

HepCAP

HEPATITIS C ALLIES OF PHILADELPHIA

June 6, 4pm-6pm

MEETING HIGHLIGHTS

Meeting Date: Wednesday, June 6, 2012; 4pm – 6pm

Meeting Location: Jefferson University; Brent Auditorium in Alumni Hall

HepCAP Governmental Chair: Alex Shirreffs, MPH, Adult Viral Hepatitis Prevention Coordinator
Philadelphia Department of Public Health

HepCAP Community Chair: Stacey Trooskin, MD, PhD
University of Pennsylvania, Division of Infectious Disease

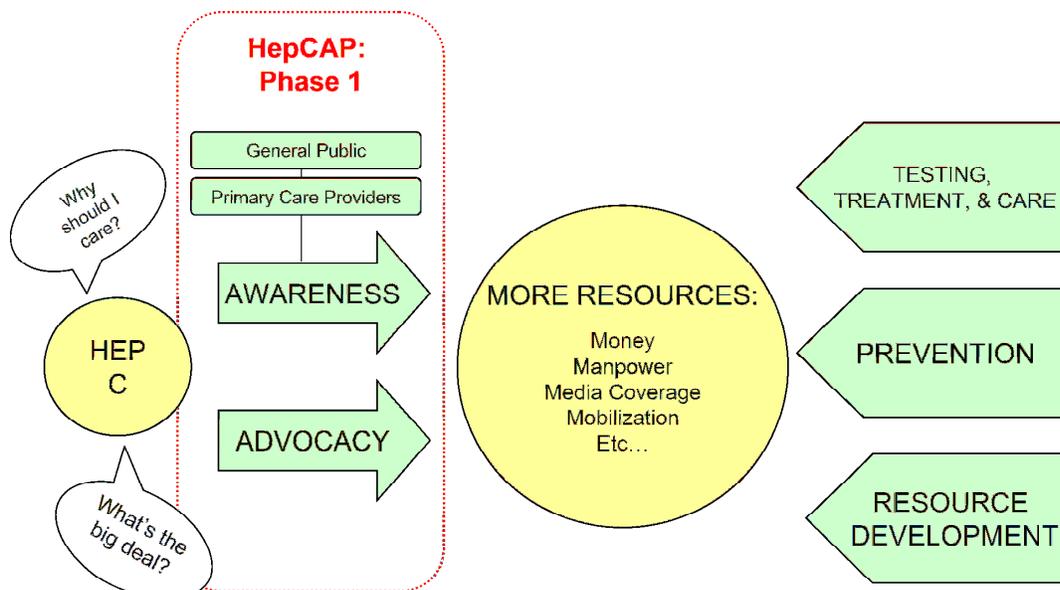
Organizations in Attendance: American Liver Foundation, BEBASHI, Drexel University, Drug Policy Alliance, GALAEI, GSK, Hepatitis B Foundation/Hep B United, HepTREC, Jefferson University, Mazzone Center, OraSure, Philadelphia Department of Public Health, University of Pennsylvania, Presbyterian Medical Center, P-HOP/PHMC, Prevention Point Philadelphia, Women’s Christian Alliance

Handouts: HepCAP: April Meeting Highlights
Letter: PA State Clinical Laboratory Policy Changes
Flyer: American Liver Foundation Patient Symposium
Flyer: P-HOP Hep C Support Group at Care Clinic

Agencies are always welcome to bring materials or flyers for hepatitis related activities to distribute at HepCAP meetings.

WELCOME & INTRODUCTIONS

DISCUSSION: HEP CAP ACTIVITIES



HepCAP Phase 1: Focus on Awareness and Advocacy

Ms. Shirreffs and Stacey Trooskin, the HepCAP Co-Chairs, presented their vision for beginning to execute the ideas that HepCAP members brainstormed at the April meeting. Ideas were developed under five key areas: Awareness, Advocacy, Prevention, Resource Development, and Testing, Treatment, and Care. By focusing Phase 1 (see chart above) of HepCAP efforts on **Awareness** and **Advocacy**, the Co-Chairs believe HepCAP can start to generate more interest and education around hepatitis C. With increased awareness from the public, clinicians, and policy makers – HepCAP may be able to generate additional resources to begin to address ideas under the other priority areas. The Co-Chairs presented the following ideas for HepCAP projects:

- **Public Awareness Campaign.** Acknowledging the limited resources for developing an awareness campaign, Ms. Shirreffs suggested having a design contest to work with local university students to develop a public awareness campaign. Programs that were suggested by HepCAP members included art, design, marketing, communications. The timeline for this project would be as follows:
 - **Summer:** Make contacts at local schools to discuss logistics of reaching out to students; how this sort of contest might fit into existing coursework; HepCAP workgroup will discuss goals of campaign and brainstorm best mediums for campaign outreach (public transportation, print media, social media, etc...)
 - **Fall:** Send out announcement to local schools to recruit submissions; hold info sessions for interested applicants to find out more about hepatitis C and goals of the campaign
 - **Winter:** Due date for submissions; selection committee picks winner; campaign launched
- **Primary Care Provider Education.** Dr. Trooskin suggested that HepCAP solicit hepatitis treatment specialists to volunteer their time for a HepCAP speakers bureau. Their expertise would be used to go out and educate primary care providers about the importance of screening patients for hepatitis C and the appropriate steps to follow if one of their patients does test positive. Clinicians participating in the speaker's bureau would be asked to give 1-2 presentations a month. The timeline for this project would be:
 - **Summer:** Recruit clinicians to participate in the speakers bureau; the workgroup will develop a strategy for outreach to primary care providers, develop a standard presentation and create an evaluation tool.
 - **Fall:** Begin scheduling presentations and sending speakers into clinical offices!
- **Local Advocacy.** Dr. Trooskin discussed her efforts to educate local politicians about hepatitis C, which will hopefully result in advocacy activities in the fall, including a potential city council proclamation and/or hearing. It was also noted that the Hepatitis B Foundation/Hep B United coalition have received a commitment from City Councilman David Oh to make hepatitis B his signature health issue. Ms. Shirreffs mentioned that the Secretary of Health has also shown a commitment to raising the profile of hepatitis C and hosted a meeting to educate and engage high-ranking cabinet members from various state agencies (Welfare, Corrections, Drug and Alcohol, etc). He has also said that he

would be interested in helping pull legislators together if we ever wanted to have an advocacy or awareness event at the Capitol in Harrisburg.

Workgroups will be developed to conduct planning activities under each project area. These workgroups will communicate more frequently between HepCAP's bimonthly meetings in ways, such as conference calls, that make it feasible for workgroup participants. If you are interested in joining one of the workgroups, please email Alex Shirreffs – Alexandra.shirreffs@phila.gov – and specify which project you would like to help out with and when are the best times for you to participate in conference calls or meetings.

COMMUNITY PRESENTATIONS

The second half of the HepCAP meeting focused on presentations from people working on hepatitis projects in the community. If you are interested in presenting your work at a future HepCAP meeting, email alexandra.shirreffs@phila.gov or call her at 215-685-6462 to be included on an upcoming agenda!

Jason Bell: Viral Hepatitis Resource Guide

Drexel MPH student Jason Bell presented on his Capstone project – updating a viral hepatitis resource guide for Philadelphia. Working with the Philadelphia Dept. of Public Health, Mr. Bell began his project by interviewing hepatitis stakeholders to collect their input on the original resource guide, made in 2008. Using this feedback, Mr. Bell developed a comprehensive survey to collect information about a variety of hepatitis services that could be offered by agencies (prevention, clinical, education, etc.) as well as more detailed organization information such as whether or not there is a waiting list for services, languages spoken, and insurances accepted.

Mr. Bell's provider survey served two purposes – to gather information to be used for an updated resource guide and to gain a better understanding of local hepatitis assets and identify gaps in hepatitis services. Mr. Bell presented some of his observations of gaps and assets based on the 48 agencies that completed the survey.

PDPH is now undertaking the next steps of completing the Resource Guide. Whereas the 2008 Resource Guide was in print format, the latest edition will be online for several reasons: it will allow site updates and additions to be completed easier and quicker; it will allow for different search parameters (type of service, geographic location, etc.); and it will be able to evolve to meet the needs of users more quickly and cost-effectively than a print version. PDPH is currently looking for web developers and designers to work on this project and hopes to have a version of the guide online by the end of the year. PDPH can then use the pilot version of the site to encourage even more agencies to fill out the information to have their organizations included in the directory.

Community Spotlight: Prevention Point

Gus Grannan, a Harm Reduction Specialist at Prevention Point Philadelphia, presented a background of PPP and talked about harm reduction theory and how it applies to hepatitis education and prevention efforts in drug using populations.

Some of the resources he suggested for people who would like to learn more about harm reduction:

- Harm Reduction Coalition: *Getting Off Right... and Left... and Sideways: Drug Injections in the Real World, the Persistence of Hepatitis C, and the Failure of "Total Hygiene" Interventions*
- Chicago Recovery Alliance: 23 steps to insure safe injection

When Mr. Grannan concluded, Ms. Shirreffs asked agencies interested in presenting their program at future meetings to contact her to get on the agenda in September, October, or December.

Updates & Announcements

Hepatitis Testing FOA. In late May, the CDC released a funding announcement: *PPHF 2012 Viral Hepatitis, Early Education, and Linkage to Care for Persons with Chronic HBV and HCV Infections Financed Solely by 2012 Prevention and Public Health Fund*. There are two categories: A) Early identification and linkage to care for foreign-born persons with hepatitis B; and B) Testing for HCV infection and enhancing linkage to care for persons with hepatitis C. Category B has three parts: 1) testing and linkage to care in settings that provide services to people who inject drugs; 2) hepatitis services in community health centers (CHCs); and 3) HCV testing/linkage to care in other settings.

Dr. Trooskin told the group about a model of testing she is applying for under Category B, Part 3 that would distribute 4,000 test kits to a variety of sites throughout the city and would coordinate a network of specialists to accept linkage to care for people confirmed to have HCV. She invited anyone in attendance to contact her about joining this model. The application for this grant is due July 2nd.

UPDATE: In addition to Dr. Trooskin's model, the local health clinics operated by the National Nursing Centers Consortium (housed at PHMC) are applying for this grant under Category 2, Part B. Kudos for two strong applications coming from the City of Philadelphia! Keep your fingers crossed for Drexel and NNCC!

Hep C Rapid Test. Ms. Shirreffs distributed another letter from the state that summarizes recent changes to laboratory regulations. Among some of the most important points are:

- Proficiency testing will no longer be required for CLIA-waived tests
- Physician's Office Laboratories will no longer be classified as Level 1, Level 2, and Level 3; the Bureau will identify these laboratories as simply Physician's Office Laboratories. Physician's Office Laboratories and Nursing Homes will no longer be limited in the types of tests they perform provided they comply with all associated Pennsylvania and CLIA requirements.
- Any documents previously released by the Bureau stipulating the need for quality control requirements beyond those required by the test kit manufacturer are no longer valid.
- Whether or not a laboratory will be inspected will no longer be based on laboratory type; The need for on-site inspections will be decided on a case-by-case basis.

These changes are intended to make it easier for sites to use the HCV rapid test. **Sites that would like to use the HCV rapid test must still submit an application to BOL and the Bureau must approve requests to perform new tests and issue an updated permit before patient testing may be performed.**

Despite these changes, in Pennsylvania sites are still slow to get up and running. A challenge for some sites is establishing a medical director who can sign off on testing activities. Dr. Trooskin submitted paperwork to the Bureau of Labs so that she can start to use the rapid test. She shared her experience and let people know where to find the forms as well as a contact person for sites to get more information.

- **Letter:** <http://www.portal.state.pa.us/portal/server.pt?open=18&objID=1259401&mode=2>
- **Application Forms:**
http://www.portal.state.pa.us/portal/server.pt/community/laboratories/14158/clinical_lab_lic_ensure/556786
- **BOL Contact:** Tom Bannon, Acting Director, Division of Lab Improvement

OraSure also has released an Implementation Guide that provides guidance for sites that would like to set up an HCV testing program. Contact Rebekah Parsons - rparsons@orasure.com or 484-894-7470 if you would like the guide or other information about the Rapid Test.

Changing HepCAP Meeting Dates/Time/Location. The group voted and agreed that the HepCAP meetings should be moved back to 500 S. Broad Street. There was some discussion over whether the day/time of the meetings should be changed to take into account the different schedules of participants (ex: some clinicians would like to attend but cannot get out of their office until after 5pm). Several participants said they would like more flexible meeting scheduling. It was decided that the best way to adjust the HepCAP schedule would be through a survey to assess people's individual preferences. *The next HepCAP meeting will still be held on the first Wednesday of SEPTEMBER (8/5) from 5:30pm-7pm at PDPH's office at 500 S. Broad Street.*

Other Announcements.

Hep B and C Patient Symposium: Sponsored by the American Liver Foundation on July 28th

- <http://www.liverfoundation.org/chapters/midatlantic/events/823/>
- For more information contact Erica Stein at estein@liverfoundation.org

NEXT STEPS

Ms. Shirreffs will send out the meeting minutes. Participants who signed up for workgroups will be contacted to begin project planning for the awareness campaign, provider education, and/or advocacy activities.

Ms. Shirreffs will include a survey with the meeting minutes to solicit feedback about the future day/times of HepCAP meetings.

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

**The next HepCAP meeting will be held on
Wednesday, SEPTEMBER 5th from 5:30pm-7pm
at PDPH (500 S. Broad St)**