

**2017 Comprehensive Plan for HIV Prevention and Care Services  
Coordination of Effort Workgroup**

9:00 a.m., Friday, May 13, 2016  
Meeting Location: 2223 W. Loop South, Room #240

**AGENDA**

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**Goal of Today's Meeting:**

Complete Logic Model 1 by finishing selection of the 2017 Comprehensive Plan  
Coordination of Effort Strategy Solutions and selecting Benchmarks

- |      |  |   |
|------|--|---|
| I.   | Call to Order  | David Benson and<br>Gloria Sierra, Co-Chairs        |
|      | A. Welcome   |   |
|      | B. Moment of Reflection                              |   |
|      | C. Adoption of the Agenda                            |   |
|      | D. Approval of the Minutes                           |   |
| II.  | Finish Selection of COE Solutions for 2017 Plan      | Amber Harbolt, Health<br>Planner, Office of Support |
| III. | Select COE Benchmarks for 2017 Plan                  |   |
| IV.  | End New Diagnoses Houston Intersecting Issues Update | Venita Ray  |
| V.   | Next Steps   | David Benson and<br>Gloria Sierra, Co-Chairs        |
|      | A. Set meeting schedule—6/10 or 6/24                 |   |
|      | B. What to Expect at the Next Meeting                |   |
|      | 1. Begin Logic Model 2 (Foci & Activities)           |   |
| VI.  | Announcements  |   |
| VII. | Adjourn  |   |

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*The 2017 Comprehensive Plan for HIV Prevention and Care Services is a collaborative project of the*

♦ Houston Health Department      ♦ HIV Prevention Community Planning Group      ♦ Ryan White Planning Council  
♦ Harris County Public Health & Environmental Services      ♦ Ryan White Grant Administration      ♦ The Resource Group

♦ Meetings hosted by the Ryan White Planning Council 2223 W. Loop South, #240; Houston, TX 77027 ♦  
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## 2017 Comprehensive Plan for HIV Prevention and Care Services

### COORDINATION OF EFFORT WORKGROUP

9:00 a.m., Friday, April 22, 2016

Meeting Location: 2223 West Loop South, Room 416; Houston, TX 77027

#### Minutes

| MEMBERS PRESENT         | MEMBERS ABSENT            | OTHERS PRESENT                      |
|-------------------------|---------------------------|-------------------------------------|
| Gloria Sierra, co-chair | Alex Moses                | Venita Ray, Legacy Community Health |
| Amana Turner            | Cecilia Ross              | Amber Harbolt, Office of Support    |
| Andrew Motz             | Curtis Bellard            | Diane Beck, Office of Support       |
| Angela F. Hawkins       | David Benson, excused     |                                     |
| Ardry Skeet Boyle       | Michael Kennedy           |                                     |
| Becky Chen              | Nancy Miertschin, excused |                                     |
| C. Bruce Turner         |                           |                                     |
| Denis Kelly             |                           |                                     |
| Ella Collins-Nelson     |                           |                                     |
| Isis Torrente           |                           |                                     |
| Kevin Aloysius          |                           |                                     |
| Lorena Arista           |                           |                                     |
| Robert Noble            |                           |                                     |
| Rodney Mills            |                           |                                     |
| Steven Vargas           |                           |                                     |
| Tana Pradia             |                           |                                     |
| Teresa Pruitt           |                           |                                     |
| Tracy Gorden            |                           |                                     |

**Call to order:** Gloria Sierra, Co-Chair, called the meeting to order at 9:08 a.m.; she welcomed everyone and asked for a moment of reflection.

**Adoption of the Agenda: Motion #1:** *It was moved and seconded (Kelly, Pruitt) to adopt the agenda.*  
**Motion Carried.** Abstention: Mills.

**Approval of the Minutes: Motion #2:** *It was moved and seconded (Pruitt, Kelly) to approve the March 18, 2016 meeting minutes.* **Motion Carried.** Abstentions: Aloysius, Gorden, Pradia, Ray, A.Turner.

**Coordination of Effort Goals for 2017 Plan (Logic Model 1):** See attached. The workgroup chose to keep Goal 3 as written. Goal 1 was revised as follows: change Human Service to Social Service; Goal 2 was revised as follows: change HIV to HIV-related; Goal 4 was revised as follows: change Access to Care to Access to Prevention and Care; Goal 5 was revised as follows: Change Prepare for to Monitor and Respond to. **Motion #3:** *it was moved and seconded (Kelly, Pradia) to adopt the Coordination of Effort goals as revised.* **Motion carried unanimously.**

**Coordination of Effort Solutions for 2017 Plan (Logic Model 1):** See attached. The workgroup chose to keep Solution 1 as written. Solution 2 was revised to “Support technical assistance and training to current providers and extend training to potential HIV-related service providers”. Solution 3 was revised to “Increase communication of HIV-related issues through media to educate and mobilize the public and providers”. The remaining solutions will be addressed at the next meeting.

**End New Diagnosis Houston Intersecting Issues Update:** Ray explained that Legacy received a REACH grant from AIDS United to create a plan for the Houston area to end new HIV diagnosis in 5 years. It is not the same as the comprehensive plan but it does have intersecting issues which complement and inform the comprehensive plan process. She will share updates with the workgroups as the process continues.

**Next Meeting:** May 13, 2016 at 9:00 a.m.; Agenda items include finishing the solutions and start development of 2017 Comprehensive Plan benchmarks.

**Announcements:** Torrente said the Houston Positive Network’s application was approved thanks to help from Ray.

**Adjourn:** The meeting was adjourned at 11:03 a.m.

## **2017 Comprehensive Plan Coordination of Effort (COE) Goals**

*COE Workgroup Approved 4-22-16*

The goals of the 2017 Comprehensive Plan Strategy for Coordination of Effort are to:

1. Increase awareness of HIV among all Greater Houston Area health and social service providers\*
2. Increase the availability of HIV-related prevention and care services and providers\*
3. Reduce barriers to HIV prevention and care
4. Partner to address co-occurring public health problems that inhibit access to HIV prevention and care\*
5. Monitor and respond to state and national-level changes in the health care system\*

# 2017 Houston Area Comprehensive HIV Services Plan

## Logic Model 1: Goal, Solutions, and Benchmarks – COE

| <b>Solutions</b><br>{Recommended approaches to achieve the goal}  |
|---|
| <p>②</p> <ol style="list-style-type: none"><li>1. Launch proactive efforts to unify stakeholders and to engage new and non-traditional partners in achieving the HIV prevention and care mission</li><li>2. Support technical assistance and training to current HIV-related service providers and extend training to potential providers*</li><li>3. Increase communication of HIV-related issues through media to educate and mobilize the public and providers*</li></ol> <p>Continue work on Benchmarks on 5/13 at 9 a.m.</p> |

| <b>Goal</b><br>{Desired long-term result, outcome, or change}  |
|--|
| <ol style="list-style-type: none"><li>1. Increase awareness of HIV among all Greater Houston Area health and social service providers* ①</li><li>2. Increase the availability of HIV-related prevention and care services and providers*</li><li>3. Reduce barriers to HIV prevention and care</li><li>4. Partner to address co-occurring public health problems that inhibit access to HIV prevention and care*</li><li>5. Monitor and respond to state and national-level changes in the health care system*</li></ol> |

| <b>Benchmarks</b><br>{How the result will be measured} |
|--|
| <p>Work on Benchmarks on 5/13 at 9 a.m. ③</p>          |

## 2017 Comprehensive Plan Special Populations COE Solutions Selection Table

The COE Solutions selected should describe recommended approaches to achieve the 2017 COE Goals.

| 2012 COE Solutions   | Corresponding NHAS Update for 2020 Goal Steps  | Status   | 2017 Revision (if applicable) |
|--|--|--|-------------------------------|
| 1. Launch proactive efforts to unify stakeholders and to engage new and non-traditional partners in achieving the HIV prevention and care mission  | <ul style="list-style-type: none"> <li>• Step 1.A: Intensify HIV prevention efforts in the communities where HIV is most heavily concentrated</li> <li>• Step 2.A: Establish seamless systems to link people to care immediately after diagnosis, and support retention in care to achieve viral suppression that can maximize the benefits of early treatment and reduce transmission risk</li> <li>• Step 2.B: Take deliberate steps to increase the capacity of systems as well as the number and diversity of available providers of clinical care and related services for people living with HIV</li> <li>• Step 2.C: Support comprehensive, coordinated, patient-centered care for people living with HIV, including addressing HIV-related co-occurring conditions and challenges meeting basic needs, such as housing</li> <li>• Step 3.A: Reduce HIV-related disparities in communities at high risk for HIV infection</li> <li>• Step 3.B: Adopt structural approaches to reduce HIV infections and improve health outcomes in high-risk communities</li> <li>• Step 4.A: Increase the coordination of HIV programs across the Federal government and between Federal agencies and State, territorial, Tribal, and local governments</li> </ul> | <input type="checkbox"/> Keep as Written<br><input type="checkbox"/> Revise<br><input type="checkbox"/> Remove |                               |
| 2. Intensify technical assistance and training to current and potential AIDS-service organizations (ASOs) and providers  | <ul style="list-style-type: none"> <li>• Step 1.B: Expand efforts to prevent HIV infection using a combination of effective evidence-based approaches</li> <li>• Step 2.A: Establish seamless systems to link people to care immediately after diagnosis, and support retention in care to achieve viral suppression that can maximize the benefits of early treatment and reduce transmission risk</li> <li>• Step 2.B: Take deliberate steps to increase the capacity of systems as well as the number and diversity of available providers of clinical care and related services for people living with HIV</li> <li>• Step 2.C: Support comprehensive, coordinated, patient-centered care for people living with HIV, including addressing HIV-related co-occurring conditions and challenges meeting basic needs, such as housing</li> <li>• Step 4.A: Increase the coordination of HIV programs across the Federal government and between Federal agencies and State, territorial, Tribal, and local governments</li> <li>• Step 4.B: Develop improved mechanisms to monitor and report on progress toward achieving national goals</li> </ul>   | <input type="checkbox"/> Keep as Written<br><input type="checkbox"/> Revise<br><input type="checkbox"/> Remove |                               |
| 3. Maximize the use of media to (re) mobilize the public and providers around HIV  | <ul style="list-style-type: none"> <li>• Step 1.A: Intensify HIV prevention efforts in the communities where HIV is most heavily concentrated</li> <li>• Step 1.B: Expand efforts to prevent HIV infection using a combination of effective evidence-based approaches</li> <li>• Step 1.C: Educate all Americans with easily accessible, scientifically accurate information about HIV risks, prevention, and transmission</li> <li>• Step 3.C: Reduce stigma and eliminate discrimination associated with HIV status</li> </ul>   | <input type="checkbox"/> Keep as Written<br><input type="checkbox"/> Revise<br><input type="checkbox"/> Remove |                               |
| 4. Maximize the use of technology to: (a) link people at risk for or living with HIV/AIDS (PLWHA) with resources; and (b) assist providers with real-time referrals for clients to needed HIV prevention and care services | <ul style="list-style-type: none"> <li>• Step 1.A: Intensify HIV prevention efforts in the communities where HIV is most heavily concentrated</li> <li>• Step 1.C: Educate all Americans with easily accessible, scientifically accurate information about HIV risks, prevention, and transmission</li> <li>• Step 2.A: Establish seamless systems to link people to care immediately after diagnosis, and support retention in care to achieve viral suppression that can maximize the benefits of early treatment and reduce transmission risk</li> <li>• Step 2.C: Support comprehensive, coordinated, patient-centered care for people living with HIV, including addressing HIV-related co-occurring conditions and challenges meeting basic needs, such as housing</li> <li>• Step 3.B: Adopt structural approaches to reduce HIV infections and improve health outcomes in high-risk communities</li> </ul>   | <input type="checkbox"/> Keep as Written<br><input type="checkbox"/> Revise<br><input type="checkbox"/> Remove |                               |

| 2012 COE Solutions  | Corresponding NHAS Update for 2020 Goal Steps   | Status   | 2017 Revision (if applicable) |
|---|---|--|-------------------------------|
| 5. Intensify coordination of data systems within the HIV care system; between HIV prevention and care; and between AIDS-service organizations and the broader health care delivery system | <ul style="list-style-type: none"> <li>• Step 2.A: Establish seamless systems to link people to care immediately after diagnosis, and support retention in care to achieve viral suppression that can maximize the benefits of early treatment and reduce transmission risk</li> <li>• Step 4.A: Increase the coordination of HIV programs across the Federal government and between Federal agencies and State, territorial, Tribal, and local governments</li> <li>• Step 4.B: Develop improved mechanisms to monitor and report on progress toward achieving national goals</li> </ul> | <input type="checkbox"/> Keep as Written<br><input type="checkbox"/> Revise<br><input type="checkbox"/> Remove |                               |
|   |   | <input type="checkbox"/> Add   |                               |

**Important Questions:**

1. Do the solutions selected correspond with the NHAS Update for 2020 goal steps (listed on the following page)? Are any not addressed?
2. Have any issues, policies, therapies, or strategies relevant to increasing coordination of effort emerged since 2011 when the 2012 Plan was developed that are not addressed?
3. Are the solutions relevant in light of:
  - a. The 2017 Comprehensive Plan COE Goals selected in today’s meeting?
  - b. Changes in language or description (appropriate terminology)?
  - c. Current funding priorities (both within and outside the HIV prevention and care system)?
  - d. Local HIV data?
  - e. Other local, state, and national strategies for increasing coordination of effort?

**NHAS Updated for 2020 Goals and Steps**

- **GOAL 1: REDUCING NEW HIV INFECTIONS**
  - Step 1.A: Intensify HIV prevention efforts in the communities where HIV is most heavily concentrated
  - Step 1.B: Expand efforts to prevent HIV infection using a combination of effective evidence-based approaches
  - Step 1.C: Educate all Americans with easily accessible, scientifically accurate information about HIV risks, prevention, and transmission
- **GOAL 2: INCREASING ACCESS TO CARE AND IMPROVING HEALTH OUTCOMES FOR PEOPLE LIVING WITH HIV**
  - Step 2.A: Establish seamless systems to link people to care immediately after diagnosis, and support retention in care to achieve viral suppression that can maximize the benefits of early treatment and reduce transmission risk
  - Step 2.B: Take deliberate steps to increase the capacity of systems as well as the number and diversity of available providers of clinical care and related services for people living with HIV
  - Step 2.C: Support comprehensive, coordinated, patient-centered care for people living with HIV, including addressing HIV-related co-occurring conditions and challenges meeting basic needs, such as housing
- **GOAL 3: REDUCING HIV-RELATED DISPARITIES AND HEALTH INEQUITIES**
  - Step 3.A: Reduce HIV-related disparities in communities at high risk for HIV infection
  - Step 3.B: Adopt structural approaches to reduce HIV infections and improve health outcomes in high-risk communities
  - Step 3.C: Reduce stigma and eliminate discrimination associated with HIV status
- **GOAL 4: ACHIEVING A MORE COORDINATED NATIONAL RESPONSE TO THE HIV EPIDEMIC**
  - Step 4.A: Increase the coordination of HIV programs across the Federal government and between Federal agencies and State, territorial, Tribal, and local governments
  - Step 4.B: Develop improved mechanisms to monitor and report on progress toward achieving national goals

UPDATED:  
05/03/16

All meetings subject to  
change. Please call in  
advance to confirm:  
713 572-3724.

*Unless otherwise noted,  
meetings are held at:*

2223 W. Loop South,  
Suite 240  
Houston, TX 77027

# June 2016

|  | <i>Sun</i>   | <i>Mon</i>  | <i>Tue</i>   | <i>Wed</i>   | <i>Thu</i>  | <i>Fri</i> | <i>Sat</i> |
|--|--|---|--|--|---|------------|------------|
|  |  |   |  | <b>1</b>   | <b>2</b><br>12 noon<br>Steering Committee<br>Room #240<br><br>3:00 pm<br>Gaps in Care Wg<br>Rm #TBD                                     | <b>3</b>   | <b>4</b>   |
|  | <b>5</b><br>National HIV<br>Long-Term<br>Survivors<br>Awareness<br>Day | <b>6</b><br>3:00 pm<br>Prevention and Early<br>Identification Wg<br>Room #TBD       | <b>7</b>   | <b>8</b><br>National Caribbean<br>American HIV<br>Awareness Day                        | <b>9</b><br>12 noon<br>Planning Council<br>Leonel Castillo<br>Community Ctr 2101<br>South St, 77009<br><br>2:00 pm<br>Comp HIV Planning | <b>10</b>  | <b>11</b>  |
|  | <b>12</b>  | <b>13</b><br>11 am - 3 pm<br>Priority & Allocations<br>Special meeting<br>Room #240 | <b>14</b><br>CANCELLED<br>Operations<br><br>11 am - 3 pm<br>Priority & Allocations<br>Special meeting<br>Room #240 | <b>15</b><br>11 am - 3 pm<br>Priority & Allocations<br>Special meeting<br>Room #240    | <b>16</b><br>CANCELLED<br>Quality Improvement   | <b>17</b>  | <b>18</b>  |
|  | <b>19</b>  | <b>20</b>   | <b>21</b><br>12:00 pm<br>Affected Community<br>Room #532   | <b>22</b><br>11:00 am<br>Priority & Allocations<br>w/ <b>Project LEAP</b><br>Room #416 | <b>23</b><br>CANCELLED<br>P & A   | <b>24</b>  | <b>25</b>  |
|  | <b>26</b>  | <b>27</b><br>7:00 pm<br>Public Hearing<br>900 Bagby 77002                           | <b>28</b><br>11:00 am<br>TENTATIVE<br>Priority & Allocations   | <b>29</b><br>SIRR  | <b>30</b>   |            |            |