

**Houston Area HIV Services Ryan White Planning Council**

**Comprehensive HIV Planning Committee**

2:00 p.m., Thursday, November 12, 2020

*Meeting Location: Online or via phone – **Please do not come in person***

*Join Zoom Meeting by clicking on this link: <https://us02web.zoom.us/j/81035711790>*

*Meeting ID: 810 3571 1790*

*To join via telephone call: (346) 248-7799*

**AGENDA**

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**I. Call to Order**

A. Welcome

B. Moment of Reflection

C. Adoption of the Agenda

D. Approval of the Minutes (July 23, 2020)

Daphne L. Jones and  
Steven Vargas, Co-Chairs

**II. Public Comment and Announcements**

(NOTE: If you wish to speak during the Public Comment portion of the meeting, please sign up on the clipboard at the front of the room. No one is required to give his or her name or HIV status. All meetings are audio taped by the Office of Support for use in creating the meeting minutes. The audiotape and the minutes are public record. If you state your name or HIV status it will be on public record. If you would like your health status known, but do not wish to state your name, you can simply say: "I am a person living with HIV", before stating your opinion. If you represent an organization, please state that you are representing an agency and give the name of the organization.

**III. Review Year 3 Comprehensive Plan Evaluation Report**

A. Review Year 3 Comprehensive Plan Evaluation Report

B. Approve Evaluation Report

Amber Harbolt, Health Planner  
Office of Support

**IV. Quarterly Report**

A. Suggest any updates for the 2021 Comprehensive HIV  
Planning Committee Goals

Daphne L. Jones and  
Steven Vargas, Co-Chairs

**V. Announcements**

A. No Committee Meeting in December

**VI. Adjourn**

## Houston Area HIV Services Ryan White Planning Council

Comprehensive HIV Planning Committee  
3:00 p.m., Thursday, July 23, 2020  
Meeting Location: Zoom teleconference

### Minutes

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MEMBERS PRESENT	MEMBERS ABSENT	OTHERS PRESENT
Steven Vargas, Co-Chair	Ryan Clark	Curan Gandhi
Daphne L. Jones, Co-Chair	Denis Kelly	Heather Keizman, RWGA
Dawn Jenkins	Deondre Moore	Rebecca Edwards, RWGA
Rodney Mills	Matilda Padilla	Tya Johnson, HHD
Shital Patel	Faye Robinson	Miyase Koksai-Ayhan, HHD
Dominique Brewster	Imran Shaikh	Amber Harbolt, Office of Support
Datonye Charles	Bianca Burley	Diane Beck, Office of Support
Esther Ogunjimi	Larry Woods	
Anthony Williams		

**Call to Order:** Steven Vargas, Co-Chair, called the meeting to order at 3:14 p.m. and asked for a moment of reflection.

**Adoption of Agenda: Motion #1:** *it was moved and seconded (Charles, Jenkins) to adopt the agenda. Motion carried.*

**Approval of the Minutes: Motion #2:** *it was moved and seconded (Brewster, Patel) to approve the June 11, 2020 minutes. Motion carried.* Abstentions: Charles, Ogunjimi.

**Public Comment:** None.

**FY 2021 EIIHA Target Populations:** Harbolt reviewed the EIIHA Planning Process and Requirements, see attached. There have been no changes to the HRSA guidance for the EIIHA section of the grant application. The Texas Department of State Health Services (TDSHS) has not released any new data so the data to be reviewed for the target population selection process is current through 12/31/2018 (late diagnoses are current through 12/31/17). The committee reviewed the FY 2021 EIIHA Plan motions from the EIIHA workgroup. The EIIHA Workgroup met on July 16, 2020. Participants included representatives from prevention and care, community members, and consumers. The Workgroup reviewed the FY 2021 guidance from HRSA, adopted selection criteria, and selected the FY 2021 target populations. The target populations were sent out after the meeting for comment. There was no Council or Community input received regarding the target populations.

**Motion #3:** *it was moved and seconded (Mills, Williams) to approve the following populations for inclusion in the FY 2021 EIIHA Plan:*

1. *Black/African Americans*
2. *Hispanics/Latinx age 25 and over*

3. *Male-Male Sexual Contact/Men who have Sex with Men (MSM)*

*Office of Support is to include information on late diagnoses, along with HIV and aging, in the EIIHA section of the HRSA application. Motion carried.*

**Motion #4:** *it was moved and seconded (Williams, Ogunjimi) to have the Office of Support is to include a statement in the EIIHA section of the HRSA application recognizing that currently available epidemiologic data consistently fail to assess the need for testing, referral, and linkage in vulnerable populations such as among those who are transgender, intersex, homeless, those released from incarceration, adolescents ages 13 to 17, and young adults ages 18 to 24. Motion carried.*

**Announcements:** Vargas said that the committee will not meet in August due to the National HRSA conference being held that week. Harbolt said that in September she will be starting seminary but will continue working at reduced hours. Everyone congratulated her and wished her well.

**Adjournment:** **Motion:** *it was moved and seconded (Jones, Jenkins) to adjourn the meeting at 3:33 p.m. Motion carried.*

Submitted by:

Approved by:

\_\_\_\_\_  
Amber Harbolt, Office of Support      Date

\_\_\_\_\_  
Chair of Committee      Date

JA = Just arrived at meeting  
 LR = Left room temporarily  
 LM = Left the meeting  
 C = Chaired the meeting

**2020 Voting Record for Meeting Date July 23, 2020**

<b>MEMBERS</b>	<b>Motion #1: Agenda</b>				<b>Motion #2: Minutes</b>				<b>Motion #3: FY21 EIIHA Plan Motion Carried</b>				<b>Motion #4: Additional Info for the EIIHA Section Motion Carried</b>			
	<b>ABSENT</b>	<b>YES</b>	<b>NO</b>	<b>ABSTAIN</b>	<b>ABSENT</b>	<b>YES</b>	<b>NO</b>	<b>ABSTAIN</b>	<b>ABSENT</b>	<b>YES</b>	<b>NO</b>	<b>ABSTAIN</b>	<b>ABSENT</b>	<b>YES</b>	<b>NO</b>	<b>ABSTAIN</b>
Steven Vargas, Co-Chair				C				C				C				C
Daphne L. Jones, Co-Chair		X				X				X				X		
Dawn Jenkins		X				X				X				X		
Denis Kelly	X				X				X				X			
Rodney Mills		X				X				X				X		
Deondre Moore	X				X				X				X			
Matilda Padilla	X				X				X				X			
Shital Patel		X				X				X				X		
Faye Robinson		X				X				X				X		
Imran Shaikh	X				X				X				X			
Dominique Brewster		X				X				X				X		
Bianca Burley	X				X				X				X			
Datonye Charles		X						X		X				X		
Ryan Clark	X				X				X				X			
Esther Ogunjimi		X						X		X				X		
Anthony Williams		X				X				X				X		
Larry Woods	X				X				X				X			



# Houston Area Comprehensive HIV Prevention and Care Services Plan 2017 - 2021

*Capturing the community's vision for an ideal system of  
HIV prevention and care for the Houston Area*

Year 3 (2019) Evaluation Report

*Approval Pending*

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## **Vision**

The greater Houston area will become a community with an enhanced system of HIV prevention and care. New HIV infections will be reduced to zero. Should new HIV infections occur, every person, regardless of sex, race, color, ethnicity, national origin, age, familial status, marital status, military status, religion, disability, sexual orientation, genetic information, gender identity, pregnancy, or socio-economic circumstance, will have unfettered access to high-quality, life-extending care, free of stigma and discrimination.

## **Mission**

The mission of the 2017-2021 Houston Area Comprehensive HIV Prevention & Care Services Plan is to work in partnership with the community to provide an effective system of HIV prevention and care services that best meets the needs of populations living with, affected by, or at risk for HIV.

## Contributors

**Members of the Houston Area Comprehensive HIV Plan Evaluation Workgroup** *The following individuals serve as members of the Houston Area Comprehensive HIV Plan Evaluation Workgroup, which met in October 2020 to evaluate Year 3 implementation. This report summarizes their findings and recommendations.*

Nicholas Sloop, Co-Chair  
Steven Vargas, Co-Chair  
Bianca Burley  
Cynthia Deverson  
Chelsea Frand  
Jon-Michael Gillispie  
Ronnie Galley  
Camden Hallmark  
Angela F. Hawkins  
Dawn Jenkins

Sha'Terra Johnson  
Denis Kelly  
Miyase Koksai-Ayhan  
Rodney Mills  
Matilda Padilla  
Oscar Perez  
Crystal Starr  
Crystal Townsend  
Mike Wilkerson  
Larry Woods

**Other Contributors** *The following individuals provided data, analysis, and other information used during the evaluation process and in this report*

Ryan White Planning Council  
Office of Support  
Tori Williams  
Amber Harbolt  
Diane Beck  
Rodriga Avila

Harris County Public Health  
Ryan White Grant Administration  
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Division of Disease Prevention and Control  
Camden Hallmark

Suggested citation:

The Houston Area Ryan White Planning Council and The Houston HIV Prevention Community Planning Group. Houston Area Comprehensive HIV Prevention and Care Services Plan (2017 – 2021). Evaluation Report for Year 3 Implementation (covering the period of January 2019 to December 2019). Conducted October 2020.



## Introduction

The Houston Area Comprehensive HIV Prevention and Care Services Plan (2017 – 2021) (also referred to as the 2017 Comprehensive Plan) was revealed to the public on January 10, 2017, following an 11-month planning process with collaboration between 90 individuals and 55 agencies. The final plan included 64 specific activities slated for completion by 2021 to help shape an ideal system of HIV prevention and care in the Houston Area. Seventy-five (75) distinct objectives and benchmark measurements were included to evaluate progress over time. The 2017 Comprehensive Plan included an *Evaluation and Monitoring Plan*, which set forth the annual assessment process of the plan's activities and progress made in achieving the plan's objectives and benchmarks. This report summarizes the findings of the evaluation and monitoring process for Year 3 (January 2019 – December 2019) plan implementation, including implementation highlights and recommendations.

## Purpose

The 2017 Comprehensive Plan's *Evaluation and Monitoring Plan* (Section III) outlines specific goals and methods for assessing progress in both the short- and long-term aims of the plan:

*The goal of the monitoring and evaluation plan is to assess successful implementation of the 2017-21 Comprehensive HIV Prevention and Care Services Plan as measured by:*

- 1. Completion of stated activities and efforts (Section II); and*
- 2. Annual progress toward the target measurements of stated objectives and benchmarks (Section II).*

Assessment of activities status measures the extent of the community's implementation of the 2017 Comprehensive Plan each calendar year, and allows for regular review and update. Over time, assessment of the progression of objectives and benchmarks reveals the plan's larger impact on reaching stated goals, filling gaps in the HIV prevention and care system in the Houston Area, and, ultimately, alleviating the local HIV epidemic.

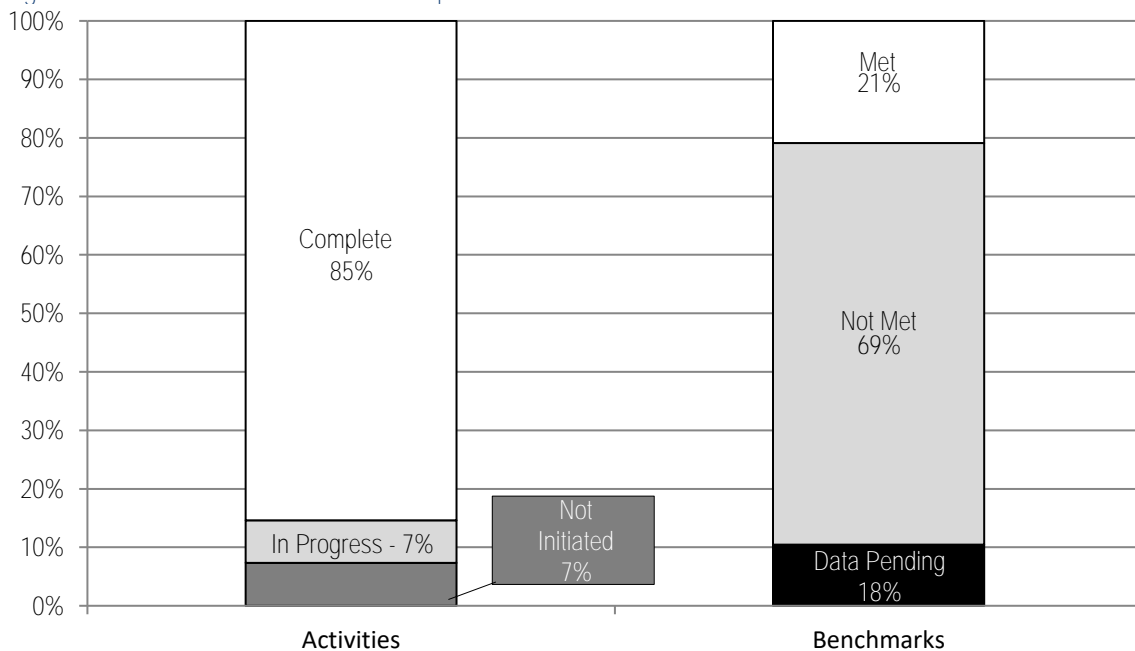
## Methods

The methods used for evaluating Year 1 implementation are consistent with the *Evaluation and Monitoring Plan* (Section III). Each Responsible Party (**RP**) named in the 2017 Comprehensive Plan (Section II) completed a series of written checklists of designated activities and benchmarks. For the designated activities, the RP provided process notes and other updates to support and provide context for progress made on each designated activity. The RP also indicated the level of completion for each assigned activity (NI = Not Initiated, P = In Progress, C = Complete). For the benchmarks, the RP supplied the most current and complete year-end data point for each benchmark using approved data sources. Staff in the Planning Council Office of Support cross-referenced and consolidated all checklists and supporting documentation, and gathered data on system-wide objectives and any benchmarks not assigned to a RP. Due to laboratory reporting issues, Texas Department of State Health Services (**TDSHS**) was unable to provide 2019 surveillance data. For this reason, staff used surveillance data for 2018. The 2017 Comprehensive Plan's standing *Evaluation Workgroup* convened twice in October 2020 to review activities and benchmarks progress for the 2019 calendar year, offer suggested revisions to activities, and identify key findings.

## Summary of Year 1 Implementation

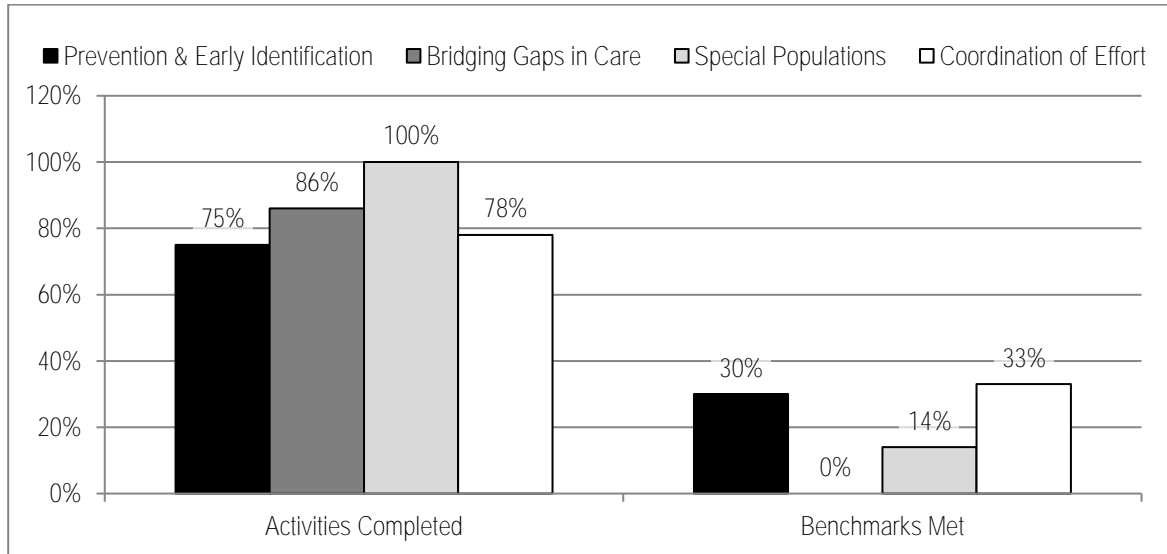
- The Houston Area Report Card: Overall Status of Year 3 Activities and Benchmarks  
The 2017 Comprehensive Plan is organized into four specific Strategies, each containing activities and benchmarks. Across the four Strategies, 41 activities were designated for completion in Year 3, including activities to be conducted as needed or annually; and 64 benchmarks were measured for Year 3. Overall, 38 of the activities designated for Year 1 (93%) were completed or had progress made (**Figure 1**). Only three activities (7%) designated for completion in Year 3 were not initiated as the result of staff vacancies or limited capacity to complete the activity as written. Fourteen benchmarks measured in Year 3 (21%) met or exceeded targets set for 2019. Data were not available or were still pending for 7 benchmarks in Year 3 benchmarks (10%).

Figure 1: Activities and Benchmarks Completion for Year 3



Overall, the *Strategy for Addressing the Needs of Special Populations* saw the most activity progress with 100% of its activities completed (**Figure 2**). The *Strategy for Prevention and Early Identification* saw the least overall activity progress with 75% of its activities completed by the end of Year 3. The *Strategy for Coordination of Effort* had the most benchmark progress with 33% of benchmarks met or exceeded. The *Strategy for Bridging Gaps in Care and Reaching the Out of Care* saw the least benchmark progress with no benchmarks measures met.

Figure 2: Percent of Activities and Benchmarks Completed/Met for Year 3, by Strategy



- The Houston Area Objectives: Progress Made in Year 1  
The 2017 Comprehensive Plan includes ten objectives intended to serve as measures of overall improvements in the Houston Area of HIV prevention and care system. The objectives include core epidemiological indicators of HIV diagnosis, nationally defined benchmarks for HIV prevention and care services, and locally defined goals for the Houston Area Ryan White HIV Program (**Figure 3**). Of the ten objectives measured for Year 3, two had most current measurements that met or exceeded the 2017 Comprehensive Plan targets originally set for Year 3.

Figure 3: Status of System-Wide Objectives for the Houston Area, Year 3

Objective	Baseline	Y3 Measure	Y3 Target	Status
1.) Number of new HIV diagnoses	1,386	1,350	≤1,157	✗
2.) Percent of newly diagnosed PLWH* informed of status through targeted testing	97%	90%	≥ 97%	✗
3.) Proportion of newly diagnosed PLWH linked to clinical care within one month	66%	60%	≥ 77%	✗
4.1) Percent of new HIV diagnoses with an HIV Stage 3 diagnosis within one year	26%	23%	≤ 22%	✗
4.2.) Percent of new HIV diagnoses with an HIV Stage 3 diagnosis within one year among Hispanic/Latino men age 35+	36%	13-30%	≤ 31%	✓
5.) Percent of RW Program clients who are in continuous HIV care	75%	75%	≥ 84%	✗
6.) Percent of diagnosed PLWH retained in HIV medical care	61%	68%	≥ 78%	✗
7.) Proportion of RW Program clients with are virally suppressed	80%	77%	≥ 80%	✗
8.) Percent of diagnosed PLWH who are virally suppressed	55%	59%	≥ 70%	✗
9.) Number of gay and bisexual men of color and women of color receiving PrEP** education each year	2,822	3,845	≥ 2,000	✓

\*People Living with HIV

\*\*Pre-Exposure Prophylaxis

## Highlights of Year 3 Implementation

- New Activities Initiated in Year 3

Year 3 marked in the initiation of several new activities to support a more cohesive and equitable system of HIV prevention and care in the Houston Area. Under the *Strategy for Prevention and Early Identification* Activity 11: “Explore feasibility of same-day PrEP initiation for high-risk HIV negative individuals”, HHD began a contract in January 2019 for the 340B Program to generate revenue and assist in sustainability of PrEP services at the HHD. Activity 1 under the *Strategy for Bridging Gaps in Care and Reaching the Out of Care* to “coordinate a workgroup to develop and secure funding for a public service announcement detailing the benefits of treatment adherence, treatment as prevention, and retention in care,” was found to be infeasible as written because securing media funding is beyond the Office of Support’s allowable activities. However, the Office of Support retained this activity in 2020 and is currently working with Project LEAP classes to create grassroots public service announcements addressing these issues. Under the *Strategy for Addressing the Needs of Special Populations* Activity 3: “Partner with SIRR to develop a process for tracking linkage for recently released PLWH” TRG, the Criminal Justice Workgroup with the END Coalition, the EIS Workgroup with Harris County Jail, SIRR, and TDSHS have developed linkage tracking processes for recently released PLWH. Within the *Strategy for Improving Coordination of Effort* Activity 9 to “compile HIPAA compliant best practices for using technology to communicate with consumers, and incorporate into provider training”, RWGA used the HRSA-funded Learning Collaborative to identify best practice information for integration into allowable Houston EMA provider policies. RWGA also provided funded agencies with technical assistance on implementing these practices.

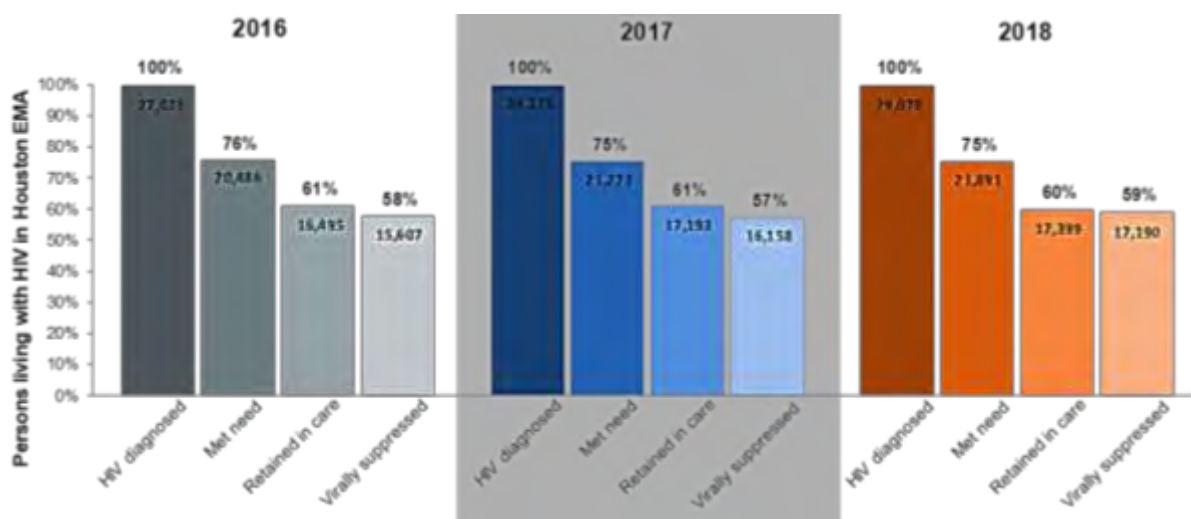
- Fourteen Benchmarks Met or Exceeded Targets in Year 3

Of the 67 benchmarks measured in Year 3, 14 had measurements that met or exceeded 2019 targets. The 2017 Comprehensive Plan’s *Strategy for Prevention and Early Identification* benchmarks for the number of publicly-funded targeted and routine HIV test, the number of new HIV diagnoses in Sunnyside/South Park, Acres Home, and Montrose zip codes, the percentage of prevention and care staff receiving standardized pre-exposure prophylaxis (PrEP) training, and the number of MSM and transgender persons of color receiving PrEP education met or exceeded their 2019 targets. Four benchmark measurements met or exceeded 2019 targets for the *Strategy for Addressing the Needs of Special Populations*: the numbers of new diagnoses among people experiencing homelessness and those age 65+, the proportion of newly-diagnosed individuals age 13-24 linked to clinical care within three months of their HIV diagnosis, and the proportion of PLWH experiencing homelessness who are out of care. Under the *Strategy for Improving Coordination of Effort*, the proportion of Ryan White Planning Council (**RWPC**) members not employed at HIV care or prevention service providers, the proportion of PLWH reporting barriers to using Ryan White HIV/AIDS Program Support Services, and the proportion of PLWH reporting barriers to professional mental health counseling met or exceeded 2019 targets.

## Progress in the Houston EMA HIV Care Continuum

In addition to monitoring the system objectives in the Plan Objectives, evaluation process includes monitoring of the local HIV Care Continuum (**HCC**). While the 2017 Comprehensive Plan includes the Houston Health Services Delivery Area (**HSDA**) served through Ryan White Part B and States Services funds, and through CDC HIV prevention funding in the Houston Metropolitan Statistical Area (**MSA**), the data reflected in the HCC are derived only from data collected for the counties that comprise the Houston Eligible Metropolitan Area (**EMA**) (**Figure 4**). As mentioned in the Methodology section, TDSHS was unable to provide 2019 surveillance data due to an issue with laboratory reporting. For this reason, the Houston EMA HCC reflects data for 2016 through 2018.

Figure 4: The Houston EMA HIV Care Continuum, 2016-2018



Source: Texas Department of State Health Services, 2019

HIV diagnosed = No. people living with diagnosed HIV in 2016, 2017, and 2018 in the Houston EMA

Met need = No. diagnosed PLWH with met need (at least one: medical visit, ART prescription, or CD4/VL test in 12 months) in 2016, 2017, and 2018 in the Houston EMA.

Retained in care = No. diagnosed PLWH retained in care (PLWH with at least 2 visits, labs, or ARVs in 12 months, at least 3 months apart) in 2016, 2017, and 2018 in the Houston EMA

The HCC reflects within the Houston EMA: the number of PLWH in who have been diagnosed; and, among the diagnosed, the numbers of PLWH with records of met need, retention in care, and viral suppression within the 2016, 2017, and 2018 calendar years. The proportions of the diagnosed PLWH with met need, who were retained in care, and who had suppressed viral loads at the end of the calendar year have remained consistent since 2016.

## Recommendations from the Evaluation Workgroup

- Recommendations for Existing Activities

The Evaluation Workgroup reviewed updates for all activities with annual, as needed, or 2019 completion timeframes, and recommends the following modifications to existing activities:

Strategy for Prevention and Early Identification: No recommendations

Strategy for Bridging Gaps in Care and Reaching the Out of Care: No recommendations

Strategy for Addressing the Needs of Special Populations:

- Activity 10: “Investigate the need for Ryan White-funded support groups (traditional or online) for youth, seniors, LGBTQ populations, heterosexual, and rural populations in the 2019 Needs Assessment.”
  - **Recommendation: Retain as an activity for 2021 for staff to conduct analysis in special population profiles.** Rationale: Questions assessing need for traditional and online support groups were included in the 2020 Needs Assessment. Thirty-eight percent (38%) of participants reported needing psychosocial support/support groups, with a majority expressing preference for in-person groups. Additional analysis is needed to determine specific needs for the populations listed.
- Activity 13: “Train frontline staff on resources and access to gender-affirming medications.”
  - **Recommendation: Retain as an activity for 2021.** Rationale: This activity was added by Evaluation Workgroup at the request of the 2018 Project LEAP class, but HHD management did not vet this addition. HHD will consider this activity for 2021 following management vetting.

Strategy for Improving Coordination of Effort:

- Activity 4: “Extend notification of general trainings where capacity does not present a barrier to non-funded case managers and social workers at local hospitals (Ben Taub, LBJ, etc).”
  - **Recommendation: Retain as an activity for 2021.** Rationale: This activity was expanded to all RPs by Evaluation Workgroup, but HHD management did not vet this addition. HHD will consider this activity for 2021 following management vetting.
- Activity 9: “Compile HIPAA compliant best practices for using technology to communicate with consumers, and incorporate into provider training.”
  - **Recommendation: Specify “best practices for telehealth” and retain as an activity for 2021.** Rationale: As a result of the COVID-19 pandemic, more PLWH may be seeking healthcare through telehealth services.
- No Recommended Technical Adjustments to Benchmarks  
The Evaluation Workgroup reviewed the Objectives and Benchmark Evaluation tool (see **Appendix**), and had the opportunity to make recommendations for technical adjustments. No recommendations were made.

## Appendix: Year 3 Comprehensive Plan Objectives & Benchmarks

### System Objective Evaluation Tool

Objective to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	2021 Target	Notes
❖ OBJECTIVE 1: Number of new HIV diagnoses in the Houston Area	TDSHS eHARS	1,386 (2014)	≤1,157	1,350 (2018)	✗ Not met	□ at least 25% to ≤1004 (NHAS target)	Region is EMA
❖ OBJECTIVE 2: Percentage of newly diagnosed individuals identified through <i>targeted</i> HIV testing who are informed of their HIV+ status	HHD, TDSHS HIV Testing & Awareness Data	97.2% (2015)	97.2%	90.4% (HHD - 2018)	✗ Not met	Maintain or increase ≥97.2% (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)	77.4%	60% (2018)	✗ Not met	↑ 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)	22.0%	23% (2017)	✗ Not met	□ 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)	30.6%	HL: 29.7% Male: 23.9% 35+: 13.1% (2017)	✓ Met	□ 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)	84%	74.8% (2019)	✗ Not met	↑ to at least 90% (NHAS target)	
❖ OBJECTIVE 6: Percentage of individuals with diagnosed HIV 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)	78.4%	68% (2018)	✗ Not met	↑ 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%	77.4% (2019)	✗ Not met	Maintain or increase ≥80.4% (local target)	
❖ OBJECTIVE 8: Percentage of individuals with diagnosed HIV in the Houston Area who are virally suppressed	TDSHS Viral Suppression Data	55% (2014)	70%	59% (2018)	✗ Not met	↑ 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	2,822 (2017)	≥2000	3,845 (2019)	✓ Met	≥2000 (local target)	



## Prevention and Early Identification Benchmarks

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	2021 Target	Notes
❖ BENCHMARK 1: Number of new HIV diagnoses in the Houston Area	TDSHS eHARS	1,386 (2014)	≤1,157	1,350 (2018)	✗ Not met	□ at least 25% to ≤1004 (NHAS target)	Region is EMA
❖ BENCHMARK 2: Number of HIV/STD brochures distributed	HHD	88,700 (2014)	88,700	3,500 (2018)	✗ Not met	Maintain =88,700 (local target)	Region is Houston/Harris County
❖ BENCHMARK 3: Number of publicly-funded targeted and routine HIV tests							Region is Houston/Harris County for HHD; EMA for TDSHS
Number of publicly-funded <i>targeted</i> HIV tests	HHD, TDSHS HIV Testing & Awareness Data	10,109 (2015)	10,109	11,963 (2018)	✓ Met	Maintain = 10,109 (local target)	
Number of publicly-funded <i>routine</i> HIV tests	HHD, TDSHS HIV Testing & Awareness Data	117,610 (2015)	117,610	129,543 (2018)	✓ Met	Maintain = 117,610 (local target)	
❖ BENCHMARK 4: New diagnoses positivity rate for publicly-funded <i>targeted</i> HIV testing	HHD, TDSHS HIV Testing & Awareness Data	1.76% (2015)	1.76%	1.54% (2018)	✗ Not met	Maintain = 1.76% (local target)	Region is Houston/Harris County for HHD; EMA for TDSHS;
❖ BENCHMARK 5: Percentage of newly diagnosed individuals identified through <i>targeted</i> HIV testing who are informed of their HIV+ status	HHD, TDSHS HIV Testing & Awareness Data	97.2% (2015)	97.2%	90.4% (HHD - 2018)	✗ Not met	Maintain or increase ≥97.2% (local target)	Region is Houston/Harris County for HHD; EMA for TDSHS Target exceeds NHAS 90% goal



## Prevention and Early Identification Benchmarks

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	2021 Target	Notes
❖ BENCHMARK 6: Percentage of new HIV diagnoses with an HIV stage 3 diagnosis within one year	TDSHS Late Diagnoses Data	25.9% (2014)	22.0%	23% (2017)	✗ Not met	□ 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)	77.4%	60% (2018)	✗ Not met	↑ 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%	77.4% (2019)	✗ Not met	Maintain or increase ≥80.4% (local target)	
❖ BENCHMARK 9: Percentage of individuals with diagnosed HIV in the Houston Area who are virally suppressed	TDSHS Viral Suppression Data	55% (2014)	60%	59% (2018)	✗ Not met	↑ to at least 80% (NHAS target)	Region is EMA
❖ BENCHMARK 10: Number of new HIV diagnoses in high HIV/STD morbidity zip codes targeted for intervention							
Sharpstown (77036 and 77074)	HHD, eHARS	56 (2014)	48	44 (2019)	✗ Not met	↓25% =42 (NHAS target)	
Sunnyside/South Park (77033 and 77051)	HHD, eHARS	34 (2014)	29	24 (2019)	✓ Met	↓25% =26 (NHAS target)	
Greater 5th Ward (77020 and 77026)	HHD, eHARS	28 (2014)	24	30 (2019)	✗ Not met	↓25% =21 (NHAS target)	
Acres Home (77088 and 77091)	HHD, eHARS	32 (2014)	27	24 (2019)	✓ Met	↓25% =24 (NHAS target)	
Montrose (77006)	HHD, eHARS	26 (2014)	22	18 (2019)	✓ Met	↓25% =20 (NHAS target)	

## Prevention and Early Identification Benchmarks

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	2021 Target	Notes
❖ BENCHMARK 11: Rate of STD diagnoses per 100,000 population (Chlamydia, gonorrhea, and primary and secondary syphilis)	HHD, STD MIS	CT: 600.4 GC: 184.1 P&S: 7.6 (2016)	CCT: 531.7 GC: 159.2 P&S: 7.3	CT: 592.3 GC: 187.5 P&S: 11.6 (2019)	✗ Not met ✗ Not met ✗ Not met	CT: =510.3 (local target) GC: 10.6%/ 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	280,000 (2019)	✗ Not met	Maintain =450,000 (local target)	Includes mass and targeted condom distribution efforts
❖ BENCHMARK 13: Number of high-risk individuals that completed an evidence-based behavioral intervention to reduce risk for HIV	HHD	4,944 (2015)	4,944	750 (2019)	✗ Not met	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	100% (2017)	100%	100% (2019)	✓ Met	100% (local target)	
❖ BENCHMARK 15: Number of MSM and transgender persons of color receiving pre-exposure prophylaxis (PrEP) education	Project PrIDE	1,215 (2017)	2,000	2,213 (Subcontractors)  40 (Service Linkage)  360 (HHD Clinics-2018)*	✓ Met	2,000 annually (local target)	Among HIV-negative clients seen by HHD frontline staff (i.e. DIS and SLWs) and HHD-funded contractors. *HHD cannot provide the number of MSM and transgender POC seen by DIS and receiving PrEP education due to problems in retrieving data from THISIS. As the 2019 data is incomplete, the HHD provided the 2018 data for the number of MSM and transgender persons of color seen at HHD clinics and receiving PrEP education.
❖ BENCHMARK 16: Percentage of HIV-negative clients screened for PrEP eligibility	HHD Project PrIDE, ECLIPS, Maven	68% (2017)	71.5%	70% (2019)	✗ Not met	10% increase to 75% (local target)	Among HIV-negative clients seen by HHD frontline staff (i.e., DIS and SLWs) and HHD-funded contractors

## Gaps in Care/Reaching OOC Benchmarks

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	2021 Target	Notes
❖ BENCHMARK 1: Proportion of PLWH with Unmet Need	TDSHS Unmet Need Data	25.0% (2014)	20.2%	25% (2018)	✗ Not met	□ 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)	77.4%	60% (2018)	✗ Not met	↑ 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)	84%	74.8% (2019)	✗ Not met	↑ to at least 90% (NHAS target)	
❖ BENCHMARK 4: Percentage of individuals with diagnosed HIV 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)	78.4%	68% (2018)	✗ Not met	↑ 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%	77.4% (2019)	✗ Not met	Maintain or increase ≥80.4% (local target)	
❖ BENCHMARK 6: Percentage of individuals with diagnosed HIV in the Houston Area who are virally suppressed	TDSHS Viral Suppression Data	55% (2014)	70%	59% (2018)	✗ Not met	↑ to at least 80% (NHAS target)	Region is EMA

## Address Needs of Special Pops. Benchmarks

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	2021 Target	Notes
❖ BENCHMARK 1: Number of new HIV diagnoses among each special population:							
Youth (13-24)	TDSHS eHARS	360 (2014)	186	308 (2018)	✗ Not met	↓25% =70 (NHAS target)	Region is EMA
Homeless	HMIS (potential)	54 (2014)	46	39 (2018)	✓ Met	↓25% =41 (NHAS target)	Region is Harris/Fort Bend County 2019 PIT Report – 2.9% homeless also PLWH. Applied to 2018 new dx
Incarcerated in Jail	TRG	Baseline to be established	---		Pending request	↓25% (NHAS target)	
Incarcerated in Prison	TDCJ	Baseline to be established	---		Pending request	↓25% (NHAS target)	
PWID	TDSHS eHARS	66 (2014)	56	60 (2018)	✗ Not met	↓25% =50 (NHAS target)	Region is EMA
MSM	TDSHS eHARS	930 (2014)	791	919 (2018)	✗ Not met	↓25% = 698 (NHAS target)	Region is EMA
Transgender and Gender Non-conforming	HHD, HIV Surveillance System	20 (2016)	16	37 (2019)	✗ Not met	↓25% =14 (NHAS target)	Region is Houston/Harris County
Women of Color	TDSHS eHARS	219 (2017)	205	246 (2018)	✗ Not met	↓25% = 164 (NHAS target)	Region is EMA
Aging (50 and older)	TDSHS eHARS	45+ = 264 55+ = 88 65+ = 20 (2014)	45+ = 217 55+ = 72 65+ = 16	45+ = 303 55+ = 112 65+ = 14	✗ Not met ✗ Not met ✓ Met	↓25% 45+ = 198 55+ = 66 65+ = 15 (NHAS target)	Region is EMA

## Address Needs of Special Pops. Benchmarks

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	2021 Target	Notes
❖ BENCHMARK 2: Proportion of newly-diagnosed individuals within each special population linked to clinical care within one month of their HIV diagnosis							Where region is EMA, Baseline and 2019 measure reflects 3 month linkage window
Youth (13-24)	TDSHS Linkage to Care Data	74.0% (2014)	80.6%	81% (2018)	✓ Met	85% (NHAS target)	Region is EMA
Homeless	Needs Assessment	53.9% (2016)	72.6%	45.2% (Unstable housing); 45.2% (Homeless) 2020	✗ Not met No set target	85% (NHAS target)	Region is HSDA Baseline: Unstable housing
Recently Released from Jail (*linked within 1 month of release)	TRG	Baseline to be established	---		Data pending	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	---		Data pending	85% (NHAS target)	Region is HSDA
PWID	TDSHS Linkage to Care Data	85.0% (2014)	≥85.0%	76.9% (2018)	✗ Not met	85% (NHAS target)	Region is EMA
MSM	TDSHS Linkage to Care Data	78.0% (2014)	82.2%	79.2% (2018)	✗ Not met	85% (NHAS target)	Region is EMA
Transgender and Gender Non-conforming	Needs Assessment	54.1% (2016)	72.7%	27.2% (2020)	✗ Not met	85% (NHAS target)	Region is HSDA
Women of Color	TDSHS eHARS	81% (2017)	83%	82% (2018)	✗ Not met	85% (NHAS target)	Region is EMA
Aging (50 and older)	TDSHS eHARS	45+ = 83% 55+ = 85% 65+ = Not available (2014)	45+ = 85% 55+ = 85% 65+ = 85%	45+ = 78% 55+ = 75% 65+ = 65%	✗ Not met ✗ Not met ✗ Not met	85% (NHAS target)	Region is EMA

## Address Needs of Special Pops. Benchmarks

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	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)	15.6%	23% (2018)	✗ Not met	10% (NHAS target)	Region is EMA
Homeless	TDSHS Unmet Need Analysis	60% (2015)	30%	48.3% (2018)	✓ Met	10% (NHAS target)	Region is EMA
Recently Released from Jail/Prison	TDSHS Minority AIDS Initiative Coordinator	Local data not available	---	Local data not available	No 2019 target specified	10% (NHAS target)	Region is HSDA 2014 NA = 11.9%
PWID	TDSHS Unmet Need Analysis	27.0% (2014)	16.8%	28% (2018)	✗ Not met	10% (NHAS target)	Region is EMA
MSM	TDSHS Unmet Need Analysis	25.0% (2014)	16%	24% (2018)	✗ Not met	10% (NHAS target)	Region is EMA
Transgender and Gender Non-conforming	TDSHS HIV Systems Consultant	17% (2017)	13.5%	Data Unavailable	Data Unavailable	10% (NHAS target)	Region is HSDA
Women of Color	TDSHS Unmet Need Analysis	To be developed	---	22.8%	No 2017 target specified	10% (NHAS target)	Region is EMA
Aging (50 and older)	TDSHS Unmet Need Analysis	45+ = 24% 55+ = 26% (2014) 65+ = 21% (2017)	45+ = 14% 55+ = 15% 65+ = 16%	45+ = 25% 55+ = 25% 65+ = 31%	✗ Not met ✗ Not met ✗ Not met	10% (NHAS target)	Region is EMA
❖ 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	HHD: 0% RWGA: Data Pending TRG: Data Pending	Track only	Track only	Region is Houston/Harris Count; EMA; HSDA

## Coordination of Effort Benchmarks

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	2021 Target	Notes
❖ BENCHMARK 1: Proportion of Ryan White Planning Council members who are not employed at HIV care or prevention service providers	RWPC-OS FY Membership Roster (Program Terms Report)	19/37 (51%) (FY16)	46% - 56%	18/34 (53%) (FY19)	✓ Met	Maintain within 5 percentage points of 51% (local target)	
❖ BENCHMARK 2: Number of non-HIV prevention and care service providers requesting information about HIV services	RWPC-OS	110 (2015)	>110	These data are not reliably collected	These data are not reliably collected;	Increase (local target)	Data cannot be reliability collected and therefore cannot be measured
❖ BENCHMARK 3: Proportion of PLWH reporting barriers to using Ryan White HIV/AIDS Program Core Medical Services	Needs Assessment	40.5% (2016)	<40.5%	56.6% (2020)	✗ Not met	Decrease (local target)	Baseline: Numerator = 203; Denominator = 501 Measure: Numerator = 312; Denominator = 551
❖ BENCHMARK 4: Proportion of PLWH reporting barriers to using Ryan White HIV/AIDS Program Support Services	Needs Assessment	20.2% (2016)	<20.2% (2016)	9.9% (2020)	✓ Met	Decrease (local target)	Baseline: Numerator = 93 Denominator = 461 Measure: Numerator = 55; Denominator = 551
❖ BENCHMARK 5: Proportion of PLWH reporting barriers to outpatient alcohol or drug abuse treatment services	Needs Assessment	8.2% (2016)	<8.2% (2016)	10.8% (2020)	✗ Not met	Decrease (local target)	Baseline: Numerator = 10 Denominator = 122 Measure: Numerator = 15 Denominator = 139

## Coordination of Effort Benchmarks

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2019 Target	2019 Measure	Met?	2021 Target	Notes
❖ BENCHMARK 6: Proportion of PLWH reporting barriers to professional mental health counseling	Needs Assessment	12.1% (2016)	<12.1%	10.2% (2020)	✓ Met	Decrease (local target)	Baseline: Numerator = 32 Denominator = 265 Measure: Numerator = 30 Denominator = 293
❖ BENCHMARK 7: Proportion of PLWH reporting housing instability	Needs Assessment	25.6% (2016)	≤25.6%	32% (2020)	✗ Not met	Maintain / decrease =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%		Data Pending	Increase (local target)	
❖ 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	---	RWGA cannot determine who may be qualified for Medicaid or Medicare	RWGA cannot determine who may be qualified for Medicaid or Medicare	Decrease (local target)	RWGA cannot determine who may be qualified for Medicaid or Medicare
❖ BENCHMARK 10: Percentage of Ryan White HIV/AIDS Program clients with private health insurance (including Marketplace QHPs)	CPCDMS	10% (2014)	>10%		Data Pending	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	23% (2017)	<23%		Data Pending	Decrease (local target)	6.3% of RW enrolled in QHP in 2015



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## **2020 QUARTERLY REPORT COMPREHENSIVE HIV PLANNING COMMITTEE**

### **Status of Committee Goals and Responsibilities (\*means mandated by HRSA):**

1. Assess, evaluate, and make ongoing recommendations for the Comprehensive HIV Prevention and Care Services Plan and corresponding areas of the End HIV Plan, in collaboration toward the development of one local ending the HIV epidemic plan.
  
2. \*Determine the size and demographics of the estimated population of individuals who are unaware of their HIV status.
  
3. \*Work with the community and other committees to develop a strategy for identifying those with HIV who do not know their status, make them aware of their status, and link and refer them into care.
  
4. \*Explore and develop on-going needs assessment and comprehensive planning activities including the identification and prioritization of special studies.
  
5. \*Review and disseminate the most current Joint Epidemiological Profile.

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**Committee Chairperson**

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**Date**