

2017-2021 Comprehensive Plan for HIV Prevention and Care Services

Evaluation Workgroup

11:00 a.m., Thursday, June 28, 2018

Meeting Location: 2223 W. Loop South, Room 416
Houston, Texas 77027

AGENDA

Goal of Today's Meeting:

Continue evaluation of Year 1 (2017) Comprehensive Plan implementation

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| I. Call to Order | Brenda Harrison, Nick Sloop,
and Steven Vargas, Co-Chairs |
| A. Welcome | |
| B. Moment of Reflection | |
| C. Adoption of the Agenda | |
| D. Approval of the Minutes | |
| II. Review and Address Quorum Rules | |
| III. Continue Review Year 1 (2017) Comprehensive Plan Implementation | Amber Harbolt, Health
Planner, Office of Support |
| A. Develop Year 1 Evaluation Conclusions | |
| 1. Technical adjustments | |
| 2. Activities to retain for Year 2 (2018) implementation | |
| IV. Next Meeting (July) | Brenda Harrison, Nick Sloop,
and Steven Vargas, Co-Chairs |
| V. Announcements | |
| VI. Adjourn | |

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 Houston Area Comprehensive HIV Prevention and Care Services Plan EVALUATION WORKGROUP

12:00 p.m., Thursday, May 10, 2018

Meeting location: 2223 West Loop South, Room 532; Houston, TX 77027

Minutes

MEMBERS PRESENT

Steven Vargas, Co-Chair
Nicholas Sloop, Co-Chair
Raven Bradley
Herman Finley
Osaro Mgbere
Cecilia Oshingbade
Crystal Starr
Crystal Townsend

MEMBERS ABSENT

Cynthia Deverson
Thomas Dickerson
Brenda Harrison
Angela F. Hawkins
Dawn Jenkins
Calvin Mills
Sarah Njue
Amana Turner
Kellie Watkins
Mike Wilkerson

OTHERS PRESENT

Camden Hallmark, HHD
Chanda Green, HHD
Sha'Terra Johnson-Fairley, TRG
Amber Harbolt, Ofc of Support
Diane Beck, Ofc of Support

Call to order: Steven Vargas, co-chair, called the meeting to order at 12:12 p.m. and asked for a moment of reflection.

Adopt the Agenda: ***Motion #1:** it was moved and seconded (Oshingbade, Starr) to adopt the agenda with one change: move item IV up to III. Motion Carried.*

Approval of the Minutes: ***Motion #2:** it was moved and seconded (Oshingbade, Green) to approve the August 30, 2016 meeting minutes. Motion Carried.* Abstentions: Bradley, Green, Starr, Townsend.

Role of the Evaluation Workgroup: Harbolt reviewed the attached workgroup description.

Next Meeting: The next meeting is scheduled for June 12, 2018 at 2:00 p.m.; the time may change depending on room availability.

Review Year 1 (2017) Comprehensive Plan Implementation: See attached PowerPoint presentation. The workgroup reviewed and completed the Strategy for HIV Prevention and Early Identification, see attached.

Announcements: None.

Adjournment: The meeting was adjourned at 2:04 p.m.

Evaluation Workgroup Quorum Rules

From Evaluation Workgroup Meeting Minutes dated 08/30/2016:

Review Membership Requirements, Voting Rules, & Quorum: Harbolt reviewed quorum rules in place for the other comprehensive plan workgroups, see attached. ***Motion #2:*** *it was moved and seconded (Ross, Harrison) to adopt quorum for the workgroup as at least 1/3 of members must be present, including one consumer and one co-chair.* **Motion Carried.**

Staff suggestion:

- “In the event that an Evaluation Workgroup co-chair cannot be present, individuals in the following positions may serve as alternate chair for the Workgroup meeting:
 - Either co-chair from the Comprehensive HIV Planning Committee
 - Comprehensive HIV Planning Committee vice-chair
 - Chair of the Ryan White Planning Council
 - Vice-chair of the Ryan White Planning Council
 - Community co-chair of the Community Planning Group
 - Governmental co-chair of the Community Planning Group”

2017 Comprehensive Plan Activities, by Strategy

Strategy for HIV Prevention and Early Identification

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Contact; Assigned Committee	Status and Brief Progress
Explore opportunities for cross-representation between the Houston HIV community and School Health Advisory Councils (SHAC) for all school districts within the Houston area.	CPG; HHD		Annually	HHD CPG Support Staff; Task Forces (Youth Task Force)	Youth	Cross-representation occurred; SHAC minutes; Youth Task Force minutes		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Educate Houston Area faith community leadership on HIV information, risk reduction, and prevention tools.	CPG;		Annually	HHD CPG Support Staff; Urban AIDS Ministry	Faith communities	Urban AIDS Ministry minutes; Speakers Bureau evaluations		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Adopt PrEP uptake marketing models designed to remove stigma.	HHD		2017	HHD PrEP Coordinator; Project PrIDE	HIV negative individuals; partners of HIV positive individuals	Materials created		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Educate public officials on changing governmental policies that create barriers to HIV prevention information and tools (e.g. repeal the ban on syringe access, access to PrEP, adopt comprehensive sexuality education in schools, etc.).	HHD; CPG	<i>Potential non-RP partners: Positive Organizing Project; Task Forces; Texas HIV/AIDS Coalition</i>	Annually	HHD staff; HHD CPG Support Staff; HHD PrEP Coordinator; RWPC-OS	Public officials; policy-level interventions	Education occurred; local/state policy changes		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Disseminate routine testing implementation toolkit to targeted private and non-Ryan White funded providers and FQHCs to facilitate linkage to care. (See also: Coordination of Effort Strategy and Special Populations Strategy)	RWPC-OS	<i>Potential non-RP partners: TDSHS; AETC; HHS</i>	Annually	TDSHS, Test Texas, Texas HIV/AIDS Coalition, and Baylor College of Medicine	Status unaware individuals	Toolkits disseminated		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Contact; Assigned Committee	Status and Brief Progress Narrative
Expand distribution of HIV testing and PrEP information and resources to healthcare providers. (See also: Special Populations Strategy)	HHD; CPG		Annually	HHD CPG support staff; volunteers	HIV negative and status unaware in high-incidence areas	Information distributed; New diagnoses in high-incidence areas decreased		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Educate Task Forces, community groups, funded agencies, and non-HHD funded agencies on availability of the Mobile Testing Unit	HHD	Potential non-RP partners: HHD Clinical Services	As needed	HHD staff	Task Forces; community groups; funded agencies; non-HHD funded agencies	Education occurred; Mobile Unit schedule		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Create and distribute rural referral resource list to DIS.	TRG		Annually	TRG staff	Rural PLWH	List created and distributed; list regularly updated		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Pursue strategies to reduce time period between diagnosis and entry into HIV medical care to facilitate timely linkage to care.	HHD; RWGA; RWPC	Potential non-RP partners: all HIV care providers	2017	HHD staff; RWGA staff; RWPC-OS; contracted providers	Newly diagnosed PLWH; incoming consumers	Record of strategies pursued		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Hold consumer PrEP and treatment as prevention education forums.	RWPC; HHD	Potential non-RP partners: AETC	Annually	RWPC-OS; HHD staff; volunteers; possibly pharma rep if not COI	PLWH; partners of PLWH	Forums occurred; evaluations		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Identify methods for measuring local online HIV and sexual health information seeking.	HHD		2017	HHD PrEP Coordinator; HHD staff	N/A	Methods identified; resulting measurements		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)

Strategy for Bridging Gaps in Care and Reaching the Out of Care

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Contact; Assigned Committee	Status and Brief Progress Narrative
Assess the feasibility of providing Ryan White-funded buddy/peer mentoring support to incoming clients during first eligibility and primary care appointment(s).	RWGA	<i>Potential Non-RP partners:</i> RWPC-OS; RWPC	2017	RWGA staff; RWPC-OS; volunteers	Incoming clients	Report completed for feasibility study		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Revise case management, service linkage, and outreach services Standards of Care and policies to incorporate warm handoff protocols.	RWGA	<i>Potential Non-RP partners:</i> HHD; RWPC	2017; revisit annually	RWGA staff; RWPC-OS; HHD Hearts program staff; volunteers	Incoming clients	Changes made to Standards of Care; increase in retention per CPCDMS		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Design Standards of Care ensuring follow-up contact with newly diagnosed consumers throughout first year of diagnosis.	RWGA	<i>Potential Non-RP partners:</i> HHD; RWPC	2017; revisit annually	RWGA staff; RWPC-OS; HHD Hearts program staff; volunteers	Newly diagnosed PLWH	Changes made to Standards of Care; increase in retention per CPCDMS		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Expand the Road to Success consumer training program to housing sites.	RWPC-OS; RWP; RWGA; ; TRG	<i>Potential non-RP partners:</i> HCD; housing sites	Annually	RWPC-OS; RWGA staff; TRG staff	HOPWA/housing clients	Road to Success agenda; evaluations		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Study the feasibility of allowing non-Ryan White providers CPCDMS access to health information to support re-linkage. (See Also: Coordination of Effort Strategy)	RWGA	<i>Potential non-RP partners:</i> Local hospital systems	2017	RWGA staff; Pam Green	Out of Care PLWH	Report completed for feasibility study		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Contact Health Departments in other jurisdictions and begin dialog regarding success and opportunities for working with health insurance providers to identify and reengage Out of Care individuals.	RWPC-OS		2017	RWPC-OS	Out of Care PLWH; PLWH with private/public insurance	Record that discussion occurred; success and opportunities applicable to Houston generated		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)

Strategy to Address the Needs of Special Populations

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Contact; Assigned Committee	Status and Brief Progress Narrative
Assess and adjust Standards of Care and other relevant policies to ensure access to facilities and services for all people regardless of sexual orientation or gender identity.	RWGA ; TRG; HHD	<i>Potential non-RP partners: RWPC</i>	Annually	RWGA staff; TRG staff; HHD staff; volunteers	HIV prevention and care services clients	Standards of Care modified		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Educate providers serving special populations about routine HIV testing and PrEP, and promote inclusion of routine HIV testing and PrEP education in policies, procedures, and practices to facilitate linkage to care. (See also: <i>Prevention and Early Identification Strategy</i>)	HHD; CPG; RWPC	<i>Potential non-RP partners: TDSHS – rural areas; AETC</i>	Annually	HHD PrEP Coordinator; HHD CPG support staff; RWPC-OS; Project PrIDE; possibly Gilead Project FOCUS if not COI	Private providers; special populations	Education materials developed/used ; list of providers educated; increase in routine testing		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Develop an HIV Care Continuum for each Special Population as possible, and disseminate to providers and the public as appropriate.	RWPC; HHD	<i>Potential non-RP partners: TDSHS</i>	2017 <i>Include as needed in each Epi Profile</i>	RWPC-OS; HHD staff	Special populations for which data are available	Completed continuum		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Train PrEP providers and prevention workers on best practices for educating and promoting PrEP among special populations.	HHD		Annually	HHD staff; Project PrIDE	PrEP providers & prevention workers; HIV negative individuals in special populations	Training occurred; increased testing of members in special populations		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Contact; Assigned Committee	Status and Brief Progress Narrative
Expand distribution of HIV testing and PrEP information and resources to healthcare providers. <i>(See also: Prevention and Early Identification Strategy)</i>	HHD; CPG	<i>Potential non-RP partner:</i> Task Forces	Annually	HHD CPG support staff; HHD Task Force liaisons; volunteers	HIV negative and status unaware in high-incidence areas	Information distributed; New diagnoses in high-incidence areas decreased		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Compile HIPAA compliant best practices for using technology to communicate with consumers and incorporate into provider training. <i>(See also: Coordination of Effort Strategy)</i>	RWGA; TRG		2017	RWGA staff; TRG staff	Youth, homeless PLWH	List of best practices compiled; training occurred		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Provide training to DIS staff on data collection for transgender and other special population clients.	HHD	<i>Potential non-RP partners:</i> TDSHS	Annually	HHD staff	Special populations (especially transgender)	Training provided		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Train surveillance staff to enhance data collection on transgender community.	HHD	<i>Potential non-RP partners:</i> HHD Surveillance Bureau	TBD	HHD staff; HHD Surveillance Bureau staff	MSM, transgender	Training provided; sex/gender field in data reports includes transgender		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)

Strategy for Improving Coordination of Effort

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Contact; Assigned Committee	Status and Brief Progress Narrative
Support AETC efforts to provide regular HIV-related updates to the Houston medical community.	RWCP; RWGA; HHD	<i>Potential non-RP partners: AETC; HHS; TDSHS</i>	As needed	RWPC-OS; RWGA staff; HHD staff; TDSHS	Houston medical community	Evidence of support (e.g. promotion emails/social media communication sent; collaborative products, etc.)		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Facilitate an annual Task Force meeting for community-wide coordination of effort.	HHD; CPG; Task Forces		Annually	HHD CPG support staff; HHD Task Force liaisons; Task Force members	Current stakeholders; populations served by Task Forces	Meeting occurred; resulting coordination		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Sustain current efforts and target the following sectors and groups for coordination of effort activities: a. Advocacy groups b. Aging (e.g., assisted living, home health care, hospice, etc.) c. Alcohol and drug abuse providers and coalitions at the local and regional levels d. Business and Chambers of Commerce e. Community centers f. Chronic disease prevention, screening, and self-management programs g. Faith communities h. Medical professional associations, medical societies, and practice groups i. Mental health (e.g., counseling associations, treatment facilities, etc.) j. New HIV-related providers such as FQHCs and Medicaid Managed Care Organizations (MCOs) k. Philanthropic organizations l. Primary education, including schools and school districts m. Secondary education, including researchers, instructors, and student groups n. Workforce Solutions and other vocational training and rehabilitation programs	RWGA; TRG; HHD; RWPC-OS; RWPC; CPG;		Annually	RWGA staff; TRG staff; HHD staff; HHD CPG support staff; HHD Task Force liaisons; RWPC-OS; RWPC; CPG; Task Forces	Per sector	Record of coordination per sector		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Contact; Assigned Committee	Status and Brief Progress Narrative
Extend notification of quarterly case manager trainings to non-funded case managers and social workers at local hospitals (Ben Taub, LBJ, etc.).	RWGA		Annually	RWGA staff; RWPC-OS staff	Non-RW case managers; PLWH outside RW system	Record of notice sent (e.g. email, blast fax, etc.)		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Cultivate peer technical assistance that facilitates sharing best practice models between current providers.	RWGA; TRG		As needed	RWGA staff; TRG staff	Current RW providers	Peer technical assistance model created and implemented		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Identify local media resources to serve as outlets for HIV education and community mobilization efforts.	RWPC; CPG	<i>Potential non-RP partners: Task Forces; RWPC-OS; HHD</i>	Annually	RWPC-OS staff; HHD CPG support staff; volunteers	N/A	List of opportunities compiled		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Cultivate social media pathways to disseminate HIV-related information and mobilization efforts.	HHD; TRG; RWPC; CPG		2017 <i>Utilize annually</i>	HHD staff; HHD CPG support staff; RWPC-OS; TRG; volunteers; Task Force members	N/A	Documentation stating pathways; evidence of pathways utilized		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Evaluate opportunities for partnering with other local government initiatives for co-branding HIV-related issues.	HHD; RWGA; TRG	<i>Potential Non-RP partners: City of Houston; Harris County; HSDA Counties</i>	Annually	HHD staff; RWGA staff; TRG staff	N/A	Opportunities identified; partnerships (MOU if necessary) created		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Contact; Assigned Committee	Status and Brief Progress Narrative
Compile HIPAA compliant best practices for using technology to communicate with consumers, and incorporate into provider training. <i>(See also: Special Populations Strategy)</i>	RWGA; TRG		2017	RWGA staff; TRG staff	Youth, homeless PLWH	List of best practices compiled; training occurred		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)
Study the feasibility of allowing non-Ryan White providers CPCDMS access to health information to support re-linkage. <i>(See Also: Gaps in Care Strategy)</i>	RWGA	<i>Potential non-RP partners: local hospital systems</i>	2017	RWGA staff; Pam Green	Out of Care PLWH	Report completed for feasibility study		<input type="checkbox"/> Complete (C) <input type="checkbox"/> In Progress (P) <input type="checkbox"/> Not Initiated (NI)

Table 1: 2017 Comprehensive Plan System Objective Evaluation Tool

Objective to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
❖ OBJECTIVE 1: Number of new HIV infections diagnosed in the Houston Area	TDSHS eHARS	1,386 (2014)	≤1,310	≤1,233	≤1,157	≤1,080	↓ at least 25% to ≤1004 (NHAS target)	Region is EMA
❖ OBJECTIVE 2: Percentage of individuals with a positive HIV test result identified through <i>targeted</i> HIV testing who are informed of their HIV+ status	HHD, TDSHS HIV Testing & Awareness Data	93.8% (2015)	93.8%	93.8%	93.8%	93.8%	Maintain or increase ≥93.8% (local target)	Region is Houston/Harris County for HHD; EMA for TDSHS Target exceeds NHAS 90% goal
❖ OBJECTIVE 3: Proportion of newly-diagnosed individuals linked to clinical care within one month of their HIV diagnosis	TDSHS Linkage to Care Data	66% (2015)	69.8%	73.6%	77.4%	81.2%	↑ to at least 85% (NHAS target)	Region is EMA
❖ OBJECTIVE 4.1: Percentage of new HIV diagnoses with an HIV stage 3 diagnosis within one year	TDSHS Late Diagnoses Data	25.9% (2014)	24.6%	23.3%	22.0%	20.7%	↓ at least 25% =19.4% (DHAP target)	Region is EMA
❖ OBJECTIVE 4.2: Percentage of new HIV diagnoses with an HIV stage 3 diagnosis within one year among Hispanic/Latino men age 35 and up	TDSHS Late Diagnoses Data	36% (2014)	34.2%	32.4%	30.6%	28.8%	↓ at least 25% = 27% (local target)	Region is EMA
❖ OBJECTIVE 5: Percentage of Ryan White HIV/AIDS Program clients who are in continuous HIV care (at least two visits for HIV medical care in 12 months at least three months apart)	CPCDMS	75.0% (2014)	78%	81%	84%	87%	↑ to at least 90% (NHAS target)	
❖ OBJECTIVE 6: Percentage of individuals with diagnosed HIV infection in the Houston Area who are retained in HIV medical care (at least two documented HIV medical care visits, viral load or CD4 tests in a 12 month period)	TDSHS Retention Data	61% (2014)	66.8%	72.6%	78.4%	84.2%	↑ to at least 90% (NHAS target)	Region is EMA
❖ OBJECTIVE 7: Proportion of Ryan White HIV/AIDS Program clients who are virally suppressed	CPCDMS	80.4% (2014)	≥80.4%	≥80.4%	≥80.4%	≥80.4%	Maintain or increase ≥80.4% (local target)	
❖ OBJECTIVE 8: Percentage of individuals with diagnosed HIV infection in the Houston Area who are virally suppressed	TDSHS Viral Suppression Data	55% (2014)	60%	65%	70%	75%	↑ to at least 80% (NHAS target)	Region is EMA
❖ OBJECTIVE 9: Number of gay and bisexual men of color and women of color receiving pre-exposure prophylaxis (PrEP) education each year	HHD	To be developed	---	---	---	---	≥2000 (local target)	Among HIV-negative clients seen by HHD frontline staff (i.e. DIS and SLWs) and HHD-funded contractors

Table 3: 2017 Comprehensive Plan PEI Strategy Benchmark Evaluation Tool

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
❖ BENCHMARK 1: Number of new HIV infections diagnosed in the Houston Area	TDSHS eHARS	1,386 (2014)	≤1,310	≤1,233	≤1,157	≤1,080	↓ at least 25% to ≤1004 (NHAS target)	Region is EMA
❖ BENCHMARK 2: Number of HIV/STD brochures distributed	HHD	88,700 (2014)	88,700 (2014)	88,700 (2014)	88,700 (2014)	88,700 (2014)	Maintain =88,700 (local target)	Region is Houston/Harris County
❖ BENCHMARK 3: Number of publicly-funded targeted and routine HIV tests								
Number of publicly-funded <i>targeted</i> HIV tests	HHD, TDSHS HIV Testing & Awareness Data	10,109 (2015)	10,109 (2015)	10,109 (2015)	10,109 (2015)	10,109 (2015)	Maintain = 10,109 (local target)	Region is Houston/Harris County for HHD; EMA for TDSHS
Number of publicly-funded <i>routine</i> HIV tests	HHD, TDSHS HIV Testing & Awareness Data	117,610 (2015)	117,610 (2015)	117,610 (2015)	117,610 (2015)	117,610 (2015)	Maintain = 117,610 (local target)	Region is Houston/Harris County for HHD; EMA for TDSHS
❖ BENCHMARK 4: Positivity rate for publicly-funded <i>targeted</i> HIV testing	HHD, TDSHS HIV Testing & Awareness Data	3.01% (2015)	3.01%	3.01%	3.01%	3.01%	Maintain = 3.01% (local target)	Region is Houston/Harris County for HHD; EMA for TDSHS
❖ BENCHMARK 5: Percentage of individuals with a positive HIV test result identified through <i>targeted</i> HIV testing who are informed of their HIV+ status	HHD, TDSHS HIV Testing & Awareness Data	93.8% (2015)	93.8%	93.8%	93.8%	93.8%	Maintain or increase ≥93.8% (local target)	Region is Houston/Harris County for HHD; EMA for TDSHS Target exceeds NHAS 90% goal
❖ BENCHMARK 6: Percentage of new HIV diagnoses with an HIV stage 3 diagnosis within one year	TDSHS Late Diagnoses Data	25.9% (2014)	24.6%	23.3%	22.0%	20.7%	↓ at least 25% =19.4% (DHAP target)	Region is EMA
❖ BENCHMARK 7: Proportion of newly-diagnosed individuals linked to clinical care within one month of their HIV diagnosis	TDSHS Linkage to Care Data	66% (2015)	69.8%	73.6%	77.4%	81.2%	↑ to at least 85% (NHAS target)	Region is EMA
❖ BENCHMARK 8: Proportion of Ryan White HIV/AIDS Program clients who are virally suppressed	CPCDMS	80.4% (2014)	≥80.4%	≥80.4%	≥80.4%	≥80.4%	Maintain or increase ≥80.4% (local target)	

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
❖ BENCHMARK 9: Percentage of individuals with diagnosed HIV infection in the Houston Area who are virally suppressed	TDSHS Viral Suppression Data	55% (2014)	60%	65%	70%	75%	↑ to at least 80% (NHAS target)	Region is EMA
❖ BENCHMARK 10: Number of new HIV infections in high HIV/STD morbidity zip codes targeted for intervention								
Sharpstown (77036 and 77074)	HHD, eHARS	56 (2014)	53	50	48	45	↓25% =42 (NHAS target)	
Sunnyside/South Park (77033 and 77051)	HHD, eHARS	34 (2014)	32	31	29	28	↓25% =26 (NHAS target)	
Greater 5th Ward (77020 and 77026)	HHD, eHARS	28 (2014)	27	25	24	22	↓25% =21 (NHAS target)	
Acres Home (77088 and 77091)	HHD, eHARS	32 (2014)	30	29	27	26	↓25% =24 (NHAS target)	
Montrose (77006)	HHD, eHARS	26 (2014)	25	24	22	21	↓25% =20 (NHAS target)	
❖ BENCHMARK 11: Rate of STD infection per 100,000 population (Chlamydia, gonorrhea, and primary and secondary syphilis)	HHD, STD MIS	CT: 563.7 GC: 162.5 P&S: 8.2 (2014)	CT: 553.0 GC: 161.4 P&S: 7.9	CT: 542.3 GC: 160.3 P&S: 7.6	CT: 531.7 GC: 159.2 P&S: 7.3	CT: 521.0 GC: 158.1 P&S: 7.0	CT: =510.3 (local target) GC: ↓0.6%/year =157.0 (local target) P&S: 6.7 (HP 2020 males target)	Region is Houston/Harris County CT/GC targets based on available historical data
❖ BENCHMARK 12: Number of condoms distributed	HHD	450,000 (2014)	450,000	450,000	450,000	450,000	Maintain =450,000 (local target)	Includes mass and targeted condom distribution efforts

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
❖ BENCHMARK 13: Number of high-risk individuals that completes an evidence-based behavioral intervention to reduce risk for HIV	HHD	4,944 (2015)	4,944	4,944	4,944	4,944	Maintain =4,944 (local target)	Includes completion of ILI or GLI intervention only (not CLI)
❖ BENCHMARK 14: Percentage of prevention and care staff receiving standardized pre-exposure prophylaxis (PrEP) training	HHD, RWGA, TRG	To be developed	---	---	---	---	100% (local target)	
❖ BENCHMARK 15: Number of MSM and transgender persons of color receiving pre-exposure prophylaxis (PrEP) education	Project PrIDE	To be developed	---	---	---	---	2,000 annually (local target)	Among HIV-negative clients seen by HHD frontline staff (i.e. DIS and SLWs) and HHD-funded contractors
❖ BENCHMARK 16: Percentage of HIV-negative clients screened for PrEP eligibility	HHD Project PrIDE, ECLIPS, Maven	To be developed	---	---	---	---	10% increase (local target)	Among HIV-negative clients seen by HHD frontline staff (i.e., DIS and SLWs) and HHD-funded contractors

Table 6: 2017 Comprehensive Plan Gaps Strategy Benchmark Evaluation Tool

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
❖ BENCHMARK 1: Proportion of PLWH with Unmet Need	TDSHS Unmet Need Data	25.0% (2014)	23.4%	21.8%	20.2%	18.6%	↓ 1.6% annually =17.0% (local target)	Region is EMA Target based on available historic data (2010=33.1%)
❖ BENCHMARK 2: Proportion of newly-diagnosed individuals linked to clinical care within one month of their HIV diagnosis	TDSHS Linkage to Care Data	66% (2015)	69.8%	73.6%	77.4%	81.2%	↑ to at least 85% (NHAS target)	Region is EMA
❖ BENCHMARK 3: Percentage of Ryan White HIV/AIDS Program clients who are in continuous HIV care (at least two visits for HIV medical care in 12 months at least three months apart)	CPCDMS	75.0% (2014)	78%	81%	84%	87%	↑ to at least 90% (NHAS target)	
❖ BENCHMARK 4: Percentage of individuals with diagnosed HIV infection in the Houston Area who are retained in HIV medical care (at least two documented HIV medical care visits, viral load or CD4 tests in a 12 month period)	TDSHS Retention Data	61% (2014)	66.8%	72.6%	78.4%	84.2%	↑ to at least 90% (NHAS target)	Region is EMA
❖ BENCHMARK 5: Proportion of Ryan White HIV/AIDS Program clients who are virally suppressed	CPCDMS	80.4% (2014)	≥80.4%	≥80.4%	≥80.4%	≥80.4%	Maintain or increase ≥80.4% (local target)	
❖ BENCHMARK 6: Percentage of individuals with diagnosed HIV infection in the Houston Area who are virally suppressed	TDSHS Viral Suppression Data	55% (2014)	60%	65%	70%	75%	↑ to at least 80% (NHAS target)	Region is EMA

Table 9: 2017 Comprehensive Plan SP Strategy Benchmark Evaluation Tool

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
❖ BENCHMARK 1: Number of new HIV infections diagnosed among each special population:								
Youth (13-24)	TDSHS eHARS	360 (2014)	302	244	186	128	↓25% =70 (NHAS target)	Region is EMA
Homeless	HMIS (potential)	54 (2014)	51	49	46	44	↓25% =41 (NHAS target)	Region is Harris/Fort Bend County Baseline: 3.9%- National Alliance to End Homelessness, 2009. http://www.nationalhomeless.org/factsheets/hiv.html applied to local 2014 new Dx
Incarcerated in Jail	TRG	Baseline to be established	---	---	---	---	↓25% (NHAS target)	
Incarcerated in Prison	TDCJ	Baseline to be established	---	---	---	---	↓25% (NHAS target)	
IDU	TDSHS eHARS	66 (2014)	63	60	56	53	↓25% =50 (NHAS target)	Region is EMA
MSM	TDSHS eHARS	930 (2014)	884	837	791	744	↓25% =698 (NHAS target)	Region is EMA
Transgender and Gender Non-conforming	HHD, HIV Surveillance System	Baseline to be established	---	---	---	---	↓25% (NHAS target)	Region is Houston/Harris County

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
Women of Color	TDSHS eHARS	Baseline to be established	---	---	---	---	↓25% (NHAS target)	Region is EMA
Aging (50 and older)	TDSHS eHARS	264 (2014)	251	238	224	211	↓25% =198 (NHAS target)	Region is EMA Baseline: Placeholder, reflects 45+
❖ BENCHMARK 2: Proportion of newly-diagnosed individuals within each special population linked to clinical care within one month of their HIV diagnosis								
Youth (13-24)	TDSHS Linkage to Care Data	74.0% (2014)	76.2%	78.4%	80.6%	82.8%	85% (NHAS target)	Region is EMA Baseline: Reflects 3 month linkage window
Homeless	Needs Assessment	53.9% (2016)	60.1%	66.3%	72.6%	78.8%	85% (NHAS target)	Region is HSDA Baseline: Unstable housing
Recently Released from Jail (*linked within 1 month of release)	TRG	Baseline to be established	---	---	---	---	85% (NHAS target)	Region is HSDA Harris County Jail only.
Recently Released from Prison (*linked within 1 months of release)	TRG	Baseline to be established	---	---	---	---	85% (NHAS target)	Region is HSDA
IDU	TDSHS Linkage to Care Data	85.0% (2014)	≥85.0%	≥85.0%	≥85.0%	≥85.0%	85% (NHAS target)	Region is EMA
MSM	TDSHS Linkage to Care Data	78.0% (2014)	79.4%	80.8%	82.2%	83.6%	85% (NHAS target)	Region is EMA
Transgender and Gender Non-conforming	Needs Assessment	54.1% (2016)	60.3%	66.5%	72.7%	78.8%	85% (NHAS target)	Region is HSDA
Women of Color	TDSHS eHARS	Baseline to be established	---	---	---	---	85% (NHAS target)	Region is EMA
Aging (50 and older)	TDSHS eHARS	84% (2014)	84.2%	84.4%	84.6%	84.8%	85% (NHAS target)	Region is EMA Baseline: Placeholder, reflects 45+

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
❖ BENCHMARK 3: Proportion of PLWH with unmet need within each Special Population								NHAS 90% retention target
Youth (13-24)	TDSHS Unmet Need Analysis	24.0% (2014)	21.2%	18.4%	15.6%	12.8%	10% (NHAS target)	Region is EMA
Homeless	Needs Assessment – Out of Care Assessment	To be developed	---	---	---	---	10% (NHAS target)	Region is HSDA 2014 NA = 16.3%
Recently Released from Jail/Prison	Needs Assessment – Out of Care Assessment	To be developed	---	---	---	---	10% (NHAS target)	Region is HSDA 2014 NA = 11.9%
IDU	TDSHS Unmet Need Analysis	27.0% (2014)	23.6%	20.2%	16.8%	13.4%	10% (NHAS target)	Region is EMA
MSM	TDSHS Unmet Need Analysis	25.0% (2014)	22%	19%	16%	13%	10% (NHAS target)	Region is EMA
Transgender and Gender Non-conforming	Needs Assessment – Out of Care Assessment	To be developed	---	---	---	---	10% (NHAS target)	Region is HSDA 2014 NA = 7.4%
Women of Color	TDSHS Unmet Need Analysis	To be developed	---	---	---	---	10% (NHAS target)	Region is EMA
Aging (50 and older)	TDSHS Unmet Need Analysis	25% (2014)	22%	19%	16%	13%	10% (NHAS target)	Region is EMA Baseline: Placeholder, reflects 45+
❖ BENCHMARK 4: Percentage of grievances relating to cultural and linguistic competence received through the Ryan White grievance lines and the HHD prevention “warmline” and website	HHD: RWGA; TRG	To be developed	Track only	Track only	Track only	Track only	Track only	Region is Houston/Harris Count; EMA; HSDA

Table 12: 2017 Comprehensive Plan COE Strategy Benchmark Evaluation Tool

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
❖ BENCHMARK 1: Number of Ryan White Planning Council members who are not employed at HIV care or prevention service providers	RWPC-OS	29 total 4 non-infected/ affected (2014)	29 total 4 non-infected/ affected	29 total 4 non-infected/ affected	29 total 4 non-infected/ affected	29 total 4 non-infected/ affected	Maintain (local target)	Baseline includes Council and External members who do not bring HIV expertise because of their place of employment. 2014 measure is placeholder for 2016 data.
❖ BENCHMARK 2: Number of non-HIV prevention and care service providers requesting information about HIV services	RWPC-OS	110 (2015)	>110	>110	>110	>110	Increase (local target)	Actual numbers tallied using office tracking sheets and website requests. Defined as an entity that does not state HIV prevention or care in its mission.
❖ BENCHMARK 3: Proportion of PLWH reporting barriers to using Ryan White HIV/AIDS Program Core Medical	Needs Assessment	40.5% (2016)	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Baseline: Numerator = 203; Denominator = 501 Target to be based on available historical data (2014)
❖ BENCHMARK 4: Proportion of PLWH reporting barriers to using Ryan White HIV/AIDS Program Support Services	Needs Assessment	20.2% (2016)	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Baseline: Numerator = 93 Denominator = 461 Target to be based on available historical data (2014)
❖ BENCHMARK 5: Proportion of PLWH reporting barriers to outpatient alcohol or drug abuse treatment services	Needs Assessment	8.2% (2016)	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Baseline: Numerator = 10 Denominator = 122 Target to be based on available historical data (2014)

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2017 Target	2018 Target	2019 Target	2020 Target	2021 Target	Notes
❖ BENCHMARK 6: Proportion of PLWH reporting barriers to professional mental health counseling	Needs Assessment	12.1% (2016)	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Pending 2014 SPSS Re-Run	Baseline: Numerator = 32 Denominator = 265 Target to be based on available historical data (2014)
❖ BENCHMARK 7: Proportion of PLWH reporting housing instability	Needs Assessment	25.6% (2016)	≤25.6%	≤25.6%	≤25.6%	≤25.6%	Maintain =25.6% (local target)	Target based on current resources and planning
❖ BENCHMARK 8: Percentage of Ryan White HIV/AIDS Program clients with Medicaid or Medicare enrollment	CPCDMS	27% (2014)	>27%	>27%	>27%	>27%	Increase (local target)	Baseline to be updated
❖ BENCHMARK 9: Proportion of Ryan White HIV/AIDS Program clients who may qualify for Medicaid or Medicare, but who are not enrolled in either program	CPCDMS	To be developed	---	---	---	---	Decrease (local target)	
❖ BENCHMARK 10: Percentage of Ryan White HIV/AIDS Program clients with private health insurance	CPCDMS	10% (2014)	>10%	>10%	>10%	>10%	Increase (local target)	Baseline to be updated
❖ BENCHMARK 11: Proportion of Ryan White HIV/AIDS Program who may qualify for an Advanced Premium Tax Credit, but who are not enrolled in an ACA Marketplace QHP.	CPCDMS	To be developed	---	---	---	---	Decrease (local target)	6.3% of RW enrolled in QHP in 2015

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

July 2018

<i>Sun</i>	<i>Mon</i>	<i>Tue</i>	<i>Wed</i>	<i>Thu</i>	<i>Fri</i>	<i>Sat</i>
1	2 7:00 p.m. Public Hearing City Hall Annex 900 Bagby 77002	3 10:00 a.m. Priority & Allocations	4 Office Closed	5 12 noon Steering Committee	6	7
8	9	10	11	12 12 noon Planning Council Room 532 2:00 p.m. Comp HIV Planning Room 532	13	14
15	16 12 noon Affected Community Room 416	17 CANCELLED Quality Improvement	18	19	20	21
22	23	24 10:00 a.m. Operations	25 9:00 a.m. SIRR Meeting Montrose Center 401 Branard 77006	26 11:30 a.m. Priority & Allocations Room 416	27	28
29	30	31				