

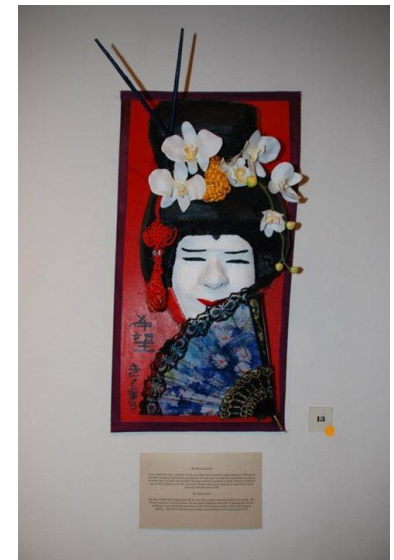


# PILOTING HEPATITIS C TREATMENT IN THE MISSION DISTRICT

MISSION NEIGHBORHOOD HEALTH CENTER  
240 SHOTWELL STREET  
SAN FRANCISCO, CA 94110

# ABOUT MISSION NEIGHBORHOOD HEALTH CENTER

- FQHC located in the Mission District of San Francisco.
- MNHC serves over 13,000 low-income, predominantly Latino individuals.
- HIV services provided through Clinica Esperanza



# ABOUT THE HCV PILOT PROGRAM

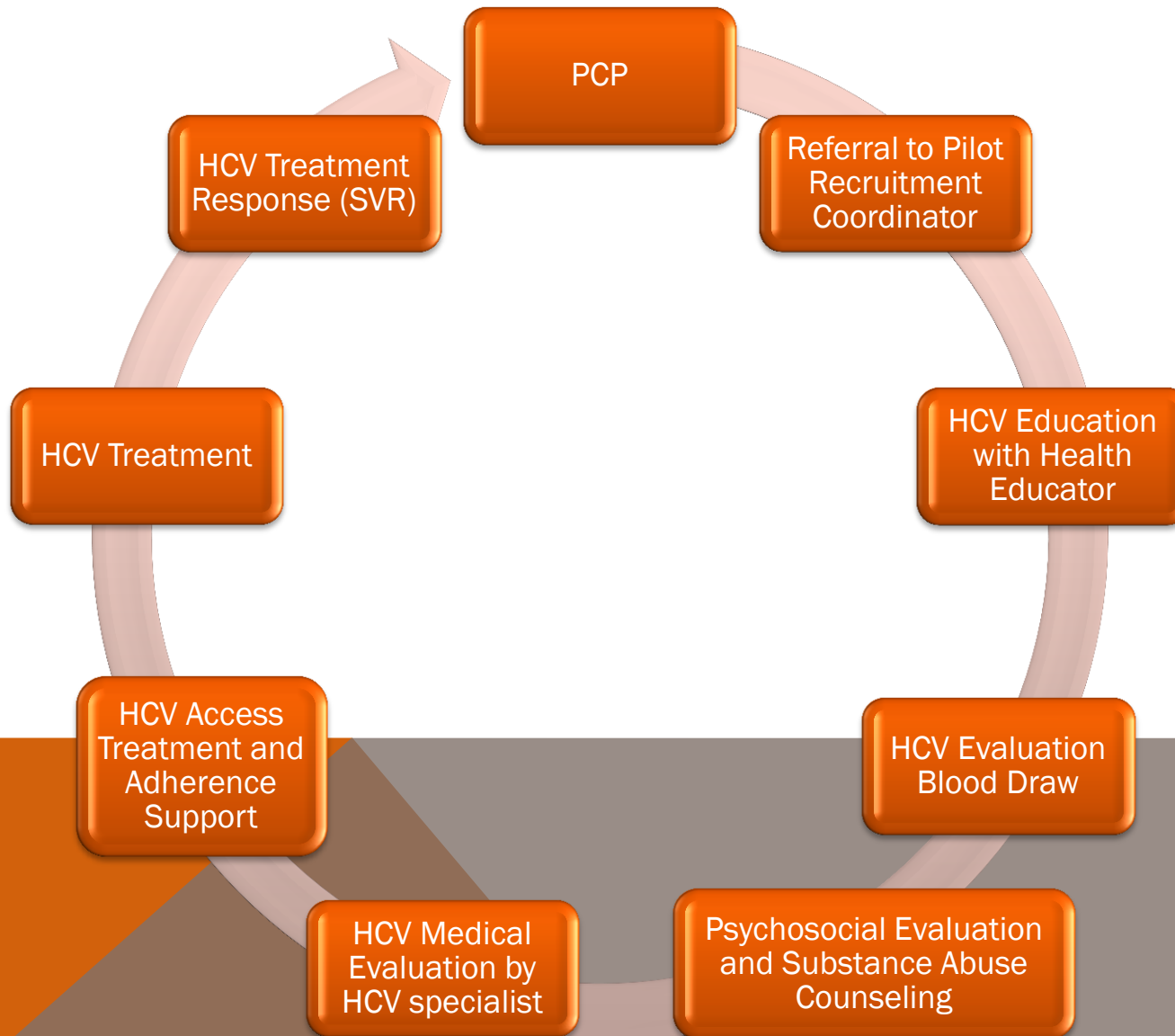
- Launched April 2014, began treating HCV with interferon-free regimens in Fall 2014
- Treatment offered for up to 30 HCV mono-infected MNHC patients (HIV co-infected patients also treated)
- Utilizes the successful multi-disciplinary model previously reserved for persons living with HIV
- Funded by Gilead grant for treatment and education support



# PILOT PARTICIPANTS

DEMOGRAPHICS	HCV Pilot (30 Total Patients)
Latino	50%
Monolingual Spanish Speakers	40%
Homeless or Marginally Housed	30%
Mental Health Disorder	67%
Substance Use Disorder	67%

# PILOT PROGRAM MODEL

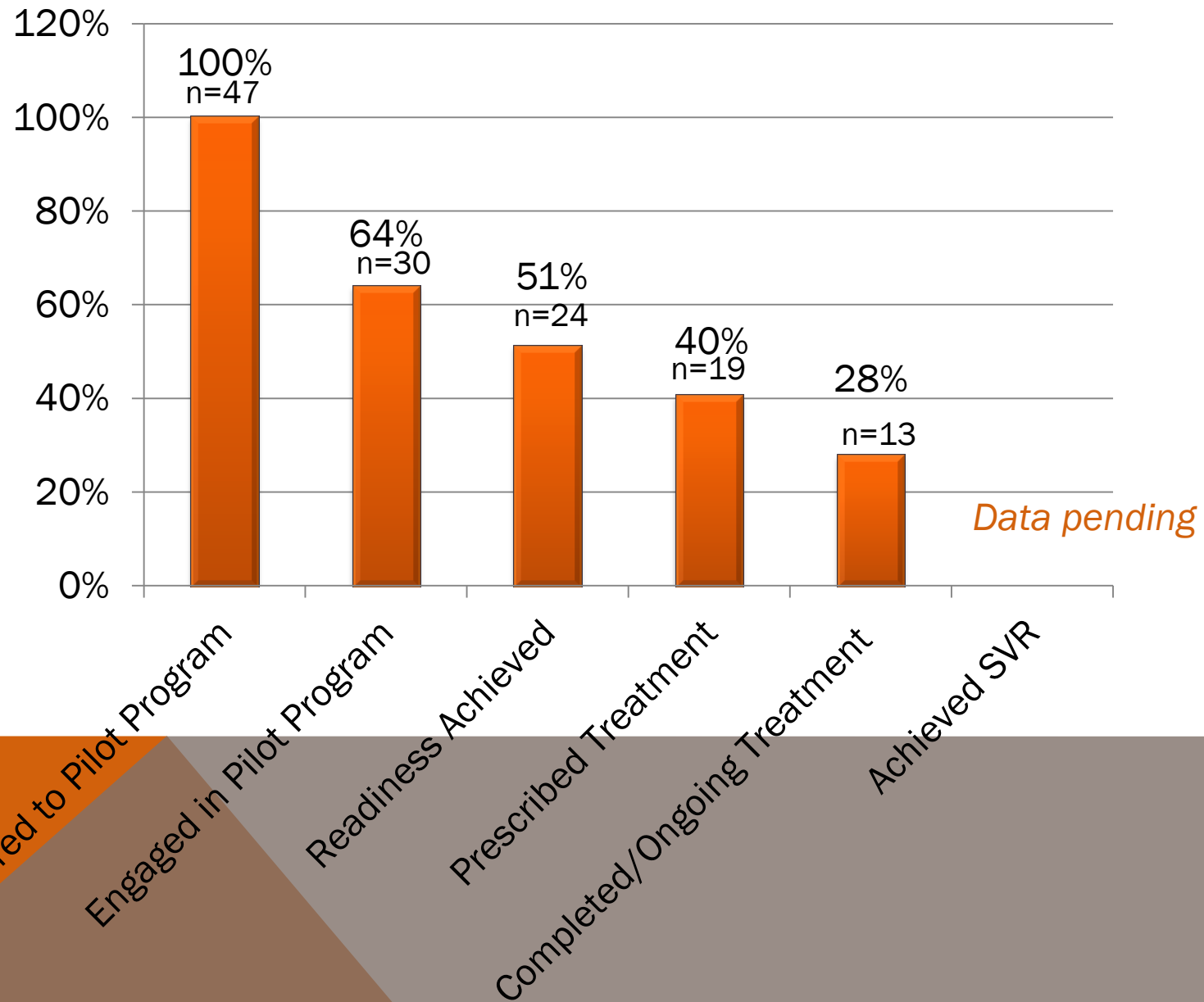


STAFFING NEEDS	
POSITION	FTE
MD (not included in funding)	0.1
Nurse Medication Adherence	0.2
Treatment Health Educator	0.1
Case Manager/Substance Abuse Counselor	0.1
Recruitment Coordinator	0.1


# INITIAL GOALS AND OUTCOMES

	Goals	Outcomes
Patients who enroll in Pilot	30 patients	30 patients
Patients who receive counseling on HCV transmission and treatment	85%	100%
Enrolled patients who receive an HCV medical evaluation to evaluate HCV treatment readiness	66%	83%
Patients who complete treatment and achieve an SVR	70%	(Results pending)

# Treatment Cascade for HCV Pilot

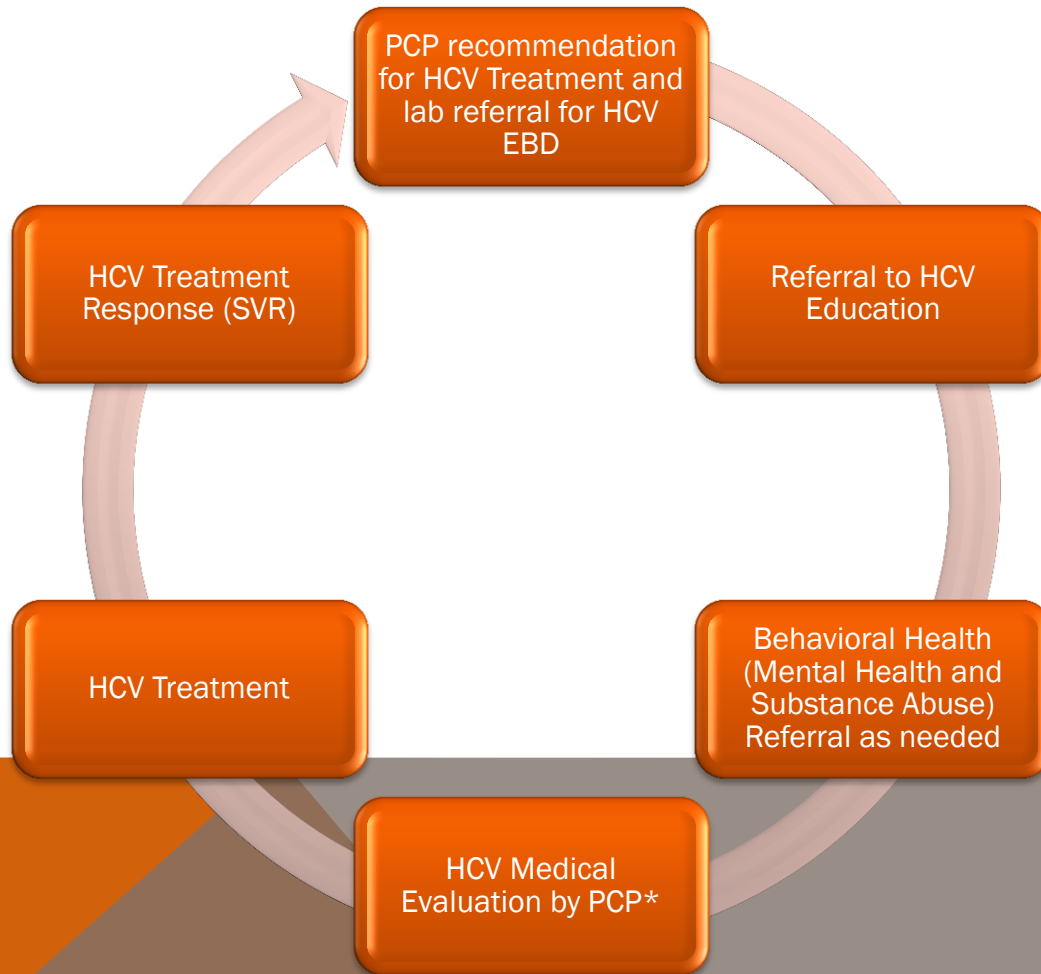


# KEY FINDINGS

- Successful HCV treatment for complex patient populations is achievable in community based clinical settings
  - A multidisciplinary model facilitates treatment readiness and improves treatment outcomes
  - Referral barriers still exist in an internal referral system
  - Accessing treatment authorization is time intensive and requires dedicated support
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# NEXT STEPS



Transition to a primary care based model of HCV treatment where patients receive treatment directly from their PCP or a provider in their same clinical site/department