Washington State Getting to the End of AIDS

Tamara Jones End AIDS Washington Policy & Systems Coordinator Office of Infectious Disease

Washington State Department of Health





End AIDS Washington Developing Recommendations



Recommendation: Development

Governor's Proclamation

• Empowered State HIV Planning Group (HPSG)

HPSG created End AIDS Steering Committee

Tasked Committee to:

- Build upon present work
- Develop recommendations to achieve goals 50% reduction in rate of new HIV diagnoses by 2020 Reduction of disparities in health outcomes
- Obtain and include community input

The Governor's Proclamation

Reference to the HIV Strategic Framework and six outcomes

Reference to multi-agency, multi-sectoral approach and leveraging resources

Reference to 50% reduction in rate of new HIV diagnoses by 2020 and reduction of disparities in health outcomes

The State of Mashinaton



Aroclamation

WHEREAS, Washington State took bold action on the AIDS epidemic in the 1980s, dedicating resources to educate the public about HIV, prevent the spread of disease, and care for individuals who were infected; and

WHEREAS, these resources have been invested wisely, focusing on those areas of the state with the most disease and on interventions that are on the front edge of prevention science and most likely to interrupt the spread of disease, resulting in decreases in new HIV infections, new AIDS cases, and deaths in people with HIV; and

WHEREAS, because of the Affordable Care Act, more people than ever have access to health care, and Washington's health system is transforming to integrate physical and behavioral health care and social supports, all of which will help to care for those infected with HIV and further reduce the spread of disease; and

WHEREAS, as a result of all of these factors, Washington State is again in a position to take bold action and be a national leader in ending AIDS; and medical providers, public health experts, and community advocates are poised to work with other partners across sectors and agencies to drive infection rates to the lowest in the country, by leveraging resources within the evolving health system at a time of budget challenges; and

WHEREAS, World AIDS Day is held on December 1st each year and is an opportunity for people worldwide to unite in the fight against HIV;

NOW THEREFORE, I, Jay Inslee, Governor of the state of Washington, do hereby proclaim December 1st, 2014, as the beginning of our work together to

End AIDS in Washington State

and I urge all people to join me in supporting this effort to make a Healthier Washington for all. Furthermore, I empower the State HIV Planning Steering Group to lead a robust task force to put forward recommendations to achieve the goals of End AIDS Washington, including reducing the rate of new HIV diagnoses in Washington by 50% by 2020 and reducing disparities in health outcomes.

Signed this 25th day of November, 2014

THE PROPERTY OF A DESCRIPTION OF A DESCR

Governor Jay Insle

History of the epidemic in Washington

Reference to ACA and health systems transformation/Healthier Washington

Assignment of Leadership to HIV Planning Steering Group



Community Input: Process



Recommendation Development

How: Webinars. Town Halls. Surveys. Targeted Conversations.
Questions: What needs to happen to End AIDS in Washington?
Given all that we know, why is it still so hard to prevent HIV? What is the most important thing to consider? If you could do anything to end AIDS, and money and politics were not issues, what would you do?

Draft Report and Recommendations

- How: Email and web-based questionnaires.
- Questions: What are the strengths? What are the weaknesses and what would correct them? What is missing?



Community Input: Outcomes

Beginning Development

- Address Stigma
- Address Health Disparities
- Meaningful Community Engagement

Draft Report and Recommendations

- Substance User Health
- Meaningful Community Engagement
 - PLWH over 50
 - Transgender

Policy & Systems

- New FTE
 - Policy
 - Legislative
- Engages with:
 - Federal Partners
 - Tribal Nations
 - Other Agencies
 - Community Based Organizations
 - Community Members
- Knowledge & Experience
 - Working with Policy Makers
 - Maneuvering through the Legislative Process
 - System Level Changes





End AIDS Washington What Next?

What We Learned

• No Single Solution

11 Recommendations each with Action Steps

- Need Change Across Systems
 Health Care, Insurance, Policy / Regulations
- New Partnerships / New Relationships
 Health Care Authority, Insurance Commissioner, Legislature, Health Care Organizations and Systems
 What We Learned We Need

Calls to Action regarding:

- Stigma
- Health Disparities
- Community Engagement

Implementation



- Develop Coordination / Leadership
- **Continued Community Engagement**
- **Develop Recommendation Plans**
 - Identify Early Wins, Prioritize Actions
 - **Engage New Partners**
- Measuring Progress Goals and Recommendations
 - Development of metrics and dashboard
- **New Staff Positions**
 - Peer Navigator
 - **Health Disparities**
 - HIV Stigma

End AIDS WA Marketing Company End A SWashington



We Need – Continued Support from Leadership



L: Joseph Ready, End AIDS Steering Team R: John Wiesman, Director WA DOH

facebook

Governor Jay Inslee is on Facebook. To connect with Governor Jay Inslee, join Facebook today.

Join Log In





Governor Jay Inslee On World AIDS Day, we unite in the fight against HIV. Together, we can end AIDS: http:// endaidswashington.org/

We Need – Stakeholder Involvement

•End AIDS Washington is a collaboration.

•Not owned by WA DOH or by any single AIDS service organization – Ownership by all stakeholders

•Ending the HIV epidemic requires active involvement, collaboration, and leadership of all stakeholders:

- PLWH, at-risk communities
- healthcare plans and providers, insurance systems, social service providers
- DOH, other State government agencies, LHJs, CBOs
- Governor, Legislature, Cities and Counties
- Researchers, Business Community

•This will require developing new partnerships and maintaining and growing established partnerships



We Will Get Us There



We have achieved so much in Washington State because of the efforts of incredibly dedicated people.

We can build on these successes.

End AIDS Washington provides us with a unifying purpose.

It calls us to:

- Find new answers to address long standing challenges, and
- Align our efforts to transform existing systems

Together, we can reach our goals.

Together, we will End AIDS in Washington.





Tamara Jones

End AIDS Washington Policy & Systems Coordinator

tamara.jones@doh.wa.gov

Claudia Catastini, MA

Director, Office of Infectious Disease

claudia.catastini@doh.wa.gov



Reducing Health Disparities: 10

Measure	Population	2014 Baseline Difference*	2020 Target Difference*
New HIV Dx Rate	U.Sborn Black	14.6 per 100K	≤ 7.3 per 100K
	Foreign-born Hispanic	8.9 per 100K	≤ 4.5 per 100K
Late HIV Diagnosis	Foreign-born Black	4% late	≤ 2% late
	Foreign-born Hispanic	10% late	≤ 5% late
	Ages 45 and older	10% late	≤ 5% late
Linkage to Care (in 30 days)	U.Sborn Black	4% linked	≤ 2% linked
Engagement in Care	Foreign-born Hispanic	14.5% engaged	≤ 7.3% engaged
VL Suppression	U.S.–born Black	8.1% suppressed	≤ 4.0% suppressed
	Foreign-born Hispanic	10.5% suppressed	≤ 5.2% suppressed
	Persons Who Inject Drugs	20% suppressed	≤ 10% suppressed

* Difference compared to aggregate value among all PLWH, statewide

Improving Quality of Life: 3 Objectives

Measure*	2014 Baseline	2020 Target
Percent who rate their overall health as good, very good, or excellent (includes both physical and mental health).	81%	≥ 82%
Mean numbers of days in which poor physical or mental health prevented normal activity, during past 30-day period	3.6 days	≤ 3.0 days
Summary index of healthy days: mean number of healthy days (mental and physical; limit 30) reported during past 30- day period	19.8 days	≥ 22.0 days

Source: Medical Monitoring Project (MMP) surveys conducted annually with PLWH. Note: All measures based on CDC's HRQoL Core Module (4 questions)

Recommendations: The Task

Achieve the Goals

- 1. Reduce Rates
- 2. Increase Viral Suppression
- 3. Reduce Morbidity
- 4. Address Disparities
- 5. Improve Life Quality

Build on Present Work

Public In-Put

- Address Stigma
- Reduce Disparities
- Community Engagement

Recommendations

- 1. Stigma
- 2. Disparities
- 3. Routine HIV Screening
- 4. PrEP
- 5. Sexual Minority Healthcare
- 6. Substance Users
- 7. Insurance
- 8. Housing
- 9. Whole Person Healthcare
- 10. Youth
- 11. Community Engagement

