

Houston Area HIV Services Ryan White Planning Council

Comprehensive HIV Planning Committee

2:00 p.m., Thursday, June 09, 2016

Meeting Location: Leonel Castillo Community Center, 2101 South Street
Houston, Texas 77009

AGENDA

*=Handout to be provided at meeting

I. Call to Order

A. Welcome

John Lazo and

B. Moment of Reflection

Nancy Miertschin, Co-Chairs

C. Adoption of the Agenda

D. Approval of the Minutes

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, Chair

IV. Update on 2016 Needs Assessment

Amber Harbolt, Health Planner

A. Review Sampling Summary and Weighting Information*

Office of Support

B. NAG Analysis Meeting – 6/16 at 1:30 p.m.

C. NAG Meeting – 6/23 at 2:00 p.m.

V. Update 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 – 6/30 at 3:00 p.m.

VI. Continue Discussion on Committee Name Change

VII. Announcements

John Lazo and

Nancy Miertschin, Co-Chairs

VIII. Adjourn

Houston Area HIV Services Ryan White Planning Council

Comprehensive HIV Planning Committee

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

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

Minutes

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

Call to Order: John Lazo, co-chair, called the meeting to order at 2:08 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 (Bellard, Kiehnhoff) to adopt the agenda with one correction: change IV.B. Evaluation Workgroup to Analysis Workgroup. Motion carried.*

Approval of the Minutes: Motion #2: *it was moved and seconded (Bellard, Sierra) to approve the February 11, 2016 minutes with one correction: change David Benson to John Lazo. Motion carried.* Abstention: Noble.

Public Comment: None.

Report from the Chamber of Commerce Workgroup: Lazo said that the Speaker's Bureau workgroup met just before this meeting to discuss finding business needing speakers and to get volunteers to help the speakers at each engagement. He said that there were 6 presentations done in 2015 and he would like to double that for 2016.

Update on the 2016 Needs Assessment: Harbolt reviewed the sampling summary dated May 5, 2016. See attached. She said that as of today we have 401 surveys completed and need 186 to meet the minimum threshold. We are working with DSHS DIS who are looking for those who may be out of care in their system. They are contacting them to get them into care and also transferring them to our office to take the survey. The Houston Health Department will also refer any out of care individuals that they find. The Merck grant for re-linkage found that many people thought to be out of care were either in care, moved away or deceased. Ogunjimi expressed concern for African immigrants because they are a growing population with specific needs and are not being addressed as an emerging population. The Needs Assessment Group will meet on May 19, 2016 at 2:00 p.m. The Evaluation Workgroup will meet on Monday, May 23, 2016 at 10:00 a.m. to discuss the needs assessment document.

Update on the 2017 Comprehensive Plan process: Harbolt reviewed the Goals and Solutions for each workgroup, see attached. She also reviewed the next steps that the workgroup will be doing with Logic Model 2 and 3, see attached. The Leadership Team will meet on Monday, May 16, 2016 at 3:00 p.m.

Public Hearing Topics: May 24th – HIV Care Continuum and June 27th – either preliminary Needs Assessment findings or the Project LEAP Special Study results.

Discuss Committee Name Change: Motion #3: *it was moved and seconded (Kelly, Kiehnhoff) to postpone discussion of this item until the next committee meeting. **Motion Carried.***

Announcements: Happy Birthday to John Lazo.

Adjournment: The meeting was adjourned at 3:43 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 May 12, 2016

MEMBERS	Motion #1: Agenda				Motion #2: Minutes				Motion #3: Postpone discussion of committee name change			
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN
John Lazo, Co-Chair				C				C				C
Nancy Miertschin, Co-Chair	X											
Ted Artiaga		X				X			X			
Curtis Bellard lm 2:55 pm		X				X			X			
David Benson	X											
Denny Delgado	X											
Evelio Salinas Escamilla	X											
Herman Finley	X											
Allen Murray		X				X				X		
Robert Noble lm 3:04 pm		X						X	X			
Shital Patel	X											
Gloria Sierra		X				X				X		
Larry Woods	X											
Kevin Aloysius	X											
Denis Kelly		X				X				X		
Tam Kiehnhoff		X				X				X		
Osaro Mgbere	X											
Esther Ogunjimi		X		X						X		

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

2016 Houston Area HIV/AIDS Needs Assessment
Sampling Summary
June 2, 2016

1. Overall Sample Size

	Minimum	Maximum
Sample Size Goal	587	1,024
Current Sample Size*	461	461
Percent of Goal	79%	45%

2. Rural Representation

	Goal	Current*
Harris County	92%	93%
Non-Harris County	8%	7%

3. Retention in Care Representation

	Goal	Current*
Retained in Care	75%	99.5%
Not Retained in Care	25%	0.5%

4. Demographic Proportions

	Goal	Current*
Male	75%	65%
Female	25%	34%
White	21%	12%
Black	49%	64%
Hispanic	27%	24%
18 – 24	5%	3%
25 – 49	59%	42%
50+	35%	54%
MSM	55%	43%
IDU	11%	1%
Heterosexual	30%	53%

5. Special Populations

	Current*
Rural**	0.2%
Not Retained in Care	0.5%
Unstable Housing	26%
IDU	1 %
MSM	43%
Recently Released	7%
Transgender	4%

* Only 447 surveys entered; 14 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 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}
<ol style="list-style-type: none">1. Reduce the number of new HIV infections diagnosed among each Special Population by 25 percent ③2. Increase the proportion of newly-diagnosed individuals within each Special Population linked to HIV clinical care within three months of their HIV diagnosis to at least 85 percent3. Decrease the proportion of PLWH with unmet need within each Special Population*4. Monitor grievances relating to cultural and linguistic competence received through the Ryan White grievance lines**

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*4. Optimize and explore new ways to utilize technology to: (a) link people at risk for or living with HIV (PLWH) to resources; and (b) assist providers with real-time referrals for clients to HIV prevention and care services*5. Strengthen coordination of data systems within the HIV care system, HIV prevention and care; and HIV prevention and care service providers and the broader health care delivery system*

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}
<ol style="list-style-type: none">1. Maintain the number of Ryan White Planning Council members who are not employed at HIV care or prevention service providers* ③2. Increase of non-HIV prevention and care service providers requesting information about HIV services¹3. Reduce the proportion of Needs Assessment respondents reporting barriers to using Ryan White HIV/AIDS Program Core Medical Services4. Reduce the proportion of Needs Assessment respondents reporting barriers to using Ryan White HIV/AIDS Program Support Services <p>Continue Work on Benchmarks on 6/10 at 9 a.m.</p>

UPDATED:
05/27/16

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

*Unless otherwise noted,
meetings are held at:*

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

June 2016

	<i>Sun</i>	<i>Mon</i>	<i>Tue</i>	<i>Wed</i>	<i>Thu</i>	<i>Fri</i>	<i>Sat</i>
				1	2 12 noon Steering Committee Room #240 3:00 pm Gaps in Care Wg Rm #416	3 9:00 am Special Populations Wg Rm # 240	4
	5 National HIV Long-Term Survivors Awareness Day	6 10:00 am NAG Analysis Wg Rm #TBD 3:00 pm Prevention and Early Identification Wg Room #416	7	8 National Caribbean American HIV Awareness Day	9 12 noon Planning Council Leonel Castillo Community Ctr 2101 South St, 77009 2:00 pm Comp HIV Planning	10 9:00 am Coordination of Effort Wg Room #TBD	11
	12	13 11 am - 3 pm Priority & Allocations Special meeting Room #240	14 CANCELLED Operations 11 am - 3 pm Priority & Allocations Special meeting	15 11 am - 3 pm Priority & Allocations Special meeting 6:30 pm Affected Community Change Happens 3353 Elgin St 77004	16 CANCELLED Quality Improvement 1:30 pm NAG Analysis Wg Rm #TBD	17 9:00 am Special Populations Wg Rm # TBD	18
	19	20	21 RESCHEDULED: See 06/15/16 Affected Community Room #532	22 11:00 am Priority & Allocations w/Project LEAP Room #416	23 CANCELLED P & A 2:00 p.m. Needs Assessment Group (NAG) Room #TBD	24 9:00 am Coordination of Effort Wg Room #TBD	25
	26	27 7:00 pm Public Hearing 900 Bagby 77002 Nat'l HIV Testing Day	28 11:00 am TENTATIVE Priority & Allocations	29 SIRR	30 3:00 pm Leadership Team Room #TBD		