TREATMENT FOR HIV: THE INTERSECTION BETWEEN POLICY AND DATA IN NSW

HEATHER-MARIE SCHMIDT1, MARLENE VELECKY1, BARBARA TELFER2, CHRISTINE SELVEY2, JO HOLDEN1, MELANIE MIDDELTON2, VICKI BOWDEN2
1 CENTRE FOR POPULATION HEALTH, NSW MINISTRY OF HEALTH & 2 HEALTH PROTECTION NSW, SYDNEY, AUSTRALIA

SETTING TREATMENT TARGETS
The NSW HIV Strategy 2012-2015: A New Era committed NSW to reinvigorating efforts to increase to 90% the number of people living with HIV on treatment. Consistent with coalition theory on change, leadership provided through the NSW partnership facilitated an integrated and multi-strategic approach spanning the continuum from system reform to promotion campaigns.

STRENGTHENING THE BASE FOR CHANGE
ENGAGING WITH CLINICIANS:
1. HIV Support Program (HSP)
The HSP is a key initiative established to provide expert support to primary care clinicians at the time of new HIV diagnoses. Expected elements in delivery of care were established. These, the 5 Key Support Services, included:
• effective clinical management
• HIV prevention counselling
• psychosocial support
• contact tracing
• specialist and community service linkages
2. Resources to support clinicians
A range of resources were developed to support clinical management and conversations with patients
3. HIV S100 Prescriber Forums
Regular forums held by the NSW Chief Health Officer provided opportunity to discuss the evidence for treatment.

SUPPORTING PEOPLE WITH HIV
System redesign occurred to resolve barriers to treatment access:
• providing support for treatment costs
• making public pharmacies easier to access
• working with other jurisdictions and the Commonwealth government on:
  • removal of the CD4 count restriction on accessing subsidised treatment
  • broadened treatment dispensing to community pharmacies.

OUTCOMES AND BENEFITS
Treatment coverage in NSW has increased from an estimated 54-70% in 2012 to over 90% in June 2015 for people living with HIV and attending public sexual health clinics.

Among the cohort of 698 NSW residents notified with newly diagnosed HIV infection from 1 January 2013 to 31 December 2014, 447 (64%) were reported to have commenced ART within six months of diagnosis.

In addition, 49% of the 2013 new diagnoses cohort was on ART within three months of diagnosis, compared with 61% of 2014 new diagnoses cohort. It would appear that early commencement of ART is increasing.