

SK HIV Collaborative Work Plan 2017-2020

The Joint United Nations Programme on HIV/AIDS (UNAIDS) has set a global goal to end the AIDS epidemic as a public health threat by 2030. To monitor progress, UNAIDS established "90-90-90" treatment targets for 2020.

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Optimize the HIV Care Environment	Goal: 90% of people living with HIV are diagnosed Increase HIV Testing Coverage and Linkage to Care	Goal: 90% of all those who are diagnosed with HIV are on treatment Increase HIV Treatment Coverage	Goal: 90% of all those on treatment have a suppressed viral load Increase Retention in Care, Treatment Adherence and Viral Suppression	Improve HIV Surveillance and Program Monitoring & Evaluation
 Address barriers to HIV care Make it easier to receive treatment Address barriers to accessing care for people living in northern and rural locations Support transportation options Consider impacts of inadequate housing and poverty Coordinate services with Mental Health & Addictions Use technology to offer remote HIV care 	Promote the provincial HIV routine testing policy making HIV testing a part of regular and ongoing medical care Offer testing in more locations, including emergency rooms and acute care settings	Test and monitor patients for HIV drug resistance before starting them on medication Create and distribute testing instructions for primary care providers Obtain provincial data on drug resistance to inform and monitor HIV treatment	Monitor if patients are staying connected to care Care providers to review patient files every year Establish milestones for care and triggers for action that support collaboration and information exchange between public health and clinicians	Improve the provincial HIV surveillance system • Include standard collection of data on pregnant women living with HIV and babies born to HIV positive women
Reduce stigma and discrimination Provide ongoing public education Create public awareness campaigns that are relevant to the individuals at risk of getting HIV	Increase HIV Point of Care Testing (POCT) (test results available instantly) Use at more locations Explore self-testing and home-based POCT when it becomes available in Canada	Offer HIV medication soon after a person is diagnosed • Provide training and support to pharmacists and expand engagement of rural/northern pharmacists • Provide HIV education, tools, and mentorship to primary care providers to support timely access to treatment	Re-connect patients who have lost their connection to care • Ensure follow up on missed clinic appointments • Ensure follow up with patients who have lost contact with their care providers over time	 Share HIV data Continue to produce the HIV/AIDS Quarterly and Annual Reports Continue to produce the Prevention & Risk Reduction Annual Report Develop an interactive database for HIV and HCV programs, projects and interventions
 Ensure patient-centered care Create and share resources for patient self-care Educate health care providers about traditional Indigenous medicines for HIV care 	Explore testing options outside of health care settings to reach more people	Monitor how HIV medication is prescribed Provide ongoing education to primary care providers and pharmacists Create a medication checklist for pharmacists Create standard instructions for ordering follow-up HIV tests and bloodwork	Expand the electronic medical record data gathering system Use self-reported adherence, and pharmacy refill data to monitor retention in treatment	Work with First Nations and Inuit Health Branch and Northern Inter-Tribal Health Authority to explore community-based research with First Nations/Indigenous communities Identify research priorities
 Increase community engagement Work closely with First Nations communities and Metis people and organizations Increase community readiness to address HIV Support diverse community members (Elders, HIV+, LGBTTQ, youth) as leaders and educators 	Develop a monitoring system to track the percentage of the population being tested and the percentage of positive HIV tests	Develop a standard lab requisition for ongoing HIV care Offer enhanced education to improve skills of those who draw blood	Create processes to strengthen patient retention in care and viral suppression Create a standard process for clinical care and triggers for action (clinical and public health guidelines) Create a standard process to ensure that	Standardize data collection and reporting across the province Promote the use of standard Electronic Medical Records Promote a clinical management tool
Support healthcare providers to deliver evidence-based care Offer mentorship, education and resources Establish www.skhiv.ca as the online source for current HIV/AIDS information and resources	 Connect patients to HIV care soon after diagnosis Formalize and strengthen peer supports, education and networks Include peers living with HIV in the care team working with newly diagnosed patients Use case managers and patient navigators to ensure patients have transportation to attend their appointments 	Explore options for HIV medication coverage for all patients living with HIV • Ensure that cost of HIV medication co-pay is not a barrier to treatment	 patients who move have been referred and are linked to services Use the eHealth portal to support patient care Link patients to financial, social, emotional and spiritual supports 	Expand data collection to enhance program evaluation and monitoring Conduct a cost savings analysis Review HIV targeted investments Establish program indicators to inform decision making and monitor impact
Offer better services by using multi-disciplinary teams Increase co-location of services Increase use of mobile and outreach models of care in rural and remote areas of the province Expand prevention and risk reduction (harm reduction) and Take Home Naloxone programs Explore options to increase access to harm reduction supports and supplies for injecting drugs, safer sex and opioid overdose prevention Expand the Take Home Naloxone program	Promote Canadian Pre-exposure Prophylaxis (PrEP) guidelines. PrEP is HIV medication taken by an HIV- negative person at risk of HIV infection to reduce their risk of becoming infected • Explore options and address barriers to accessing PrEP for those who test negative but are at ongoing risk			