

The Bree Collaborative Hepatitis C Charter and Roster

Problem Statement

Hepatitis C virus (HCV) is the most common chronic blood-borne pathogen in the US and a leading cause of complications from chronic liver disease.¹ In 2018, an estimated 59,100 Washingtonians were living with HCV, prompting Governor Inslee to issue Directive of the Governor 18-13: “Eliminating Hepatitis C in Washington in 2030 through combined public health efforts and a new medication purchasing approach.”²

Aim

To increase evidence-informed screening, monitoring, and treatment for Hepatitis C virus to reduce the burden of HCV in Washington state.

Purpose

To propose evidence-informed recommendations to the full Bree Collaborative on achieving HCV elimination including:

- Monitoring HCV prevalence in Washington state using existing metrics or through new data strategies
- Access to preventative and screening services for HCV
- Building clinical capacity to diagnose and treat HCV
- Improving access to HCV treatment and intervention services
- Increasing HCV awareness, education, and reducing stigma

Duties & Functions

The workgroup will:

- Research evidence-informed and expert-opinion informed guidelines and best practices for screening, monitoring, and treating HCV (emerging and established).
- Identify current barriers and future opportunities for implementing interventions.
- Consult relevant professional associations and other stakeholder organizations and subject matter experts for feedback, as appropriate.
- Meet for approximately nine months, as needed.
- Provide updates at Bree Collaborative meetings.
- Post draft report(s) on the Bree Collaborative website for public comment prior to sending report to the Bree Collaborative for approval and adoption.
- Present findings and recommendations in a report.
- Recommend data-driven and practical implementation strategies including metrics or a process for measurement.
- Create and oversee subsequent subgroups to help carry out the work, as needed.
- Revise this charter as necessary based on scope of work.

¹ US Preventative Services Task Force (2020). Screening for Hepatitis C Virus Infection in Adolescents and Adults. JAMA. doi:10.1001/jama.2020.1123

² HEP C Free Washington (2019). Plan to Eliminate Hepatitis C in Washington State by 2030. <http://www.doh.wa.gov/HepCFreeWA>

Structure

The workgroup will consist of individuals confirmed by Bree Collaborative members or appointed by the chair of the Bree Collaborative. The Bree Collaborative director and program coordinator will staff and provide management and support services for the workgroup.

Less than the full workgroup may convene to: gather and discuss information; conduct research; analyze relevant issues and facts; or draft recommendations for the deliberation of the full workgroup. A quorum shall be a simple majority and shall be required to accept and approve recommendations to send to the Bree Collaborative.

Meetings

The workgroup will hold meetings as necessary. Bree Collaborative staff will conduct meetings, arrange for the recording of each meeting, and distribute meeting agendas and other materials prior to each meeting. Additional workgroup members may be added at the discretion of the Bree Collaborative director.

Name	Title	Organization