NACCHO’s Hepatitis C Public Health Detailing Kit is a collection of tools and resources to support local health departments in implementing public health detailing as a strategy to increase healthcare provider awareness and uptake of effective practices for HCV screening, diagnosis, and linkage to care and treatment. This User’s Guide for theDetailing Kit contains the following sections:

1. Overview of Public Health Detailing
2. Key Messages for Successful HCV Detailing
3. Detailing Kit Components and Instructions for Use

Overview of Public Health Detailing

Public health detailing, also referred to as academic detailing, is a method of reaching healthcare providers to deliver key messages and essential information on treating and preventing diseases and conditions impacting local communities. Detailing consists of brief scheduled or unscheduled visits to healthcare providers. During these visits, detailing staff meet with providers and office staff to deliver brief educational sessions on a topic and share informational resources and tools to support the uptake of practices and services discussed.

Detailing was adapted from the pharmaceutical industry, where it has been used as a marketing technique to influence provider practices through one-on-one visits with physicians. Based on its success impacting provider practices, detailing has been adapted by health departments and academic institutions as a strategy for educating local providers and their office staff, with the goal of increasing provider capacity to meet patient and community needs through the delivery of necessary clinical and preventive services.

Detailing can be used to inform on different diseases, interventions, or public health campaigns. Topics and messages can range from disease-specific testing and treatment education (e.g., HCV screening, HIV testing) to prevention and risk reduction campaigns (e.g., pre-exposure prophylaxis for HIV prevention, smoking cessation). Ensuring that information delivered during detailing visits is relevant to local providers is also an important aspect of detailing, and can be achieved by tailoring content with local data, resources, and available services.

Regardless of its subject, detailing features several common components:

- **Provider Identification:** Provider sites can be selected for detailing visits through a number of approaches, including using available data to target providers serving, or geographically located to serve, at-risk populations. Established health department referral networks and directories can also be used as sources of providers.
Overview of Public Health Detailing

- **Presentation on Topic:** Brief presentations delivered during detailing visits should provide an overview of the detailing topic in a slideshow format. Presentations should be concise, engaging, and encouraging of action. Where relevant, local information and data about the topic of focus (e.g., local surveillance data) should be included.

- **Kits/Leave-behinds:** Most detailing efforts include “kits” with leave-behind materials for providers and patients, and public health campaign materials. All kit materials should be accurate, up-to-date, and include locally-developed resources on the topic, if available.

- **Training:** Detailing can be conducted by health department staff, academic or clinical partners, or contracted staff. Whoever conducts detailing should have strong communication skills, and possess experience providing public health education and interacting with healthcare providers. Detailing staff should be trained in advance of detailing visits on the provider education materials and resources; the interventions, campaigns, or diseases being addressed; and the characteristics and needs of the patients and communities being served by the provider sites.

- **Provider Visits:** Detailing can be conducted in single or multiple visits. Often, single visits can be useful for delivering brief, disease-specific education and materials. If necessary and capacity allows, follow-up visits can be conducted to reinforce messages and provide additional technical assistance. Visits can be scheduled or unscheduled. Some health departments have found that providers are receptive to scheduled visits, while others have found that providers are resistant to scheduling visits, and brief unscheduled visits are more effective. Holding unscheduled introductory visits with office staff and nurses can also open an opportunity for a more comprehensive, scheduled follow-up visit with a provider. Additionally, including an evaluation component to visits can be helpful to demonstrate the impact of detailing visits by measuring changes in provider practice, and to continuously improve the detailing program.

Where public health detailing has been conducted, healthcare providers and office staff have been receptive to detailing efforts and education and materials provided to them. Furthermore, providers reported greater adherence to clinical practice guidelines and wide distribution of patient-directed educational resources following detailing visits.¹

The following resources provide additional information on public health detailing and examples of where and how it is being conducted:

- **Promoting Expedited Partner Therapy via Academic Detailing** (City of Milwaukee Health Department)
- **Public Health Detailing: Building Partnerships to Improve Health Outcomes in a Rural State** (New Hampshire Department of Health and Human Services)

Overview of Public Health Detailing

- Developing and Managing an Academic Detailing Program for Tobacco Cessation (CDC) – This document also provides useful information on the background and implementation of detailing for public health education.
- Public Health Detailing Action Kits (New York City Department of Health and Mental Hygiene)
- Pennsylvania’s Academic Detailing Program
- National Resource Center for Academic Detailing
- Academic Detailing: Frequently Asked Questions (CDC) – A number of useful references are included.

Key Messages for Successful Hepatitis C Detailing

Public health detailing can be an effective strategy for educating local healthcare providers on HCV, including developments in curative therapies for HCV, recommended practices for screening and treatment, and information on local populations impacted by HCV who should be screened. Detailing is also an opportunity to deliver provider- and patient-focused educational materials and to disseminate information on local programs and resources for those at-risk for or living with HCV. Below are several key messages on these topics that can contribute to successful HCV detailing efforts.

- **Emphasize that new, curative, and well-tolerated treatment regimens are available.** Many providers, as well as people living with HCV, are not aware of the availability of new, curative treatment regimens for HCV. In some cases, providers may also be resistant to screening for HCV based on past experience with less effective interferon-based treatment regimens that had significant side effects. Detailing is a strategy that can be used to address this resistance and increase provider and patient awareness of the curative, better-tolerated, and shorter-duration treatment regimens now available.

- **Strengthen provider understanding of the necessity of both antibody screening and providing or linking to HCV RNA confirmatory testing.** Detailing visits can be used to emphasize to providers and their office staff that testing for HCV is a two-step process. Following a reactive antibody screening test, patients must be provided an RNA confirmatory test to determine if they have an active HCV infection. A confirmed diagnosis is necessary to link patients to care for treatment, but despite the necessity of confirmatory testing, it is often a missed step that leaves patients vulnerable to being lost to care.

- **Discuss the importance of drug user health and share information on harm reduction strategies.** Interacting with people who inject drugs can be a challenge and area of discomfort for some providers. Detailing visits can be an opportunity to discuss the impact of HCV on those who inject drugs, and increase provider knowledge and comfort around discussing injection drug use and harm reduction practices. Visits can be used to inform providers of locally-available harm reduction services, such as syringe service programs, that they may not be aware of. During a visit, detailing staff can underline the importance of harm reduction strategies for reducing the likelihood of HCV transmission,
especially in the time before patients receive curative treatment, as well as for reducing HCV infection risk for those testing HCV-negative.

- **Recognize that treatment barriers exist for many people affected by HCV.** Challenges to accessing treatment can include financial barriers, treatment restrictions, and being un- or underinsured, among others. Providers may be aware of some of these challenges, and may be frustrated by limitations on their ability to treat HCV-positive patients. However, a detailing visit can be used to inform providers that progress is being made to address many of these barriers, and to provide information on those resources that are currently available, including patient assistance programs.

- **Address the importance of culturally and linguistically competent care.** Detailing provides an opportunity for health departments to educate providers and office staff on the importance of providing culturally and linguistically competent care. Some populations severely impacted by HCV may have limited experience or trust of healthcare systems, and detailing visits can be used to share effective practices for engaging these individuals, including how to openly discuss and assess risk factors, and identify and address other co-occurring health issues.

### Detailing Kit Components and Instructions for Use

NACCHO’s Hepatitis C Public Health Detailing Kit was developed to support local health departments interested in implementing public health detailing as a healthcare provider education strategy. The kit contains tools local health departments can use to conduct healthcare provider education activities, and leave-behind materials including healthcare provider tools and resources, and patient education and support materials.

### Healthcare Provider Education

These tools can be used by local health departments to educate healthcare providers on the epidemiologic profile of HCV nationally and locally, testing and treatment recommendations and guidelines, and what they can do to increase HCV testing, diagnosis, and linkage to care for treatment for their patients.

**Presentation: Hepatitis C Overview for Healthcare Providers**

This PowerPoint slide set, which can be delivered in approximately 20-25 minutes in a provider’s office, is designed to allow for customization by local health departments. Several slides include placeholders with suggestions for the addition of local data and other jurisdiction-specific information. Additionally, a slide set without formatting is provided to allow for further customization, such as placing the presentation into the health department’s existing slide template.
Healthcare Provider Education

Topics addressed in the presentation include:

- National and local or state HCV incidence, prevalence, and trends;
- Populations at-risk for HCV, including baby boomers, people who inject drugs, and people living with HIV;
- HCV testing guidelines and recommendations; and
- HCV care and treatment information.

One-Pager: Hepatitis C Overview for Healthcare Providers

A one-page (back and front) document that provides a brief overview of the impact of HCV in the United States, curative treatment regimens, and key actions healthcare providers can take to increase HCV screening and engagement in care and treatment. This document can be shared with providers, along with the Dear Colleague letter described below, as a way of increasing awareness of HCV as an important public health and healthcare issue, the benefits provided by newer, curative treatment regimens, and the importance of screening patients in accordance with testing recommendations.

The document can also be included in the leave-behind materials assembled for public health detailing visits, and can be used for delivering critical information to providers who may not have time to meet with detailing staff during a visit.

Dear Colleague Letter

A one-page (back and front) customizable letter local health departments can send to providers in their jurisdiction to encourage increased uptake of HCV testing, care, treatment, and preventive services, and provide information on health department and other local resources to support the provision of these services.

The Dear Colleague letter is not a core component of public health detailing, however it is offered as an additional tool local health departments can use to reach healthcare providers with important information about HCV. The letter can also be used to introduce providers to the local health department’s HCV detailing efforts ahead of the local health department reaching out to schedule visits.

Healthcare Provider Tools and Resources

These materials are directed to healthcare providers, and address screening, counseling, harm reduction, and treatment. They can be included in a health department’s packet of leave-behind materials given to providers for their review and reference.

CDC Hepatitis C Testing Algorithm

This diagram provides a useful visualization of CDC’s recommended testing sequence for HCV. The diagram clearly shows the need for an HCV RNA test following a reactive HCV antibody test to confirm current HCV infection.
CDC Testing Results Interpretation Guide
This document provides information about the interpretation of HCV testing outcomes and further clinical actions for each potential test outcome.

Hepatitis C Clinical Support Tools
Developed by the New York City Department of Health and Mental Hygiene, this document provides quality improvement and electronic health record tips to increase HCV testing and improve care.

Hepatitis C Risk Reduction Counseling Best Practices
Developed by the Harm Reduction Coalition, this document contains detailed guidance and best practices for providing pre- and post-HCV test counseling, and for developing risk reduction plans for frequently encountered HCV risk behaviors. It also provides vaccination guidance for hepatitis A and B, and a comprehensive list of additional resources and handouts for providers and patients.

HCV Guidance: Recommendations for Testing, Managing, and Treating Hepatitis C (External Link)
Developed in partnership between the American Association for the Study of Liver Diseases and the Infectious Diseases Society of America, this resource provides comprehensive guidance for managing and treating HCV, as well as for testing for infection (based on CDC testing guidelines). Guidance for HCV treatment in adults can change periodically with the advent of new therapies and other developments, so while the Guidance can be printed out, it is recommended that the website (www.hcvguidelines.org) be used for the latest recommendations.

Treatment and Medication Fact Sheets
Developed by the Treatment Action Group, this collection of HCV fact sheets covers adherence, diagnostics, and treatment using the available curative medications (updated through August 2016). Fact sheets are provided in both English and Spanish.

Patient Assistance and Cost-sharing Assistance Programs
Compiled by NASTAD, this document provides a comprehensive listing of the patient assistance and cost-sharing assistance programs for HCV as well as hepatitis B virus (as of July 2016). This document can be consulted by providers and office staff providing navigation to assist patients in accessing financial support for HCV treatment.
These resources are directed toward patients, and can be included in a health department’s packet of leave-behind materials given to providers to make available to their patients. Additionally, they include information and data that can be incorporated into health department-developed leave-behind materials. Some CDC-developed materials are also available in Spanish, and can be accessed online at [www.cdc.gov/hepatitis/hcv/patienteduhtm](http://www.cdc.gov/hepatitis/hcv/patienteduhtm).

**Hepatitis C General Information**

Provides an overview of what hepatitis is, how HCV is spread, what symptoms of HCV are and when they occur, who should be screened, screening and treatment protocols, and prevention approaches.

**Hepatitis C Information on Testing & Diagnosis**

Provides more detailed information on screening for HCV, including who should be screened, the difference between antibody and RNA tests, and the need for RNA testing if an antibody test is reactive.

**Hepatitis C: Why Baby Boomers Should Get Tested**

Provides information on why baby boomers should be tested, why they may have higher rates of HCV, and what they should know about screening and treatment.

**Hepatitis C & Injection Drug Use**

Provides information on HCV and its symptoms, how HCV is spread through injection drug use, screening and treatment, reinfection risks, and harm reduction strategies.

**Living Well with Hepatitis C and HIV: What You Need to Know about Hepatitis C Testing and Prevention**

Provides information on HCV testing and prevention strategies for individuals living with HIV. Developed by Project Inform.

**Sexual Transmission of Hepatitis C: A Guide for HIV-positive Gay Men**

Discusses sexual transmission of HCV and protection strategies to prevention infection. Developed by Project Inform.

**A Guide to Understanding Hepatitis C**

Discusses HCV risks, transmission, diagnosis, and treatment, updated to 2017 and with a glossary of key terms. Developed by the Hepatitis C Support Project.
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