2017 Comprehensive Plan for HIV Prevention and Care Services

Special Populations Workgroup

9:00 a.m., Friday, June 3, 2016 Meeting Location: 2223 W. Loop South, Room #420

AGENDA

Goal of Today's Meeting:

Complete Logic Model 2 for each Special Populations Solution by selecting focus areas and activities

I. Call to Order John Humphries and

A. Welcome Cristan Williams, Co-Chairs

B. Moment of Reflection

D. Approval of the Minutes

II. Develop Foci and Activities for Each Solution (Logic Model 2)

Amber Harbolt, Health
Planner, Office of Support

III. End New Diagnoses Houston Intersecting Issues Update Venita Ray

IV. Next Steps John Humphries and

A. Set Next Meeting–6/17 Cristan Williams, Co-Chairs

B. What to Expect at the Next Meeting

1. Complete Logic Model 3 (Activity Details)

V. Announcements

C. Adoption of the Agenda

VI. Adjourn

2017 Comprehensive Plan for HIV Prevention and Care Services SPECIAL POPULATIONS WORKGROUP

9:00 a.m., Friday, May 20, 2016

Meeting Location: 2223 West Loop South, Room 240; Houston, TX 77027

Minutes

MEMBERS PRESENT	MEMBERS ABSENT	OTHERS PRESENT
Cristan Williams, co-chair	Andrew Motz	Camden Hallmark, HHD
Alex Moses	Angela F. Hawkins, excused	Sha'Terra Johnson-Fairley, TRG
Ardry Skeet Boyle	Chandra Tubbs	Amber Harbolt, Office of Support
Cecilia Ross	Curtis Bellard	Diane Beck, Office of Support
Denis Kelly	Ella Collins-Nelson	
Ebony Smith	Jacoby Bryant	
Esther Ogunjimi	John Humphries	
Isis Torrente	Kevon Strange, excused	
Gloria Sierra	Nancy Miertschin, excused	
Michael Kennedy	Robert Noble	
Robert Betancourt	Rodney Mills, excused	
Tana Pradia	Teresa Pruitt	
Tracy Gorden	Vincent Ivery	
Zaida Lopez		

Call to order: Cristan Williams, co-chair, called the meeting to order at 9:04 a.m.; she welcomed everyone and asked for a moment of reflection.

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

Approval of the Minutes: <u>Motion #2</u>: It was moved and seconded (Boyle, Pradia) to approve the April 29, 2016 meeting minutes. **Motion Carried.** Abstentions: Betancourt, Gorden, Ogunjimi, Pradia Sierra.

Review Approved Special Populations: Harbolt reviewed the special populations that were approved by the workgroup. See attached.

Special Populations Benchmarks for 2017 Plan (Logic Model 1): See attached. The workgroup chose to revise the benchmarks as follows: Benchmark 1 was revised as follows: update the special populations to match the 2017 special populations and add Recently Released; Benchmark 2 was revised as follows: update the special populations to match the 2017 special populations, delete Incarcerated in Jail and change the linkage window to one month (if data is available for one month); Benchmark 3 was changed to read: *Proportion of PLWH with Unmet Need within each special population* and update the special populations to match the 2017 special populations; the workgroup chose to keep Benchmark 4 as is; add Benchmark 5 regarding client complaints received by the

administrative agents. <u>Motion #3</u>: it was moved and seconded (Torrente, Boyle) to approve the Special Population benchmarks as revised. Motion carried. Abstention: Moses.

Next Meeting: June 3 and 17, 2016 at 9:00 a.m.; Agenda items include completion of Logic Model 2 and Logic Model 3.

Announcements: None.

Adjourn: The meeting was adjourned at 11:02 a.m.

2012-2014

HOUSTON AREA COMPREHENSIVE HIV PREVENTION AND CARE SERVICES PLAN STRATEGY 3: STRATEGY TO ADDRESS THE NEEDS OF SPECIAL POPULATIONS

DEFINITIONS

- Adolescents aged 13 to 17
- Homeless defined as individuals who lack a fixed, regular, and adequate nighttime residence, including those who live in locations not meant for human habitation such as public parks and streets, those who live in or are transitioning from temporary housing or shelters, and those who have persistent housing instability
- Incarcerated or Recently Released (IRR)
 defined as individuals who are currently
 incarcerated in the jail or prison system or
 have been released from jail or prison within
 the past 12 months
- Injection Drug Users (IDU) defined as individuals who inject medications or drugs, including illegal drugs, hormones, and cosmetics
- MSM or Men who Have Sex with Men, defined as men who engage in male-to-male sexual practices and identify as gay or bisexual, those who engage in male-to-male sexual practices and do not identify as gay or bisexual, and those who engage in gay or bisexual male culture regardless of gender identity (i.e., male-to-female transgender)
- Transgender or individuals who cross or transcend culturally-defined categories of gender

Note: Adolescents, homeless, IDU, and transgender are special populations required by the Health Resources and Services Administration (HRSA); IRR and MSM were added by participants following analysis of local epidemiological, needs assessment, and service utilization data. All definitions were developed by participants using various sources.

GOALS

 Prevent New HIV Infections among the Special Populations of Adolescents, Homeless, IRR from jail or prison, IDU, MSM, and Transgender

- Reduce Barriers to HIV Prevention and Care for the Special Populations of Adolescents, Homeless, IRR from jail or prison, IDU, MSM, and Transgender
- Strengthen the Cultural and Linguistic Competence of the HIV Prevention and Care System

SOLUTIONS

- Infuse the HIV prevention and care system with policies, procedures, and other structural solutions that ensure equal treatment of all people living with or at risk for HIV
- Fill gaps in targeted interventions and services to better meet the HIV prevention and care needs of vulnerable populations
- Improve data management systems to better reveal information on the HIV epidemiology, risks, outcomes, and needs of historically under-sampled populations

ACTIVITIES (RESPONSIBLE PARTY, TIMELINE)

- Develop and adopt policies on nondiscrimination toward Special Populations in the provision of HIV prevention and care services (Ryan White Planning Council, Community Planning Group; 2012 - 2014)
- Establish or maintain formal partnerships between the Houston Area HIV Planning Bodies and agencies or individuals representing Special Populations; and through these partnerships, seek technical assistance and training on how the needs of Special Populations can be advanced (Ryan White Planning Council 2012-2014)

ACTIVITIES (RESPONSIBLE PARTY, TIMELINE) CON'T

- 3. Sustain community-based Task Forces and Coalitions focused on Special Populations (e.g., Serving the Incarcerated and Recently Released Partnership/SIRR, HIV Planning Group Task Forces, etc.) (Community Planning Group, The Resource Group; 2012-2014)
- 4. Sustain training on Special Populations in current capacity-building efforts for frontline HIV prevention and care staff (Ryan White Grant Administration, The Resource Group, Houston Department of Health and Human Services; 2012-2014)
- 5. Require cultural competence training for frontline HIV prevention and care staff to have: (a) standard minimum training topics; and (b) methods for measuring change in knowledge, skill, and ability (Ryan White Grant Administration, The Resource Group, Houston Department of Health and Human Services; 2012-2014)
- 6. Ensure data on Special Populations are included in the annual process for determining Ryan White HIV/AIDS Program Part A, B, and State Services funded services, priorities, and allocations (Ryan White Planning Council/Office of Support; 2012-2014)
- 7. Sustain HIV care services to specific Special Populations through the Ryan White HIV/AIDS Program Part A, B, State Services, and the Minority AIDS Initiative (MAI) (Ryan White Planning Council; 2012-2014)
- 8. Sustain HIV care services to specific Special Populations through the Ryan White HIV/AIDS Program Part D (The Resource Group, if funded; 2012-2014)
- Re-assess the Houston Area Early Identification of Individuals with HIV/AIDS (EIIHA) Strategy to ensure inclusion of Special Populations and any additional highrisk sub-populations (Ryan White Planning Council Ad Hoc EIIHA Committee; 2012)

- 10. Sustain HIV prevention services to specific Special Populations through contracted community-based organizations (Houston Department of Health and Human Services; 2012-2014)
- 11. Explore how to address bias, stigma, and discrimination against Special Populations in social marketing and other mass education activities (e.g., HIP HOP for HIV Awareness, School Health Summit), including data collection methods (Houston Department of Health and Human Services, Houston Independent School District; 2012-2014)
- 12. Alter data collection and reporting methods in current local data collection systems (e.g., Testing 4 Tickets, ECLIPS, CPCDMS, etc.) to provide information on Special Populations, particular, in Transgender, Homeless, IRR, and including standard definitions for data collection and reporting requirements (Ryan White Grant Administration, Houston Department of Health and Human Services; 2013)
- 13. Develop baselines and targets for each Special Population lacking benchmark data; this may develop into Special Studies on certain populations (Ryan White Planning Council/Office of Support; 2012-2014)

BENCHMARKS

 Reduce the number of new HIV infections diagnosed among each Special Population by 25 percent:

> Adolescents, from 18 to 13 Homeless, from 172 to 132 IRR from jail, from 1,097 to 822 IRR from prison, from 137 to 102 IDU, from 38 to 28 MSM, from 563 to 422 Transgender, from 7 to 5

BENCHMARKS CON'T

 Increase the proportion of newly-diagnosed individuals within each Special Population linked to HIV clinical care within three months of their HIV diagnosis to at least 85 percent:

Adolescents, baseline to be developed
Homeless, baseline to be developed
Incarcerated in jail, maintain at 100
percent
Recently released from jail, from 62.0
percent to 85 percent
IRR from prison, baseline to be developed
IDU, from 51.1 percent to 85 percent
MSM, from 65.2 percent to 85 percent
Transgender, baseline to be developed

 Prevent increases in the proportion of individuals within each Special Population who have tested positive for HIV but who are not in care (Ryan White HIV/AIDS Program Unmet Need Framework):

> Adolescents, baseline to be developed Homeless, baseline to be developed IRR from jail, baseline to be developed IRR from prison, baseline to be developed IDU, maintain at 37.6 percent MSM, maintain at 33.7 percent Transgender, baseline to be developed

4. Maintain the percentage of frontline HIV prevention and care staff receiving annual cultural competence training at 100 percent

2017 Houston Area Comprehensive HIV Services Plan Logic Model 2: Solution, Focus & Activities – SP Solution 1

Solution {Recommended approach to achieve stated goals and targets}
1. Evaluate HIV prevention and care system policies, procedures, and other structural components, and adjust to ensure equal treatment of all people living with or at risk for HIV*

Activities {Specific tasks to be performed that will achieve the solution}								
{Any specific focus for the proposed activities. A focus can be geographic, population-based, program-specific, or another type of segmentation} Focus Focus Focus								
1 0005	1 0005	1000	10005					

2017 Houston Area Comprehensive HIV Services Plan

Logic Model 2: Solution, Focus & Activities – SP Solution 2

	2. Close gaps in targeted into better meet the HIV prevent populations	erventions and services to tion and care needs of special						
	Activities {Specific tasks to be performed that will achieve the solution}							
Focus	proposed activities. A focus can be geograph Focus	Focus	another type of segmentation} Focus					

Solution {Recommended approach to achieve stated goals and targets}

2017 Houston Area Comprehensive HIV Services Plan

Logic Model 2: Solution, Focus & Activities – SP Solution 3

Solution {Recommended approach to achieve stated goals and targets}	
3. Improve data management systems to better reveal information on the HIV epidemiology, risks outcomes, and needs of historically under-sampled populations and support Data-to-Care	

Activities {Specific tasks to be performed that will achieve the solution} {Any specific focus for the proposed activities. A focus can be geographic, population-based, program-specific, or another type of segmentation} **Focus Focus Focus Focus**

2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

Logic Model 3: Action Planning Matrix

	Solution {Recommended approach to achieve stated goals and targets}					
Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)

UPDATED:	Sun	Mon	Tue	Wed	Thu	Fri	Sat
05/23/16 STAFF				1 LEAP Rm #416	2 12 noon Steering Committee 1pm 5pm	9:00 am Special Pops Wg Rm #TBD	4
Unless otherwise noted, meetings are held at: 2223 W. Loop South,					Amber FIMR @ UW 3:00 pm Gaps in Care Wg		
Suite 240 Houston, TX 77027	5	6	7	8	Room #416	10	11
	National HIV Long-Term Survivors Awareness Day	10:00 am NAG Analysis Wg Rm #TBD 3:00 pm PEI Wg Room #416	11:00 am Staff meeting	LEAP CANCELLED Rm #416 Timesheets due National Caribbean American HIV Awareness Day	12 noon Planning Council Leonel Castillo Community Ctr 2101 South St, 77009 Holding Rm 532 2:00 pm Comp HIV Planning	9:00 am COE Wg Room #TBD	
ne	12	13 11 am - 3 pm Priority & Allocations Special meeting Room #240	14 CANCELLED Operations 11 am - 3 pm P&A Special mtg #240 Court	15 LEAP Rm #416 11 am - 3 pm P&A Special mtg #240 6:30 pm Affected Community Change Happens 3353 Elgin St 77004	2 CANCELLED Quality Improvement Room #532 1:30 pm NAG Analysis Wg Rm #TBD	17 9:00 am Special Pops Wg Rm #TBD	18
	19	20	21 CANCELLED Affected Community Room #532	22 11:00 am Priority & Allocations w/Project LEAP Room #416 Timesheets due	23 CANCELLED P & A Rm 416 2:00 pm NAG Room #TBD	24 9:00 am COE Wg Room #TBD	25
2016	26	7:00 pm Public Hearing 900 Bagby 77002 Nat'l HIV Testing Day	28 11:00 am TENTATIVE Priority & Allocations Court	29 LEAP Rm #416	3:00 pm Leadership Team Room #TBD		