



February 6; 5:30pm – 7pm

MEETING HIGHLIGHTS

Meeting Date: Wednesday, February 6, 2013; 5:30pm – 7pm
Meeting Location: Philadelphia Department of Public Health, 500 S. Broad St

Organizations in Attendance: Abbvie, ACT UP, Action AIDS, American Liver Foundation, BEBASHI, Crosslink Medical Services, Do One Thing, Drug Policy Alliance, GALAEI, Gaudenzia DRC, Gilead, Health Federation, Hepatitis B Foundation/Hep B United, HepTREC, Jefferson University, MANNA, Mazzone Center, Office of HIV Planning, Philadelphia Department of Public Health, Penn Community Practice/Presbyterian Medical Center, P-HOP, PHMC, Prevention Point Philadelphia, St. Christopher's Hospital, Temple University, University of Penn Medicine, University of the Sciences Philadelphia, Vertex

Forty-eight people were in attendance at the February 6th HepCAP meeting representing **twenty-eight different agencies!**

WELCOME & INTRODUCTIONS

Ms. Shirreffs provided an overview of HepCAP since there were several new people in attendance. She pointed out that 2012 was HepCAP's start-up year and the focus was on starting to build our community; 2013 will be the year we put some of the great ideas from our community into action.

Ms. Shirreffs recapped the [December 2012 HepCAP meeting](#) and gave an update on the [USPSTF draft recommendations](#), which gave a **B grade** to screening individuals at high-risk for HCV and a **C grade** for routine HCV screening among Baby Boomers. P-HOP submitted ~200 letters to the USPSTF in favor of giving an A or B grade to Baby Boomer screening! Several other local agencies submitted letters and added their organizations to national sign-on letters. Thanks to all local organizations who advocated for a grade change! The final decision on the USPSTF's HCV screening recommendations is due for release in Spring or Summer 2013.

HEPCAP WORKGROUP UPDATES

Ms. Shirreffs reviewed projects being implemented by the **Public Awareness** and **Clinician Education**. A goal for 2013 is to launch several HepCAP projects in May to raise the profile of the coalition during **Hepatitis Awareness Month**.

Clinician Education. The last clinician workgroup call took place on January 30th; call highlights can be found at <http://www.hepcap.org/meeting-archive>. The workgroup is planning two projects:

- *Hep C Speaker's Bureau:* This project aims to send hep C clinical experts into primary care practices to encourage more testing and build efficient linkages to specialty care. Ms. Shirreffs is currently collecting slide sets from providers who are already doing clinical outreach and education. These sets will be compiled into a set of objectives and

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a master deck of slides that can be used by the Speaker's Bureau volunteers. Once these have been developed, the workgroup will meet in person to review.

- *Quarterly Case Conference.* HepCAP will host a quarterly case conference for hepatitis specialists to provide a forum for clinicians managing/treating hep C to share challenging cases. Ms. Shirreffs will poll the workgroup participants to select a date in May for the launch of this case conference. The workgroup agreed to invite colleagues to participate once a date has been set.

Public Awareness. On January 14th, several agencies who have hosted Hepatitis Awareness Month events in the past had a conference call to begin planning HAM 2013. Ms. Shirreffs allotted time at the end of this meeting for HepCAP to generate more ideas for HAM.

COMMUNITY PRESENTATIONS

Three community projects were presented: **PDPH** announced its new hepatitis surveillance grant; **PHMC** gave an overview of its CDC-funded hepatitis C testing project; and the **Do One Thing** HIV/HCV testing model was presented.

PDPH Hepatitis Surveillance (Danica Kuncio). In November 2012, PDPH received a three-year grant from the CDC to expand surveillance activities for chronic hepatitis B and C. Philadelphia was one of seven jurisdictions to receive this competitive grant. Ms. Shirreffs noted that she thinks this is a good sign that CDC is recognizing our city as a leader in viral hepatitis activities. Ms. Kuncio explained that the grant would allow PDPH to hire staff to investigate chronic hepatitis B and C cases that are reported to the health department. Before this grant, only acute B and C, chronic hep B cases among women of childbearing age, and hep C in people under age 30 were tracked. Being able to expand investigation of all chronic hepatitis B and a sample of chronic hep C cases will allow PDPH to collect more information about hepatitis risk factors, testing patterns, and patient demographics. This information will help PDPH and community partners target specific communities and improve service delivery. As this project starts up, PDPH will be working with providers to improve hepatitis reporting and improve screening. PDPH will also partner with Hep B United and HepCAP to periodically share the findings from this enhanced surveillance.

Someone asked if reporting was required for rapid hep C tests. The state currently does not require sites to report rapid hep C test results since the rapid test is just a screening test and a confirmatory test is needed to make a diagnosis of active disease. PDPH collects aggregate testing information from sites it knows are using the rapid hep C test device.

PHMC/NNCC Hep C Testing Project (Catelyn Coyle). PHMC's National Nursing Centers Consortium received a competitive grant from CDC to do hepatitis C testing in four of their nurse-run health centers (which are all federally qualified health centers, or FQHCs) in Philadelphia. The sites are: Mary Howard Health Center, Care Clinic, Rising Sun Health Center, Health Connection, and Congreso Health Center. This one-year grant will test 2,000 people with the HCV antibody tests. Any patient at these clinics who presents with a risk factor or who falls within the Baby Boomer cohort will be screened. Insured patients who test positive for HCV antibodies will receive a confirmatory test right away. Linkage coordinators will help uninsured patients enroll into an insurance program; once those patients are enrolled in insurance, they will then receive the confirmatory test. If they are uninsurable, the project will cover the cost of the confirmatory test. Once a patient is confirmed as having a chronic hep C infection, many of the health centers have existing relationships with hospital hepatology or GI

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programs that they can refer patients to. PHMC's Care Clinic also offers hep C care. A nurse care manager assists patients with the linkage to care process and stays in touch with patients to assure follow up to the specialist appointment.

As of the February HepCAP meeting, **PHMC has run 445 hep C tests and identified 31 positives**. Among the successes of this project, PHMC has found that integrating the HCV test with HIV testing makes for a more streamlined process.

Do One Thing (Sophie Feller). Do One Thing is a community-based HIV and HCV testing project based in three Southwest Philadelphia zip codes: 19139, 19142, and 19143. Testing is done by scaling up routine HIV screening at the Health Annex clinic and doing mobile testing in the community on Thursdays, Fridays, and Saturdays. This project worked closely with a host of partners to get community buy-in before the project launched. Thirty people have been trained to do testing and outreach. This team goes door-to-door to tell people about the project, reach out to local businesses to help advertise the project, and help conduct the testing. The project uses health department data and feedback from community members to determine testing locations. In addition to encouraging people to learn their HIV and HCV status, this project aims to normalize HIV and HCV testing and to stimulate a community dialogue about these diseases.

Since HCV testing was incorporated into this project, **182 rapid hep C tests have been conducted and 7 tested positive for HCV antibodies**. Do One Thing has established a linkage to care algorithm that uses a linkage coordinator to schedule their appointments with an HCV specialist and, as needed, enroll patients in insurance.

DISCUSSION: HEPATITIS AWARENESS MONTH 2013

There was not enough time to brainstorm new HAM 2013 ideas so Ms. Shirreffs reviewed ideas generated during a call of organizations who have hosted HAM events in previous years. HepCAP participants offered a few new suggestions. More time will be allotted for discussion of HAM 2013 at the March 6th meeting.

- SEPTA ads
- Event with city leaders: who would generate attention?
 - Have someone high-profile like the Mayor get tested
 - Pastors, Black churches: Health, Prison, and Recovery ministries
 - Pattie LaBelle
 - Athletes
 - Need to address stigma and complacency

UPDATES & ANNOUNCEMENTS

- American Liver Foundation events
 - March: ALF Advocacy Day in DC
 - May 11: Liver Life Walk; 8:30am at the Please Touch Museum
 - <http://www.liverfoundation.org/chapters/midatlantic/events/869/>

*Please contact **Alex Shirreffs** at 215-685-6462 or alexandra.shirreffs@phila.gov if you have edits to these notes or feedback about HepCAP.*

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