

## Background/Rationale for the Viral Hepatitis Strategic Plan: Framework for Hepatitis C

Strategy	Background/Rationale
<b>Focus Area: Prevention</b>	
<b>1.1</b> Promote the use of effective risk reduction interventions and strategies.	High risk behaviors such as sharing injection equipment and having unprotected sex with multiple partners increase the risk for hepatitis C transmission. Proven-effective risk reduction interventions for persons who may not be able or ready to discontinue risky behaviors include services provided by syringe exchange programs, the Expanded Syringe Access Program (ESAP) and access to condoms through the New York State Condom (“NYSCondom”) Program can prevent transmission of hepatitis C.
<b>1.2</b> Expand capacity for hepatitis C screening statewide.	Approximately half of hepatitis C-infected persons do not know their status. Screening is the first step in identifying persons infected with hepatitis C. To increase the number of persons who are aware of their hepatitis C status, providers must have the capacity to conduct screening and/or refer individuals for screening. The availability of newer technologies, such as a rapid test, will further expand the capacity for and availability of screening statewide.
<b>1.3</b> Improve access to hepatitis C screening and referral for diagnosis.	Improving access to hepatitis C screening through such efforts as expanded days and hours of operation and promoting the availability of screening to the public will ensure early diagnosis, entry to care and the initiation of treatment, thus decreasing the morbidity and mortality of hepatitis C.
<b>1.4</b> Increase the provision of timely referrals for substance use and mental health services.	Many persons infected with hepatitis C have co-occurring substance use and mental health disorders that can impact eligibility for and adherence to hepatitis C treatment and disease progression. Timely referrals for substance use and mental health services can assist in controlling these disorders and, in turn, improve health outcomes.
<b>1.5</b> Integrate hepatitis C counseling, screening and referral services into existing service delivery systems.	Because there are overlapping routes of transmission for HIV, sexually transmitted diseases (STDs) and hepatitis C, integration of services allows for individuals’ needs to be met in one location. It prevents missed opportunities, is more convenient for consumers, builds on the existing infrastructure of programs and is more cost-effective.
<b>1.6</b> Maintain adequate infection control practices in health care and other settings.	Hepatitis C transmission can occur within health care and other settings (i.e., hospitals, nursing homes, adult homes, outpatient clinics, tattoo and piercing businesses). The use of universal/standard precautions, proper disinfection and sterilization of equipment and other instruments will prevent transmission from occurring within these settings.
<b>1.7</b> Strengthen the foundation for substance use prevention.	Substance use can increase the risk of hepatitis C transmission. Prevention of substance use through prevention, treatment and recovery programs is a component of a comprehensive approach to preventing hepatitis C transmission and reducing morbidity and

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mortality.	
<b>Focus Area: Education</b>	
<p><b>2.1</b> Increase the knowledge of hepatitis C among the general public.</p>	<p>Educating the general public regarding hepatitis C, including how it is transmitted, prevented and treated, will result in more people reducing or eliminating their risk, getting screened and diagnosed. By raising awareness about the disease, public education will also reduce the stigma and discrimination associated with hepatitis C.</p>
<p><b>2.2</b> Improve and expand the knowledge of hepatitis C among health and human service providers.</p>	<p>Knowledge of hepatitis C among health and human service providers promotes the delivery of quality care, creates awareness and changes practices and attitudes. Hepatitis C education may be provided via conferences, on-line trainings, webinars, residency training programs and provider-to-provider mentorships.</p>
<p><b>2.3</b> Ensure access to culturally-sensitive and linguistically appropriate educational messages for persons, populations and communities at-risk.</p>	<p>Culturally and linguistically appropriate educational messages and materials are required to make appropriate hepatitis C information available to New York State's diverse population. Because people access information in different ways, information must be available in a variety of formats, through traditional and new media and technology.</p>
<p><b>2.4</b> Increase the awareness, understanding of and adherence to proper infection control practices.</p>	<p>Breaches in infection control (i.e., improper use of multi-dose vials and sterilization of equipment) can result in health care-associated transmission of hepatitis C. An increase in awareness, understanding and adherence to proper infection control practices will prevent such transmission. Infection control guidelines exist from many sources. New York State requires infection control training for all licensed health care professionals working in the state.</p>
<p><b>2.5</b> Increase knowledge and promote a healthy lifestyle among persons newly diagnosed or living with hepatitis C.</p>	<p>In addition to becoming knowledgeable regarding hepatitis C, newly diagnosed persons need appropriate information to maintain a healthy lifestyle. Examples include avoiding alcohol and certain medications, proper diet and exercise. Written educational materials, support groups and peer training programs are just a few ways to help promote a healthy lifestyle and prevent liver disease progression.</p>
<b>Focus Area: Surveillance and Research</b>	
<p><b>3.1</b> Secure adequate resources for state and local surveillance activities.</p>	<p>Hepatitis C follow-up and case reporting requires state and local efforts. Adequate resources are required for surveillance in order to accurately monitor disease trends, ensure timely responses to disease transmission and implementation of effective interventions and strategies to control the spread of hepatitis C.</p>
<p><b>3.2</b> Improve capacity for complete and accurate disease reporting among laboratories and providers.</p>	<p>Electronic laboratory reporting of positive hepatitis C virus test results is mandatory in New York State. Adequate resources are necessary to establish standardized data formats and to exchange data between laboratories, providers and state and local health departments. Improvement of existing systems and expansion of additional electronic health information data will improve</p>

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<p><b>3.3</b> Use surveillance data to better inform recommendations for hepatitis C prevention programs.</p>	<p>the completeness and accuracy of case reporting.</p> <p>Surveillance data serve many purposes, including assisting with the identification of hepatitis C-infected persons and persons who may be at-risk. Prevention interventions specific to persons, populations and communities can be developed, implemented and evaluated. Aggregate data inform resource allocation and planning for care, treatment and prevention.</p>
<p><b>3.4</b> Improve the epidemiologic investigation and response capacity to community and health care-associated outbreaks.</p>	<p>Hepatitis C transmission occurs within communities and health care settings. Improving the epidemiologic investigation and response capacity for community and health care-associated outbreaks will prevent further spread of the virus.</p>
<p><b>3.5</b> Develop and evaluate evidence-based interventions for hepatitis C prevention.</p>	<p>Evidence-based interventions that demonstrate efficacy in reducing hepatitis C incidence or risk behaviors advance the effectiveness of prevention interventions.</p>
<p><b>3.6</b> Conduct hepatitis C-related research to advance prevention, care and treatment.</p>	<p>Hepatitis C-related research is necessary to inform policy and program development for an effective response to the disease by further advancing hepatitis C prevention, care and treatment.</p>
<p><b>Focus Area: Medical Care and Treatment</b></p>	
<p><b>4.1</b> Ensure provider access to current guidelines, regulations and recommendations for hepatitis C diagnosis, treatment and prevention.</p>	<p>Hepatitis C guidelines, regulations and recommendations help ensure appropriate quality of prevention, care and treatment. This information is available from many sources. Various approaches can be used to provide such information.</p>
<p><b>4.2</b> Establish a referral network for hepatitis C diagnosis, care and treatment.</p>	<p>Timely access to hepatitis C diagnosis, care and treatment can be supported by publicizing locations where hepatitis C care, treatment and other related services can be accessed in communities statewide. Referral resources can be identified through on-line directories for easy access.</p>
<p><b>4.3</b> Assure timely access to hepatitis C diagnosis, care and treatment.</p>	<p>Early entry to hepatitis C care and initiation of treatment results in better outcomes and a decrease in the morbidity and mortality associated with chronic liver disease.</p>
<p><b>4.4</b> Integrate hepatitis C care, treatment and supportive services into primary care settings.</p>	<p>The integration of hepatitis C care, treatment and supportive services into primary care settings maximizes access, improves coordination of comprehensive care and reduces missed opportunities. Providing care at locations where individuals access care for other diseases and conditions allows them to have one “medical home”.</p>
<p><b>4.5</b> Ensure timely access to substance use and mental health services.</p>	<p>Many persons infected with hepatitis C have co-occurring substance use and mental health disorders that can impact eligibility for and adherence to hepatitis C treatment and disease progression. Timely referrals for substance use and mental health services can assist in controlling these disorders and, in turn, improve health outcomes.</p>
<p><b>4.6</b> Address the complex needs associated with hepatitis C through coordination of care.</p>	<p>Navigating the health care system can be challenging, especially for persons living with hepatitis C. Often, a multi-disciplinary team of providers is involved in the care, treatment and support of persons with hepatitis C. Care</p>

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	coordination assists patients and their families to receive efficient and effective health care.
<p><b>4.7</b> Establish programs to support hepatitis C care and treatment for uninsured and underinsured persons.</p>	<p>A large number of persons, including persons living with hepatitis C, are uninsured or underinsured. Programs targeting the needs of these persons ensure access to essential hepatitis C prevention, care and treatment-related services.</p>
<p><b>Focus Area: Policy and Planning</b></p>	
<p><b>5.1</b> Maintain an adequate statutory and regulatory environment for hepatitis C prevention.</p>	<p>Federal and state laws and regulations play an important role in creating an environment that provides optimal protection from the transmission and/or acquisition of hepatitis C. Federal and state laws and regulations set forth standards and requirements for proper patient care and prevention of health care-associated infections. New York State laws and regulations include provisions for proven-effective community-based prevention interventions.</p>
<p><b>5.2</b> Base policy development and decisions on credible information.</p>	<p>Hepatitis C research, guidelines and data are constantly evolving. Current and accurate information is used for policy decisions and program development.</p>
<p><b>5.3</b> Ensure an inclusive approach to policy development and program planning.</p>	<p>Input from a variety of individuals, agencies and organizations is necessary for development of a comprehensive public health approach to hepatitis C prevention, care and treatment.</p>
<p><b>5.4</b> Provide policy makers with information on the impact of challenges and unmet needs related to hepatitis C.</p>	<p>Hepatitis C-related policies should be based upon an understanding of the challenges and unmet needs associated with hepatitis C.</p>
<p><b>5.5</b> Assure the capacity of statewide systems to support hepatitis C-related goals.</p>	<p>Substance use and mental illness are co-morbid conditions affecting many persons, including some persons living with hepatitis C in New York State. Adequate capacity of systems statewide to provide care, treatment and other supportive services to persons living with hepatitis C is required for a comprehensive statewide program.</p>
<p><b>5.6</b> Reduce hepatitis C-related stigma, discrimination, health disparities and cultural barriers.</p>	<p>Hepatitis C-related stigma negatively impacts the quality of life for persons living with the disease. Negative consequences include reduced self-esteem, diminished mental health, social isolation and fear of disclosing their hepatitis C status. Stigma can also contribute to the hesitancy of some medical providers to care for and treat persons living with hepatitis C.</p>