

Houston Area HIV Services Ryan White Planning Council

Comprehensive HIV Planning Committee

2:00 p.m., Thursday, May 12, 2016

Meeting Location: 2223 W. Loop South, Room 532

Houston, Texas 77027

AGENDA

I. Call to Order

A. Welcome and Introductions

John Lazo and

B. Moment of Reflection

Nancy Miertschin, Co-Chairs

C. Adoption of the Agenda

D. Approval of the Minutes (February 11, 2016)

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/AIDS 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/AIDS 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 with HIV/AIDS", before stating your opinion. If you represent an organization, please state that you are representing an agency and give the name of the organization. If you work for an organization, but are representing yourself, please state that you are attending as an individual and not as an agency representative. Individuals can also submit written comments to a member of the staff who would be happy to read the comments on behalf of the individual at this point in the meeting. All information from the public must be provided in this portion of the meeting.)

III. Report from the Speakers Bureau Workgroup

John Lazo

Nancy Miertschin, Co-Chairs

IV. Review Updates on 2016 Needs Assessment

Amber Harbolt, Health Planner

A. Review Sampling Summary and Plans for Surveying Out of Care

Office of Support

B. Evaluation Workgroup Meeting

C. NAG Meeting – 5/19 at 2:00 p.m.

V. Review Updates on 2017 Comprehensive Plan

A. Prevention and Early Identification

B. Gaps in Care and Reaching the Out of Care

C. Addressing the Needs of Special Populations

D. Coordination of Effort

E. Comprehensive Plan Leadership Team Meeting – 5/16 at 3:00 p.m.

VI. Review 2016 Public Hearing Topics

A. May 24th – HIV Care Continuum

B. June 27th – Preliminary Needs Assessment Results or
Project L.E.A.P. Special Study Results

VII. New Business:

John Lazo and

A. Discuss Committee Name Change

Nancy Miertschin, Co-Chairs

B. Committee Quarterly Report

VIII. Announcements

IX. Adjourn

Houston Area HIV Services Ryan White Planning Council

Comprehensive HIV Planning Committee

2:00 p.m., Thursday, February 11, 2016

Meeting Location: 2223 West Loop South, Room 532; Houston, Texas 77027

Minutes

MEMBERS PRESENT	MEMBERS ABSENT	OTHERS PRESENT
David Benson, Co-Chair	Denny Delgado	Steven Vargas
Nancy Miertschin, Co-Chair	Herman Finley	Alex Moses
Ted Artiaga	Robert Noble	Sha'Terra Johnson-Fairley
Curtis Bellard	Shital Patel, excused	Amber Harbolt, Office of Support
David Benson		Diane Beck, Office of Support
Evelio Salinas Escamilla		
Steven Harris		
Allen Murray		
Gloria Sierra		
Larry Woods		
Kevin Aloysius		
Denis Kelly		
Tam Kiehnhoff		
Osaro Mgbere		
Esther Ogunjimi		

Call to Order: Nancy Miertschin, co-chair, called the meeting to order at 2:10 p.m. and asked for a moment of reflection. She then asked everyone to introduce themselves.

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

Approval of the Minutes: Motion #2: *it was moved and seconded (Harris, Artiaga) to approve the December 10, 2015 minutes with one change: the date of the meeting was December 10th. Motion carried.* Abstentions: Aloysius, Bellard, Lazo, Mgbere, Ogunjimi, Woods.

Public Comment: None.

Nuts and Bolts for Committee Members: Harbolt reviewed the following documents: Nuts and Bolts for New Members, Timeline of Critical 2016 Council Activities, Committee Meeting Schedule, memo re Petty Cash and the 2016 Committee Goals. Lazo said that the name of the committee is easily confused with the Comprehensive Planning process so maybe it should be changed; Miertschin said they will present this suggestion at the next Steering committee meeting

Report from the Chamber of Commerce Workgroup: Miertschin said that she and Lazo working to change the name of the workgroup to the Speaker's Bureau workgroup. Lazo reported that the speaker's bureau can present information to all types of businesses in the area. He is proposing that the workgroup meet in April, August and December. There are currently six

speakers who can present on a wide variety of topics and he is hoping to add two alternate speakers to the lineup. There were 6 presentations done in 2015 and so far he has three presentations booked for 2016.

Update on the 2017 Comprehensive Plan process: Harbolt said that the Leadership Team has now met three times. They reviewed and updated their Mission and Vision statements, Guiding principles, Goals and most recently completed their Objectives. See attached. Harbolt reviewed the changes that were made to the Goals and Objectives. Please contact the Office of Support if you are interested in participating on one or more workgroups.

Update on the 2016 Needs Assessment: Harbolt reviewed the sampling plan created by the Epi workgroup, see attached.

Announcements: Kelly said that the AIDS Walk is March 6, 2016 and it is starting at 1:00 pm this year instead of early in the morning.

Adjournment: The meeting was adjourned at 3:32 p.m.

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

2016 Voting Record for Meeting Date February 11, 2016

	Motion #1: Agenda				Motion #2: Minutes			
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN
MEMBERS								
John Lazo, Co-Chair		X						X
Nancy Miertschin, Co-Chair				C				C
Ted Artiaga		X				X		
Curtis Bellard Im 2:51 pm		X						X
David Benson Im 3:21 pm		X				X		
Denny Delgado	X							
Evelio Salinas Escamilla		X				X		
Herman Finley	X							
Steven Harris		X				X		
Allen Murray		X						X
Robert Noble	X							
Shital Patel	X							
Gloria Sierra		X						X
Larry Woods		X				X		
Kevin Aloysius		X						X
Denis Kelly		X				X		
Tam Kiehnhoff		X				X		
Osaro Mgbere		X						X
Esther Ogunjimi		X						X

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

2016 Houston Area HIV/AIDS Needs Assessment
Sampling Summary
May 5, 2016

1. Overall Sample Size

	Minimum	Maximum
Sample Size Goal	587	1,024
Current Sample Size*	364	364
Percent of Goal	62%	26%

2. Rural Representation

	Goal	Current*
Harris County	92%	91%
Non-Harris County	8%	9%

3. Retention in Care Representation

	Goal	Current*
Retained in Care	75%	99.4%
Not Retained in Care	25%	0.6%

4. Demographic Proportions

	Goal	Current*
Male	75%	68%
Female	25%	32%
White	21%	13%
Black	49%	64%
Hispanic	27%	20%
18 – 24	5%	4%
25 – 49	59%	38%
50+	35%	58%
MSM	55%	42%
IDU	11%	2%
Heterosexual	30%	54%

5. Special Populations

	Current*
Rural**	0.3%
Not Retained in Care	0.6%
Unstable Housing	27%
IDU	2 %
MSM	42%
Recently Released	6%
Transgender	4%

* Only 339 surveys entered; 25 surveys pending entry. Current percentages reflect entered surveys only.

** Residing in Wharton, Colorado, Austin, or Walker County

2017 Houston Area Comprehensive HIV Services Plan

Logic Model 1: Goal, Solutions, and Benchmarks - PEI

Solutions {Recommended approaches to achieve the goal}
② <ol style="list-style-type: none">1. Adopt high-impact structural interventions such as governmental policy change and population-based efforts that normalize HIV risk reduction and help create unfettered access to HIV information and proven prevention tools2. Expand opportunities for HIV testing for the general public and in high-incidence populations and communities3. Increase the timeliness of the linkage to care system for newly-diagnosed HIV+ individuals4. Expand prevention with positives including treatment adherence and Treatment as Prevention (TasP), HIV prophylaxis including Pre-Exposure Prophylaxis (PrEP), and behavior change interventions for HIV+ individuals and their partners*5. Expand HIV prevention data collection to include behavioral surveillance and measures of community-wide sexual health*6. Expand opportunities for HIV and sexual health education for the general public an high-incidence populations and communities**

Goal {Desired long-term result, outcome, or change}
<ol style="list-style-type: none">1. Reduce new HIV infections2. Increase awareness of HIV3. Increase awareness of HIV status4. Ensure early entry into care5. Increase access to ARV therapy for treatment and prevention*6. Address the HIV prevention needs of high incidence communities7. Reduce population risk factors for HIV infection ①

Benchmarks {How the result will be measured}
<ol style="list-style-type: none">1. Reduce number of new HIV infections diagnosed in the Houston Area by 25% ③ <p>-Will revisit benchmarks on brochures distributed and mean number of calls to HIV prevention hotline in June pending information from HHD</p> <p>-All Hip Hop for HIV Awareness-related benchmarks to be revised/removed</p>

2017 Houston Area Comprehensive HIV Services Plan
Logic Model 1: Goal, Solutions, and Benchmarks - Gaps in Care

Solutions {Recommended approaches to achieve the goal}
② <ol style="list-style-type: none">1. Target linkage to care efforts to vulnerable points in the HIV system (e.g. at initial diagnosis, before the first medical visit, after the initial visit, upon release from incarceration, etc.) where individual are more likely to not seek care or to fall out of care, particularly newly-diagnosed PLWH*2. Expand retention and engagement activities with in-care PLWH, focusing on community education system enhancements, and health literacy*3. Adopt strategies to re-engage out of care PLWH to return to care

Goal {Desired long-term result, outcome, or change}
<ol style="list-style-type: none">1. Ensure early entry into care ①2. Reduce Unmet Need3. Increase retention in continuous care4. Improve health outcomes for People Living with HIV (PLWH)*5. Increase viral suppression**

Benchmarks {How the result will be measured}
Continue work on Benchmarks on 6/2 at 3 p.m. ③

2017-2021 Comprehensive Plan

Strategy to Address the Needs of Special Populations

Definitions

- **Youth** aged 13-24
- **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/Recently Released (I/RR)** 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/tattooing
- **Men who have Sex with Men (MSM)** 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 and Gender Non-conforming** defined as individuals who cross or transcend culturally-defined categories of gender
- **Women of Color** defined as individuals who identify racially or ethnically as Black/African American, Hispanic/Latina, or Multiracial women
- **Aging** aged 50 and up

Note: Youth, homeless, IRR, IDU, MSM, and transgender and gender non-conforming are special populations retained from the 2012 Comprehensive Plan with relevant adjustments to terms and definitions reflect appropriate terminology, lived experiences, and/or data; the Special Populations Strategy Workgroup added women of color and aging following analysis of local epidemiological, needs assessment/special study, service utilization data, and the National HIV/AIDS Strategy Updated for 2020. The Workgroup developed all definitions using various sources.

2017 Houston Area Comprehensive HIV Services Plan

Logic Model 1: Goal, Solutions, and Benchmarks – SP

Solutions {Recommended approaches to achieve the goal}
② <ol style="list-style-type: none">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*2. Close gaps in targeted interventions and services to better meet the HIV prevention and care needs of special populations*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*

Goal {Desired long-term result, outcome, or change}
<ol style="list-style-type: none">1. Prevent new HIV infections among the special populations of youth, homeless, IRR from jail or prison, IDU, MSM, transgender and gender non-conforming, women of color, and aging* ①2. Reduce barriers to HIV prevention and care for the special populations of youth, homeless, IRR from jail or prison, IDU, MSM, transgender and gender non-conforming, women of color, and aging*3. Strengthen the cultural and linguistic competence of the HIV prevention and care system¹ <p>¹Revise definitions of “culture” and “health” in activities relating to this goal to align with current Office of Minority Health <i>National Cultural and Linguistically-Appropriate Services Standards</i></p>

Benchmarks {How the result will be measured}
Continue work on Benchmarks on 5/20 at 9 a.m. ③

2017 Houston Area Comprehensive HIV Services Plan

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

Solutions {Recommended approaches to achieve the goal}
<p>②</p> <ol style="list-style-type: none">1. Launch proactive efforts to unify stakeholders and to engage new and non-traditional partners in achieving the HIV prevention and care mission2. Support technical assistance and training to current HIV-related service providers and extend training to potential providers*3. Increase communication of HIV-related issues through media to educate and mobilize the public and providers* <p>Continue work on Benchmarks on 5/13 at 9 a.m.</p>

Goal {Desired long-term result, outcome, or change}
<ol style="list-style-type: none">1. Increase awareness of HIV among all Greater Houston Area health and social service providers* ①2. Increase the availability of HIV-related prevention and care services and providers*3. Reduce barriers to HIV prevention and care4. Partner to address co-occurring public health problems that inhibit access to HIV prevention and care*5. Monitor and respond to state and national-level changes in the health care system*

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

2017 Houston Area Comprehensive HIV Services Plan

Logic Model 2: Solution, Focus & Activities

Solution {Recommended approach to achieve stated goals and targets}
①



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 #)