



San Francisco Department of Public Health HIV Health Services

San Francisco Health Commission September 19, 2023

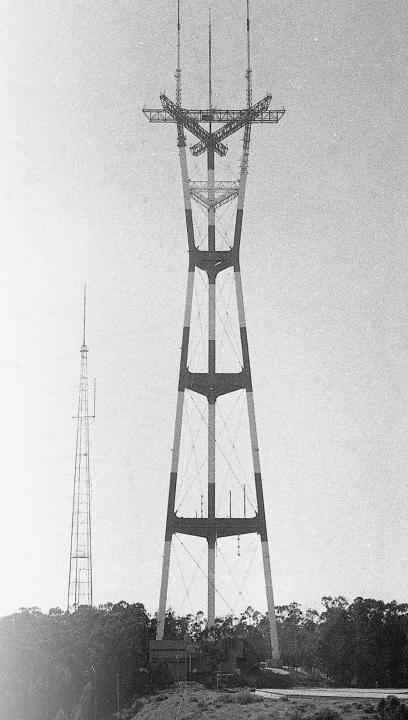
Bill Blum HHS Director



Program Overview Mission Statement

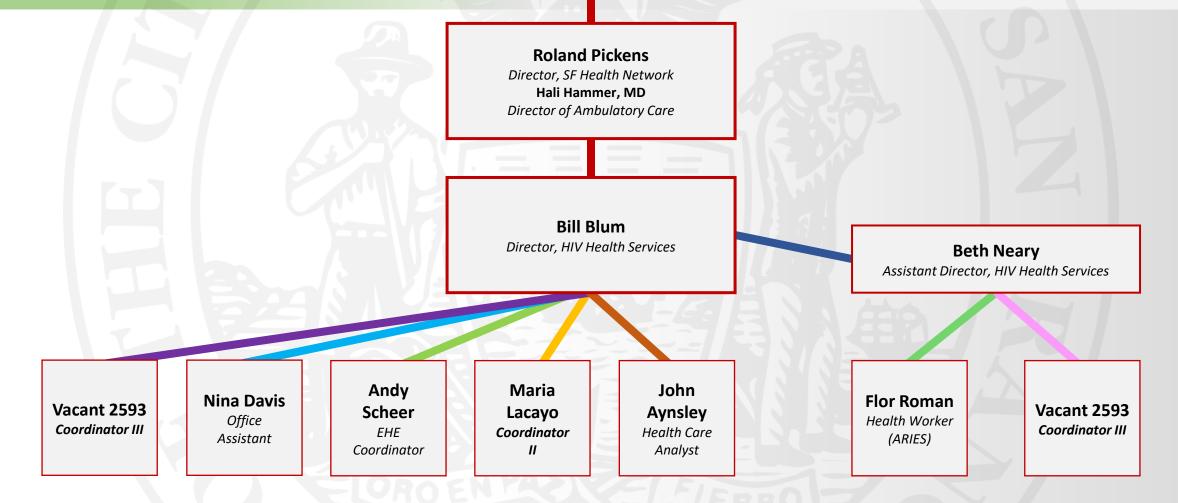
The Mission of San Francisco Department of Public Health's HIV Health Services (HHS) is to oversee and ensure a state-of-the-art, client centered care that improves and sustains the quality of life of people with HIV.

HHS collaborates with federal, state, and local partners to promote health equity to maintain an excellent HIV healthcare system that is comprehensive and sustainable.



Program Overview Organizational Chart

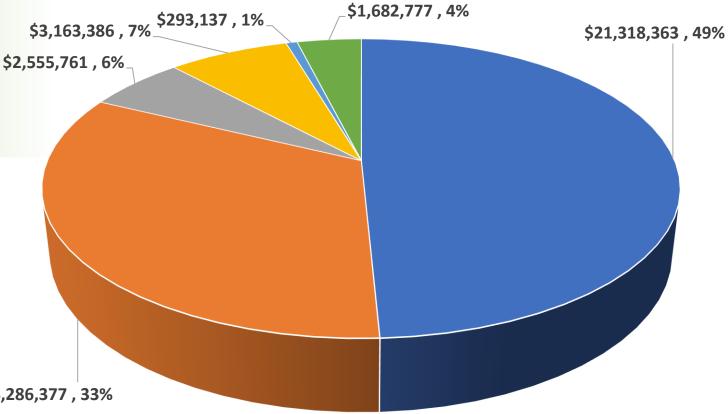
Grant Colfax, MD Director of Health



Program Overview Organizational Budget

82%

of the HHS budget is funded by **RW Part A & San Francisco General Fund**



\$14,286,377,33%

- San Francisco General Fund
- Ryan White Part A
- **Ryan White Ending The HIV Epidemic**
- Ryan White Part B
- Ryan White Part C
- San Francisco Getting to Zero

Program Overview Services Provided



5,602

Unduplicated clients were provided HHS funded services in 2022-2023 (roughly 40% of persons living with HIV in San Francisco)

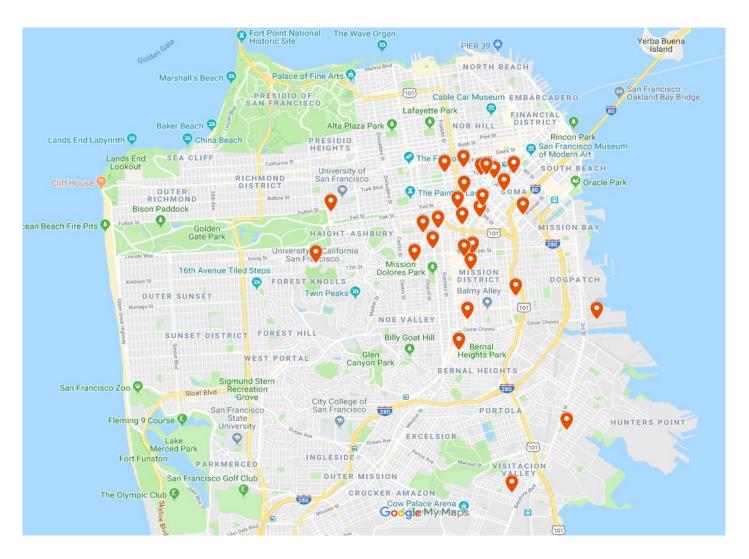
Core Services	Support Services		
Outpatient Amb. Health Services	Food / Home Delivered Meals		
Centers of Excellence	Emergency Financial Assistance		
Medical Case Management	Residential Substance Use		
Mental Health	Psychosocial Support		
Early Intervention Services	Housing Subsidies		
Oral Health	Non-Medical Case Management		
Home & Commbased Services	Facility-based Care		
Home Health Care	Legal Services		
Hospice	Outreach		

Program Overview Community Partners

- Total of 65 contracts/MOUs for 79 programs within 42 different CBOs, UCSF, and sister programs within DPH
 - 40 contracts supporting 58 separate program with 26 Non-Profit Community-Based Organizations
 - 10 contracts for 12 programs within 5 different divisions of UCSF
 - 15 MOU supporting 18 HHS-funded programs within 11 different units and clinics of SFDPH



Program Overview Community Partners Map



- AIDS Legal Referral Panel
- Alliance Health Project
- Castro-Mission Health Center
- Catholic Charities (multiple sites)
- City Clinic
- Community Awareness & Treatment Services
- Dolores Street Community Services
- Health Right 360
- HIV Integrated Services
- Instituto Familiar de la Raza
- Larkin Street Youth Services
- Lutheran Social Services
- Mission Neighborhood Health Center
- Native American Health Center
- Positive Resource Center
- Project Open Hand / AIDS Emergency Fund
- Rafiki Coalition
- San Francisco AIDS Foundation
- San Francisco Community Health Center
- Shanti
- South Van Ness Behavioral Health Services
- Southeast Health Center
- St Mary's Dignity Health
- Tom Waddell Urban Health Center
- UCSF, Men of Color Program/PCC
- UCSF, Positive Health Program
- University of Pacific, School of Dentistry
- Westside Community Services

Epidemiological Snapshot Characteristics of persons living with HIV in San Francisco

Compared to overall San Francisco HIV population, HHS clients are statistically more likely to be Cis or Trans Women and identify as persons of color.							San Francisco (i)	San Francisco HHS (ii)	
		San	San			Cis Men	92%	84%	
			Francisco 🕫	Francisco HHS (ii)		Gender	Cis Women	6%	10%
	Age	0-20	<1%	<1%		Race/Ethnicity Gen	Trans Women	2%	5%
		21-30	3%	4%			Trans Men	<1%	<1%
		31-40	14%	15%			White	58%	41%
		41-50	19%	18%			Black/African American	12%	19%
		51-60	34%	28%			Latino/a/x	20%	25%
		61-70	22%	25%			Asian/Pacific Islander	6%	6%
		70+	7%	10%			Other/Unknown	3%	9%

i – San Francisco Epi Report 2021, ii – ARIES July 2023

Ending the HIV Epidemic Program Goal & Funding Level



In 2020, the federal government launched a bold new initiative called <u>Ending the</u> <u>HIV Epidemic in the U.S.</u> (EHE). This initiative intends to reduce the number of new HIV infections in the United States by at least 90 percent by 2030. The initiative focuses on four strategies—diagnose, treat, prevent, and respond—that together can end the HIV epidemic in the U.S.

\$291M was allocated in the first year, \$70M of which was awarded by HRSA/HAB

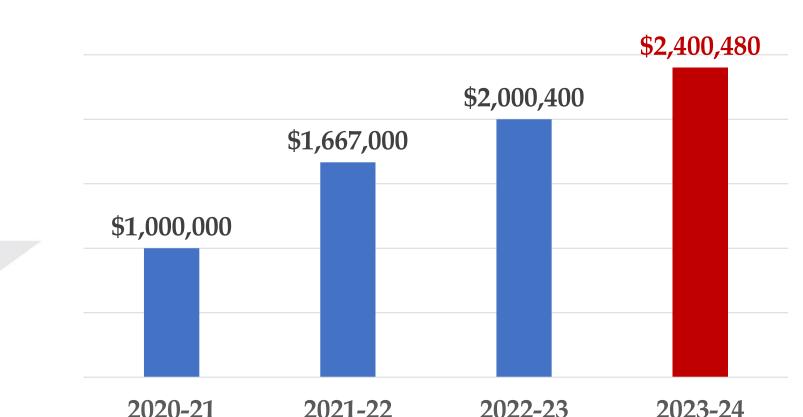


Ending the HIV Epidemic Program Goal & Funding Level



Increase in EHE funding each year from 2021 to 2024

SFDPH HHS EHE FUNDING



75% reduction in new **HIV infections** in 5 years and at least 90% reduction in 10 years.

GOAL:

Ending the HIV Epidemic Priority Populations – EHE Target Populations in San Francisco



Four populations of focus were chosen for HIV EHE care service interventions

- I. Trans Women
- II. People Experiencing Homelessness
- III. People with a Recent History of Incarceration
- IV. Persons with High Risk Substance Use

The Black/African American and Latino/a/x communities were also identified as target populations and funding for programs is being explored. There is substantial overlap among these communities and the four selected groups.

The people identified for intervention are clients currently not engaged in care, have not been engaged in care in the past, and are intermittent or non-consistent seekers of care.

106

Trans Women were diagnosed with HIV between 2010 and 2019 marginally housed (inc. homeless) people were diagnosed with HIV between 2010 and 2019

409

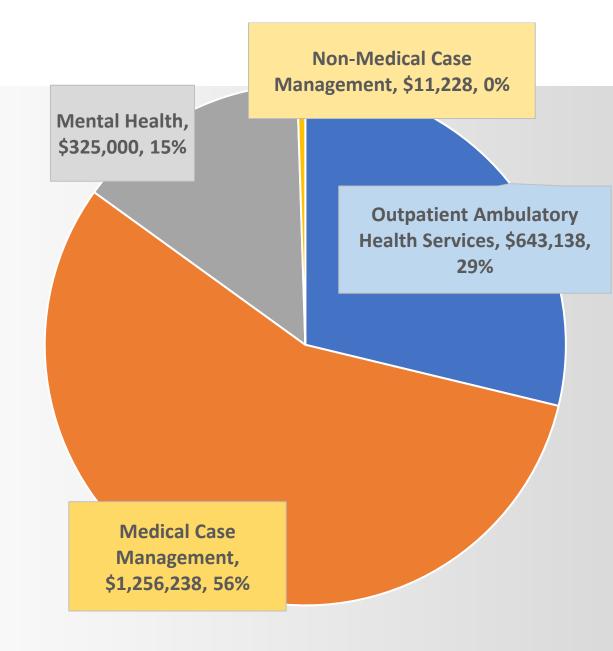
221

incarcerated people received HIV services in the 2020-21 program year 236

People who inject drugs were diagnosed with HIV between 2010 and 2019

Ending the HIV Epidemic Community Partners & Service Categories





Planning Body The San Francisco HIV Community Planning Council



The San Francisco EMA HIV Community Planning Council (SF HCPC) is a collaborative regional planning body that consists of volunteers and government appointees from throughout San Francisco, Marin, and San Mateo counties, including persons living with HIV, community members, and representatives of private and public agencies providing a wide range of HIV-related prevention and care services and programs.

The SF HCPC 's primary functions include the prioritization of services and the allocation of funding for Ryan White Funding.

The HIV Community Planning Council allows our region to examine HIV prevention and care through a unified lens, and to develop innovative, effective, and integrated responses to meet the shifting needs of the HIV epidemic.

Continuous Quality Improvement Two Populations of Focus



Black & African American

- Started in 2020
- Goal of improving from 78% to 87% viral suppression
- Achieved 84% in two years

Persons Experiencing Unstable Housing

- Started in 2022
- Goal of improving from 74% to 87% viral suppression
- Currently at 74%

HHS Evaluation Program Challenges

- Maintenance in care and medication adherence for people multiple structural challenges and trauma due to racism, sexism, homophobia and transphobia among others.
- Housing Shortage and challenge of attaining and maintaining care and optimal health outcome with people living or at-risk-for HV experiencing housing instability/homelessness.
- The high proportion of HIV clients with significant mental health issues and/or high risk substance including high levels of methamphetamine use.
- Hiring, training and retention of HIV services providers particularly community based mental health service providers.
- Maintenance in care and medication adherence for people multiple structural challenges and trauma due to racism, sexism, homophobia and transphobia among others.

HHS Evaluation Program Successes

- Implementation and expansion of services through EHE particularly for people experiencing housing instability/homelessness, transitioning out of incarceration resulting in stabilization in medical care and viral suppression.
- Increased viral load suppression in the safety net HIV population including in black/African American and people experiencing homelessness/housing instability.
- Expansion of Trans-affirming care services
- Maintenance of in-person care and expanded telehealth services throughout the COVID epidemic
- Implementation of "braided" federal funding (HRSA/HAB and CDC) for "status neutral" HIV services
- Implementation of Long-Acting Antiretroviral Therapy (LAI ART) in many DPH and Community Clinics

Appreciation for the talented and hard-working HIV Health Services staff

Beth Neary: HHS assistant director HHS and director Health Care for the Homeless Grant

John Aynsley: budget, data and contracts

Nina Davis: administrative support

Maria Lacayo, ADAP, Planning Council, data, CQI and training

Flor Roman, ARIES/HIV Care Connect, CQI, data and racial equity

Andy Sheer, EHE Coordinator

Thank you Questions & Feedback