Houston Area HIV Services Ryan White Planning Council
Office of Support
Meeting Location: 1440 Harold Street, Houston, Texas 77006
832 927-7926 telephone; http://rwpchouston.org

Memorandum

To:	Members, Quality Improvement Committee	
	Tana Pradia, Co-Chair	Faye Robinson
	Pete Rodriguez, Co- Chair	*Herman Finley*
	Kevin Aloysius	*Denis Kelly*
	Caleb Brown	*Gloria Sierra*
	Titan Capri	*Deborah Somoye*
	Daphne L. Jones	*Denis Kelly*
	Oscar Perez	*Christopher Walker*
Copy:	Glenn Urbach	Mackenzie A. Hudson
	Mauricia Chatman	Diane Beck
	Francisco Ruiz	Rod Avila
	Tiffany Shepherd	Ann Robison
	Sha'Terra Johnson	Gary Grier
	Patrick Martin	
From:	Tori Williams	
Date:	Tuesday, November 7, 2023	
Re:	Meeting Notice	

We look forward to seeing you at the next Quality Improvement Committee meeting. The primary goal of the meeting is to review the FY 2024 Standards of Care and Performance Measures. Details are as follows:

Quality Improvement Committee Meeting
2:00 p.m., Tuesday, November 14, 2023

To participate virtually, click on this link:
https://us02web.zoom.us/j/81144509622?pwd=SFNBM1RScVFabHkzakVpaUZoeHhIdz09
Meeting ID: 811 4450 9622 Passcode: 125672
Or, call in by dialing: 346 248 7799

To attend in person: Bering Church, 1440 Harold St, Houston, Texas 77006

RSVP to Rod, even if you cannot attend the meeting. She can be reached at: Rodriga.Avila@harriscountytx.gov or by telephone at 832 927-7926. And, if you have questions for your committee mentor, do not hesitate to contact her at: Tana Pradia, 832 298-4248, tanapradia@gmail.com.

DRAFT

Houston Area HIV Services Ryan White Planning Council

Quality Improvement Committee

2:00 pm, Tuesday, November 14, 2023

Join Zoom Meeting by clicking on this link:
https://us02web.zoom.us/j/81519929661?pwd=cXZPdzkzdjJwWnJPeFRJc1RwOStYUT09
Meeting ID: 811 4450 9622 Passcode: 125672 To join via telephone call: (346) 248-7799

In-person location: Bering Church, 1440 Harold Street, Houston, TX 77006. Please park and enter the building from behind the church on Hawthorne Street

Agenda

* = Handout to be distributed via email or at the meeting

I. Call to Order — Tana Pradia and Pete Rodriguez, Co-Chairs
   A. Welcoming Remarks and Moment of Reflection
   B. Adoption of Agenda
   C. Approval of Minutes

II. Public Comment

(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. If you work for an organization, but are representing your self, 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. Reports from the Administrative Agents
   A. Ryan White Part A — Glenn Urbach
   B. Ryan White Part B and State Services — Tionna Cobb

IV. FY 2024 Standards of Care and Performance Measures
   A. Ryan White Part A and MAI — Mauricia Chatman, RWGA*
   B. Ryan White Part B and State Services (SS) — Patrick Martin, TRG**

V. Old Business
   A. 2024 Data Reports
   B. Committee Quarterly Report
   C. Appreciations

VI. Announcements

VII. Adjourn

*RWGA = Ryan White Grant Administration
**TRG = The Resource Group

DRAFT

Houston Area HIV Services Ryan White Planning Council

Quality Improvement Committee
2:00 p.m., Tuesday, August 15, 2023
Meeting location: Zoom Teleconference

Minutes

MEMBERS PRESENT	MEMBERS ABSENT	OTHERS PRESENT
Pete Rodriguez, Co-Chair	Kevin Aloysius, excused	Crystal Starr, RWPC Chair
Caleb Brown	Tana Pradia, excused	Allen Murray, RWPC
Titan Capri	Faye Robinson	Glenn Urbach, RWGA
Daphne Jones	Herman Finley	Mauricia Chatman, RWGA
Oscar Perez	Gloria Sierra, excused	Francisco Ruiz, RWGA
Denis Kelly	Christopher Walker	Patrick Martin, TRG
Deborah Somoye		Sha'Terra Johnson, TRG
		Tori Williams, Ofc of Support
		Mackenzie Hudson, Ofc of Support
		Diane Beck, Ofc of Support

Call to Order: Pete Rodriguez, Co-Chair, called the meeting to order at 2:03 p.m. and asked for a moment of reflection.

Adoption of the Agenda: ***Motion #1****: it was moved and seconded (Kelly, Somoye) to approve the agenda with one change: Under New Business add Assessment of the Part A Administrative Mechanism.* ***Motion carried****.*

Approval of the Minutes: ***Motion #2****: it was moved and seconded (Jones, Kelly) to approve the July 18, 2023 minutes.* ***Motion carried****.* Abstentions: Brown, Jones, Perez, Somoye.

Public Comment: See attached comments re HIV and Aging. Williams read a public comment from Dr. Patel that was received in email today, see attached.

Reports from the Administrative Agents
Ryan White Part A/MAI: Urbach presented the following attached reports:

- FY 2022 Ryan White Part A and MAI Procurement Report, dated 07/21/23
- FY 2023 Ryan White Part A and MAI Service Utilization Report, dated 07/21/23
- FY 2023 Ryan White Part A and MAI Service Utilization Report, dated 07/21/23

Ryan White Part B and State Services: Martin presented the following attached reports:

- FY2324 Ryan White Part B Service Utilization Report, dated 07/31/23
- FY2324 Ryan White Part B Procurement Report, dated 08/03/23
- FY2223 DSHS State Services Procurement Report, dated 08/03/23
- Health Insurance Service Utilization Report, dated 07/05/23

Assessment of the Part A Administrative Mechanism: Hudson presented the attached report. ***Motion #3****: it was moved and seconded (Kelly, Brown) to accept the Assessment of the Ryan White Part A Administrative Mechanism with no corrective action needed.* **Motion carried.**

Stand-Alone Mental Health Subcategory Service Definition: The committee reviewed the attached draft service definition and Collapsed List of Priority Populations. Martin said that the information specific to the new service definition is shaded in gray. ***Motion #4:*** *it was moved and seconded (Kelly, Brown) to accept the service definition for the mental health subcategory*. **Motion Carried**.

Announcements: Starr asked everyone to please fill out the food form and return it to the Office of Support as soon as possible.

Adjourn: ***Motion:*** *it was moved and seconded (Capri, Kelly) to adjourn the meeting at 2:32 p.m.* **Motion Carried.**

Submitted by: Approved by:

Tori Williams, Director Date Committee Chair Date

DRAFT

Scribe: Beck

ja = Just arrived at meeting
lm = Left the meeting
C = Chaired the meeting

2023 Quality Improvement Meeting Voting Record for Meeting Date 08/15/23

MEMBERS:	**Motion #1** Agenda				**Motion #2** Minutes				**Motion #3** Assessment of the Admin Mech				**Motion #4** Mental Health subcategory svc definition			
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN
Pete Rodriguez, Co-Chair				**C**				**C**				**C**				**C**
Tana Pradia, Co-Chair	**X**				**X**				**X**				**X**			
Kevin Aloysius	**X**				**X**				**X**				**X**			
Caleb Brown		**X**						**X**		**X**				**X**		
Titan Capri		**X**				**X**				**X**				**X**		
Daphne Jones		**X**						**X**		**X**						**X**
Oscar Perez ja 2:16 pm	**X**				**X**					**X**				**X**		
Faye Robinson	**X**				**X**				**X**				**X**			
Herman Finley	**X**				**X**				**X**				**X**			
Denis Kelly		**X**				**X**						**X**		**X**		
Gloria Sierra	**X**				**X**				**X**				**X**			
Deborah Somoye		**X**						**X**		**X**				**X**		
Christopher Walker	**X**				**X**				**X**				**X**			

Part A Reflects "TBD" Funding Scenario
MAI Reflects "TBD" Funding Scenario

FY 2023 Ryan White Part A and MAI
Procurement Report

Priority	Service Category	Original Allocation *RWPC Approved Level Funding Scenario*	Award Reconcilation	July Adjustments (carryover)	August 10% Rule Adjustments (f)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procure-ment Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
1	**Outpatient/Ambulatory Primary Care**	**10,965,788**	**460,625**	**0**	**0**	**0**	**0**	**11,426,413**	**46.94%**	**11,426,413**	**0**		**4,171,374**	**37%**	**50%**
1.a	Primary Care - Public Clinic (a)	3,927,300	182,397					4,109,697	16.88%	4,109,697	0	3/1/2023	$1,604,066	39%	50%
1.b	Primary Care - CBO Targeted to AA (a) (e) (f)	1,064,576	49,443					1,114,019	4.58%	1,114,019	0	3/1/2023	$603,464	54%	50%
1.c	Primary Care - CBO Targeted to Hispanic (a) (e)	910,551	42,289					952,840	3.91%	952,840	0	3/1/2023	$648,551	68%	50%
1.d	Primary Care - CBO Targeted to White/MSM (a) (e)	1,147,924	53,314					1,201,238	4.93%	1,201,238	0	3/1/2023	$260,634	22%	50%
1.e	Primary Care - CBO Targeted to Rural (a) (e)	1,100,000	51,088					1,151,088	4.73%	1,151,088	0	3/1/2023	$357,810	31%	50%
1.f	Primary Care - Women at Public Clinic (a)	2,100,000	97,531					2,197,531	9.03%	2,197,531	0	3/1/2023	$536,388	24%	50%
1.g	Primary Care - Pediatric (a.1)	15,437	-15,437					0	0.00%	0	0	3/1/2023	$0	0%	0%
1.h	Vision	500,000	0					500,000	2.05%	500,000	0	3/1/2023	$160,460	32%	50%
1.x	Primary Care Health Outcome Pilot	200,000	0					200,000	0.82%	200,000	0	3/1/2023	$0	0%	50%
2	**Medical Case Management**	**1,880,000**	**-97,859**	**0**	**0**	**0**	**0**	**1,782,141**	**7.32%**	**1,782,141**	**0**		**705,944**	**40%**	**50%**
2.a	Clinical Case Management	531,025	0					531,025	2.18%	531,025	0	3/1/2023	$286,139	54%	50%
2.b	Med CM - Public Clinic (a)	301,129	0					301,129	1.24%	301,129	0	3/1/2023	$ 124,759	41%	50%
2.c	Med CM - Targeted to AA (a) (e)	183,663	0					183,663	0.75%	183,663	0	3/1/2023	$84,087	46%	50%
2.d	Med CM - Targeted to H/L (a) (e)	183,665	0					183,665	0.75%	183,665	0	3/1/2023	$26,566	14%	50%
2.e	Med CM - Targeted to W/MSM (a) (e)	66,491	0					66,491	0.27%	66,491	0	3/1/2023	$35,030	53%	50%
2.f	Med CM - Targeted to Rural (a)	297,496	0					297,496	1.22%	297,496	0	3/1/2023	$52,771	18%	50%
2.g	Med CM - Women at Public Clinic (a)	81,841	0					81,841	0.34%	81,841	0	3/1/2023	$71,319	87%	50%
2.h	Med CM - Targeted to Pedi (a.1)	97,859	-97,859					0	0.00%	0	0	3/1/2023	$0	0%	0%
2.i	Med CM - Targeted to Veterans	86,964	0					86,964	0.36%	86,964	0	3/1/2023	$1,509	2%	50%
2.j	Med CM - Targeted to Youth	49,867	0					49,867	0.20%	49,867	0	3/1/2023	$23,764	48%	50%
3	**Local Pharmacy Assistance Program**	**2,067,104**	**0**	**0**	**0**	**0**	**0**	**2,067,104**	**8.49%**	**2,067,104**	**0**	3/1/2023	**$824,677**	**40%**	**50%**
3.a	Local Pharmacy Assistance Program-Public Clinic (a) (e)	367,104	0					367,104	1.51%	367,104	0	3/1/2023	$96,505	26%	50%
3.b	Local Pharmacy Assistance Program-Untargeted (a) (e)	1,700,000	0					1,700,000	6.98%	1,700,000	0	3/1/2023	$728,171	43%	50%
4	**Oral Health**	**166,404**	**0**	**0**	**0**	**0**	**0**	**166,404**	**0.68%**	**166,404**	**0**	3/1/2023	**83,900**	**50%**	**50%**
4.b	Oral Health - Targeted to Rural	166,404	0					166,404	0.68%	166,404	0	3/1/2023	$83,900	50%	50%
5	**Health Insurance (c)**	**1,383,137**	**223,222**		**0**	**0**	**0**	**1,606,359**	**6.60%**	**1,606,359**	**0**	3/1/2023	**$803,175**	**50%**	**50%**
7	**Medical Nutritional Therapy (supplements)**	**341,395**	**0**					**341,395**	**1.40%**	**341,395**	**0**	**3/1/2023**	**$167,083**	**49%**	**50%**
10	**Substance Abuse Services - Outpatient (c)**	**45,677**	**0**	**0**	**0**	**0**	**0**	**45,677**	**0.19%**	**45,677**	**0**	3/1/2023	**$12,119**	**27%**	**50%**
13	**Non-Medical Case Management**	**1,267,002**	**0**	**0**	**0**	**0**	**0**	**1,267,002**	**5.20%**	**1,267,002**	**0**	**3/1/2023**	**$679,091**	**54%**	**50%**
13.a	Service Linkage targeted to Youth	110,793	0					110,793	**0.46%**	110,793	0	3/1/2023	$42,113	38%	50%
13.b	Service Linkage targeted to Newly-Diagnosed/Not-in-Care	100,000	0					100,000	**0.41%**	100,000	0	3/1/2023	$31,191	31%	50%
13.c	Service Linkage at Public Clinic (a)	370,000	0					370,000	**1.52%**	370,000	0	3/1/2023	$194,828	53%	50%
13.d	Service Linkage embedded in CBO Pcare (a) (e)	686,209	0					686,209	**2.82%**	686,209	0	3/1/2023	$410,959	60%	50%
14	**Medical Transportation**	**424,911**	**0**	**0**	**0**	**0**	**0**	**424,911**	**1.75%**	**424,911**	**0**		**175,902**	**41%**	**50%**
14.a	Medical Transportation services targeted to Urban	252,680	0					252,680	1.04%	252,680	0	3/1/2023	$126,678	50%	50%
14.b	Medical Transportation services targeted to Rural	97,185	0					97,185	0.40%	97,185	0	3/1/2023	$49,224	51%	50%
14.c	Transportation vouchering (bus passes & gas cards)	75,046	0					75,046	0.31%	75,046	0	3/1/2023	$0	0%	50%
15	**Emergency Financial Assistance**	**1,653,247**	**485,889**	**0**	**0**	**0**	**0**	**2,139,136**	**8.79%**	**2,139,136**	**0**		**1,018,729**	**48%**	**50%**
15.a	EFA - Pharmacy Assistance	1,553,247	485,889					2,039,136	8.38%	2,039,136	0	3/1/2023	$982,992	48%	50%
15.b	EFA - Other	100,000	0					100,000	0.41%	100,000	0	3/1/2023	$35,737	36%	50%
17	**Outreach**	**420,000**	0					**420,000**	**1.73%**	**420,000**	**0**	**3/1/2023**	**$108,426**	**26%**	**50%**
FY23_RW_DIR	**Total Service Dollars**	**20,614,665**	**1,071,877**	**0**	**0**	**0**	**0**	**21,686,542**	**89.09%**	**21,686,542**	**0**		**8,750,420**	**40%**	**50%**
									Unallocated	Unobligated					50%
	Part A Grant Award:	**24,342,151**	***Carryover:***	**0**			***Total Part A:***	**24,342,151**	**0**	**0**					
		Original Allocation	**Award Reconcilation**	**July Adjusments (carryover)**	**August 10% Rule Adjustments**	**October Adjustments**	**Final Quarter Adjustments**	**Total Allocation**	**Percent**	**Total Expended on Services**	**Percent**	**Award Category**	**Award Amount**	**Amount Spent**	**Balance**
	Core (must not be less than 75% of total service dollars)	**16,849,505**	**585,988**	**0**	**0**	**0**	**0**	**17,435,493**	**80.40%**	**6,768,271**	**77.35%**	Formula			0

Part A Reflects "TBD" Funding Scenario
MAI Reflects "TBD" Funding Scenario

FY 2023 Ryan White Part A and MAI
Procurement Report

Priority	Service Category	Original Allocation *RWPC Approved Level Funding Scenario*	Award Reconcilation	July Adjustments (carryover)	August 10% Rule Adjustments (f)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procure-ment Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
	Non-Core (may not exceed 25% of total service dollars)	**3,765,160**	**485,889**	**0**	**0**	**0**	**0**	**4,251,049**	**19.60%**	**1,982,149**	**22.65%**	Supplemen			0
	Total Service Dollars (does not include Admin and QM)	**20,614,665**	**1,071,877**	**0**	**0**	**0**	**0**	**21,686,542**		**8,750,420**		Carry Over	0		0
												Totals	0	0	0
	Total Admin (must be ≤ 10% of total Part A + MAI)	**2,208,914**	**18,000**	**0**	**0**	**0**	**0**	**2,226,914**	**8.33%**						
	Total QM (must be ≤ 5% of total Part A + MAI)	**428,695**	**0**	**0**	**0**	**0**	**0**	**428,695**	**1.60%**						

MAI Procurement Report

Priority	Service Category	Original Allocation *RWPC Approved Level Funding Scenario*	Award Reconcilation	July Adjustments (carryover)	August 10% Rule Adjustments (f)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procure-ment Balance	Date of Procure-ment	Expended YTD	Percent YTD	Percent Expected YTD
1	**Outpatient/Ambulatory Primary Care**	**2,107,819**	**-39,764**	**0**	**0**	**0**	**0**	**2,068,055**	**86.82%**	**2,068,055**	**0**		**1,059,075**	**51%**	**50%**
1.b (MAI)	Primary Care - CBO Targeted to African American	1,065,775	-20,106		0			1,045,669	43.90%	1,045,669	0	3/1/2023	$566,250	54%	50%
1.c (MAI)	Primary Care - CBO Targeted to Hispanic	1,042,044	-19,658		0			1,022,386	42.92%	1,022,386	0	3/1/2023	$492,825	48%	50%
2	**Medical Case Management**	**320,099**	**-6,038**	**0**	**0**	**0**	**0**	**314,061**	**13.18%**	**314,061**	**0**		**$95,738**	**30%**	50%
2.c (MAI)	MCM - Targeted to African American	160,050	-3,019					157,031	6.59%	157,031	0	3/1/2023	$70,410	45%	50%
2.d (MAI)	MCM - Targeted to Hispanic	160,049	-3,019					157,030	6.59%	157,030	0	3/1/2023	$25,329	16%	50%
	Total MAI Service Funds	**2,427,918**	**-45,802**	**0**	**0**	**0**	**0**	**2,382,116**	**100.00%**	**2,382,116**	**0**		**1,154,813**	**48%**	**50%**
	Grant Administration	0	0	0	0	0	0	0	0.00%	0	0		0	0%	0%
	Quality Management	0	0	0	0	0	0	0	0.00%	0	0		0	0%	0%
	Total MAI Non-service Funds	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0.00%**	**0**	**0**		**0**	**0%**	**0%**
	Total MAI Funds	**2,427,918**	**-45,802**	**0**	**0**	**0**	**0**	**2,382,116**	**100.00%**	**2,382,116**	**0**		**1,154,813**	**48%**	**50%**
	MAI Grant Award	**2,382,116**	***Carry Over:***	**0**			***Total MAI:***	**2,382,116**							
	Combined Part A and MAI Orginial Allocation Total	**25,680,192**							Unallocated	Unobligated					50%
									0	**0**		***MAI Award***	**2,382,116**		
Footnotes:							**Total Part A & MAI**	**26,724,267**							
All	When reviewing bundled categories expenditures must be evaluated both by individual service category and by combined categories. One category may exceed 100% of available funding so long as other category offsets this overage.														
(a)	Single local service definition is multiple HRSA service categories. (1) does not include LPAP. Expenditures must be evaluated both by individual service category and by combined service categories.														
(c)	Funded under Part B and/or SS														
(e)	10% rule reallocations														

THE RESOURCE GROUP

2024 STANDARDS OF CARE

AND PERFORMANCE MEASURES

REV231107

1

PURPOSE

- Review the current Standards of Care and Performance Measures
- Outline DSHS Changes to the Standards and Measures
- Review TRG changes to The Standards and Measures
- Collect Feedback from the Community, The Providers and the People We Serve

2

FULL TRANSPARENCY

- Though the Standards of Care are a collaborative process with community stakeholders, providers, and people being served, Final Approval of the Standards of Care reside with TRG and DSHS.

3

DSHS UNIVERSAL STANDARDS

- DSHS developed Universal Standard for All Its Funded Services that Subrecipients must follow.
- https://www.dshs.texas.gov/hiv-std-program/texas-dshs-hiv-std-program-hiv-medical-support-service-categories/universal-standards

4

2023/2024 PILOT INDICATORS

TWO-YEAR AUDITING CYCLE

5

UNIVERSAL STANDARDS

- **Page 10: Take Charge Texas**
  - **<u>Indicator 45</u>: Policies are in place at all agency locations that are funded in the state of Texas with RWHAP Part B and State Services funds that ensure TCT information is protected and maintained to ensure client confidentiality.**
  - **<u>Indicator 46</u>: Agency has local policies and procedures in place relating to TCT and the data collected through TCT.**

6

UNIVERSAL STANDARDS

- Page 15: Health Insurance Assistance
  - Indicator 77: Where funds are used for copays of eyewear, agency must maintain documentation of the physician's statement that the eye condition is related to HIV. (Already In SOCs)

7

UNIVERSAL STANDARDS

- Page 18: Mental Health Services
  - Indicator 94: Policies/procedures in place for emergency/crisis intervention plan. (Already In SOCs)

8

TRAUMA-INFORMED SERVICE DELIVERY

FROM PREACHING TO PRACTICING

9

ALL SERVICE CATEGORIES

- **TRAUMA-INFORMED SERVICE DELIVERY:**
  - **Trauma-informed approaches (TIA) is a universal framework that any organization can implement to build a culture that acknowledges and anticipates that many of the people being served and those delivering the services have histories of trauma and that the environment and interpersonal interactions within an organization can exacerbate the physical, mental, and behavioral manifestations of trauma.**

10

ALL SERVICE CATEGORIES

- **TRAUMA-INFORMED SERVICE DELIVERY:**
  - **Trauma-informed care is a service delivery approach focused on an understanding of and responsiveness to the impact of trauma. Trauma-informed care is not a one-size-fits-all approach to service delivery. It's not a program. It's a set of principles and approaches that can shape the ways that people interact within an organization, with clients, patients, customers, and other stakeholders, and with the environment. "A trauma-informed care approach recognizes the intersection of trauma with many health and social problems for which people seek services and treatment, aiming to sensitively address trauma along with an individual's issues."**

11

ALL SERVICE CATEGORIES

- **TRAUMA-INFORMED SERVICE DELIVERY:**
  - **Trauma-informed service delivery (TISD) requires that:**
    - **Policies are reviewed and revised to ensure that they incorporate trauma-informed approaches and resist retraumatizing the people being served and the staff providing the services.**
    - **Staff are trained to be aware of trauma and avoid processes and practices that may retraumatize survivors.**
    - **Systems and workflows should be altered to support the environment that promotes trauma-informed care.**

12

TRG TRAINING SERIES

- TRG will be developing a training video series for its You Tube Channel to cover the expectations of this Standard.
  - Combination of TRG-specific and respected resource training videos.

13

AFFECTED COMMITTEE/COMMUNITY COMMENTS

14

AC/COMMUNITY COMMENTS

- Each year the Affected Committee hosts a community forum for comments about the funded services.
- TRG send its Meaningful Engagement Manager to collect comments about its services.
- Comments are reviewed to determine if a standard needs to be created.
- Meeting occurred 10/23. Comments are incorporated in today's discussion.

15

HEALTH INSURANCE ASSISTANCE

- Standard 1.7: Matched DSHS Language
- Standard 3.8: Trauma-Informed Service Delivery
- Affected Committee/Community Comments

16

HIA COMMENTS

- Health Insurance Assistance (HIA) Concerns:
  - Few or no warm handoffs and limited or no communication with PLWH.
  - HIA Staff are not communicating updates to PLWH.
  - OAHS Subrecipients are not accepting some of the insurance plans.

17

HIA COMMENTS

- TRG will conduct provider interviews to determine practices.
- TRG will conduct further focus groups with those receiving OHC services to determine potential resolutions that will address the concerns.
- TRG will determine any additional SOC revisions or alternative resolutions based on this feedback.

18

HOSPICE

- **Standard 2.10: Trauma-Informed Service Delivery**

19

LINGUISTIC SERVICES

- **Standard 2.7: Trauma-Informed Service Delivery**

20

MENTAL HEALTH SERVICES (MHS)

- Standard 2.7: Trauma-Informed Service Delivery

21

MHS TARGETING SPECIAL POPULATIONS

- Based on Mental Health Standards
- Local Definition: Inserted Target Populations
- Standard 2.11: Trauma-Informed Service Delivery
- Standard 2.12: Collaborative Relationships
- Standard 2.13: Specialized Training
- Standard 2.14: Community Based Approach

22

MHS TARGETING SPECIAL POPULATIONS

- Target Populations
  - Transgender Persons (Emphasizing Those Who Are Latinx/Black and/or Under The Age Of 25),
  - Individuals Who Exchange Sex For Money, and
  - Individuals Born Outside The United States.

23

ORAL HEALTH CARE

- Standard 2.9: Trauma-Informed Service Delivery
- Affected Committee/Community Comments

24

Oral Health Care (OHC) Comments

- Too many appointments
- Up to 5 appointments before service is received.
  1. Eligibility
  2. Intake
  3. X-Ray
  4. Discussion of a dental service plan
  5. May see dentist or more discussion
- And a separate appointment for each quadrant of the mouth.

25

OHC Comments

- TRG will conduct provider interviews to determine practices.
- TRG will conduct further focus groups with those receiving OHC services to determine potential resolutions that will address the concerns.
- TRG will determine any additional SOC revisions or alternative resolutions based on this feedback.

26

REFERRAL FOR HEALTH CARE (AEW)

- **Standard 1.7: TCT Additional Measures**
- **Standard 2.7: Trauma-Informed Service Delivery**

27

REFERRAL FOR HEALTH CARE (IRR)

- **Standard 1.11: TCT Additional Measures**
- **Standard 3.8: Trauma-Informed Service Delivery**

28

REFERRAL FOR HEALTH CARE (IRR)

- Standard 1.11: TCT Additional Measures
- Standard 3.8: Trauma-Informed Service Delivery

29

WRAP-UP

- Feedback from this workgroup and the community comments will be reviewed, and additional revisions will be made if warranted.
- The final draft Standards will be presented to QI Committee and full Council.

30

Prepared by: Ryan White Grant Administration

FY 2023 Ryan White Part A and MAI Service Utilization Report

Date Range 3/1/23 - 9/30/23

RW PART A SUR																		
Priority	Service Category	Goal	Unduplicated Clients Served YTD	Male	Female	Trans gender	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
1	**Outpatient/Ambulatory Primary Care (excluding Vision)**	8,643	6,781	76%	22%	2%	42%	11%	2%	44%	0%	0%	4%	28%	27%	12%	26%	3%
1.a	Primary Care - Public Clinic (a)	2,959	2,383	73%	26%	1%	41%	9%	2%	49%	0%	0%	2%	17%	25%	15%	36%	4%
1.b	Primary Care - CBO Targeted to AA (a)	2,417	1,801	71%	26%	4%	99%	0%	1%	0%	0%	0%	5%	37%	27%	10%	18%	2%
1.c	Primary Care - CBO Targeted to Hispanic (a)	1,916	1721	83%	13%	3%	0%	0%	0%	100%	0%	1%	6%	33%	29%	12%	19%	1%
1.d	Primary Care - CBO Targeted to White and/or MSM (a)	774	528	86%	12%	1%	0%	85%	15%	0%	0%	0%	2%	27%	26%	8%	33%	4%
1.e	Primary Care - CBO Targeted to Rural (a)	683	429	71%	29%	0%	34%	25%	1%	40%	0%	0%	4%	25%	27%	13%	28%	3%
1.f	Primary Care - Women at Public Clinic (a)	793	627	0%	99%	1%	49%	6%	1%	44%	0%	0%	2%	12%	25%	18%	38%	6%
1.g	Primary Care - Pediatric (a)	5	0															
1.h	Vision	2,815	1215	74%	24%	2%	43%	13%	2%	41%	0%	0%	3%	19%	22%	12%	38%	6%
2	**Medical Case Management (f)**	5,429	2,607	73%	25%	2%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2.a	Clinical Case Management	936	474	71%	137%	2%	57%	16%	2%	26%	0%	0%	3%	22%	23%	10%	33%	8%
2.b	Med CM - Targeted to Public Clinic (a)	569	403	93%	162%	2%	50%	12%	1%	36%	0%	0%	2%	25%	23%	12%	34%	4%
2.c	Med CM - Targeted to AA (a)	1,625	643	72%	101%	3%	99%	0%	1%	0%	0%	0%	6%	26%	27%	10%	23%	7%
2.d	Med CM - Targeted to H/L(a)	813	401	83%	162%	4%	0%	0%	0%	100%	0%	0%	5%	29%	27%	11%	24%	3%
2.e	Med CM - Targeted to White and/or MSM (a)	504	215	89%	303%	1%	0%	92%	8%	0%	0%	0%	2%	21%	22%	8%	37%	10%
2.f	Med CM - Targeted to Rural (a)	548	246	64%	265%	1%	51%	28%	3%	18%	0%	0%	3%	19%	19%	9%	41%	9%
2.g	Med CM - Targeted to Women at Public Clinic (a)	246	186	0%	350%	0%	69%	6%	1%	24%	0%	0%	2%	24%	33%	10%	26%	5%
2.h	Med CM - Targeted to Pedi (a)	0	0															
2.i	Med CM - Targeted to Veterans	172	31	94%	2100%	0%	74%	19%	0%	6%	0%	0%	0%	0%	0%	3%	45%	52%
2.j	Med CM - Targeted to Youth	15	8	100%	8138%	0%	50%	25%	0%	25%	0%	13%	88%	0%	0%	0%	0%	0%
3	**Local Drug Reimbursement Program (a)**	5,775	**4,394**	77%	20%	4%	40%	12%	2%	45%	0%	0%	4%	25%	28%	12%	28%	3%
4	**Oral Health**	356	**259**	69%	30%	1%	38%	26%	1%	36%	0%	0%	3%	17%	25%	17%	30%	9%
4.a	Oral Health - Untargeted (d)	NA	**NA**															
4.b	Oral Health - Rural Target	356	259	69%	30%	1%	38%	26%	1%	36%	0%	0%	3%	17%	25%	17%	30%	9%
5	**Mental Health Services (d)**	0	**NA**															
6	**Health Insurance**	1,918	**1,469**	79%	19%	2%	42%	26%	3%	30%	0%	0%	2%	12%	18%	9%	41%	17%
7	**Home and Community Based Services (d)**	NA	**NA**															
8	**Substance Abuse Treatment - Outpatient**	17	**12**	92%	8%	0%	25%	42%	8%	25%	0%	0%	0%	25%	42%	17%	17%	0%
9	**Early Medical Intervention Services (d)**	NA	**NA**															
10	**Medical Nutritional Therapy/Nutritional Supplements**	546	**387**	76%	23%	2%	45%	17%	3%	35%	0%	0%	1%	7%	13%	9%	51%	20%
11	**Hospice Services (d)**	NA	**NA**															
12	**Outreach**	1,042	**500**	72%	25%	3%	63%	10%	2%	25%	0%	0%	6%	31%	26%	10%	22%	4%
13	**Non-Medical Case Management**	8,657	**5,797**															
13.a	Service Linkage Targeted to Youth	175	128	77%	23%	1%	50%	8%	2%	40%	0%	12%	88%	0%	0%	0%	0%	0%
13.b	Service Linkage at Testing Sites	100	54	76%	24%	0%	54%	4%	0%	43%	0%	0%	0%	46%	30%	9%	11%	4%
13.c	Service Linkage at Public Clinic Primary Care Program (a)	3,546	2,353	68%	31%	1%	52%	9%	1%	38%	0%	0%	0%	19%	24%	13%	37%	7%
13.d	Service Linkage at CBO Primary Care Programs (a)	4,537	3,262	76%	21%	2%	48%	12%	2%	38%	0%	0%	4%	28%	27%	11%	25%	4%
14	**Transportation**	**2,366**	**1119**	71%	27%	2%	61%	10%	2%	26%	0%	0%	2%	16%	21%	11%	41%	8%
14.a	Transportation Services - Urban	796	313	65%	33%	1%	56%	7%	3%	34%	0%	0%	3%	24%	25%	10%	28%	10%
14.b	Transportation Services - Rural	237	103	66%	34%	0%	33%	30%	1%	36%	0%	0%	4%	17%	19%	14%	39%	7%
14.c	Transportation vouchering	1,333	758	73%	25%	2%	68%		2%	22%	0%	0%	2%	13%	19%	11%	47%	8%
15	**Linguistic Services (d)**	**NA**	**NA**															
16	**Emergency Financial Assistance (e)**	**1,830**	**1243**	77%	21%	2%	42%	9%	2%	48%	0%	0%	3%	24%	27%	12%	31%	2%
17	**Referral for Health Care - Non Core Service (d)**	**NA**	**NA**															
Net unduplicated clients served - all categories*		12,941	12,141	75%	23%	2%	47%	13%	2%	38%	0%	0%	4%	24%	25%	11%	30%	6%
Living AIDS cases + estimated Living HIV non-AIDS (from FY19 App) (b)		NA	30,198	30%	9%	1%	19%	5%	1%	30%	0%	0%	0%	10%	10%	4%	12%	3%

Available Data As Of: 10/13/2023 3:31 PM

Prepared by: Ryan White Grant Administration

FY 2023 Ryan White Part A and MAI Service Utilization Report

Date Range 3/1/23 - 9/30/23

RW MAI Service Utilization Report

Priority	Service Category MAI unduplicated served includes clients also served under Part A	Goal	Unduplicated MAI Clients Served YTD	Male	Female	Trans gender	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
	Outpatient/Ambulatory Primary Care (excluding Vision)																	
1.b	Primary Care - MAI CBO Targeted to AA (g)	1,664	1397	72%	25%	3%	99%	0%	1%	0%	0%	0%	6%	36%	27%	10%	18%	2%
1.c	Primary Care - MAI CBO Targeted to Hispanic (g)	1,380	1267	82%	14%	3%	0%	0%	0%	100%	0%	1%	5%	33%	27%	12%	20%	2%
2	**Medical Case Management (f)**	**NA**	**NA**															
2.c	Med CM - Targeted to AA (a)	967	422	67%	29%	4%	99%	0%	1%	0%	0%	1%	5%	28%	26%	12%	24%	5%
2.d	Med CM - Targeted to H/L(a)	735	266	83%	13%	4%	0%	0%	0%	100%	0%	0%	5%	28%	27%	10%	27%	2%

RW Part A New Client Service Utilization Report

Report reflects the number & demographics of clients served during the report period who did not receive services during previous 12 months

Priority	Service Category	Goal	Unduplicated New Clients Served YTD	Male	Female	Trans gender	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
1	Primary Medical Care	1,871	1131	19%	19%	3%	48%	10%	2%	40%	0%	1%	9%	36%	25%	10%	16%	3%
2	LPAP	954	489	83%	14%	3%	46%	10%	2%	42%	0%	1%	9%	37%	27%	10%	14%	2%
3.a	Clinical Case Management	95	52	81%	19%	0%	62%	10%	2%	27%	0%	2%	8%	19%	25%	6%	33%	8%
3.b-3.h	Medical Case Management	1,097	540	76%	21%	2%	49%	12%	1%	37%	0%	1%	8%	30%	24%	12%	20%	5%
3.i	Medical Case Mananagement - Targeted to Veterans	33	3	67%	33%	0%	100%	0%	0%	0%	0%	0%	0%	0%	0%	33%	0%	67%
4	Oral Health	50	25	76%	24%	0%	40%	36%	0%	24%	0%	0%	8%	16%	28%	4%	36%	8%
12.a. 12.c. 12.d	Non-Medical Case Management (Service Linkage)	1,870	1224	72%	27%	1%	53%	12%	1%	33%	0%	1%	7%	28%	25%	11%	23%	6%
12.b	Service Linkage at Testing Sites	92	49	71%	27%	2%	49%	4%	2%	45%	0%	6%	8%	33%	29%	8%	12%	4%

Footnotes:

(a) Bundled Category

(b) Age groups 13-19 and 20-24 combined together; Age groups 55-64 and 65+ combined together.

(d) Funded by Part B and/or State Services

(e) Total MCM served does not include Clinical Case Management

(f) CBO Pcare targeted to AA (1.b) and HL (1.c) goals represent combined Part A and MAI clients served

Available Data As Of: 10/13/2023 3:31 PM

Houston Ryan White Health Insurance Assistance Service Utilization Report

Period Reported: 09/01/2022-09/30/2023

Revised: 10/20/2023

	Assisted			NOT Assisted		
Request by Type	Number of Requests (UOS)	*Dollar Amount of Requests*	Number of Clients (UDC)	*Number of Requests (UOS)*	*Dollar Amount of Requests*	*Number of Clients (UDC)*
Medical Co-Payment	1141	$152,354.77	416	*0*	*$0.00*	*0*
Medical Deductible	300	$202,006.67	203	*0*	*$0.00*	*0*
Medical Premium	8223	$2,886,089.01	909	*0*	*$0.00*	*0*
Pharmacy Co-Payment	34978	$2,232,740.03	2036	*0*	*$0.00*	*0*
APTC Tax Liability	0	$0.00	0	*0*	*$0.00*	*0*
Out of Network Out of Pocket	0	$0.00	0	*0*	*$0.00*	*0*
ACA Premium Subsidy Repayment	22	$4,288.06	12	*NA*	*NA*	*NA*
Totals:	44664	$5,468,902.42	3576	0	$0.00	

Comments: This report represents services provided under all grants.

2023-2023 Ryan White Part B Service Utilization Report
4/1/2023- 09/30/2023 Houston HSDA (4816)
3rd Quarter

Revised 11/1/2023

Funded Service	UDC		Gender				Race				Age Group							
	Goal	YTD	Male	Female	FTM	MTF	AA	White	Hisp	Other	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65+
Health Insurance Premiums	***1,150***	737	83.05%	15.74%	0.45%	0.76%	37.58%	26.14%	33.37%	2.91%	0.00%	0.00%	0.18%	16.07%	23.35%	22.83%	30.25%	7.32%
Home and Communiy Based Health Services	***0***	0	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Oral Health Care	***4,224***	2,032	73.32%	24.81%	0.00%	1.87%	51.10%	11.82%	34.78%	2.30%	0.00%	0.24%	1.62%	17.17%	22.58%	23.17%	24.75%	10.48%
Unduplicated Clients Served By State Services Funds:	*NA*	2,769	78.19%	20.28%	0.23%	1.30%	44.34%	18.98%	34.08%	2.60%	0.00%	0.12%	0.90%	16.62%	22.98%	23.00%	27.50%	8.90%

Completed By: L.Ledezma

The Houston Regional HIV/AIDS Resource Group, Inc.

FY 2324 Ryan White Part B

Procurement Report

April 1, 2023 - March 31, 2024

Reflects spending through September 2023

Spending Target: 46%

Revised 10/30/23

Priority	Service Category	Original Allocation per	% of Grant	Amendment*	Contractual Amount	Amendment	Contractual Amount	Date of Original	Expended YTD	Percent YTD
4	Oral Health Service-General	$1,833,318	53%	$0	$1,833,318	$0	$1,833,318	4/1/2023	$906,082	49%
4	Oral Health Service -Prosthodontics	$576,750	17%	$0	$576,750	$0	$576,750	4/1/2023	$298,952	52%
5	Health Insurance Premiums and Cost Sharing (1)	$1,028,433	30%	$0	$1,028,433	$0	$1,028,433	4/1/2023	$505,615	49%
		$0	0%	$0	$0					
	Total Houston HSDA	3,438,501	100%	0	3,438,501	$0	$3,438,501		1,710,649	50%

Note: Spending variances of 10% of target will be addressed:

(1) HIP- Funded by Part A, B and State Services. Provider spends grant funds by ending dates Part A -2/28; B-3/31;SS-8/31.

The Houston Regional HIV/AIDS Resource Group, Inc.

FY 2223 DSHS State Services

Procurement Report

September 1, 2022 - August 31, 2023

Chart reflects spending through August 2023 (Final)

Spending Target: 100%

Revised 10/30/2023

Priority	Service Category	Original Allocation per	% of Grant	Amendments per RWPC	Contractual Amount	Amendment	Contractual Amount	Date of Original	Expended YTD	Percent YTD
5	**Health Insurance Premiums and Cost Sharing (1)**	$864,506	47%	**$0**	$864,506	$58,000	$922,506	9/1/2022	$922,506	100%
6	**Mental Health Services (2)**	$300,000	16%	**$0**	$300,000	-$45,000	$255,000	9/1/2022	$255,000	100%
11	**Hospice**	$259,832	14%	**$0**	$259,832	$77,000	$329,560	9/1/2022	$329,560	100%
13	**Non Medical Case Management (4)**	$350,000	19%	**$0**	$350,000	-$130,000	$220,000	9/1/2022	$220,000	100%
16	**Linguistic Services (5)**	$68,000	4%	**$0**	$68,000	$0	$68,000	9/1/2022	$68,000	100%
	Total Houston HSDA	**1,842,338**	**100%**	**$0**	$1,842,338	-$40,000	$1,795,066		1,795,066	100%

Note

(1) TRG will reallocate funds to avoid lapse in funds
(2) TRG will reallocate funds to avoid lapse in funds
(4) TRG will reallocate funds to avoid lapse in funds
(5) TRG will reallocate funds to avoid lapse in funds

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Harris County Public Health
Building a Healthy Community

Ericka Brown, MD, MBA, FACHE
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2023-2024 Houston EMA: RWGA Part A Standards of Care for HIV Services Ryan White Grant Administration Section SUMMARY OF CHANGES AS OF 11/7/2023

Location	2023-2024 (old)	2023-2024 (new)
RWA Standards of Care all categories	OAMC Outpatient Ambulatory Medical Care	OAHS Outpatient Ambulatory Health Services
Primary Medical Care 1.8	Plan of Care A plan of care shall be developed for each identified problem and should address diagnostic, therapeutic and educational issues in accordance with the current U.S. HHS treatment guidelines.	Plan of Care A plan of care shall be developed for each identified problem and should address diagnostic, therapeutic and educational issues in accordance with the current U.S. HHS treatment guidelines. When the plan of care identifies medical issues that require a referral to a specific specialty, such as Psychiatry, Podiatry, Dermatology, Oncology, etc., the primary care provider must clearly document the need for the referral in the client's record and provide the client with a written copy of the referral to the specialist indicating the reason for the referral. If the client continues attending appointments with a specialist, the primary care provider must receive documentation from the specialist describing why ongoing visits / treatments are necessary.

Case Management (All Case Management Categories) 2.3	Not previously in SOC	Case Management Brief Intervention Case Management staff (Medical, Clinical and Service Linkage) will, on occasion, be called to assist a client with a low/intermittent need, (i.e., CPCDMS eligibility renewal, ADAP application renewal, bus pass renewal, or information about a service, etc.) and have no other needs. In these situations the staff may provide a ***brief intervention*** with the client. If during the visit, the staff assesses the client has further needs than originally presented, the appropriate staff will complete an assessment (brief or comprehensive) appropriate to addressing the client's needs.
Outreach 1.4	Not previously in SOC	Outreach Brief Intervention Outreach staff will, on occasion, be called to assist a client with a low/intermittent need, (such as, CPCDMS eligibility renewal, ADAP application renewal, bus pass renewal, or information about a service, etc.) and have no other needs. In this situation the staff may provide a ***brief intervention*** with the client. The subcategory "OUTBIFF" and "OUTBIPH" will be used to indicate this service as a brief intervention by the Outreach Worker. If during the visit, the staff assesses the client has further needs than originally presented, the appropriate staff will complete an assessment (brief or comprehensive) appropriate to addressing the client's needs.

Transportation 1.4	Not previously in SOC	Ride Share Guidelines Ride Share: Eligible clients residing in Harris County have access to ride share services with a focus on newly diagnosed and re-engaged to care patients but may also include established patients in medical care. This form of transportation can be provided to any HIV-related medical appointment and on a limited basis to appointments directly related to social determinants of health, such as visits to a food bank.
General Standard 2.8	Accountability There is a system in place to document staff work time.	Accountability There is a system in place to document staff work time. Time and effort must be appropriately allocated based on funding stream.

Transportation 1:1	Client Eligibility In order to be eligible for services, individuals must meet the following: • HIV+ • Residence in the Houston EMA/HSDA • Part A Urban Transportation limited to Harris County • Part A Rural/Part B Transportation are limited to Houston EMA/HSDA, as applicable • Income no greater than 300% of the Federal Poverty level • Proof of identification Documentation of ineligibility for Third Party Reimbursement	Client Eligibility In order to be eligible for services, individuals must meet the following: • HIV+ • Residence in the Houston EMA/HSDA • Part A Urban Transportation limited to Harris County • Part A Rural/Part B Transportation are limited to Houston EMA/HSDA, as applicable • Income no greater than 400% of the Federal Poverty level • Proof of identification Documentation of ineligibility for Third Party Reimbursement

Ryan White Part A
FY 2024-2025 Performance Measures

Current Performance Measure	Proposed Performance Measure
85% of clients for whom there is lab data in CPCDMS will be virally suppressed (<200)	By end of the measurement year, reduce disparities in the viral load of the following priority populations by 5-10%: Gay, MSM Black/Latino, Youth Black/Latino aged 13-24, Black and Trans Women.
Prior performance measure – 95% of clients will be prescribed antiretroviral therapy during the measurement year.	Increase percentage of clients prescribed antiretroviral therapy during the measurement year by 2%.
Prior performance measure – 90% of clients will have two or more medical encounters, 90 days apart, in an HIV care setting in the measurement year.	Increase percentage of clients retained-in-care, having two or more HIV medical encounters, at least 90 days apart, in the measurement year by 5-10%.

2023 Quarterly Report
Quality Improvement Committee
(November 2023)

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

1. Conduct the "How to Best Meet the Needs" (HTBMN) process, with particular attention to the continuum of care with respect to HRSA identified core services.

2. Develop a process for including consumer input that is proactive and consumer friendly for the Standards of Care and Performance Measures review process.

3. Continue to improve the information, processes and reporting (within the committee and also thru collaboration with other Planning Council committees) needed to:
   a. Identify "The Unmet Need";
   b. Determine "How to Best Meet the Needs";
   c. *Strengthen and improve the description and measurement of medical and health related outcomes.

4. *Identify and review the required information, processes and reporting needed to assess the "Efficiency of the Administrative Mechanism". Focus on the status of specific actions and related time-framed based information concerning the efficiency of the administrative mechanism operation in the areas of:
   a. Planning fund use (meeting RWPC identified needs, services and priorities);
   b. Allocating funds (reporting the existence/use of contract solicitation, contract award and contract monitoring processes including any time-frame related activity);
   c. Distributing funds (reporting contract/service/re-imbursement expenditures and status, as well as, reporting contract/service utilization information).

5. Annually, review the status of committee activities identified in the current Comprehensive Plan.

Status of Tasks on the Timeline:

_____ _____

Committee Chairperson Date