on STOP project
- Responding to FNHC requests, e.g. Data sharing – STOP pilots have implemented Aboriginal self identification question to clients for testing & treatment
- Indigenous Cultural Competency training now expected by all STOP funded VCH/non VCH staff
- Exploration of other opportunities to work together

# Key Implementation Achievements

## 8. Housing Continuum for HIV+ clients

- Housing & clinical supports are available for:
  - HIV+ clients with difficulty starting or re-starting ARV treatment due to homelessness &/or lack of stable housing
  - 30% of housing dedicated for Aboriginal clients
- Since Sep/11 full continuum of housing options available:
  - Stabilization beds – **10**
    - 17 clients stabilized
    - 71% male, 29% female, 35% Aboriginal
  - Supported housing units – **25**
    - 25 clients housed/56% male, 44% female
    - Outcomes to date:
      - Baseline: 2 (8%) clients vL < 200
      - Current: 15 (60%) clients with vL < 200
  - Supported Independent Living Units – **10** single & **5** family units
    - 7 utilized/Target - to be fully utilized Nov/11
    - Single – 4 filled/75% male, 25% female, 25% Aboriginal
    - Families – 3 filled/2 families (66%) Aboriginal

# Key Implementation Achievements


## 9. Vancouver Social Marketing Campaign

- Public social marketing campaign to support routine testing
- Targeting Vancouver public incl UBC/Downtown SFU
- Campaign Strategy – with False Creek Ventures
  - Slogan - ‘It’s Different Now’
  - Message – An HIV test is part of routine care. Say “Yes” when your doctor offers one to you.
- Bus shelter ads will be used to peak interest & drive people to campaign resources which include: a website, videos, Public Relations, TEDX, Facebook, Twitter, posters
- Launch – target early Nov 2011
- CAPE & VCH/PHC Corporate communications kept up to date




# WE DON'T THINK YOU'RE SPECIAL.

[WWW.ITSDIFFERENTNOW.ORG](http://WWW.ITSDIFFERENTNOW.ORG)


WE DON'T THINK YOU'RE SPECIAL.



YOU CAN DO ONE THING TO CHANGE YOUR QUALITY OF LIFE.



SOMETIMES THE WAITING IS THE HARDEST PART.



WE WANT TO LIVE OUR LIVES TO THE FULLEST. WE'RE GREEDY THAT WAY.



ONLINE I'M KNOWN AS VNCVR\_GRL I LIKE IT THAT WAY.



CONNECT WITH US ON FACEBOOK & TWITTER

## YOUR MOM THINKS YOU'RE SPECIAL. WE DON'T.

If you're offered the HIV test as part of a routine exam or blood test, that's exactly what it is – routine. You are not being singled out. You are not being judged. Everyone who's ever had sex should be tested for HIV. You. Your neighbors. Everyone.



**RÉKA GUSTAFSON**  
PUBLIC HEALTH DOCTOR

02:00 HD :: vimeo

IT'S DIFFERENT NOW - RÉKA GUSTAFSON

Dr. Reka Gustafson is a Medical Health Officer and Director of Communicable Disease Control in Vancouver and is an Assistant Clinical Professor in the School of Population and Public Health at the University of British Columbia. She is involved in surveillance, prevention and control of communicable diseases, outbreak management, and refugee health.

# Update on Key Pilots & Strategies

1. Routine HIV Testing in Targeted Sites
2. STOP Clinical Outreach Team Strategy
3. Women's Wellness Program - DTES
4. Clients Linked to Treatment, Care & Support



# Update on Key Pilots

## 2. Testing Strategies in Targeted Settings

	# teams	June Status	Oct Status	Notes/Scope
Primary Care	14	0/11 (Routine)	11/14	Routine testing live in VCH sites. Added 3 partner sites (MidMain, REACH, Spectrum)
Youth Clinics	6	1/6	2/6	3 <sup>rd</sup> team Est. live: Oct
Student Health	4	1/4	2/4	2 UBC teams live; VCC, Langara engaged
Peer Testing	1	1/1	1/1	Portland Peer Testing project live
Dentists	3	0/3	2/3	3 <sup>rd</sup> team is VGH dental clinic
Addictions	15	1/15	4/15	Onsite, Rainier live with routine testing, Van Detox (POC), Insite (POC)
Mental Health	11	0/11	1/11	Strathcona Team live with routine testing, Nov leadership engagement planned
Housing/POS	3	3/3	3/3	Teams live with routine lab and POC
Health Justice	3	1/3	1/3	Vancouver Drug Court live (POC), Vancouver Jail engaged but leadership resistance
Abortion Clinics	2	0/2	1/2	Everywoman's clinic live; Bagshaw approved for funding

**Total**                      **64 teams**                      **8 teams**                      **28 teams**

All teams Live	Testing go live > 1 team, next site planned	Site prep, go live planned	1 site live, further engagement required	Initial engagement only
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# Update on Key Strategy

## 3. STOP Outreach Team

### HIV & STI Testing

- Bath Houses, HIM on the Drive, PHS Events & Health Fairs
- Testing, STI treatment, HIV follow up & linkage to care

### Engagement in HIV Care & Treatment

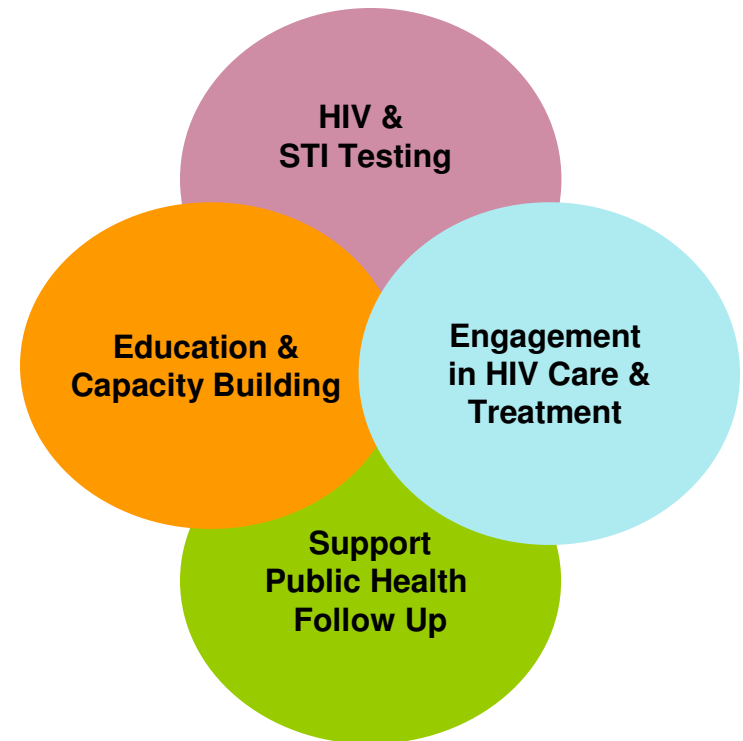
- Clinical coordination for difficult to engage or lost clients
- RN, SW & Outreach support
- Linkage to care
- MD consultation & ARV initiation

### Support Public Health Follow Up

- Post test counselling for clients not received HIV test results
- Partner notification & referrals to service with VC-CDC
- Social networking to HIV test anonymous partners
- STI Treatment, HIV follow up & linkage to care

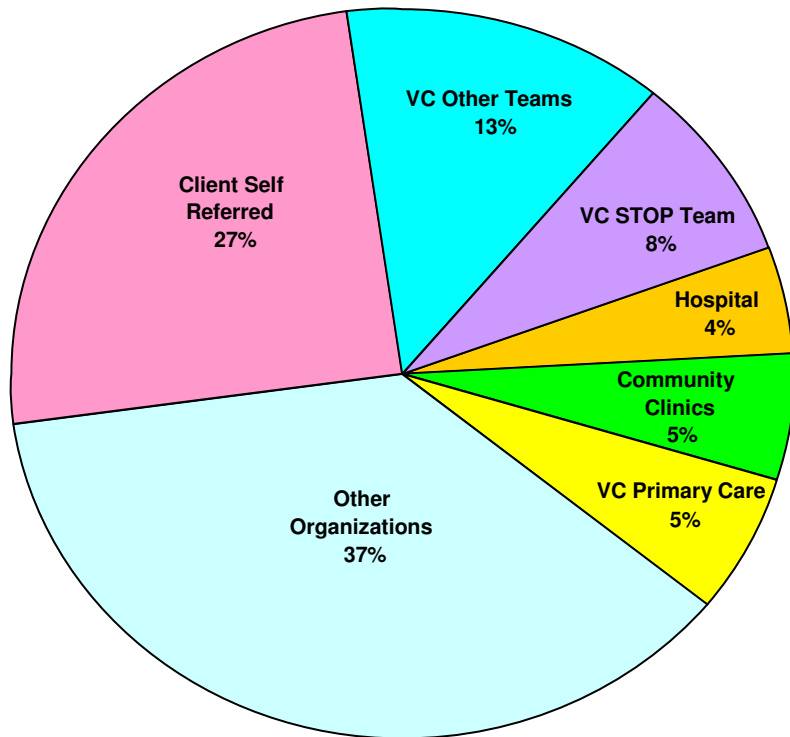
### Education & Capacity Building

- Education, training & support to RNs, LPN's, MDs, SWs, Dental Assistants & peer testers to normalize HIV screening across VCH & partner sites/clinics



# STOP Team Referral

## STOP Team Referral Source

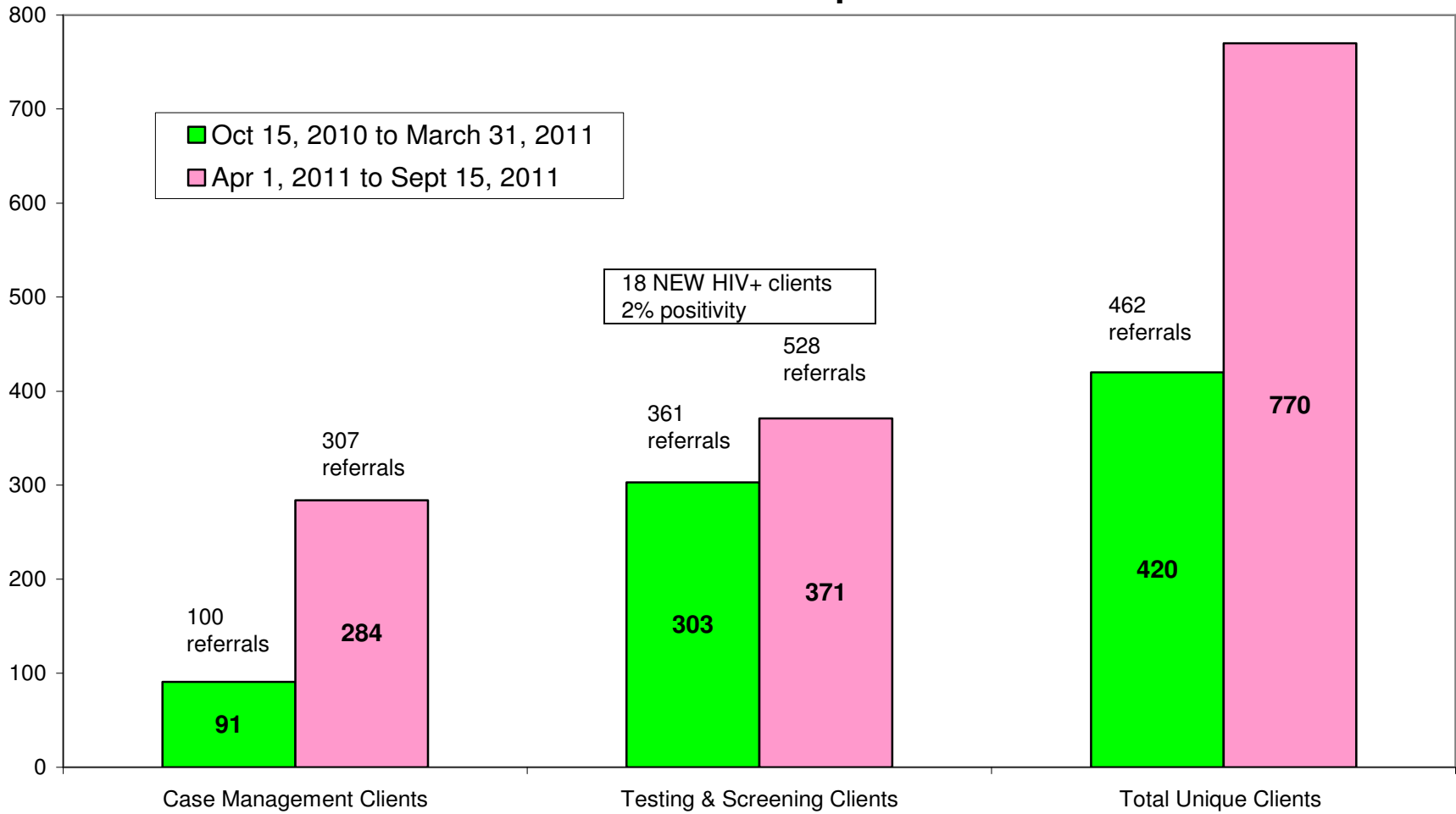


Referral Volume		
	Oct 15, 2011 to March 31, 2011	Apr 1, 2011 to Sept 15, 2011
Case Management Referrals	100	307
Testing & Screening Referrals	361	528
<b>Total Referrals</b>	<b>462</b>	<b>842</b>

\* Other Organizations Includes: PHS, VNH, AIDS Vancouver, Dr. Peters Centre, Youth Co

# STOP Outreach Team - Client Volumes

## Unique Clients Oct 2010 to Sept 2011



# Update on Key Pilots

## 4. Women's Wellness Program for DTES

- Provide increased access for women in the DTES to:
  - HIV care (STI screening, HIV testing, ARV assistance)
  - Adherence supports (case management, outreach)
- Successful collaboration with key partners between:
  - Downtown Eastside Women's Centre
  - Vancouver Native Health Centre
  - Positive Women's Network
  - STOP Outreach Team
  - PHSA
- Linked to PHSA Nurse Practitioners in DTES & Oak Tree Clinic
- Target date – Nov/11 for launch based at DTES Women's Centre at Columbia & Hastings Streets

# Update on Key Pilots

## 5. Linked to Treatment, Care & Support

To date: Includes data from 3 pilots

- Intensive ARV support & case management:
  - 92 new clients enrolled in ARV support & case management since Jan 2011
  - All clients on ARVs – (new & existing **N = 256**):
    - Baseline (Jun 2011): 141/168 (83%) clients with pVL < 200
    - Current (Sep 2011): 161/175 (92%) clients pVL < 200\*\*
      - 32 clients on ARVs < 6 months
      - 49 clients not on ARVs (engagement phase)
    - Demographics: 61% male, 38% female, 1% transgender, 49 % Aboriginal

\*Does not include case management data from AIDS Vancouver (captured via STOP Team – slide 36)

\*\*Includes all clients in programs on ARVs for more than 6 months & clients who have been enrolled in program for more than 6 months

# Education

- HIV Treatment in partnership with BCCfE
  - Collaborative – 8 VCH teams & over 40 VCH providers
  - 2 Preceptor Sessions for 4 VCH PC physicians & 2 NPs
  - Quarterly updates for 35 VCH PC physicians
  - HIV care, treatment & support course for 5 RNs/SWs
- HIV Testing
  - Via STOP Team – Educators/Practice Lead
    - 955 staff trained, 109+ formal education sessions (Feb/10 – April/11)

# Vancouver STOP HIV/AIDS Project

## 2011/12 Budget (VCH & PHC)

Objective	Budget Current Fiscal Year
Testing	\$2,739,200
Clinical Outreach	\$1,897,300
Treatment/Retention in Care	\$3,509,800
Housing Supports	\$302,700
Education	\$180,000
Evaluation/Epidemiology	\$520,000
Clinical Redesign/Tools	\$451,000
<b>TOTAL</b>	<b>\$9,600,000</b>



# Key Challenges

- Diversity of partners
- Complexity of the project
- Pace of sustained practice change for routine testing
- Engaging Vancouver family practitioners
- Sustainability
  - No guarantee of resources after 12/13
  - Need to plan sustainability during pilot testing phase
  - New service delivery structures required
- Project will be over before outcomes are seen