

**HOUSTON AREA HIV SERVICES  
RYAN WHITE PLANNING COUNCIL**



*We envision an educated community where the needs of all HIV/AIDS infected and/or affected individuals are met by accessible, effective, and culturally sensitive health and psychosocial services that are part of a fully coordinated system. The community will continue to intervene responsibly until the end of the epidemic.*

*The Houston Eligible Metropolitan Area (EMA) Ryan White Planning Council will improve the quality of life and advocate for those infected and/or affected with HIV/AIDS by taking a leadership role in the planning and assessment of HIV resources*

**AGENDA**

12 noon, Thursday, August 11, 2016

Meeting Location: 2223 W. Loop South, Room 532  
Houston, Texas 77027

- I. Call to Order Steven Vargas, Chair  
RW Planning Council
  - A. Welcoming Remarks and Moment of Reflection
  - B. Adoption of the Agenda
  - C. Approval of the Minutes
  - D. Training: 2017 Houston Area Comprehensive HIV Prevention and Care Services Plan Amber Harbolt, Health Planner  
Ryan White Office of Support
  
- II. Public Comments and Announcements Carol Suazo, Secretary

(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 the Council Secretary who would be happy to read the comments on behalf of the individual at this point in the meeting. The Chair of the Council has the authority to limit public comment to 1 minute per person. All information from the public must be provided in this portion of the meeting. Council members please remember that this is a time to hear from the community. It is not a time for dialogue. Council members and staff are asked to refrain from asking questions of the person giving public comment.)
  
- III. Reports from Committees
  - A. Quality Improvement Committee Robert Noble and  
Cecilia Ross, Co-Chairs

No report.
  
  - B. Comprehensive HIV Planning Committee John Lazo and  
Nancy Miertschin, Co-Chairs

*Item: Speaker's Bureau Workgroup Report*  
*Recommended Action: FYI: Steven Vargas presented at the Spring Klein Chamber of Commerce meeting on June 16<sup>th</sup>. See the attached Speaker's Bureau Engagement Evaluation for the event. The Committee*

discussed feedback regarding HIV-related topics attendees would like to see offered in the future.

*Item: 2016 Needs Assessment Update*

*Recommended Action:* FYI: Committee discussed possible future inquiry into the needs of survey respondents reporting hepatitis C co-infection. Harbolt noted that the data weighting strategy (sex at birth, primary race/ethnicity, and age range) developed in June appeared to make the sample data much more representative of the local epidemic. The Committee anticipates reviewing the Needs Assessment Report in August.

*Item: Discussion of Committee Name Change*

*Recommended Action:* FYI: The Committee discussed the possibility of changing its name due to recurring name confusion between the Comprehensive HIV Planning Committee and the Comprehensive Plan Leadership Team. The Committee moved to keep its name and recommend the Leadership Team address this concern when the next comprehensive plan process convenes.

*Item: 2017 Comprehensive Plan*

*Recommended Action:* FYI: The Comprehensive Plan Leadership Team met on July 25<sup>th</sup> and approved the attached components of the 2017 Comprehensive Plan – Integrated HIV Prevention and Care Plan Section. On July 29<sup>th</sup>, the Committee reviewed and concurred with the 2017 Plan components.

*Item: 2017 Comprehensive Plan*

*Recommended Action:* **Motion:** Concur with the attached 2017 Comprehensive Plan – Integrated HIV Prevention and Care Plan Section components: 2017 Comprehensive Plan Vision and Mission; Guiding Principles; Plan Goals; System Objectives; and Strategy Goals, Solutions, Benchmarks, and Activities.

C. Priority and Allocations Committee

*Item: FY 2015 Carryover Funds*

*Recommended Action:* **Motion A:** Approve allocation increases using FY 2015 Ryan White Part A and Minority AIDS Initiative (MAI) carryover funds – see attached chart for allocation details.

Peta-gay Ledbetter and  
Bruce Turner, Co-Chairs

*Item: FY 2015 Carryover Funds*

*Recommended Action:* **Motion B:** Move \$107,547 in MAI and \$160,365 in Part A funds into the Ryan White Grant Administration administrative budget for any or all of the following projects: a.) data mining related to retention in care; b.) mass advertising that links people to care; c.) HIV-related training for agency front line and administrative staff; and d.) feasibility study/studies related to the new Outreach service category, including alternate data collection methods and a pilot Outreach Program.

D. Affected Community Committee

*Item:* Committee Training

*Recommended Action:* FYI: The Committee met at Bee Busy Wellness Center and learned about PrEP.

*Item:* 2016 Monthly Meeting Schedule

*Recommended Action:* FYI: See the attached list of 2016 committee meetings and training topics.

*Item:* 2016 Community Events

*Recommended Action:* FYI: See the attached list of 2016 events at which there will be a Council presence.

Allen Murray and  
Tana Pradia, Co-Chairs

E. Operations Committee

*Item:* 2016 Monthly Council Training Schedule

*Recommended Action:* FYI: See the attached list of 2016 Training Topics for 2016 Planning Council meetings.

*Item:* 2016 Council and Committee Attendance

*Recommended Action:* FYI: The Operations Committee reviewed the attached 2016 Council and Committee attendance records and instructed staff to contact members who had missed four or more Council or committee meetings.

*Item:* 2016 Quarterly Committee Report

*Recommended Action:* FYI: See the attached 2016 Quarterly Committee Report.

Curtis Bellard and  
Teresa Pruitt, Co-Chairs

IV. Report from the Office of Support

Tori Williams, Director

V. Report from Ryan White Grant Administration

Carin Martin, Manager

VI. Report from The Resource Group

S. Johnson-Fairley, Health Planner

VII. Medical Updates

Shital Patel, MD  
Baylor College of Medicine

VIII. New Business (30 seconds/report)

A. Ryan White Part C Urban and Part D

Nancy Miertschin

B. Community Development Advisory Council (CDAC)

Tracy Gorden

C. HOPWA

Melody Barr

D. Community Prevention Group (CPG)

Herman Finley

E. Update from Task Forces:

- African American
- Latino
- MSM
- Transgender
- Youth
- Hepatitis C
- Sexually Transmitted Infections (STI)
- Urban AIDS Ministry
- Heterosexual HIV Awareness

S. Johnson-Fairley  
Steven Vargas  
Ted Artiaga

John Lazo  
Steven Vargas  
Herman Finley  
Amber David  
Ruth Atkinson

F. Positive Women's Network

Tana Pradia

G. HIV and Aging

Bruce Turner

H. END HIV Houston

Steven Vargas

I. Texas HIV Medication Advisory Committee

Bruce or Nancy

J. Legislative Updates

K. Texas HIV/AIDS Coalition

Bruce Turner

L. SPNS Grant: HIV and the Homeless Program

Nancy Miertschin

IX. Announcements

X. Adjournment

**HOUSTON AREA HIV SERVICES  
RYAN WHITE PLANNING COUNCIL**



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*The Houston Eligible Metropolitan Area (EMA) Ryan White Planning Council will improve the quality of life and advocate for those infected and/or affected with HIV/AIDS by taking a leadership role in the planning and assessment of HIV resources.*

**MINUTES**

12 noon, Thursday, July 14, 2016  
2223 W. Loop South, Room 532; Houston, Texas 77027

<b>MEMBERS PRESENT</b>	<b>MEMBERS PRESENT</b>	<b>OTHERS PRESENT</b>
Steven Vargas, Chair	Tana Pradia	Juan Leyva, TWU
Tracy Gorden, Vice-Chair	Teresa Pruitt	James Arango, DSHS
Carol Suazo, Secretary	Cecilia Ross	Mikel Marshall, ViiV
Ted Artiaga	Gloria Sierra	Hila Berl, EGM Consulting
Rodriga Avila	Larry Woods	Denis Kelly
Connie Barnes	Isis Torrente	Pamela Chambers
Curtis Bellard	C. Bruce Turner	Nevaeh Paris
Ardry Skeet Boyle	David Watson	
Bianca Burley		<b>STAFF PRESENT</b>
Ella Collins-Nelson		<i>Ryan White Grant Administration</i>
Evelio Salinas Escamilla	<b>MEMBERS ABSENT</b>	Carin Martin
Herman Finley	Ruth Atkinson	Tasha Traylor
Paul Grunenwald	Melody Barr, excused	
Angela F. Hawkins	David Benson, excused	<i>The Resource Group</i>
Arlene Johnson	Amber David	Sha'Terra Johnson-Fairley
John Lazo	Denny Delgado	
Nancy Miertschin	J. Hoxi Jones, excused	<i>Office of Support</i>
Rodney Mills	Peta-gay Ledbetter, excused	Tori Williams
Allen Murray	Leslie Raneri, excused	Amber Harbolt
Robert Noble		Diane Beck
Shital Patel		

**Call to Order:** Steven Vargas, Chair, called the meeting to order at 12:08 p.m.

During the welcoming remarks, Vargas introduced Hila Berl from EMG Consulting and invited her to describe why she is in Houston at today's Council meeting. Following comments from Ms. Berl, Vargas stated that Council Member Gene Ethridge passed away last month. Since his family had a private ceremony for him in Corpus Christi, Vargas thanked his good friends and colleagues on the Council who used personal time and resources to organize a lovely service for him in Houston. He

acknowledged Gorden, Hawkins, Williams, Beck, Moreno and especially Ross for organizing the service. Vargas also thanked Pradia for chairing the Affected Community Committee by herself in the last couple of weeks. Murray has agreed to serve as her co-chair for the remainder of the year.

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

**Approval of the Minutes:** *Motion #2*: it was moved and seconded (Pruitt, Bellard) to approve the June 9, 2016 minutes. **Motion carried.** Abstentions: Sierra.

**Training – Priority Setting Processes:** Turner presented the attached PowerPoint and handout entitled *Setting Priorities*.

**Public Comment and Announcements:** See attached comment from the Public Hearing on June 27, 2016.

Juan Leyva, TWU: He is a nursing assistant from Barcelona working with Texas Women’s University on a study on HIV and Latinas. There are two parts – part 1 is a survey and part 2 is a face to face interview (about 45 – 60 minutes). He will be in Houston through the end of September if anyone wishes to participate in the study and can be reached at 832-812-3526 or [jleyva2@twu.edu](mailto:jleyva2@twu.edu). The Office of Support has flyers in English and Spanish.

Mikel Marshall – ViiV Healthcare: Presented information on a new resource called ViiV connect which is supposed to help clients and health care providers link to care, learn about medications and resources. See attached.

**Reports from Committees:**

**Quality Improvement Committee:** Cecilia Ross, Co-Chair, reported on the following:  
Targeting for FY 2017 Service Categories: *Motion #3*: Approve the attached Targeting Chart for FY 2017 Service Categories for Ryan White Part A, B, MAI and State Services funding. **Motion carried.** Abstentions: Artiaga, Escamilla, Finley, Miertschin, Noble, Patel, Watson, Woods. Turner suggested that the committee look at targeting by aging next year.

**Priority and Allocations Committee:** C. Bruce Turner, Co-Chair, reported on the following:  
FY 2017 Ryan White Service Priorities: *Motion #4*: Approve the attached FY 2017 Service Priorities for Ryan White Parts A and B, MAI\*\* and State Services. **Motion carried.** Abstentions: Artiaga, Escamilla, Finley, Miertschin, Noble, Patel, Watson, Woods. \*\*Minority AIDS Initiative (MAI)

FY 2017 Allocations – Level Funding Scenario: *Motion #5*: Allocations Motion 1: Approve the attached FY 2017 Level Funding Scenario for Ryan White Parts A and B, MAI and State Services funding. **Motion carried.** Abstentions: Artiaga, Escamilla, Finley, Miertschin, Noble, Patel, Watson, Woods. Escamilla said that cuts should be proportionate for the Primary Care ethnic targets. Martin said that the allocations are based on previous year’s spending for the category, not on each subcategory.

FY 2017 Allocations – Decrease Funding Scenario – MAI: *Motion #6*: Allocations Motion 2: Approve the attached FY 2017 Decrease Funding Scenario for Ryan White MAI funding. **Motion carried.** Abstentions: Artiaga, Escamilla, Finley, Noble, Woods.

FY 2017 Allocations – Increase Funding Scenario – MAI: *Motion #7*: Allocations Motion 3: Approve the attached FY 2017 Increase Funding Scenario for Ryan White MAI funding. **Motion carried.** Abstentions: Artiaga, Escamilla, Finley, Noble, Woods.

FY 2017 Allocations – Decrease Funding Scenario – Part A: **Motion #8:** Allocations Motion 4: Approve the attached FY 2017 Decrease Funding Scenario for Ryan White Part A. **Motion carried.** Abstentions: Artiaga, Escamilla, Finley, Miertschin, Noble, Patel, Watson, Woods.

FY 2017 Allocations – Increase Funding Scenario – Part A: **Motion #9:** Allocations Motion 5: Approve the attached FY 2017 Increase Funding Scenario for Ryan White Part A. **Motion carried.** Abstentions: Artiaga, Escamilla, Finley, Miertschin, Noble, Patel, Watson, Woods.

FY 2017 Allocations – Increase Funding Scenario – Part B & State Services: **Motion #10:** Allocations Motion 6: Approve the attached FY 2017 Increase Funding Scenario for Ryan White Part B and State Services. **Motion carried.** Abstentions: Artiaga, Escamilla, Finley, Noble, Patel, Woods.

FY 2017 Allocations – Decrease Funding Scenarios – Part B & State Services: **Motion #11:** Allocations Motion 7: Approve the attached FY 2017 Decrease Funding Scenario for Ryan White Part B and State Services. **Motion carried.** Abstentions: Artiaga, Escamilla, Finley, Noble, Patel, Woods.

**Comprehensive HIV Planning Committee:** John Lazo, Co-Chair, reported on the following:

Speaker's Bureau Workgroup Report: The Speaker's Bureau workgroup met for the first time in May to discuss finding businesses needing speakers and to assign volunteers to help the speakers at each engagement. He thanked Pruitt for her help at the last speaking engagement and said that he got a new lead at the PRIDE event in June.

2016 Needs Assessment Update: Committee reviewed the final sampling summary. See attached. Though the minimum sampling goal for the Needs Assessment was 587 surveys, the Committee voted to end data collection at 507 surveys completed in light of the limited amount of time to incorporate Needs Assessment findings into the 2017 Comprehensive Plan, and as long as any limitations resulting would be discussed in the limitations section of the final report. Staff calculated the new margin of error for this sample size as 4.31%, compared to 4% for the original minimum sample size, and verified with a statistician that this would have no bearing on generalizability of findings, particularly as the sample would be weighted by race/ethnicity, sex at birth, and age range.

2017 Comprehensive Plan Process Update: Committee reviewed Logic Model 1 sheets detailing Goals, Solutions, and Benchmarks for each Workgroup. With the exception of two outstanding benchmarks for Prevention and Early Identification, all Workgroups have completed their Logic Model 1 sheets and substantial progress has been made on Logic Model 2 sheets, which address Solution Foci and Activities. The Leadership Team met June 30 to provide feedback and to receive a mid-development update. Harbolt added that the Special Populations workgroup had completed their work and will no longer be meeting. The Coordination of Effort workgroup will meet tomorrow at 9:00 a.m.

**Affected Community Committee:** Tana Pradia, Co-Chair, reported on the following:

Committee Training: The Committee met at Change Happens and learned about HIV and the Heterosexual Community.

2016 Greeters: See the attached list of 2016 volunteer greeters for monthly Council meetings. Johnson offered to be a greeter if there are any Council meetings that still need greeters.

2016 Monthly Meeting Schedule: See the attached list of 2016 committee meetings and training topics.

2016 Community Events: See the attached list of 2016 events at which there will be Council presence. Williams noted that the HIV Testing and Prevention event scheduled for August 13, 2016 has been rescheduled for January 21, 2017.

**Operations Committee:** No report.

**Report from Office of Support:** Tori Williams, Director, summarized the attached report.

**Report from Ryan White Grant Administration:** Carin Martin, Manager, summarized the attached report.

**Report from The Resource Group:** Sha'Terra Johnson-Fairley summarized the attached report.

**Medical Updates:** Shital Patel, MD summarized the attached report.

#### **New Business**

**Ryan White Part C Urban and Part D:** Miertschin summarized the attached report.

**Community Development Advisory Council:** Gorden said that the group has not met.

#### **Updates from Task Forces:**

- **African American:** Johnson-Fairley said that they are meeting tomorrow at noon. The Texas Black Women's Initiative is holding a PrEP training for women of color; there are 30 slots available, email her if interested.
- **Latino:** Vargas presented the attached report.
- **MPact:** Artiaga said that they have not met and are working on setting a meeting for July.
- **Transgender:** Finley said that there is a Save our Sisters meeting at MSociety; the first meeting had 10-15 participants. Noble said he is facilitating a transsexual group that is looking into creating a transgender task force.
- **Youth:** Lazo said they have not met but should be meeting soon since school starts next month.
- **Hepatitis C:** Vargas presented the attached report.
- **Sexually Transmitted Infections (STI):** Noble said that he spoke to his contact about partnering with the Planning Council to create PSAs and his contact is happy to do so. [STDfree365.org](http://STDfree365.org) provides free incentives for testing. See the website for more information.
- **Heterosexual HIV Awareness:** Atkinson submitted the attached report.

**Positive Women's Network:** Pradia said that the next meeting will be July 28, 2016 at Legacy Montrose Campus. They will be having a Summit in September 2016. Please refer any women interested in joining the group.

**HIV and Aging:** Turner presented the attached report.

**End HIV Houston:** Johnson-Fairley said that the workgroups are holding their last meetings this month. There will be a follow-up conference in September at The Council on Recovery at 303 Jackson Hill Street.

**Texas HIV Medication Advisory Committee:** Turner presented the attached report.

**SPNS Grant: HIV and the Homeless Program:** Miertschin presented the attached report.

#### **Announcements:**

- Murray said that applications are now being accepted for the next PoP class. Turner said that the Health Insurance workgroup needs to reconvene.



- Gorden said that he has applications for the Poz Living Conference if anyone is interested.
- Artiaga said to be sure and read the article about the Meningococcal outbreak. College students and people with HIV should get the vaccine since this is a deadly disease.
- Finley said that Heavy Hitters Pride is a three day event for men of size. There is an open reception on July 29, 2016 at the Hilton Southwest at Hwy 59 and Hillcroft.

**Adjournment:** The meeting was adjourned at 1:53 p.m.

Respectfully submitted,

\_\_\_\_\_  
Victoria Williams, Director

\_\_\_\_\_  
Date

Draft Certified by  
Council Chair: \_\_\_\_\_

Date \_\_\_\_\_

Final Approval by  
Council Chair: \_\_\_\_\_

Date \_\_\_\_\_

## Council Voting Records for July 14, 2016

C = Chair of the meeting lm = Left the meeting lr = Left the room VP = Via phone	Motion #1 Agenda Carried				Motion #2 Minutes Carried				Motion #3 HIV Targeting Chart Carried					Motion #1 Agenda Carried				Motion #2 Minutes Carried				Motion #3 HIV Targeting Chart Carried			
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN		MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO
MEMBERS																									
Steven Vargas, Chair				C				C				C	Shital Patel		X				X						X
Tracy Gorden, Vice-Chair		X				X				X			Tana Pradia		X				X				X		
Carol Suazo, Secretary		X				X				X			Teresa Pruitt		X				X				X		
Ted Artiaga		X				X						X	Cecilia Ross		X				X				X		
Rodriga Avila		X				X				X			Gloria Sierra		X						X		X		
Connie Barnes		X				X				X			Isis Torrente		X				X				X		
Curtis Bellard		X				X				X			C. Bruce Turner		X				X				X		
Skeet Boyle		X				X				X			David Watson		X				X						X
Bianca Burley		X				X				X			Larry Woods	X				X					X		
Ella Collins-Nelson		X				X				X															
Evelio Salinas Escamilla		X				X						X													
Herman Finley		X				X						X	<b>MEMBERS ABSENT</b>												
Angela F. Hawkins		X				X				X			Ruth Atkinson												
Paul Grunenwald		X				X				X			Melody Barr												
Arlene Johnson		X				X				X			David Benson												
John Lazo		X				X				X			Amber David												
Nancy Miertschin		X				X						X	Denny Delgado												
Rodney Mills		X				X				X			J. Hoxi Jones												
Allen Murray		X				X				X			Peta-gay Ledbetter												
Robert Noble		X				X						X	Leslie Raneri												

## Council Voting Records for June 9, 2016

C = Chair of the meeting lm = Left the meeting lr = Left the room VP = Via phone	Motion #4 FY17 Service Priorities Carried				Motion #5 P&A Motion 1 Carried				Motion #6 P&A Motion 2 Carried					Motion #4 FY17 Service Priorities Carried				Motion #5 P&A Motion 1 Carried				Motion #6 P&A Motion 2 Carried						
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN		MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN		
MEMBERS																												
Steven Vargas, Chair				C				C				C	Shital Patel				X				X		X					
Tracy Gorden, Vice-Chair		X				X				X			Tana Pradia		X				X				X					
Carol Suazo, Secretary		X				X				X			Teresa Pruitt		X				X				X					
Ted Artiaga				X				X				X	Cecilia Ross		X				X				X					
Rodriga Avila		X				X				X			Gloria Sierra		X				X				X					
Connie Barnes		X				X				X			Isis Torrente		X				X				X					
Curtis Bellard		X				X				X			C. Bruce Turner		X				X				X					
Skeet Boyle		X				X				X			David Watson				X				X		X					
Bianca Burley		X				X				X			Larry Woods		X				X						X			
Ella Collins-Nelson		X				X				X																		
Evelio Salinas Escamilla				X				X				X																
Herman Finley				X				X				X	<b>MEMBERS ABSENT</b>															
Angela F. Hawkins		X				X				X			Ruth Atkinson															
Paul Grunenwald		X				X				X			Melody Barr															
Arlene Johnson		X				X				X			David Benson															
John Lazo		X				X				X			Amber David															
Nancy Miertschin				X				X		X			Denny Delgado															
Rodney Mills		X				X				X			J. Hoxi Jones															
Allen Murray		X				X				X			Peta-gay Ledbetter															
Robert Noble				X				X				X	Leslie Raneri															

## Council Voting Records for June 9, 2016

C = Chair of the meeting lm = Left the meeting lr = Left the room VP = Via phone	Motion #7 P&A Motion 3 Carried				Motion #8 P&A Motion 4 Carried				Motion #9 P&A Motion 5 Carried				MEMBERS	Motion #7 P&A Motion 3 Carried				Motion #8 P&A Motion 4 Carried				Motion #9 P&A Motion 5 Carried								
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN		MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN				
				C				C				C	Steven Vargas, Chair		X						X				X					
		X				X				X			Tracy Gorden, Vice-Chair		X				X				X							
		X				X				X			Carol Suazo, Secretary		X				X				X							
				X				X				X	Ted Artiaga		X				X				X							
		X				X				X			Rodriga Avila		X				X				X							
		X				X				X			Connie Barnes lm 12:59pm		X				X				X							
		X				X				X			Curtis Bellard		X				X				X							
		X				X				X			Skeet Boyle		X				X						X					
		X				X				X			Bianca Burley				X		X				X							
		X				X				X			Ella Collins-Nelson																	
				X				X				X	Evelio Salinas Escamilla																	
				X				X				X	Herman Finley																	
		X				X				X			Angela F. Hawkins																	
		X				X				X			Paul Grunenwald																	
		X				X				X			Arlene Johnson																	
		X				X				X			John Lazo																	
		X						X				X	Nancy Miertschin																	
		X				X				X			Rodney Mills																	
		X				X				X			Allen Murray																	
				X				X				X	Robert Noble																	
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													Leslie Raneri																	

## Council Voting Records for June 9, 2016

C = Chair of the meeting lm = Left the meeting lr = Left the room VP = Via phone	Motion #10 P&A Motion 6 Carried				Motion #11 P&A Motion 7 Carried					Motion #10 P&A Motion 6 Carried				Motion #11 P&A Motion 7 Carried			
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN		MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO
				C				C	MEMBERS				X				X
Steven Vargas, Chair				C				C	Shital Patel				X				X
Tracy Gorden, Vice-Chair		X				X			Tana Pradia		X				X		
Carol Suazo, Secretary		X				X			Teresa Pruitt		X				X		
Ted Artiaga				X				X	Cecilia Ross lm 1:25pm		X				X		
Rodriga Avila		X				X			Gloria Sierra		X				X		
Connie Barnes lm 12:59pm	X				X				Isis Torrente		X				X		
Curtis Bellard		X				X			C. Bruce Turner		X				X		
Skeet Boyle lm 1:25pm		X				X			David Watson		X				X		
Bianca Burley		X				X			Larry Woods				X				X
Ella Collins-Nelson lm 1:20pm		X				X											
Evelio Salinas Escamilla				X				X									
Herman Finley				X				X	<b>MEMBERS ABSENT</b>								
Angela F. Hawkins lm 1:31pm		X				X			Ruth Atkinson								
Paul Grunenwald		X				X			Melody Barr								
Arlene Johnson		X				X			David Benson								
John Lazo		X				X			Amber David								
Nancy Miertschin		X				X			Denny Delgado								
Rodney Mills		X				X			J. Hoxi Jones								
Allen Murray		X				X			Peta-gay Ledbetter								
Robert Noble				X				X	Leslie Raneri								

**Comprehensive HIV  
Planning Committee  
Report**

**Speaker's Bureau Engagement Evaluation - Spring Klein CoC - 06-16-2016**

<b>Eval ID</b>	<i>What was the most memorable aspect of today's presentation?</i>	<i>What, if anything, did you learn from today's presentation that you did not previously know?</i>	<i>How relevant was the information presented today to your job or organization? (5=Extremely relevant; 1=Not relevant at all)</i>	<i>Based on today's presentation, how likely are you to recommend the Ryan White Planning Council Speakers Bureau to a colleague or another organization? (5=Extremely likely 1=Not likely at all)</i>	<i>What HIV-related topics would you like to see offered in the future?</i>	<i>Add to RWPC info contact list?</i>
1	Getting information	About the different meds	5	5	Any new info	Y
2	Statistics were amazing and educational	More education on PrEP	5	5	Can an HIV positive person get life insurance?	Y
3	Getting informed - info was enlightening	Truvada meds, PrEP	3	4	Knowing the strategy, sharing facts	N
4	The PrEP since 2012; Other ways to get infected with needles other than drugs; Can't get if from kissing, etc.	Everything above and 20,000-27,000 / 85% infected...4th largest city of infected	3.5	4	I would definitely recommend if I knew who would benefit.	N
5	The statistics of how many people have HIV.	I didn't know there was a pill that existed like this [PrEP]	3	4	[missing]	N
6	[missing]	I didn't know there was a pill to prevent HIV	2	3	[missing]	N
7	Prevention methods & the drop rate; info on testing dates & awareness	The info on prevention	[missing]	5	More information on PrEP to low income areas throughout the South.	N
Average	---	---	3.58	4.29	---	---

# 2017 Comprehensive Plan Vision and Mission

(Approved by the Leadership Team 12-02-15)

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





# 2017 Comprehensive Plan Guiding Principles

(Approved by the Leadership Team 12-02-15)

## Guiding Principles

The development of the 2017 Comprehensive Plan will be guided by 10 core principles; that the plan and planning process will:

1. Fully integrate the perspectives, needs, and priorities of both HIV prevention and HIV care.
2. Align with local, state, and national HIV prevention and care plans and initiatives.
3. Be cognizant of changes occurring in the national health care delivery system resulting from the *Patient Protection and Affordable Care Act of 2010* and the Ryan White HIV/AIDS Treatment Extension Act.
4. Assess strategies, including those used internationally, that have effectively reduced HIV infection and could be implemented locally.
5. Assure that federal expectations for Houston Area comprehensive planning and the required deliverables are met while still allowing new or emerging critical areas of need and innovation to be considered.
6. Produce Specific, Measurable, Achievable, Realistic, and Time-phased (SMART) objectives that can be used to guide priority-setting, resource allocation, scopes of work, quality improvement, and other decision-making activities of the Houston Area planning bodies and administrative agents.
7. Balance the need to be comprehensive, data-driven, and reflective of new science, theory, and models with the need for efficiency in regards to resources and timelines.
8. Recognize the importance of and provide opportunities for participation by non-AIDS-service organizations and other non-traditional partners.
9. Honor the populations most impacted by HIV, including the underserved in response to the epidemic's impact on minority and hard-to-reach populations, and those who are uniquely vulnerable to HIV infection due to social, economic, cultural, or structural barriers.
10. Engage with and ensure that people living with and at risk for HIV as well as consumers of prevention and care services have a central voice, clear understanding, and full involvement throughout the process.

# 2017-2021 Comprehensive Plan Goals

(Approved by the Leadership Team 1-13-16)

## Goals

To make progress toward an ideal system of HIV prevention and care for the Houston Area, we must:

1. Increase community mobilization around HIV in the Greater Houston Area
2. Prevent and reduce new HIV infections
3. Ensure that all people living with or at risk for HIV have access to early and continuous HIV prevention and care services
4. Reduce the effect of co-occurring conditions that hinder HIV prevention behaviors and adherence to care
5. Reduce disparities in the Houston Area HIV epidemic and address the needs of vulnerable populations
6. Increase community knowledge around HIV in the Greater Houston Area.

# 2017 Houston Area Comprehensive HIV Plan

## System Objective Evaluation Tool

**DRAFT**

Objective to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2021 Target	Notes
❖ <b>OBJECTIVE 1:</b> Number of new HIV infections diagnosed in the Houston Area	DSHS eHARS	1,386 (2014)	↓ at least 25% ≤1004 (NHAS target)	Region is EMA
❖ <b>OBJECTIVE 2:</b> Percentage of individuals with a positive HIV test result identified through <i>targeted</i> HIV testing who are informed of their HIV+ status	DSHS HIV Testing & Awareness Data	94.4% (2014)	Maintain or increase ≥94.4% (local target)	Region is EMA Target exceeds NHAS 90% goal
❖ <b>OBJECTIVE 3:</b> Proportion of newly-diagnosed individuals linked to clinical care within one month of their HIV diagnosis	DSHS Linkage to Care Data	Pending (78% linked w/in 3 months in 2014)	↑ to at least 85% (NHAS target)	Region is EMA
❖ <b>OBJECTIVE 4.1:</b> Percentage of new HIV diagnoses with an AIDS diagnosis within one year	DSHS Late Diagnoses Data	25.9% (2014)	↓ at least 25% =19.4% (DHAP target)	Region is EMA
❖ <b>OBJECTIVE 4.2:</b> Percentage of new HIV diagnoses with an AIDS diagnosis within one year among Hispanic/Latino men age 35 and up	DSHS Late Diagnoses Data	Pending	↓ at least 25% = Pending (local target)	Region is EMA
❖ <b>OBJECTIVE 5:</b> 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)	↑ to at least 90% (NHAS target)	
❖ <b>OBJECTIVE 6:</b> Percentage of individuals with diagnosed HIV infection in the Houston Area who are retained in HIV medical care (at least two documented HIV medical care visits, viral load or CD4 tests in a 12 month period)	DSHS Retention Data	61% (2014)	↑ to at least 90% (NHAS target)	Region is EMA
❖ <b>OBJECTIVE 7:</b> Proportion of Ryan White HIV/AIDS Program clients who are virally suppressed	CPCDMS	80.4% (2014)	Maintain or increase ≥80.4% (local target)	
❖ <b>OBJECTIVE 8:</b> Percentage of individuals with diagnosed HIV infection in the Houston Area who are virally suppressed	DSHS Viral Suppression Data	55% (2014)	↑ to at least 80% (NHAS target)	Region is EMA
❖ <b>OBJECTIVE 9:</b> Number of gay and bisexual men of color and women of color receiving pre-exposure prophylaxis (PrEP) education each year	PrEP Provider Report	To be developed	≥2000 (local target)	

# 2017 Houston Area Comprehensive HIV Plan

## Benchmark Evaluation Tool, By Strategy

### STRATEGY 1: PREVENTION AND EARLY IDENTIFICATION

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2021 Target	Notes
❖ BENCHMARK 1: Number of new HIV infections diagnosed in the Houston Area	DSHS eHARS	1,386 (2014)	↓25% =1040 (NHAS target)	Region is EMA
❖ BENCHMARK 2: Number of HIV/STD brochures distributed	HDHHS	88,700 (2014)	Maintain =88,700 (local target)	Target based on current resources and planning
❖ BENCHMARK 3: Number of publicly-funded HIV tests	HHD, DSHS HIV Testing & Awareness Data	127,719 (2015)  Include DSHS data when available	Maintain = 127,719 (local target)  Include DSHS data when available	Region is Houston/Harris County for HHD; EMA for DSHS Targeted and routine testing
❖ BENCHMARK 4: Positivity rate for publicly-funded <i>targeted</i> HIV testing	HHD, DSHS HIV Testing & Awareness Data	3.01% (2015)  Include DSHS data when available	Maintain = 3.01% (local target)  Include DSHS data when available	Region is Houston/Harris County for HHD; EMA for DSHS
❖ BENCHMARK 5: Positivity rate for publicly-funded <i>routine</i> HIV testing	HHD, DSHS HIV Testing & Awareness Data	1.04% (2015)  Include DSHS data when available	Maintain = 1.04% (local target)  Include DSHS data when available	Region is Houston/Harris County for HHD; EMA for DSHS

STRATEGY 1: PREVENTION AND EARLY IDENTIFICATION – CONTINUED

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2021 Target	Notes
❖ BENCHMARK 6: Percentage of individuals with a positive HIV test result identified through <i>targeted</i> HIV testing who are informed of their HIV+ status	HHD, DSHS HIV Testing & Awareness Data	93.8% (2015)  Include DSHS data when available	Maintain = 93.8% (local target)  Include DSHS data when available	Region is Houston/Harris County for HHD; EMA for DSHS
❖ BENCHMARK 7: Percentage of new HIV diagnoses with an HIV stage 3 diagnosis within one year	DSHS Late Diagnoses Data	25.9% (2014)	↓25% =19.4% (DHAP target)	Region is EMA
❖ BENCHMARK 8: Proportion of newly-diagnosed individuals linked to clinical care within one months of their HIV diagnosis	DSHS Linkage to Care Data	Pending from DSHS	85% (NHAS Updated target)	Region is EMA
❖ BENCHMARK 9: Proportion of Ryan White HIV/AIDS Program clients with suppressed viral load	CPCDMS Report	80.4%* (2014)	Maintain =80.4% (local target)	Part A clients only
❖ BENCHMARK 10: Percentage of individuals with diagnosed HIV infection in the Houston Area who are virally suppressed	DSHS Viral Suppression Data	55.5%* (2014)	80% (NHAS Updated target)	Region is EMA
❖ BENCHMARK 11: Number of new HIV infections in high HIV/STD morbidity zip codes targeted for intervention				
Sharpstown (77036 and 77074)	HHD, eHARS	= 56 (2014)	↓25% =42 (NHAS target)	
Sunnyside/South Park (77033 and 77051)	HHD, eHARS	=34 (2014)	↓25% =26 (NHAS target)	
Greater 5th Ward (77020 and 77026)	HHD, eHARS	=28 (2014)	↓25% =21 (NHAS target)	
Acres Home (77088 and 77091)	HHD, eHARS	=32 (2014)	↓25% =24 (NHAS target)	

STRATEGY 1: PREVENTION AND EARLY IDENTIFICATION – CONTINUED

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2021 Target	Notes
Montrose (77006)	HHD, eHARS	=26 (2014)	↓25% =20 (NHAS target)	
❖ BENCHMARK 12: Rate of STD infection per 100,000 population (Chlamydia, gonorrhea, and primary and secondary syphilis)	HHD, STD MIS	CT: 563.7 GC: 162.5 P&S: 8.2 (2014)  Update with 2015 when available	CT: Maintain =510.3 (local target) GC: ↓0.6%/year =157.0 (local target) P&S: 6.7 (HP 2020 males target)	Region is Houston/Harris County CT/GC targets based on available historical data
❖ BENCHMARK 13: Number of condoms distributed	HHD	450,000 (2014)	Maintain =450,000 (local target)	Includes mass and targeted condom distribution efforts
❖ BENCHMARK 14: Number of high-risk individuals that completes an evidence-based behavioral intervention to reduce risk for HIV	HHD	4,944 (2015)	Maintain =4,944 (local target)	Includes completion of ILI or GLI intervention only (not CLI)
❖ BENCHMARK 15: Percentage of prevention and care staff receiving standardized pre-exposure prophylaxis (PrEP) training	HHD, RWGA, TRG	Baseline to be developed	100% (local target)	
❖ BENCHMARK 16: Number of MSM and transgender persons of color receiving pre-exposure prophylaxis (PrEP) education	HHD Project PrIDE	Baseline to be developed	2,000 annually (local target)	
❖ BENCHMARK 17: Percentage of HIV-negative clients screened for PrEP eligibility	HHD Project PrIDE, ECLIPS, Maven	Baseline to be developed	10% increase	Among HIV-negative clients seen by HHD frontline staff (i.e., DIS and SLWs) and HHD-funded contractors

# 2017 Houston Area Comprehensive HIV Services Plan

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

<b>Solutions</b> {Recommended approaches to achieve the goal}
<p>②</p> <ol style="list-style-type: none"> <li>1. Adopt high-impact structural interventions such as governmental policy change and population-based efforts that destigmatize HIV risk reduction and help create unfettered access to HIV information and proven prevention tools</li> <li>2. Expand opportunities for HIV testing for the general public and in high-incidence populations and communities</li> <li>3. Increase the timeliness of the linkage to care system for newly-diagnosed HIV+ individuals</li> <li>4. 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*</li> <li>5. Expand HIV prevention data collection to include behavioral surveillance and measures of community-wide sexual health*</li> <li>6. Expand opportunities for HIV and sexual health education for the general public an high-incidence populations and communities**</li> </ol>

<b>Goal</b> {Desired long-term result, outcome, or change}
<ol style="list-style-type: none"> <li>1. Reduce new HIV infections</li> <li>2. Increase awareness of HIV</li> <li>3. Increase awareness of HIV status</li> <li>4. Ensure early entry into care</li> <li>5. Increase access to ARV therapy for treatment and prevention*</li> <li>6. Address the HIV prevention needs of high incidence communities</li> <li>7. Reduce community risk factors for HIV infection</li> </ol> <p style="text-align: right;">①</p>

<b>Benchmarks</b> {How the result will be measured}
<ol style="list-style-type: none"> <li>1. Reduce number of new HIV infections diagnosed in Houston Area</li> <li>2. Maintain number of publicly-funded HIV tests</li> <li>3. Maintain positivity rate for publicly-funded targeted HIV testing</li> <li>4. Maintain positivity rate for publicly-funded routine HIV testing</li> <li>5. Maintain % of individuals with a positive HIV test result identified through targeted HIV testing who are informed of their HIV+ status</li> <li>6. Decrease % of new HIV diagnoses with an HIV stage 3 diagnosis within one year</li> <li>7. Increase proportion of newly-diagnosed individuals linked to clinical care within one months of their HIV diagnosis</li> <li>8. Increase proportion of Ryan White HIV/AIDS Program clients w/ suppressed VL</li> <li>9. Increase % of diagnosed PLWH in the Houston Area who are virally suppressed</li> <li>10. Decrease number of new HIV infections in high HIV/STD morbidity zip codes targeted for intervention</li> <li>11. Decrease rate of STD infection per 100,000 population (Chlamydia, gonorrhea, and primary and secondary syphilis)</li> <li>12. Maintain number of condoms distributed</li> <li>13. Maintain the number of high-risk individuals that completes an evidence-based behavioral intervention to reduce risk for HIV</li> <li>14. Increase % of prevention and care staff receiving standardized pre-exposure prophylaxis (PrEP) training to 100%</li> <li>15. Increase the number of gay and bisexual men of color and women of color receiving pre-exposure prophylaxis (PrEP) education</li> </ol> <p><b>-Benchmarks to be finalized in July</b></p> <p style="text-align: right;">③</p>



# 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

## Logic Model 3: Action Planning Matrix: PEI Solution 1

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

1. Adopt high-impact structural interventions such as governmental policy change and population-based efforts that destigmatize HIV risk reduction and help create unfettered access to HIV information and proven prevention tools

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Explore opportunities for cross-representation between the Houston HIV community and School Health Advisory Councils (SHAC) for all school districts within the Houston area.	CPG; Task Forces (Youth Task Force); HHD	Annually	HHD CPG Support Staff	Youth	Cross-representation occurred; SHAC minutes; Youth Task Force minutes	4
2. Educate Houston Area faith community leadership on HIV information, risk reduction, and prevention tools.	CPG; Urban AIDS Ministry; RWPC Speakers Bureau	Annually	HHD CPG Support Staff; RWPC-OS	Faith communities	Urban AIDS Ministry minutes; Speakers Bureau evaluations	3
3. Adopt PrEP uptake marketing models designed to remove stigma.	HHD	2017	HHD PrEP Coordinator; Project PrIDE	HIV negative individuals; partners of HIV positive individuals	Materials created	1
4. Educate public officials on changing governmental policies that create barriers to HIV prevention information and tools (e.g. repeal the ban on syringe access, access to PrEP, adopt comprehensive sexuality education in schools, etc.).	HHD; CPG; RWPC Speakers Bureau : <i>Non-RP partners:</i> : Positive Organizing Project; Task Forces; Texas HIV/AIDS Coalition	Annually	HHD staff; HHD CPG Support Staff; HHD PrEP Coordinator; RWPC-OS	Public officials; policy-level interventions	Education occurred; Speakers Bureau evaluations; local/state policy changes	2

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: PEI Solution 2

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

- Expand opportunities for HIV testing for the general public and in high-incidence populations and communities.

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Expand both targeted and non-targeted HIV testing and education activities into new and non-traditional community events (e.g. Houston Livestock Show and Rodeo).	HHD <i>Non-RP partners: CPG; Task Forces</i>	2020	HHD staff & contractors	General public; targeted populations	Record that testing occurred at event including location, population targeted (if applicable), and number of tests	<b>3</b>
2. Disseminate routine testing implementation toolkit to targeted private and non-Ryan White funded providers and FQHCs to facilitate linkage to care.  <i>(See also: Coordination of Effort Strategy Solution 1 Activity 1 and Special Populations Strategy Solution 1 Activity 3)</i>	RWPC-OS <i>Non-RP partners: DSHS; AETC; HHS</i>	Annually	RWPC-OS	Status unaware individuals	Toolkits disseminated	<b>2</b>
3. Distribute HIV testing and PrEP information and resources to walk-in clinics throughout the Houston Area, particularly those in high-incidence areas.  <i>(See also: Special Populations Strategy Solution 2 Activity 3)</i>	HHD; Task Forces; CPG	Annually	HHD CPG support staff; HHD Task Force liaisons; volunteers	HIV negative and status unaware in high-incidence areas	Information distributed; New diagnoses in high-incidence areas decreased	<b>1</b>
4. Educate Task Forces, community groups, funded agencies, and non-HHD funded agencies on availability and use of the Mobile Testing Unit.	HHD <i>Non-RP partners: HHD Clinical Services</i>	As needed	HHD staff	Task Forces; community groups; funded agencies; non-HHD funded agencies	Education occurred; Mobile Unit schedule	<b>4</b>

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: PEI Solution 3

(Comprehensive Plan Leadership Team Approved: 07/25/16)

#### Solution

{Recommended approach to achieve stated goals and targets}

3. Increase the timeliness of the linkage to care for newly-diagnosed HIV+ individuals

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Create and distribute rural referral resource list to DIS.	TRG	Annually	TRG staff	Rural PLWH	List created and distributed; list regularly updated	2
2. Explore opportunities to partner with community health workers to support timely linkage to care.	RWGA; HHD	2021	RWGA staff; HHD staff	PLWH – general	Opportunities explored	3
3. Pursue strategies to reduce time period between diagnosis and entry into HIV medical care.	HHD	2017	HHD testing and linkage staff	Newly diagnosed PLWH; incoming consumers	Record of strategies pursued	1

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: PEI Solution 4

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

4. 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.

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Adopt PrEP uptake marketing models designed to remove stigma.	HHD		2017	HHD PrEP Coordinator; Project PrIDE	HIV negative individuals; partners of HIV positive individuals	Materials created	<b>3</b>
2. Create a public service announcement detailing the benefits of treatment adherence, treatment as prevention, and retention in care.  (See also: Gaps in Care Strategy Solution 2 Activity 1)	RWPC-OS; RWPC Affected Community Committee	<i>Non-RP partners:</i> HHD for distribution	2019	RWPC-OS; volunteers	PLWH and partners; at-risk for falling out of care; Out of Care	Public service announcement created	<b>2</b>
3. Expand materials education PLWH and partners about PrEP and treatment as prevention.	HHD		2018	HHD staff; HHD PrEP Coordinator	PLWH; partners of PLWH	Materials created	<b>3</b>
4. Hold consumer PrEP and treatment as prevention education forums.	RWPC-OS; RWPC Affected Community Committee; HHD	<i>Non-RP partners:</i> AETC	Annually	RWPC-OS; HHD staff; volunteers; possibly pharma rep if not COI	PLWH; partners of PLWH	Forums occurred; evaluations	<b>1</b>

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
5. Explore feasibility of same-day PrEP initiation for high-risk HIV negative individuals.  <i>[ Staff note: discussion centered on rapid PrEP initiation for high-risk negative individuals following HIV/STI testing]</i>	HHD	<i>Non-RP partners:</i> RWPC-OS	2019	HHD PrEP Coordinator; RWPC-OS Planner	High-risk HIV negative	Feasibility study report	<b>5</b>

**2017 Houston Area Comprehensive HIV Prevention & Care Services Plan**

Logic Model 3: Action Planning Matrix: PEI Solution 5

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

5. Expand HIV prevention data collection to include behavioral surveillance and measures of community-wide sexual health

**SOLUTION REMOVED FROM PEI STRATEGY**

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: PEI Solution 6

(Comprehensive Plan Leadership Team Approved: 07/25/16)

#### Solution

{Recommended approach to achieve stated goals and targets}

6. Expand opportunities for HIV and sexual health education for the general public and high-incidence populations and communities.

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Identify methods for measuring local online HIV and sexual health information seeking.	HHD	2017	HHD PrEP Coordinator; HHD staff	N/A	Methods identified; resulting measurements	1
2. Create a public service announcement detailing the benefits of treatment adherence, treatment as prevention, and retention in care.  <i>(See also: Gaps in Care Strategy Solution 2 Activity 1)</i>	RWPC-OS; RWPC Affected Community Committee  <i>Non-RP partners: HHD for distribution</i>	2019	RWPC-OS; volunteers	PLWH and partners; at-risk for falling out of care; Out of Care	Public service announcement created	2
3. Explore opportunities to expand community access to local academic research findings.  <i>(See also: Coordination of Effort Strategy Solution 3 Activity 7)</i>	HHD (Sharing Science Symposium); RWPC-OS	2020	HHD staff; RWPC-OS staff	General public	Opportunities identified	4
4. Promote inclusion of HIV and sexual health messaging in local community creative arts.  <i>(See also: Coordination of Effort Strategy Solution 3 Activity 8)</i>	RWPC-OS  <i>Non-RP partners: RWPC Affected Community Committee; Task Forces</i>	As Needed	RWPC-OS; community resources	General public	Resulting projects	3

STRATEGY 2: TO FILL GAPS IN CARE AND REACH THE OUT-OF-CARE

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2021 Target	Notes
❖ BENCHMARK 1: Proportion of PLWH with Unmet Need	DSHS Unmet Need Data	25.0% (2014)	↓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	DSHS Linkage to Care Data	Pending (78% linked w/in 3 months in 2014)	↑ 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)	↑ to at least 90% (NHAS target)	
❖ BENCHMARK 4: Percentage of individuals with diagnosed HIV infection in the Houston Area who are retained in HIV medical care (at least two documented HIV medical care visits, viral load or CD4 tests in a 12 month period)	DSHS Retention Data	61% (2014)	↑ 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)	Maintain or increase ≥80.4% (local target)	
❖ BENCHMARK 6: Percentage of individuals with diagnosed HIV infection in the Houston Area who are virally suppressed	DSHS Viral Suppression Data	55% (2014)	↑ to at least 80% (NHAS target)	Region is EMA



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

<b>Solutions</b> {Recommended approaches to achieve the goal}
<p>②</p> <ol style="list-style-type: none"> <li>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, unstably housed, transitioning from pediatric to adult care, etc.) where individual are more likely to not seek care or to fall out of care, particularly newly-diagnosed PLWH*</li> <li>2. Expand retention and engagement activities with in-care PLWH, focusing on community education system enhancements, and health literacy*</li> <li>3. Adopt strategies to re-engage out of care PLWH to return to care</li> </ol>

<b>Goal</b> {Desired long-term result, outcome, or change}
<ol style="list-style-type: none"> <li>1. Ensure early entry into care ①</li> <li>2. Reduce Unmet Need</li> <li>3. Increase retention in continuous care</li> <li>4. Improve health outcomes for People Living with HIV (PLWH)*</li> <li>5. Increase viral suppression**</li> </ol>

<b>Benchmarks</b> {How the result will be measured}
<ol style="list-style-type: none"> <li>1. Decrease the proportion of PLWH with Unmet Need ③</li> <li>2. Increase the proportion of newly-diagnosed individuals linked to clinical care within three months of their HIV diagnosis (one month if available)</li> <li>3. Increase the proportion of Ryan White HIV/AIDS Program clients who are in continuous care (≥2 visits for routine HIV medical care in 12 months ≥3 months apart)</li> <li>4. Increase the proportion of Ryan White HIV/AIDS Program clients who are virally suppressed</li> <li>5. Increase the proportion of PLWH in the Houston Area who are retained in care</li> <li>6. Increase the proportion of PLWH in the Houston Area who are virally suppressed</li> </ol>

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: Solution 1

(Comprehensive Plan Leadership Team Approved: 07/25/16)

#### Solution

{Recommended approach to achieve stated goals and targets}

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, unstably housed, transitioning from pediatric to adult care, etc.) where individual are more likely to not seek care or to fall out of care, particularly newly-diagnosed PLWH

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Assess the feasibility of providing Ryan White-funded buddy/peer mentoring support to incoming clients during first eligibility and primary care appointment(s).	RWGA	<i>Non-RP partners:</i> RWPC-OS; RWPC (P&A; CHPC)	2017	RWGA staff; RWPC-OS; volunteers	Incoming clients	Report completed for feasibility study	<b>1</b>
2. Revise case management, service linkage, and outreach services Standards of Care and policies to incorporate warm handoff protocols.	RWGA	<i>Non-RP partners:</i> HHD Hearts program; RWPC	2017; revisit annually	RWGA staff; RWPC-OS; HHD Hearts program staff; volunteers	Incoming clients	Changes made to Standards of Care; increase in retention per CPCDMS	<b>3</b>
3. Design Standards of Care ensuring follow-up contact with newly diagnosed consumers throughout first year of diagnosis.	RWGA	<i>Non-RP partners:</i> HHD Hearts program; RWPC	2017; revisit annually	RWGA staff; RWPC-OS; HHD Hearts program staff; volunteers	Newly diagnosed PLWH	Changes made to Standards of Care; increase in retention per CPCDMS	<b>2</b>
4. Provide case managers with training to improve skills for building referral networks for appropriate support group, mental health, and substance abuse resources.	RWGA; TRG		Annually	RWGA staff; TRG staff	Case managers	Training provided	<b>5</b>
5. Develop a process to provide regular updates on Ryan White system developments and resources to targeted private providers.	RWPC-OS		2018	RWPC-OS	Private providers; PLWH seeing private providers	Process developed; list of targeted providers generated	<b>4</b>

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: Gaps in Care Solution 2

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

2. Expand retention and engagement activities with in-care PLWH, focusing on community education system enhancements, and health literacy\*

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Create a public service announcement detailing the benefits of treatment adherence, treatment as prevention, and retention in care.  <i>(See also: Prevention and Early Identification Strategy 4 Activity 2)</i>	RWPC-OS; RWPC Affected Community Committee	<i>Non-RP partners:</i> HHD for distribution	2019	RWPC-OS; volunteers	PLWH and partners; at-risk for falling out of care; Out of Care	Public service announcement created	<b>1</b>
2. Assess consumer-preferred alternative hours of operation for primary care sites as a component of client satisfaction surveys.	RWGA; TRG		2020	RWGA staff; TRG staff	RW clients	Client satisfaction survey tool updated; client satisfaction surveys	<b>7</b>
3. Collaborate with the City of Houston Housing and Community Development Department on development of the Houston HOPWA care continuum and expansion of engagement and retention activities.  <i>(See also: Special Populations Strategy Solution 3 Activity 2)</i>	RWPC-OS	<i>Non-RP partners:</i> HCD	2018	RWPC-OS	HOPWA/housing clients; homeless PLWH	HOPWA care continuums created; engagement and retention activities developed and implemented	<b>5</b>
4. Expand Road to Success training to housing sites.	RWPC-OS; RWPC (Affected); RWGA; TRG	<i>Non-RP partners:</i> HCD; housing sites	Annually	RWPC-OS; RWGA staff; TRG staff	HOPWA/housing clients	Road to Success agenda; evaluations	<b>4</b>
5. Evaluate, adjust, and distribute existing social media materials to increase consumer and community health literacy.	RWPC; RWPC-OS; HHD; CPG		2019	RWPC-OS; HHS CPG support staff; volunteers; existing health literacy campaigns	General public	Resulting materials; record of distribution	<b>6</b>

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
<p>6. Evaluate the feasibility of establishing a site or sites with community partners for PLWH experiencing homelessness to safely store and access medications.</p> <p><i>(See also: Special Populations Strategy Solution 2 Activity 6)</i></p>	<p>RWPC-OS; RWGA</p> <p><i>Non-RP partners: City of Houston; Homeless Coalition; homeless services providers</i></p>	<p>2018</p>	<p>RWPC-OS; RWGA staff</p>	<p>Homeless PLWH</p>	<p>Report completed for feasibility study</p>	<p><b>2</b></p>
<p>7. Assess current level of risk reduction counseling provided through Primary Care, focusing particularly on promotion of treatment as prevention.</p>	<p>RWGA</p>	<p>2018</p>	<p>RWGA staff</p>	<p>RW clients</p>	<p>Assessment report</p>	<p><b>3</b></p>

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: Gaps in Care Solution 3

(Comprehensive Plan Leadership Team Approved: 07/25/16)

#### Solution

{Recommended approach to achieve stated goals and targets}

3. Adopt strategies to retain and/or reengage PLWH to return to care, particularly those receiving care outside of Ryan White

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
<p>1. Study the feasibility of allowing non-Ryan White providers CPCDMS access to health information to support re-linkage.</p> <p><i>(See Also: Coordination of Effort Strategy Solution 5 Activity 1)</i></p>	RWGA	<i>Non-RP partners:</i> Pam Green, RN with Memorial Hermann Hospital has volunteered to assist	2017	RWGA staff; Pam Green	Out of Care PLWH	Report completed for feasibility study	<b>1</b>
<p>2. Explore and, if appropriate, implement best practices for incentivization for providers to increase retention and viral suppression.</p> <p>[Staff clarification: incentivization in this instance refers to creating an incentive for providers to improve retention and viral suppression among their clients, not direct incentivization; incentivization does not necessarily imply a financial incentive]</p>	RWGA; RWPC-OS	<i>Non-RP partners:</i> RWPC	2021	RWGA staff; RWPC-OS; volunteers	Providers; clients	Best practices list created; if appropriate, incorporated into HTBMN process	<b>3</b>

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
4. Identify Houston area hospitals serving highest number of HIV positive patients, and target for dialog about ways to interface with the Ryan White system for re-linkage.	HHD; RWGA	<i>Non-RP partners:</i> Pam Green, RN with Memorial Hermann Hospital has volunteered to assist	2019	HHD Surveillance staff; RWGA staff; Pam Green	Local hospitals; Out of Care PLWH	List of hospitals generated (HHD); record of contact made to hospitals	2
5. Contact Health Departments in other jurisdictions and begin dialog regarding success and opportunities for working with health insurance providers to identify and reengage Out of Care individuals.	RWPC-OS		2017	RWPC-OS	Out of Care PLWH; PLWH with private/public insurance	Record that discussion occurred; success and opportunities applicable to Houston generated	4

STRATEGY 3: TO ADDRESS THE NEEDS OF SPECIAL POPULATIONS

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2021 Target	Notes
❖ BENCHMARK 1: Number of new HIV infections diagnosed among each special population:				
Youth (13-24)	DSHS eHARS	360 (2014)	↓25% =70 (NHAS target)	Region is EMA
Homeless	HMIS (potential)	54 (2014)	↓25% =41 (NHAS target)	Region is Harris/Fort Bend County Baseline: 3.9%- National Alliance to End Homelessness, 2009. <a href="http://www.nationalhomeless.org/factsheets/hiv.html">http://www.nationalhomeless.org/factsheets/hiv.html</a> applied to local 2014 new Dx
Incarcerated in Jail	The Resource Group	Pending	↓25% = Pending (NHAS target)	
Incarcerated in Prison	TDCJ	Pending	↓25% = Pending (NHAS target)	
Recently Released	Service Linkage Data	Pending	↓25% = Pending (NHAS target)	
IDU	DSHS eHARS	66 (2014)	↓25% =50 (NHAS target)	Region is EMA
MSM	DSHS eHARS	930 (2014)	↓25% =698 (NHAS target)	Region is EMA
Transgender and Gender Non-conforming	HHD, HIV Surveillance System	Pending	↓25% =Pending (NHAS target)	Region is Houston/Harris County
Women of Color	DSHS eHARS	Pending	↓25% =Pending (NHAS target)	Region is EMA
Aging (50 and up)	DSHS eHARS	264 (2014)	↓25% =198 (NHAS target)	Region is EMA Baseline: Placeholder, reflects 45+

STRATEGY 3: TO ADDRESS THE NEEDS OF SPECIAL POPULATIONS – CONTINUED

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2021 Target	Notes
❖ <b>BENCHMARK 2:</b> Proportion of newly-diagnosed individuals within each special population linked to clinical care within one month of their HIV diagnosis:				
Youth (13-24)	DSHS Linkage to Care Data	74.0% (2014)	85% (NHAS target)	Region is EMA Baseline: Reflects 3 month linkage window
Homeless	Needs Assessment	53.9% (2016)	85% (NHAS target)	Region is HSDA Baseline: Unstable housing
Recently Released from Jail (*linked within 1 month of release)	The Resource Group	Pending	85% (NHAS target)	Region is HSDA Harris County Jail only.
Recently Released from Prison (*linked within 1 months of release)	The Resource Group	Pending	85% (NHAS target)	
IDU	DSHS Linkage to Care Data	85.0% (2014)	85% (NHAS target)	Region is EMA
MSM	DSHS Linkage to Care Data	78.0% (2014)	85% (NHAS target)	Region is EMA
Transgender and Gender Non-conforming	Needs Assessment	54.1% (2016)	85% (NHAS target)	Region is HSDA
Women of Color	DSHS eHARS	Pending	85% (NHAS target)	Region is EMA
Aging (50 and up)	DSHS eHARS	84% (2014)	85% (NHAS target)	Region is EMA Baseline: Placeholder, reflects 45+



STRATEGY 3: TO ADDRESS THE NEEDS OF SPECIAL POPULATIONS – *CONTINUED*

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2014 Target	Notes
❖ <b>BENCHMARK 3:</b> Proportion of PLWH with unmet need within each Special Population				
Youth (13-24)	DSHS Unmet Need Analysis	24.0% (2014)	10% (NHAS 90% retention target)	Region is EMA
Homeless	Needs Assessment – Out of Care Assessment	To be established	10% (NHAS 90% retention target)	Region is HSDA 2014 NA = 16.3%
Recently Released from Jail/Prison	Needs Assessment – Out of Care Assessment	To be established	10% (NHAS 90% retention target)	Region is HSDA 2014 NA = 11.9%
IDU	DSHS Unmet Need Analysis	27.0% (2014)	10% (NHAS 90% retention target)	Region is EMA
MSM	DSHS Unmet Need Analysis	25.0% (2014)	10% (NHAS 90% retention target)	Region is EMA
Transgender and Gender Non-conforming	Needs Assessment – Out of Care Assessment	To be established	10% (NHAS 90% retention target)	Region is HSDA 2014 NA = 7.4%
Women of Color	DSHS Unmet Need Analysis	Pending	10% (NHAS 90% retention target))	Region is EMA
Aging (50 and up)	DSHS Unmet Need Analysis	25% (2014)	10% (NHAS 90% retention target)	Region is EMA Baseline: Placeholder, reflects 45+
❖ <b>BENCHMARK 4:</b> Percentage of grievances relating to cultural and linguistic competence received through the Ryan White and HHD grievance lines	Ryan White Grants Administration; TRG; HHD	To be established	Track only	Region is EMA

**2017 Houston Area Comprehensive HIV Services Plan**  
 Logic Model 1: Goal, Solutions, and Benchmarks – SP

<b>Solutions</b> {Recommended approaches to achieve the goal}
<p>②</p> <ol style="list-style-type: none"> <li>1. Evaluate HIV prevention and care system policies, procedures, and other structural components, and adjust to ensure that treatment is sufficient to meet the needs of all people living with or at risk for HIV.*</li> <li>2. Close gaps in targeted interventions and services to better meet the HIV prevention and care needs of special populations*</li> <li>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*</li> </ol>

<b>Goal</b> {Desired long-term result, outcome, or change}
<ol style="list-style-type: none"> <li>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* ①</li> <li>2. 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*</li> <li>3. Strengthen the cultural and linguistic competence of the HIV prevention and care system<sup>1</sup></li> </ol> <p><sup>1</sup>Revise 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>

<b>Benchmarks</b> {How the result will be measured}
<ol style="list-style-type: none"> <li>1. Reduce the number of new HIV infections diagnosed among each Special Population by 25 percent ③</li> <li>2. 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 percent</li> <li>3. Decrease the proportion of PLWH with unmet need within each Special Population*</li> <li>4. Monitor grievances relating to cultural and linguistic competence received through the Ryan White grievance lines**</li> </ol>

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: SP Solution 1

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

1. Evaluate HIV prevention and care system policies, procedures, and other structural components, and adjust to ensure that treatment is sufficient to meet the needs of all people living with or at risk for HIV.

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Assess and adjust Standards of Care and other relevant policies to ensure access to facilities and services for all people regardless of sexual orientation or gender identity.	RWGA; TRG; HHD	<i>Non-RP partners:</i> RWPC	Annually	RWGA staff; TRG staff; HHD staff; volunteers	HIV prevention and care services clients	Standards of Care modified	<b>3</b>
2. Review and revise client satisfaction survey tool to measure provision of culturally and linguistically appropriate services.	RWGA; TRG		2018	RWGA staff; TRG staff;	HIV prevention and care services clients	Resulting method and measurement	<b>2</b>
3. Educate providers serving special populations about routine HIV testing and PrEP, and promote inclusion of routine HIV testing and PrEP education in policies, procedures, and practices.  (See also: Prevention and Early Identification Strategy Solution 2 Activity 2)	HHD; CPG; RWPC-OS	<i>Non-RP partners:</i> DSHS – rural areas; AETC	Annually	HHD PrEP Coordinator; HHD CPG support staff; RWPC-OS; Project PrIDE; possibly Gilead Project FOCUS if not COI	Private providers; special populations	Education materials developed/used; list of providers educated; increase in routine testing	<b>1</b>
4. Partner with SIRR to develop a process for tracking linkage for recently released PLWH.	TRG; RWGA	<i>Non-RP partners:</i> SIRR; HCSO	2019	TRG staff (ARIES); SIRR members; RWGA staff (CPCDMS and QM)	Incarcerated and recently released	Tracking process in place; any necessary adjustments made to ARIES/CPCDMS	<b>4</b>
5. Explore feasibility of cooperation between RWGA and HCD to provide assisted living facility service aging PLWH.	RWGA; RWPC-OS; RWPC	<i>Non-RP partners:</i> HCD	2018	RWGA staff; RWPC-OS; HCD staff; volunteers	Aging PLWH; homeless PLWH	Report exploring feasibility created	<b>Unranked</b>

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: SP Solution 3

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

2. Close gaps in targeted interventions and services to better meet the HIV prevention and care needs of special populations.

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Develop an HIV Care Continuum for each Special Population as possible, and disseminate to providers and the public as appropriate.	RWPC-OS; HHD <i>Non-RP partners: DSHS</i>	2017 <i>Include as needed in each Epi Profile</i>	RWPC-OS; HHD staff	Special populations for which data are available	Completed continuums	<b>4</b>
2. Train PrEP providers and prevention workers on best practices for educating and promoting PrEP among special populations.	HHD	Annually	HHD staff; Project PrIDE	PrEP providers and prevention workers; HIV negative individuals in special populations	Training occurred; increased testing of members in special populations	<b>1</b>
3. Distribute HIV testing and PrEP information and resources to walk-in clinics throughout the Houston Area, particularly those in high-incidence areas.  <i>(See also: Prevention and Early Identification Strategy Solution 2 Activity 2)</i>	HHD; Task Forces; CPG	Annually	HHD CPG support staff; HHD Task Force liaisons; volunteers	HIV negative and status unaware in high-incidence areas	Information distributed; New diagnoses in high-incidence areas decreased	<b>2</b>
4. Create tailored public service announcements for each special population educating the community on the benefits of Treatment as Prevention	RWPC-OS <i>Non-RP partners: Actors for PSAs; Community partners</i>	2020	RWPC-OS; actors; community partners (distribution and possibly to help fund)	Special populations, PLWH	PSAs created	<b>3</b>

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
5. Compile HIPAA compliant best practices for using technology to communicate with consumers and incorporate into provider training. <i>See also: Coordination of Effort Strategy Solution 4 Activity 1)</i>	RWGA; TRG	2017	RWGA staff; TRG staff	Youth, homeless PLWH	List of best practices compiled; training occurred	5
6. Evaluate the feasibility of establishing a site or sites with community partners for PLWH experiencing homelessness to safely store and access medications. <i>(See also: Gaps in Care Strategy Solution 2 Activity 2)</i>	RWPC-OS; RWGA <i>Non-RP partners: City of Houston; Homeless Coalition; homeless services providers</i>	2018	RWPC-OS; RWGA staff	Homeless PLWH	Report completed for feasibility study	6

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: SP Solution 3

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

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.

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Provide training to DIS staff on data collection for transgender and other special population clients.	HHD	<i>Non-RP partners:</i> DSHS	Annually	HHD staff	Special populations (especially transgender)	Training provided	<b>1</b>
2. Collaborate with City of Houston Housing and Community Development Department on development of a local Housing Unmet framework and local Housing Care Continuums, including special populations to the extent feasible.  <i>(See also: Gaps in Care Strategy Solution 2 Activity 3)</i>	RWPC-OS	<i>Non-RP partners:</i> HCD	2018	RWPC-OS	HOPWA/housing clients; homeless PLWH	HOPWA care continuums created; engagement and retention activities developed and implemented	<b>5</b>
4. Explore additional Need Assessment activities (including utilization of local data systems) to assess causes of loss to care among special populations.	RWPC-OS; HHD		2018	RWPC-OS; HHD staff; ECLIPS	Special populations; Out of Care PLWH	Report of causes for loss to care for PLWH in special populations	<b>4</b>
5. Train surveillance staff to enhance data collection on transgender community.	HHD	<i>Non-RP partners:</i> HHD Surveillance Bureau	TBD	HHD staff; HHD Surveillance Bureau staff	MSM, transgender	Training provided; sex/gender field in data reports includes transgender	<b>2</b>

STRATEGY 4: TO IMPROVE COORDINATION OF EFFORT AND ADAPT TO HEALTHCARE SYSTEM CHANGES

Benchmark to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2014 Target	Notes
❖ BENCHMARK 1: Number of Ryan White Planning Council members who are not employed at HIV care or prevention service providers	RWPC/OS	29 total 4 non-infected/ affected (2014)	Maintain (local target)	Baseline includes Council and External members who do not bring HIV expertise because of their place of employment. 2014 measure is placeholder for 2016 data.
❖ BENCHMARK 2: Number of non-HIV prevention and care service providers requesting information about HIV services	RWPC/OS	110 (2015)	Increase (local target)	Actual numbers tallied using office tracking sheets and website requests. Defined as an entity that does not state HIV prevention or care in its mission.
❖ BENCHMARK 3: Proportion of PLWH reporting barriers to using Ryan White HIV/AIDS Program Core Medical	Needs Assessment	40.5% (2016)	↓ = Pending SPSS run (local target)	Baseline: Numerator = 203; Denominator = 501 Target to be based on available historical data (2014)
❖ BENCHMARK 4: Proportion of PLWH reporting barriers to using Ryan White HIV/AIDS Program Support Services	Needs Assessment	20.2% (2016)	↓ = Pending SPSS run (local target)	Baseline: Numerator = 93 Denominator = 461 Target to be based on available historical data (2014)
❖ BENCHMARK 5: Proportion of PLWH reporting barriers to outpatient alcohol or drug abuse treatment services	Needs Assessment	8.2% (2016)	↓ = Pending SPSS run (local target)	Baseline: Numerator = 10 Denominator = 122 Target to be based on available historical data (2014)
❖ BENCHMARK 6: Proportion of PLWH reporting barriers to professional mental health counseling	Needs Assessment	12.1% (2016)	↓ = Pending SPSS run (local target)	Baseline: Numerator = 32 Denominator = 265 Target to be based on available historical data (2014)
❖ BENCHMARK 7: Proportion of PLWH reporting housing instability	Needs Assessment	25.6% (2016)	Maintain =25.6% (local target)	Target based on current resources and planning
❖ BENCHMARK 8: Percentage of Ryan White HIV/AIDS Program clients with Medicaid or Medicare enrollment	CPCDMS	27% (2014)	Increase (local target)	Baseline to be updated
❖ BENCHMARK 9: Proportion of Ryan White HIV/AIDS Program clients who may qualify for Medicaid or Medicare, but who are not enrolled in either program	CPCDMS	Pending	Decrease (local target)	
❖ BENCHMARK 10: Percentage of Ryan White HIV/AIDS Program clients with private health insurance	CPCDMS	10% (2014)	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	Pending	Decrease (local target)	6.3% of RW enrolled in QHP in 2015

# 2017 Houston Area Comprehensive HIV Services Plan

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

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

<b>Goal</b> {Desired long-term result, outcome, or change}
<ol style="list-style-type: none"><li>1. Increase awareness of HIV among all Greater Houston Area health and social service providers* ①</li><li>2. Increase the availability of HIV-related prevention and care services and providers*</li><li>3. Reduce barriers to HIV prevention and care</li><li>4. Partner to address co-occurring public health problems that inhibit access to HIV prevention and care*</li><li>5. Monitor and respond to state and national-level changes in the health care system*</li></ol>

<b>Benchmarks</b> {How the result will be measured}
<ol style="list-style-type: none"><li>1. Maintain the number of Ryan White Planning Council members who are not employed at HIV care or prevention service providers</li><li>2. Increase the number of non-HIV prevention and care service providers requesting information about HIV services ③</li><li>3. Reduce the proportion of PLWH reporting barriers to using Ryan White HIV/AIDS Program Core Medical Services</li><li>4. Reduce the proportion of PLWH reporting barriers to using Ryan White HIV/AIDS Program Support Services</li><li>5. Reduce the proportion of PLWH reporting barriers to outpatient alcohol or drug abuse treatment services</li><li>6. Reduce the proportion of PLWH reporting barriers to professional mental health counseling</li><li>7. Maintain the proportion of PLWH reporting housing instability</li><li>8. Increase the % of Ryan White HIV/AIDS Program clients with Medicaid or Medicare enrollment</li><li>9. Decrease the proportion of Ryan White HIV/AIDS Program clients with who may qualify for Medicaid or Medicare, but who are not enrolled in either program.</li><li>10. Increase the % of Ryan White HIV/AIDS Program clients with private health insurance</li><li>11. Decrease the proportion of Ryan White HIV/AIDS Program clients who may qualify for an Advanced Premium Tax Credit, but who are not enrolled in an ACA Marketplace QHP.</li></ol>



## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: COE Solution 1

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

1. Launch proactive efforts to unify stake-holders and to engage new and non-traditional partners in achieving the HIV prevention and care mission

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Support AETC efforts to provide regular HIV-related updates to the Houston medical community.	RWCP-OS; RWGA; HHD <i>Non-RP partners:</i> AETC; HHS; DSHS	As needed	RWPC-OS; RWGA staff; HHD staff; DSHS	Houston medical community	Evidence of support (e.g. promotion emails/social media communication sent; collaborative products, etc.)	1
2. Extend Speakers Bureau scope to include presentations to non-traditional groups beyond the business community.	RWPC-OS; RWPC Speakers Bureau	2019	RWPC-OS; RWPC Speakers Bureau	New and non-traditional groups outside business community	Annual presentation goal met; list of presentation sites; evaluations	3
3. Facilitate an annual Task Force meeting for community-wide coordination of effort.	HHD; CPG; Task Forces	Annually	HHD CPG support staff; HHD Task Force liaisons; Task Force members	Current stakeholders; populations served by Task Forces	Meeting occurred; resulting coordination	2

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
<p>4. Sustain current efforts and target the following sectors and groups for coordination of effort activities:</p> <ul style="list-style-type: none"> <li>a. Advocacy groups</li> <li>b. Aging (e.g., assisted living, home health care, hospice, etc.)</li> <li>c. Alcohol and drug abuse providers and coalitions at the local and regional levels</li> <li>d. Business and Chambers of Commerce</li> <li>e. Community centers</li> <li>f. Chronic disease prevention, screening, and self-management programs</li> <li>g. Faith communities</li> <li>h. Medical professional associations, medical societies, and practice groups</li> <li>i. Mental health (e.g., counseling associations, treatment facilities, etc.)</li> <li>j. New HIV-related providers such as FQHCs and Medicaid Managed Care Organizations (MCOs)</li> <li>k. Philanthropic organizations</li> <li>l. Primary education, including schools and school districts</li> <li>m. Secondary education, including researchers, instructors, and student groups</li> <li>n. Workforce Solutions and other vocational training and rehabilitation programs</li> </ul>	RWGA; TRG; HHD; RWPC-OS; RWPC; CPG; Task Forces	Annually	RWGA staff; TRG staff; HHD staff; HHD CPG support staff; HHD Task Force liaisons; RWPC-OS; RWPC; CPG; Task Forces	Per sector	Record of coordination per sector	4

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: COE Solution 2

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

2. Support technical assistance and training to current HIV-related service providers and extend training to potential providers\*

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Support AETC efforts to provide regular HIV-related updates to the Houston medical community.	RWCP-OS; RWGA; HHD <i>Non-RP partners:</i> AETC; HHS; DSHS	As needed	RWPC-OS; RWGA staff; HHD staff; DSHS	Houston medical community	Evidence of support (e.g. promotion emails/social media communication sent; collaborative products, etc.)	3
2. Extend notification of quarterly case manager trainings to non-funded case managers and social workers at local hospitals (Ben Taub, LBJ, etc.).	RWGA; RWPC-OS	Annually	RWGA staff; RWPC-OS staff	Non-RW case managers; PLWH outside RW system	Record of notice sent (e.g. email, blast fax, etc.)	1
3. Create and disseminate an access and utilization guide for the RW Health Insurance Assistance Program to non-RW funded case managers and social workers.	TRG	2018	TRG staff	Non-RW case managers; PLWH outside RW system	Guide created; list of dissemination locations/contacts	2
4. Cultivate peer technical assistance that facilitates sharing best practice models between current providers.	RWGA; TRG	As needed	RWGA staff; TRG staff	Current RW providers	Peer technical assistance model created and implemented	4

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

Logic Model 3: Action Planning Matrix: COE Solution 3

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

3. Increase communication of HIV-related issues through media to educate and mobilize the public and providers\*

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Explore the feasibility and practicality of developing a clearinghouse of HIV-related educational opportunities.	RWPC-OS	2018	RWPC-OS	N/A	Brief report on feasibility compiled	1
2. Identify local media resources to serve as outlets for HIV education and community mobilization efforts.	RPWC (Affected Community Committee); CPG <i>Non-RP partners: Task Forces; RWPC-OS; HHD</i>	Annually	RWPC-OS staff; HHD CPG support staff; volunteers	N/A	List of opportunities compiled	4
3. Cultivate social media pathways to disseminate HIV-related information and mobilization efforts.	HHD; RWPC-OS; TRG; RWGA; RWPC; CPG; Task Forces	2017 <i>Utilize annually</i>	HHD staff; HHD CPG support staff; RWPC-OS; RWGA; TRG; volunteers; Task Force members	N/A	Documentation stating pathways; evidence of pathways utilized	2
4. Pursue partnerships to promote national prevention and care services campaigns locally.	RWPC-OS; RPWC (Affected); HHD; CPG	2020	RWPC-OS; HHD CPG support staff; volunteers	General public; populations targeted in campaigns	Documentation of partnerships pursued; list of national campaigns supported in the Houston area	3

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
5. Explore transportation-based advertisements of PrEP and other HIV prevention and care messaging.	HHD	<i>Non-RP partners: RWPC Speakers Bureau – educational presentations to transportation providers</i>	2021	HHD staff; Project PrIDE; RWPC-OS; RWPC Speakers Bureau	General public; public transportation users	Advertisements placed if possible; transportation providers trained	5
6. Evaluate opportunities for partnering with other local government initiatives for co-branding HIV-related issues.	HHD; RWGA; TRG	<i>Non-RP partners: City of Houston; Harris County; HSDA Counties</i>	Annually	HHD staff; RWGA staff; TRG staff	N/A	Opportunities identified; partnerships (MOU if necessary) created	6
7. Explore opportunities to expand community access to local academic research findings.  <i>(See also: Prevention and Early Identification Strategy Solution 6 Activity 3)</i>	HHD (Sharing Science Symposium); RWPC-OS		2020	HHD staff; RWPC-OS staff	General public	Opportunities identified	Unranked
8. Promote inclusion of HIV and sexual health messaging in local community creative arts.  <i>(See also: Prevention and Early Identification Strategy Solution 6 Activity 4)</i>	RWPC-OS	<i>Non-RP partners: RWPC Affected Community Committee; Task Forces</i>	As Needed	RWPC-OS; community resources	General public	Resulting projects	Unranked
9. Investigate need for and feasibility of creating a RWPC-OS position for an Education and Communication Coordinator.	RWPC-OS; RWGA		2018	RWPC-OS; RWGA	General public	Documentation of need investigate; position created if needed and feasible	Unranked

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

Logic Model 3: Action Planning Matrix: COE Solution 4

(Comprehensive Plan Leadership Team Approved: 07/25/16)

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

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\*

Activity	Responsible Parties (Name of entity)	Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Compile HIPAA compliant best practices for using technology to communicate with consumers, and incorporate into provider training  <i>(See also: Special Populations Strategy Solution 2 Activity 5)</i>	RWGA; TRG	2017	RWGA staff; TRG staff	Youth, homeless PLWH	List of best practices compiled; training occurred	<b>1</b>

## 2017 Houston Area Comprehensive HIV Prevention & Care Services Plan

### Logic Model 3: Action Planning Matrix: COE Solution 5

(Comprehensive Plan Leadership Team Approved: 07/25/16)

### Solution

{Recommended approach to achieve stated goals and targets}

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\*

Activity	Responsible Parties (Name of entity)		Timeframe (By when)	Resources (Funding, staff, etc.)	Target Population	Data Indicator	Priority (rank by #)
1. Study the feasibility of allowing non-Ryan White providers CPCDMS access to health information to support re-linkage.  (See Also: Gaps in Care Strategy Solution 3 Activity 1)	RWGA	<i>Non-RP partners:</i> Pam Green, RN with Memorial Hermann Hospital has volunteered to assist	2017	RWGA staff; Pam Green	Out of Care PLWH	Report completed for feasibility study	3
2. Investigate opt-in secure HIPAA-compliant health information exchanges (e.g. Greater Houston Health Connect) and assess whether incorporation of such exchanges into the RW system would be appropriate and useful.	RWGA; TRG		2018	RWGA staff; TRG staff; providers	RW clients seeking care outside the RW system; Out of Care PLWH	Report completed for investigation	2
3. Develop process for sharing information in CPCDMS between record-owning agencies and other RW providers to facilitate access to care.	RWGA	<i>Non-RP partners:</i> TRG (ARIES)	2018	RWGA staff	RW clients seeking non- primary care with other RW providers	Process developed	1

**Priority and  
Allocations  
Committee  
Report**



## Ryan White Reallocations as of 07-28-16: RYAN WHITE PART A & MAI FUNDING

Funds Available for Reallocation: Part A: \$680,325 MAI: \$577,522

**Motion A:** Approve the following allocation increases using FY 2015 Ryan White Part A and MAI carryover funds.

**Motion B:** Move \$107,547 in MAI and \$160,365 in Part A funds into the Ryan White Grant Administration administrative budget to be used for a number of education and training projects – see 08-11-16 Council agenda for project details.

Request Control #	FY16 Priority	Local Service Category	Amount of Request	Recommended Part A Allocation Increase	Recommended MAI Allocation Increase	Justification
Pt A #1	1.h	Vision	\$24,960	\$24,960		Documented need
Pt A #2	1.h	Vision	\$50,000	\$50,000		Documented need
Pt A #3	2.a	Clinical Case Management	\$25,000	\$25,000		To reduce wait time
Pt A #4	4.b	Oral Health - Rural	\$30,000	\$30,000		To reduce wait time
Pt A #5	13.a-13.b	Medical Transportation - Rural and Urban	\$40,000	\$40,000		To be proactive and meet the need, and to reduce wait time
Pt A #6	1.b – 1.d	Community-based Primary Medical Care targeted to African American, Hispanic, and White	\$200,000	\$200,000		To reduce wait time and increase capacity
Pt A #7	1.b – 1.d	Community-based Primary Medical Care targeted to African American, Hispanic, and White	\$399,975	\$150,000	249,975	Split the allocation so request receives \$150,000 from Part A and \$249,975 from MAI funding. To reduce wait time and increase capacity
MAI #1	1.b – 1.d	Community-based Primary Medical Care targeted to African American, Hispanic, and White	\$220,000		220,000	Documented need
		Administrative Agent – education and training		\$160,365	\$107,547	In response to activities outlined in the 2017 Houston Area Comprehensive HIV Prevention and Care Services Plan
<b>TOTALS:</b>				<b>\$680,325</b>	<b>\$577,522</b>	

Priority	Service Category	Original Allocation <i>RWPC Approved Level Funding Scenario</i>	Award Reconciliation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procurement Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
		Original Allocation	Award Reconciliation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent	Total Expended on Services	Percent				
	Core (must not be less than 75% of total service dollars)	16,126,394	569,608	0	0	0	16,696,002	89.46%	16,696,002	89.46%				
	Non-Core (may not exceed 25% of total service dollars)	2,261,153	-293,406	0	0	0	1,967,747	10.54%	1,967,747	10.54%				
	<b>Total Service Dollars (does not include Admin and QM)</b>	<b>18,387,547</b>	<b>276,202</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>18,663,749</b>		<b>18,663,749</b>					
	Total Admin (must be ≤ 10% of total Part A + MAI)	1,612,704	0	0	0	0	1,612,704	7.76%						
	Total QM (must be ≤ 5% of total Part A + MAI)	495,000	0	0	0	0	495,000	2.38%						

MAI Procurement Report

Priority	Service Category	Original Allocation <i>RWPC Approved Level Funding Scenario</i>	Award Reconciliation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procurement Balance	Date of Procurement	Expended YTD	Percent YTD	Percent Expected YTD
1	Outpatient/Ambulatory Primary Care	2,011,206	46,743	0	0	0	2,057,949	100.00%	2,011,206	46,743		56,100	3%	17%
1.b (MAI)	Primary Care - CBO Targeted to African American	1,016,618	23,627		0	0	1,040,245	50.55%	1,016,618	23,627	3/11/2016	\$28,050	3%	17%
1.c (MAI)	Primary Care - CBO Targeted to Hispanic	994,588	23,116		0	0	1,017,704	49.45%	994,588	23,116	3/11/2016	\$28,050	3%	17%
	<b>Total MAI Service Funds</b>	<b>2,011,206</b>	<b>46,743</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2,057,949</b>	<b>100.00%</b>	<b>2,011,206</b>	<b>46,743</b>		<b>56,100</b>	<b>3%</b>	<b>17%</b>
	Grant Administration	0	0	0	0	0	0	0.00%	0	0		0	0%	0%
	Quality Management	0	0	0	0	0	0	0.00%	0	0		0	0%	0%
	<b>Total MAI Non-service Funds</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00%</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0%</b>	<b>0%</b>
	<b>Total MAI Funds</b>	<b>2,011,206</b>	<b>46,743</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2,057,949</b>	<b>100.00%</b>	<b>2,011,206</b>	<b>46,743</b>		<b>56,100</b>	<b>3%</b>	<b>17%</b>
	<b>MAI Grant Award</b>	<b>2,057,949</b>	<b>Carry Over:</b>	<b>0</b>		<b>Total MAI:</b>	<b>2,057,949</b>							
	<b>Combined Part A and MAI Total</b>	<b>22,506,457</b>												

Footnotes:

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 four (4) HRSA service categories (Pcare, LPAP, MCM, Non Med CM). Expenditures must be evaluated both by individual service category and by combined service categories.
(a.1)	Single local service definition is three (3) HRSA service categories (does not include LPAP). Expenditures must be evaluated both by individual service category and by combined service categories.
(b)	Adjustments to reflect actual award based on Increase funding scenario.
(c)	Funded under Part B and/or SS
(d)	Not used at this time
(e)	10% rule reallocations
(f)	Include MAI funds when reviewing 10% rule reallocations

Part A Reflects "Increase" Funding Scenario  
MAI Reflects "Increase" Funding Scenario

FY 2015 Ryan White Part A and MAI  
Procurement Report

Priority	Service Category	Original Allocation <i>RWPC Approved Level Funding Scenario</i>	Award Reconciliation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procurement Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
1	Outpatient/Ambulatory Primary Care	9,746,354	516,252	0	0	0	10,262,606	49.41%	10,262,606	0		583,738	6%	25%
1.a	Primary Care - Public Clinic (a)	3,570,049	73,790	0	0	0	3,643,839	17.54%	3,643,839	0	3/1/2016	\$0	0%	8%
1.b	Primary Care - CBO Targeted to AA (a) (e) (f)	1,066,552	148,743	0	0	0	1,215,295	5.85%	1,215,295	0	3/1/2016	\$208,143	17%	25%
1.c	Primary Care - CBO Targeted to Hispanic (a) (e) (f)	929,215	128,225	0	0	0	1,057,440	5.09%	1,057,440	0	3/1/2016	\$117,213	11%	25%
1.d	Primary Care - CBO Targeted to White/MSM (a) (e)	926,294	78,076	0	0	0	1,004,370	4.84%	1,004,370	0	3/1/2016	\$108,872	11%	25%
1.e	Primary Care - CBO Targeted to Rural (a) (e)	1,143,032	23,626	0	0	0	1,166,658	5.62%	1,166,658	0	3/1/2016	\$88,680	8%	25%
1.f	Primary Care - Women at Public Clinic (a)	1,863,570	38,519	0	0	0	1,902,089	9.16%	1,902,089	0	3/1/2016	\$0	0%	8%
1.g	Primary Care - Pediatric (a.1)	15,124	313	0	0	0	15,437	0.07%	15,437	0	3/1/2016	\$6,000	39%	25%
1.h	Vision	232,518	24,960	0	0	0	257,478	1.24%	257,478	0	3/1/2016	\$54,830	21%	25%
2	Medical Case Management	2,215,702	0	0	0	0	2,215,702	10.67%	2,215,702	0		294,032	13%	25%
2.a	Clinical Case Management	488,656	0	0	0	0	488,656	2.35%	488,656	0	3/1/2016	\$88,850	18%	25%
2.b	Med CM - Public Clinic (a)	162,622	0	0	0	0	162,622	0.78%	162,622	0	3/1/2016	\$0	0%	8%
2.c	Med CM - Targeted to AA (a) (e)	321,070	0	0	0	0	321,070	1.55%	321,070	0	3/1/2016	\$78,644	24%	25%
2.d	Med CM - Targeted to H/L (a) (e)	321,072	0	0	0	0	321,072	1.55%	321,072	0	3/1/2016	\$29,732	9%	25%
2.e	Med CM - Targeted to W/MSM (a) (e)	107,247	0	0	0	0	107,247	0.52%	107,247	0	3/1/2016	\$21,741	20%	25%
2.f	Med CM - Targeted to Rural (a)	348,760	0	0	0	0	348,760	1.68%	348,760	0	3/1/2016	\$32,280	9%	25%
2.g	Med CM - Women at Public Clinic (a)	180,311	0	0	0	0	180,311	0.87%	180,311	0	3/1/2016	\$0	0%	8%
2.h	Med CM - Targeted to Pedi (a.1)	160,051	0	0	0	0	160,051	0.77%	160,051	0	3/1/2016	\$21,919	14%	25%
2.i	Med CM - Targeted to Veterans	80,025	0	0	0	0	80,025	0.39%	80,025	0	3/1/2016	\$20,867	26%	25%
2.j	Med CM - Targeted to Youth	45,888	0	0	0	0	45,888	0.22%	45,888	0	3/1/2016	\$0	0%	8%
3	Local Pharmacy Assistance Program (a) (e)	2,581,440	53,356	0	0	0	2,634,796	12.68%	2,634,796	0	3/1/2016	\$389,039	15%	25%
4	Oral Health	166,404	0	0	0	0	166,404	0.80%	166,404	0	3/1/2016	\$27,750	17%	25%
4.a	Oral Health - Untargeted (c)	0	0	0	0	0	0	0.00%	0	0	N/A	\$0	0%	0%
4.b	Oral Health - Targeted to Rural	166,404	0	0	0	0	166,404	0.80%	166,404	0	3/1/2016	\$27,750	17%	25%
5	Mental Health Services (c)	0	0	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
6	Health Insurance (c)	1,029,422	0	0	0	0	1,029,422	4.96%	1,029,422	0	3/1/2016	\$234,855	23%	25%
7	Home and Community-Based Services (c)	0	0	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
8	Substance Abuse Services - Outpatient	45,677	0	0	0	0	45,677	0.22%	45,677	0	3/1/2016	\$10,731	23%	25%
9	Early Intervention Services (c)	0	0	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
10	Medical Nutritional Therapy (supplements)	341,395	0	0	0	0	341,395	1.64%	341,395	0	3/1/2016	\$84,764	25%	25%
11	Hospice Services	0	0	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
12	Non-Medical Case Management	1,440,385	0	0	0	0	1,440,385	6.93%	1,440,385	0		116,260	8%	25%
12.a	Service Linkage targeted to Youth	110,793	0	0	0	0	110,793	0.53%	110,793	0	3/1/2016	\$3,056	3%	25%
12.b	Service Linkage targeted to Newly-Diagnosed/Not-in-Care	245,497	0	0	0	0	245,497	1.18%	245,497	0	3/1/2016	\$6,977	3%	25%
12.c	Service Linkage at Public Clinic (a)	490,886	0	0	0	0	490,886	2.36%	490,886	0	3/1/2016	\$0	0%	8%
12.d	Service Linkage embedded in CBO Pcare (a) (e)	593,209	0	0	0	0	593,209	2.86%	593,209	0	3/1/2016	\$108,227	18%	25%
13	Medical Transportation	527,362	0	0	0	0	527,362	2.54%	527,362	0		44,880	9%	25%
13.a	Medical Transportation services targeted to Urban	252,680	0	0	0	0	252,680	1.22%	252,680	0	3/1/2016	\$36,784	15%	25%
13.b	Medical Transportation services targeted to Rural	97,185	0	0	0	0	97,185	0.47%	97,185	0	3/1/2016	\$8,096	8%	25%
13.c	Transportation vouchers (bus passes & gas cards)	177,497	0	0	0	0	177,497	0.85%	177,497	0	3/1/2016	\$0	0%	0%
14	Linguistic Services (c)	0	0	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
15	Legal Assistance	293,406	-293,406	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
BE027618	Total Service Dollars	18,387,547	276,202	0	0	0	18,663,749	89.85%	18,663,749	0		1,786,048	10%	25%
	Grant Administration	1,612,704	0	0	0	0	1,612,704	7.76%	1,612,704	0	N/A	316,892	20%	25%
BE027617	HCPHES/RWGA Section	1,146,388	0	0	0	0	1,146,388	5.52%	1,146,388	0	N/A	\$226,629	20%	25%
PC	County Judge & RWPC Support*	466,316	0	0	0	0	466,316	2.24%	466,316	0	N/A	90,263	19%	25%
BE027623	Quality Management	495,000	0	0	0	0	495,000	2.38%	495,000	0	N/A	\$104,163	21%	25%
		20,495,251	276,202	0	0	0	20,771,453	100.00%	20,771,453	0		2,207,104	11%	25%
								Unallocated	Unobligated					
	Part A Grant Award:	20,771,451	Carry Over:				Total Part A:							
							20,771,451	-2	-2					

FY 2016 RW PART A REQUESTS FOR ALLOCATION INCREASE (July 2016)

REVISED: 7/20/2016

Request Control Number	FY 16 Priority Rank	HRSA Service Category	Local Service Category or Subcategory	Amount of Request	Amount Approved by RWPC	FY 2015 Final Contract Amount	Expended 2015	Percent Expended	FY 2016 Contract Amount	FY 2016 Expended YTD	FY 2016 Percent YTD	FY 2016 Percent Expected YTD	Is agency currently in compliance with contract conditions and therefore eligible for increase?	Notes
1	1b-1.c	Primary Medical Care	Community-based Primary Medical Care targeted to African American, and Hispanic	\$220,000		\$615,916	\$504,075	82%	\$772,410	\$153,725	20%	25%	Yes	Amount approved detail:
				\$220,000	\$0	\$615,916	\$504,075		\$772,410	\$153,725				
<b>Confirmed Funds Avail. for Reallocation</b>				\$577,522	MAI									
<b>Source of Funds Available for Reallocation:</b>					Explanation:									
	FY 2015 Carryover Funds			\$577,522	Unspent MAI funds from FY 15 program year									

Request for Service Category Increase  
Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)	ADULT COMPREHENSIVE PRIMARY CARE MAI				Control No.	
B.	Contract Number (not provided to RWPC)	Part A:	MAI:	Final Qtr:			
C.	Service Category Title (per RFP)	July X	Oct:				
D.	Request for Increase under (check one):	April:					
E.	Request Period (check one):	Amount of additional funding Requested:					
F.	Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in current contract:	b. Cost/unit	c. Number of additional units requested:	d. Total: (b x c)		
1.	MD / NP / PA VISITS	2808	\$275.00	800	\$220,000.00		
2.					\$0.00		
3.					\$0.00		
4.					\$0.00		
5.					\$0.00		
6.					\$0.00		
7.					\$0.00		
8.	Disbursements (list current amount in column a. and requested amount in column c.)		N/A		\$0.00		
9.	Total additional funding (must match E. above):				\$220,000.00		
G.	Number of new/additional clients to be served with requested increase.	200					
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	a. Number of clients served per CPCDMS	b. Percent AA (non-Hispanic)	c. Percent White (non-Hispanic)	d. Percent Hispanic (all races)	e. Percent Male	f. Percent Female
	1. Number of clients that received this service under Part A (or MAI) in FY 2015. * (March 1, 2015 - February 28, 2016) *If agency was funded for service under Part A (or MAI) in FY 2015 - if not, mark these cells as "NA"	709	66%	0%	34%	76%	24%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2016. a. April Request Period = Not Applicable b. July Request Period = 03/01/16 - 06/30/16 c. October Request Period = 03/01/16 - 09/30/16 d. 4th Qtr. Request Period = 03/01/16 - 11/30/16	559 400	61%	0%	38%	75%	25%

Request for Service Category Increase  
Ryan White Part A and MAI

I. Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this amount of request is received?	c. Comments (do <b>not</b> include agency name or identifying information):
1. Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	2 - 3	0	The need for same day appointments for new patients is consistently increasing. Linkage to care for newly diagnosed is being completed daily, but we still have a limited number of new patient slots for same day appointments. We are seeing a average of 25 new patients each month. New patient appt timeframes is currently 2-3 weeks, but with the steady increase of new patients the timeframe could reach 3-4 weeks without the increase in funding
2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1 - 2	0	Will be able to see patients same day with funding increase
3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	
4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	
J. List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount
1.			d. Comment (50 words or less):
2.			
3.			
4.			
K. Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):	Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).		
<b>This form must be submitted electronically via email by published deadline to Carin Martin: cmartin@hcpbes.org</b>			

**HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
SERVICE UTILIZATION REPORT**

[Agency: ...] [Grant]: RW1 [Service]: PCARE [Service Performer]: 0

Services performed between 3/1/15 and 2/29/16<sup>1</sup>

[Age Group]: AgeGrp1 (expanded) [Include/Exclude Sub-Cats]: ALL (Y/N)

[Contract 1]: I [Sub Cats 1]: All [Contract 2]: ... [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No<sup>3</sup>

RACE	AGE <sup>2</sup>	BIRTH GENDER									
		MALE			FEMALE			BOTH GENDERS			
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp		
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0	0
	13-19	5	0	5	1	0	1	6	0	6	
	20-24	58	3	55	5	0	5	63	3	60	
	25-34	153	5	148	44	0	44	197	5	192	
	35-44	72	3	69	55	2	53	127	5	122	
	45-54	31	1	30	31	1	30	62	2	60	
	55-64	19	0	19	6	0	6	25	0	25	
	65+	0	0	0	1	0	1	1	0	1	
	<b>SubTotals:</b>	<b>338</b>	<b>12</b>	<b>326</b>	<b>143</b>	<b>3</b>	<b>140</b>	<b>481</b>	<b>15</b>	<b>466</b>	
ASIAN	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	0	0	0	0	0	0	0	0	0	
	25-34	1	1	0	0	0	0	1	1	0	
	35-44	0	0	0	0	0	0	0	0	0	
	45-54	1	1	0	0	0	0	1	1	0	
	55-64	0	0	0	0	0	0	0	0	0	
	65+	0	0	0	0	0	0	0	0	0	
	<b>SubTotals:</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	1	1	0	0	0	0	1	1	0	
	25-34	3	0	3	1	0	1	4	0	4	
	35-44	2	1	1	0	0	0	2	1	1	
	45-54	1	1	0	1	1	0	2	2	0	
	55-64	0	0	0	0	0	0	0	0	0	
	65+	0	0	0	0	0	0	0	0	0	
	<b>SubTotals:</b>	<b>7</b>	<b>3</b>	<b>4</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>9</b>	<b>4</b>	<b>5</b>	
WHITE	0-12	0	0	0	0	0	0	0	0	0	
	13-19	2	2	0	0	0	0	2	2	0	
	20-24	15	15	0	2	2	0	17	17	0	
	25-34	69	69	0	5	5	0	74	74	0	
	35-44	54	54	0	11	11	0	65	65	0	
	45-54	44	44	0	5	5	0	49	49	0	
	55-64	3	3	0	3	3	0	6	6	0	
	65+	3	3	0	1	1	0	4	4	0	
	<b>SubTotals:</b>	<b>190</b>	<b>190</b>	<b>0</b>	<b>27</b>	<b>27</b>	<b>0</b>	<b>217</b>	<b>217</b>	<b>0</b>	
ALL RACES	0-12	0	0	0	0	0	0	0	0	0	
	13-19	7	2	5	1	0	1	8	2	6	

RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
ALL RACES	20-24	74	19	55	7	2	5	81	21	60
	25-34	226	75	151	50	5	45	276	80	196
	35-44	128	58	70	66	13	53	194	71	123
	45-54	77	47	30	37	7	30	114	54	60
	55-64	22	3	19	9	3	6	31	6	25
	65+	3	3	0	2	1	1	5	4	1
	<b>SubTotals:</b>		<b>537</b>	<b>207</b>	<b>330</b>	<b>172</b>	<b>31</b>	<b>141</b>	<b>709</b>	<b>238</b>

**Clients Served This Period**

Unduplicated clients:	709
Client visits: <sup>3</sup>	1813
Spanish speaking (primary language at home) clients served:	135
Deaf/hard of hearing clients served:	3
Blind/sight impaired clients served:	4
Homeless clients served:	310
Transgender M to F clients served:	10
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	694
Clients served this period who live outside Harris County:	15
Active substance abuse clients served:	28
Active psychiatric illness clients served:	105

**Methods of Exposure (not mutually exclusive)**

Perinatal Transmission	2
Hemophilia Coagulation	0
Transfusion	7
Heterosexual Contact	267
MSM (not IDU)	370
IV Drug Use (not MSM)	4
MSM/IDU	0
Multiple Exposure Categories	17
Other risk	71
<b><u>Multi-Race Breakdown</u></b>	
BLK,ASN	2
BLK,NTV	2
BLK,WHT	3
NTV,WHT	2

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of 2/29/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2015; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/14.



**HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
SERVICE UTILIZATION REPORT**

[Agency]: ; Grant]: RW1 [Service]: PCARE [Service Performer]: 0

Services performed between 3/1/16 and 6/30/16

[Agency Group]: AgeGrp1 (expanded) [Include/Exclude SubCat]: INCLUDE

[Contract 1]: Sub Cats 1]: All [Contract 2]: Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No<sup>3</sup>

RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE		FEMALE		BOTH GENDERS				
		Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp			
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	0	2	0	0	0	2	0	2
	20-24	20	1	19	2	0	2	22	1	21
	25-34	77	2	75	19	0	19	96	2	94
	35-44	32	1	31	31	0	31	63	1	62
	45-54	30	2	28	16	0	16	46	2	44
	55-64	12	0	12	7	0	7	19	0	19
	65+	0	0	0	0	0	0	0	0	0
	<b>SubTotals:</b>	<b>173</b>	<b>6</b>	<b>167</b>	<b>75</b>	<b>0</b>	<b>75</b>	<b>248</b>	<b>6</b>	<b>242</b>
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	1	0	0	0	0	1	1	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	<b>SubTotals:</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	2	0	2	1	0	1	3	0	3
	35-44	1	0	1	0	0	0	1	0	1
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	<b>SubTotals:</b>	<b>4</b>	<b>0</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>5</b>	<b>0</b>	<b>5</b>
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	10	10	0	1	1	0	11	11	0
	25-34	46	46	0	7	7	0	53	53	0
	35-44	28	28	0	8	8	0	36	36	0
	45-54	30	30	0	6	6	0	36	36	0
	55-64	4	4	0	2	2	0	6	6	0
	65+	4	4	0	0	0	0	4	4	0
	<b>SubTotals:</b>	<b>122</b>	<b>122</b>	<b>0</b>	<b>24</b>	<b>24</b>	<b>0</b>	<b>146</b>	<b>146</b>	<b>0</b>
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	0	2	0	0	0	2	0	2

RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
ALL RACES	20-24	31	11	20	3	1	2	34	12	22
	25-34	125	48	77	27	7	20	152	55	97
	35-44	61	29	32	39	8	31	100	37	63
	45-54	61	33	28	22	6	16	83	39	44
	55-64	16	4	12	9	2	7	25	6	19
	65+	4	4	0	0	0	0	4	4	0
	SubTotals:	300	129	171	100	24	76	400	153	247

**Clients Served This Period**

Unduplicated clients:	400
Client visits: <sup>3</sup>	559
Spanish speaking (primary language at home) clients served:	88
Deaf/hard of hearing clients served:	2
Blind/sight impaired clients served:	1
Homeless clients served:	161
Transgender M to F clients served:	5
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	394
Clients served this period who live outside Harris County:	6
Active substance abuse clients served:	12
Active psychiatric illness clients served:	47

**Methods of Exposure (not mutually exclusive)**

PerinatalTransmission	1
Hemophilia Coagulation	0
Transfusion	4
Heterosexual Contact	155
MSM (not IDU)	202
IV Drug Use (not MSM)	2
MSM/IDU	0
Multiple Exposure Categories	6
Other risk	38
<b>Multi-Race Breakdown</b>	
BLK,ASN	1
BLK,NTV	2
BLK,WHT	2

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of 6/30/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/15.

FY 2016 RW PART A REQUESTS FOR ALLOCATION INCREASE (July 2016)

REVISED: 7/20/2016

Request Control Number	FY 16 Priority Rank	HRSA Service Category	Local Service Category or Subcategory	Amount of Request	Amount Approved by RWPC	FY 2015 Final Contract Amount	Expended 2015	Percent Expended	FY 2016 Contract Amount	FY 2016 Expended YTD	FY 2016 Percent YTD	FY 2016 Percent Expected YTD	Is agency currently in compliance with contract conditions and therefore eligible for increase?	Notes
1	1.h	Primary Medical Care	Vision	\$24,960		\$261,847	\$164,905	63%	\$140,557	\$28,730	20%	25%	Yes	Amount approved detail:
2	1.h	Primary Medical Care	Vision	\$50,000		\$141,000	\$137,000	97%	\$116,920	\$26,100	22%	25%	Yes	
3	2.a	Medical Case Management	Clinical Case Management	\$25,000		\$224,325	\$167,120	74%	\$244,350	\$55,825	23%	25%	Yes	
4	4.b	Oral Health	Oral Health - Rural	\$30,000		\$166,400	\$166,400	100%	\$166,400	\$42,050	25%	25%	Yes	
5	13.a-13.b	Medical Transportation	Medical Transportation - Rural & Urban	\$40,000		\$349,865	\$349,864	100%	\$349,865	\$81,220	23%	25%	Yes	
6	1.b-1.d	Primary Medical Care	Community-based Primary Medical Care targeted to African American, Hispanic and White	\$200,000		\$1,835,812	\$1,835,492	100%	\$1,833,698	\$265,732	14%	25%	Yes	
7	1.b-1.d	Primary Medical Care	Community-based Primary Medical Care targeted to African American, Hispanic and White	\$399,975		\$2,676,828	\$2,676,480	100%	\$2,979,889	\$583,497	20%	25%	Yes	
				\$769,935	\$0	\$5,656,077	\$5,497,261		\$5,831,679	\$1,083,154				
<b>Confirmed Funds Avail. for Reallocation</b>				\$680,325	<b>Part A</b>									
<b>Source of Funds Available for Reallocation:</b>				<b>Explanation:</b>										
FY 2015 Carryover Funds				\$680,325	Unspent FY 2015 program year funds									

Request for Service Category Increase  
Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)	Control No.
B.	Contract Number (not provided to RWPC)	
C.	Service Category Title (per RFP)	
D.	Request for Increase under (check one): Request Period (check one): Amount of additional funding Requested:	
E.	Unit of Service: (list only those units and disbursements where an increase is requested)	
	1. Optometrist/Cert. Ophthalmic Asst. Ophthalmologist	
	2.	
	3.	
	4.	
	5.	
	6.	
	7.	
	8. Disbursements (list current amount in column a. and requested amount in column c.)	
	9. Total additional funding (must match E. above):	
G.	Number of new/additional clients to be served with requested increase.	
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	
	1. Number of clients that received this service under Part A (or MAI) in FY 2015.* (March 1, 2015 - February 28, 2016) *If agency was funded for service under Part A (or MAI) in FY 2015 - if not mark these cells as "NA"	
	2. Number of clients that have received this service under Part A (or MAI) in FY 2016.	
	a. April Request Period = Not Applicable	
	b. August Request Period = 03/01/16 - 06/30/16	
	c. October Request Period = 03/01/16 - 09/30/16	
	d. 4th Qtr. Request Period = 03/01/16 - 11/30/16	

Request for Service Category Increase  
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do not include agency name or identifying information):
1.	Length of waiting time (in weeks) for an appointment for a new client:	4	3	The agency has a large number of Ryan White patients seeking vision services as one of the two Ryan White-funded vision clinics. The agency is requesting funding in order to sufficiently meet the continued demands for vision services for new Ryan White patients.
2.	Length of waiting time (in weeks) for an appointment for a current client:	3	2	The agency has a large number of Ryan White patients seeking vision services as one of the two Ryan White-funded vision clinics. The agency is requesting funding in order to sufficiently meet the continued demands for vision services for existing Ryan White patients.
3.	Number of clients on a "waiting list" for services (per Part A SOC):	0	0	The agency does not maintain a waiting list. The agency offers a limited number of same day appointment slots for patients.
3.	Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	The agency does not maintain a waiting list. The agency offers a limited number of same day appointment slots for patients.
J.	List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	d. Comment (50 words or less):
1.				
2.				
3.				
4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):			
	Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).			
	<b>This form must be submitted electronically via email by published deadline to Carin Martin: cmartin@hcphe.org</b>			

**HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
SERVICE UTILIZATION REPORT**

[Agency] [Grant]: All [Service]: PCARE [Service Performer]: 0

Services performed between 3/1/15 and 2/29/16 <sup>1</sup>

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]: ALL [Sub Cats 1]: VOMA,VOPHT,VOPTO [Contract 2]: n/a [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No <sup>3</sup>

RACE	AGE <sup>2</sup>	BIRTH GENDER									
		MALE			FEMALE			BOTH GENDERS			
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp		
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0	0
	13-19	1	0	1	1	0	1	2	0	2	
	20-24	22	1	21	8	0	8	30	1	29	
	25-34	80	2	78	23	1	22	103	3	100	
	35-44	64	1	63	49	0	49	113	1	112	
	45-54	112	2	110	59	0	59	171	2	169	
	55-64	72	0	72	39	3	36	111	3	108	
	65+	4	0	4	5	0	5	9	0	9	
	<b>SubTotals:</b>	<b>355</b>	<b>6</b>	<b>349</b>	<b>184</b>	<b>4</b>	<b>180</b>	<b>539</b>	<b>10</b>	<b>529</b>	
ASIAN	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	0	0	0	0	0	0	0	0	0	
	25-34	3	0	3	0	0	0	3	0	3	
	35-44	2	0	2	1	0	1	3	0	3	
	45-54	2	0	2	1	0	1	3	0	3	
	55-64	2	0	2	1	0	1	3	0	3	
	65+	0	0	0	1	0	1	1	0	1	
	<b>SubTotals:</b>	<b>9</b>	<b>0</b>	<b>9</b>	<b>4</b>	<b>0</b>	<b>4</b>	<b>13</b>	<b>0</b>	<b>13</b>	
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	1	0	1	0	0	0	1	0	1	
	25-34	2	1	1	0	0	0	2	1	1	
	35-44	2	0	2	0	0	0	2	0	2	
	45-54	2	1	1	1	1	0	3	2	1	
	55-64	0	0	0	0	0	0	0	0	0	
	65+	1	0	1	0	0	0	1	0	1	
	<b>SubTotals:</b>	<b>8</b>	<b>2</b>	<b>6</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>9</b>	<b>3</b>	<b>6</b>	
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	0	0	0	0	0	0	0	0	0	
	25-34	2	1	1	0	0	0	2	1	1	
	35-44	0	0	0	0	0	0	0	0	0	
	45-54	1	0	1	0	0	0	1	0	1	
	55-64	2	1	1	1	1	0	3	2	1	
	65+	0	0	0	0	0	0	0	0	0	
	<b>SubTotals:</b>	<b>5</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>6</b>	<b>3</b>	<b>3</b>	
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	

RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
PAC.ISLND/HAWAII	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	1	1	0	0	0	0	1	1	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	1	1	0	0	0	0	1	1	0
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	1	1	0	0	0	2	1	1
	20-24	19	18	1	0	0	0	19	18	1
	25-34	102	74	28	5	3	2	107	77	30
	35-44	144	102	42	36	33	3	180	135	45
	45-54	216	122	94	38	31	7	254	153	101
	55-64	87	31	56	20	12	8	107	43	64
	65+	29	8	21	6	4	2	35	12	23
	SubTotals:	599	356	243	105	83	22	704	439	265
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	3	1	2	1	0	1	4	1	3
	20-24	42	19	23	8	0	8	50	19	31
	25-34	189	78	111	28	4	24	217	82	135
	35-44	213	104	109	86	33	53	299	137	162
	45-54	333	125	208	99	32	67	432	157	275
	55-64	163	32	131	61	16	45	224	48	176
	65+	34	8	26	12	4	8	46	12	34
	SubTotals:	977	367	610	295	89	206	1,272	456	816

**Clients Served This Period**

Unduplicated clients:	1272
Client visits: <sup>3</sup>	1955
Spanish speaking (primary language at home) clients served:	259
Deaf/hard of hearing clients served:	31
Blind/sight impaired clients served:	73
Homeless clients served:	404
Transgender M to F clients served:	7
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	1206
Clients served this period who live outside Harris County:	66
Active substance abuse clients served:	10
Active psychiatric illness clients served:	78

**Methods of Exposure (not mutually exclusive)**

Perinatal/Transmission	9
Hemophilia Coagulation	1
Transfusion	3
Heterosexual Contact	335
MSM (not IDU)	452
IV Drug Use (not MSM)	17
MSM/IDU	2
Multiple Exposure Categories	49
Other risk	430
<b>Multi-Race Breakdown</b>	
BLK,NTV	1
BLK,NTV,WHT	1
BLK,WHT	5
HWN,WHT	1
NTV,HWN,WHT	1

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of 2/29/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2015; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/14.

**HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
SERVICE UTILIZATION REPORT**

[Agency]: [Grant]: All [Service] [Service Performer]: 0

Services performed between 3/1/16 and 6/30/16

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]: ALL [Sub Cats 1]: VOMA,VOPTH,VOPTO [Contract 2]: n/a [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No<sup>3</sup>

RACE	AGE <sup>2</sup>	BIRTH GENDER									
		MALE			FEMALE			BOTH GENDERS			
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp		
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0	0
	13-19	2	0	2	2	0	2	4	0	4	
	20-24	6	0	6	3	0	3	9	0	9	
	25-34	24	1	23	8	1	7	32	2	30	
	35-44	22	1	21	15	0	15	37	1	36	
	45-54	48	0	48	23	1	22	71	1	70	
	55-64	38	0	38	22	1	21	60	1	59	
	65+	4	0	4	0	0	0	4	0	4	
	SubTotals:	144	2	142	73	3	70	217	5	212	
ASIAN	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	0	0	0	0	0	0	0	0	0	
	25-34	1	0	1	0	0	0	1	0	1	
	35-44	1	0	1	1	0	1	2	0	2	
	45-54	2	0	2	1	0	1	3	0	3	
	55-64	2	0	2	1	0	1	3	0	3	
	65+	0	0	0	1	0	1	1	0	1	
	SubTotals:	6	0	6	4	0	4	10	0	10	
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	0	0	0	1	0	1	1	0	1	
	25-34	1	0	1	0	0	0	1	0	1	
	35-44	3	1	2	0	0	0	3	1	2	
	45-54	1	1	0	0	0	0	1	1	0	
	55-64	0	0	0	0	0	0	0	0	0	
	65+	0	0	0	0	0	0	0	0	0	
	SubTotals:	5	2	3	1	0	1	6	2	4	
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	0	0	0	0	0	0	0	0	0	
	25-34	0	0	0	0	0	0	0	0	0	
	35-44	0	0	0	0	0	0	0	0	0	
	45-54	1	0	1	0	0	0	1	0	1	
	55-64	0	0	0	1	1	0	1	1	0	
	65+	0	0	0	0	0	0	0	0	0	
	SubTotals:	1	0	1	1	1	0	2	1	1	
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	



RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE		FEMALE		BOTH GENDERS				
		Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp			
PAC.ISLND/HAWAII	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	1	1	0	0	0	0	1	1	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	1	1	0	0	0	0	1	1	0
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	7	6	1	1	1	0	8	7	1
	25-34	41	32	9	2	2	0	43	34	9
	35-44	55	44	11	11	11	0	66	55	11
	45-54	86	46	40	17	13	4	103	59	44
	55-64	37	17	20	5	2	3	42	19	23
	65+	8	4	4	1	1	0	9	5	4
	SubTotals:	234	149	85	37	30	7	271	179	92
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	0	2	2	0	2	4	0	4
	20-24	13	6	7	5	1	4	18	7	11
	25-34	67	33	34	10	3	7	77	36	41
	35-44	82	47	35	27	11	16	109	58	51
	45-54	138	47	91	41	14	27	179	61	118
	55-64	77	17	60	29	4	25	106	21	85
	65+	12	4	8	2	1	1	14	5	9
	SubTotals:	391	154	237	116	34	82	507	188	319

**Clients Served This Period**

Unduplicated clients:	507
Client visits: <sup>3</sup>	709
Spanish speaking (primary language at home) clients served:	102
Deaf/hard of hearing clients served:	9
Blind/sight impaired clients served:	22
Homeless clients served:	148
Transgender M to F clients served:	2
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	478
Clients served this period who live outside Harris County:	29
Active substance abuse clients served:	3
Active psychiatric illness clients served:	22

**Methods of Exposure (not mutually exclusive)**

Perinatal Transmission	6
Hemophilia Coagulation	1
Transfusion	2
Heterosexual Contact	140
MSM (not IDU)	172
IV Drug Use (not MSM)	7
MSM/IDU	4
Multiple Exposure Categories	21
Other risk	170
<b>Multi-Race Breakdown</b>	
ASN,WHT	1
BLK,NTV	1
BLK,NTV,WHT	1
BLK,WHT	2
HWN,WHT	1

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of 6/30/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/15.

Request for Service Category Increase  
Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)	Control No.					
B.	Contract Number (not provided to RWPC)						
C.	Service Category Title (per RFP)						
D.	Request for Increase under (check one):	MAI:					
	Request Period (check one):	July X					
E.	Amount of additional funding Requested:	Final Qtr:					
F.	Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in current contract	b. Cost/unit	c. Number of additional units requested:	d. Total: (b x c)	e. Percent Male	f. Percent Female
	1. VISION	1169	\$100.00	500	\$50,000.00		
	2.				\$0.00		
	3.				\$0.00		
	4.				\$0.00		
	5.				\$0.00		
	6.				\$0.00		
	7.				\$0.00		
8.	Disbursements (list current amount in column a. and requested amount in column c.)						
9.	Total additional funding (must match E. above):				\$50,000.00		
G.	Number of new/additional clients to be served with requested increase.						
		250					
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	a. Number of clients served per CPCDMS	b. Percent AA (non-Hispanic)	c. Percent White (non-Hispanic)	d. Percent Hispanic (all races)	e. Percent Male	f. Percent Female
	1. Number of clients that received this service under Part A (or MAI) in FY 2015.* (March 1, 2015 - February 28, 2016) *If agency was funded for service under Part A (or MAI) in FY 2015 - if not, mark these cells as "NA"	888 <del>887</del>	57%	11%	31%	72%	28%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2016. a. April Request Period = Not Applicable b. July Request Period = 03/01/16 - 06/30/16 c. October Request Period = 03/01/16 - 09/30/16 d. 4th Qtr. Request Period = 03/01/16 - 11/30/16	278	54%	12%	32%	66%	34%

Request for Service Category Increase  
Ryan White Part A and MAI

I. Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do not include agency name or identifying information):
1. Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	3-4 WEEKS	1 week	We would like to be able to provide services to our new clients within 1 week of scheduling an appointment. With the steady increase in request for services the waiting time could easily increase to 4-5 weeks without additional funding.
2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	2 WEEKS	0	We would like to be able to provide services to our existing clients the same week if requesting services
3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	Currently we don't have a waiting list as we have been seeing all client requesting services. Currently we have 94u in no pay contract that we have not been paid.
4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	
J. List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	d. Comment (50 words or less):
1.			
2.			
3.			
4.			
K. Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):			
Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).			
<b>This form must be submitted electronically via email by published deadline to Carin Martin: <a href="mailto:cmartin@hcphes.org">cmartin@hcphes.org</a></b>			

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency] [Grant]: All [Service]: PCARE [Service Performer]: 0

Services performed between 3/1/15 and 2/29/16

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]: ALL [Sub Cats 1]: VOMA,VOPFH,VOPFO [Contract 2]: n/a [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
0-12	0	0	0	0	0	0
13-19	3	0	0	0	3	0
20-24	49	2	8	0	57	2
25-34	125	3	30	1	155	4
35-44	68	5	58	1	126	6
45-54	65	2	48	1	113	3
55-64	42	0	18	0	60	0
65+	3	0	3	0	6	0
SubTotals:	355	12	343	3	520	15
AFRICAN AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	2	1	1	0	3	1
25-34	3	1	2	0	5	1
35-44	0	0	0	0	0	0
45-54	2	1	1	0	3	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	7	2	5	1	8	2
ASIAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	3	1	2	0	5	1
35-44	0	0	0	0	0	0
45-54	2	1	1	0	3	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	5	2	3	0	7	2
MULTI-RACE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	2	0	2	0	4	0
25-34	1	1	2	0	4	1
35-44	0	0	0	0	0	0
45-54	2	1	1	0	3	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	5	2	7	0	9	2
NATIVE AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	2	0	2	0	4	0
25-34	1	0	1	0	2	0
35-44	0	0	0	0	0	0
45-54	2	1	1	0	3	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	5	1	4	0	6	1
PACISLAND/HAWAII	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	2	0	2	0	4	0
25-34	1	0	1	0	2	0
35-44	0	0	0	0	0	0
45-54	2	1	1	0	3	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	5	1	4	0	6	1

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hispanic	Hispanic	Non-Hispanic	Hispanic	Non-Hispanic
	AGE <sup>2</sup>	PAC.ISLND/HAWAII		WHITE		ALL RACES
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	1	1	0	1	1	2
65+	0	0	0	0	0	0
SubTotals:	1	1	1	1	2	2
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	1	1	0	1	1	2
65+	0	0	0	0	0	0
SubTotals:	1	1	1	1	2	2
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	23	20	3	0	23	20
65+	6	5	1	2	6	2
SubTotals:	271	203	68	75	346	251
20-24	0	0	0	0	0	0
25-34	71	55	16	13	84	66
35-44	78	66	12	29	107	83
45-54	68	46	22	21	89	60
55-64	23	9	14	9	32	14
65+	6	5	1	2	8	6
SubTotals:	271	203	68	75	346	251
20-24	0	0	0	0	0	0
25-34	74	22	52	8	82	22
35-44	146	71	75	87	233	89
45-54	140	51	89	69	209	66
55-64	68	9	59	28	96	14
65+	9	5	4	5	14	8
SubTotals:	644	220	424	245	889	271

**Clients Served This Period** Methods of Exposure (not mutually exclusive)

Unduplicated clients:	889	Prenatal/Transmission	5
Client visits: <sup>3</sup>	1370	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	153	Transfusion	4
Deaf/hard of hearing clients served:	4	Heterosexual Contact	370
Blind/sight impaired clients served:	6	MSM (not IDU)	391
Homeless clients served:	387	IV Drug Use (not MSM)	11
Transgender M to F clients served:	7	MSM/IDU	1
Transgender F to M clients served:	0	Multiple Exposure Categories	25
Clients served this period who live w/in Harris County:	783	Other risk	114
Clients served this period who live outside Harris County:	106	Multi-Race Breakdown	
Active substance abuse clients served:	43	BLK,NTV	2
Active psychiatric illness clients served:	154	BLK,WHT	4
		NTV,WHT	1

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day  
<sup>2</sup> Age as of 2/29/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2015; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/14.

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency]: [Grant]: All [Service]: PCARE [Service Performer]: 0

Services performed between 3/1/16 and 6/30/16

AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]: [Sub Cats 1]: VONIA,VOPFH,VOPFO [Contract 2]: n/a [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
AGE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	10	0	2	0	12	0
25-34	35	1	9	0	44	1
35-44	17	1	18	0	35	1
45-54	13	0	21	1	34	1
55-64	16	0	11	0	27	0
65+	0	0	1	0	1	0
SubTotals:	91	2	62	1	153	3
AFRICAN AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	2	1	0	0	2	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	2	1	0	0	2	1
ASIAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	0	0	0	1	0
25-34	0	0	2	2	2	0
35-44	2	1	0	0	2	1
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	3	1	2	2	5	1
MULTI-RACE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	1	1	0	0	2	1
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	1	1	0	0	2	1
PACISLAND/HAWAII	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	1	1	0	1	2	0
65+	0	0	0	0	0	0
SubTotals:	1	1	0	1	2	0
WHITE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	1	1	0	1	2	0
65+	0	0	0	0	0	0
SubTotals:	1	1	0	1	2	0

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
20-24	5	0	2	1	8	7
25-34	19	5	1	1	26	20
35-44	26	3	7	4	34	27
45-54	15	5	3	3	30	22
55-64	5	6	3	3	16	8
65+	1	1	0	1	2	0
<b>SubTotals:</b>	<b>67</b>	<b>19</b>	<b>16</b>	<b>13</b>	<b>116</b>	<b>84</b>
<b>SubTotals:</b>	<b>187</b>	<b>72</b>	<b>94</b>	<b>77</b>	<b>278</b>	<b>89</b>
<b>ALL RACES</b>						
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	16	11	5	2	21	7
25-34	59	39	13	1	72	21
35-44	42	20	29	7	71	29
45-54	39	19	27	4	66	24
55-64	27	22	18	3	45	8
65+	1	0	2	0	3	0
<b>SubTotals:</b>	<b>187</b>	<b>72</b>	<b>94</b>	<b>77</b>	<b>278</b>	<b>89</b>

**Clients Served This Period** (Methods of Exposure (not mutually exclusive))

Unduplicated clients:	278	PerinatalTransmission	1
Client visits: <sup>3</sup>	380	Hemophilia Contusion	0
Spanish speaking (primary language at home) clients served:	59	Transfusion	3
Deaf/hard of hearing clients served:	1	Heterosexual Contact	134
Blind/sight impaired clients served:	3	NISM (not IDU)	105
Homeless clients served:	108	IV Drug Use (not MSM)	2
Transgender M to F clients served:	2	MSM/IDU	0
Transgender F to M clients served:	0	Multiple Exposure Categories	13
Clients served this period who live w/in Harris County:	241	Other risk	47
Clients served this period who live outside Harris County:	37	Multi-Race Breakdown	
Active substance abuse clients served:	11	BLK,NTV	3
Active psychiatric illness clients served:	51	BLK,WHT	2

**FOOTNOTES**

- <sup>1</sup> Visit = time spent per client per agency per service per day
- <sup>2</sup> Age as of 6/30/16
- <sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/15.

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
 SERVICE UTILIZATION REPORT

[Agency]: All [Service]: PCARE [Service Performer]: 0  
 Services performed between 3/1/16 and 6/30/16  
 [Age Group]: All [Grant]: All [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: All [Contract 2]: n/a [Contract 3]: All [Contract 4]: n/a [Contract 5]: All  
 [SubCats 1]: All [SubCats 2]: n/a [SubCats 3]: All [SubCats 4]: n/a [SubCats 5]: All  
 [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

BIRTH GENDER		FEMALE		MALE	
	BOTH GENDERS	Hispanic	Non-Hisp	Hispanic	Non-Hisp

RACE	AGE	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Sub Totals	BIRTH GENDER	
									MALE	FEMALE
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	0	2	0	0	0	2	0	0
	25-34	7	0	7	0	3	0	10	0	0
	35-44	6	1	5	7	7	0	13	1	12
	45-54	5	1	4	8	8	0	13	1	12
	55-64	6	0	6	1	0	0	7	0	7
	65+	0	0	0	0	0	0	0	0	0
Sub Totals:		26	2	24	19	0	19	45	2	43
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	1	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
Sub Totals:		1	0	1	0	0	0	1	0	1
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	0	0	0	1	0	1	1	0	1
	35-44	2	1	1	0	0	0	2	1	1
	45-54	1	0	1	0	1	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
Sub Totals:		4	1	3	1	0	1	5	1	4
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	1	1	0	0	0	1	1	0
	25-34	4	4	1	1	0	0	5	5	0
	35-44	6	5	1	3	2	2	9	7	2
	45-54	7	1	1	3	1	2	10	7	3
	55-64	4	3	1	1	0	0	5	4	1
	65+	0	0	1	1	0	0	1	1	0
Sub Totals:		22	15	7	9	6	3	31	25	6
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	1	1	0	0	0	1	1	0
	25-34	4	4	1	1	0	0	5	4	1
	35-44	6	5	1	3	2	2	9	7	2
	45-54	7	1	1	3	1	2	10	7	3
	55-64	4	3	1	1	0	0	5	4	1
	65+	0	0	1	1	0	0	1	1	0
Sub Totals:		22	15	7	9	6	3	31	25	6



BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
	AGE2	SubTotals:	AGE2	SubTotals:	AGE2	SubTotals:
ALL RACES	4	53	0	23	4	28
20-24	1	4	0	4	1	3
25-34	4	11	1	16	5	11
35-44	7	14	2	24	9	15
45-54	7	14	1	25	8	17
55-64	3	10	1	12	4	8
65+	0	0	1	0	1	0
SubTotals:	27	53	6	23	28	54

**Clients Served This Period**

Unduplicated clients:	52	Perinatal Transmission	0
Client visits: <sup>3</sup>	52	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	18	Transfusion	0
Deaf/hard of hearing clients served:	0	Heterosexual Contact	41
Blind/sight impaired clients served:	0	MSM (not IDU)	26
Homeless clients served:	23	IV Drug Use (not MSM)	1
Transgender M to F clients served:	0	MSM/IDU	0
Transgender F to M clients served:	0	Multiple Exposure Categories	3
Clients served this period who live w/in Harris County:	75	Other risk	14
Clients served this period who live outside Harris County:	7	Multi-Race Breakdown	3
Active substance abuse clients served:	3	BLK,NTV	3
Active psychiatric illness clients served:	15	BLK,WHT	1
		NTV,WHT	1

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day  
<sup>2</sup> Age as of 6/30/16  
<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/15.

Request for Service Category Increase  
Ryan White Part A and MAI

A. Name of Agency (not provided to RWPC)		B. Contract Number (not provided to RWPC)		C. Service Category Title (per RFP)		D. Request for Increase under (check one):		E. Amount of additional funding Requested:		F. Unit of Service: (list only those units and disbursements where an increase is requested)		G. Number of new/additional clients to be served with requested increase.		H. Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.		I. Number of clients that received this service under Part A (or MAI) in FY 2015.* (March 1, 2015 - February 28, 2016) *If agency was funded for service under Part A (or MAI) in FY 2015 - if not, mark these cells as "NA"		J. Number of clients that have received this service under Part A (or MAI) in FY 2016.		K. April Request Period = Not Applicable		L. July Request Period = 03/01/16 - 06/30/16		M. October Request Period = 03/01/16 - 09/30/16		N. 4th Qtr. Request Period = 03/01/16 - 11/30/16	
Name of Agency		Contract Number		Service Category Title		Request for Increase under (check one):		Amount of additional funding Requested:		Unit of Service		Number of new/additional clients to be served with requested increase.		Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.		Number of clients that received this service under Part A (or MAI) in FY 2015.*		Number of clients that have received this service under Part A (or MAI) in FY 2016.		April Request Period		July Request Period		October Request Period		4th Qtr. Request Period	
Name of Agency		Contract Number		Service Category Title		Request for Increase under (check one):		Amount of additional funding Requested:		Unit of Service		Number of new/additional clients to be served with requested increase.		Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.		Number of clients that received this service under Part A (or MAI) in FY 2015.*		Number of clients that have received this service under Part A (or MAI) in FY 2016.		April Request Period		July Request Period		October Request Period		4th Qtr. Request Period	
CLINICAL CASE MANAGEMENT		9773		CCM		Request for Increase under (check one):		\$25,000.00		1000		150		659		660		377		Not Applicable		03/01/16 - 06/30/16		03/01/16 - 09/30/16		03/01/16 - 11/30/16	
Request for Increase under (check one):		Amount of additional funding Requested:		Unit of Service:		Number of new/additional clients to be served with requested increase.		Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.		Number of clients that received this service under Part A (or MAI) in FY 2015.*		Number of clients that have received this service under Part A (or MAI) in FY 2016.		April Request Period		July Request Period		October Request Period		4th Qtr. Request Period							
Request for Increase under (check one):		Amount of additional funding Requested:		Unit of Service:		Number of new/additional clients to be served with requested increase.		Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.		Number of clients that received this service under Part A (or MAI) in FY 2015.*		Number of clients that have received this service under Part A (or MAI) in FY 2016.		April Request Period		July Request Period		October Request Period		4th Qtr. Request Period							

Request for Service Category Increase  
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do not include agency name or identifying information):
1.	Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	2	0	Historically this program utilization increases towards 3Q/4Q. Also there's an increase in new patients with complex needs: substance abuse counseling, non adherence to meds and mental health.
2.	Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1	0	Same Day
3.	Number of clients on a "waiting list" for services (per Part A SOC):	0	0	
4.	Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	
J.	List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount
1.				d. Comment (50 words or less):
2.				
3.				
4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax): Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount). <b>This form must be submitted electronically via email by published deadline to Carin Martin: cmartin@hcpbes.org</b>			

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency: ...] [Grant: RW1 [Service: CMGMT [Service Performer: 0

Services performed between 3/1/15 and 2/29/16

[Age Group]: ... [Expanded] [Include/Exclude SubCats]: INCLUDE

[Contract 1]: ... [Sub Cats 1]: All [Contract 2]: n/a [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MFI]: All [Show Detail]: False [Registration Type]: ALL [New Clients Only]: No

BIRTH GENDER	Males		Females		Both Genders	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
African American	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	28	27	2	2	30	1
25-34	87	86	25	25	112	1
35-44	57	56	56	56	113	1
45-54	40	38	40	40	80	2
55-64	20	19	21	21	41	1
65+	0	0	3	3	3	0
SubTotals:	257	228	149	149	383	6
ASIAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	1	0	0	1	0
35-44	0	1	0	0	1	0
45-54	0	1	0	0	1	0
55-64	0	2	0	0	2	0
65+	0	0	0	0	0	0
SubTotals:	0	5	0	0	5	0
MULTI-RACE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	0	0	0	1	1
25-34	1	1	1	1	2	0
35-44	1	1	1	1	2	0
45-54	1	1	0	0	1	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	4	3	2	2	6	1
NATIVE AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	1	1	0	0	1	1
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	1	1	0	0	2	0
PACISLND/HAWAII	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	1	1	0	0	1	1
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	1	1	0	0	2	0

1 Visit = time spent per client per agency per service per day  
 2 Age as of 2/29/16  
 3 If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2015;  
 4 If New Client = No is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 03/01/14.

FOOTNOTES

Method of Exposure (not mutually exclusive)	Count	Description
Permanent Transmission	666	Unduplicated clients:
Hemophilia Coagulation	1615	Client visits: 3
Transmission	28	Spanish speaking (primary language at home) clients served:
Heterosexual Contact	1	Deaf/hard of hearing clients served:
MSM (not IDU)	3	Blind/sight impaired clients served:
IV Drug Use (not MSM)	248	Homeless clients served:
MSM IDU	3	Transgender M to F clients served:
Multiple Exposure Categories	0	Transgender F to M clients served:
Other risk	437	Clients served this period who live w/in Harris County
Mutual-Exposure Breakdown	229	Clients served this period who live outside Harris County
BLK M/F	61	Active substance abuse clients served:
BLK M/F	248	Active psychiatric illness clients served:
BLK M/F	1	
NTW M/F	2	

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
AGE						
PAC.ISLND/HAWAII	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	1	1	0	0	1	1
65+	0	0	0	0	0	0
SubTotals:	7	7	0	0	7	7
WHITE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	1	1	0	0	1	1
20-24	14	11	0	0	14	11
25-34	50	29	11	6	61	35
35-44	49	16	30	9	79	25
45-54	53	18	17	7	70	25
55-64	21	0	15	1	36	1
65+	6	1	0	0	6	1
SubTotals:	194	75	73	23	267	98
ALL RACES	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	3	0	2	0	5	0
20-24	44	13	2	0	46	13
25-34	139	30	38	6	177	36
35-44	108	17	87	9	195	26
45-54	97	20	57	7	154	27
55-64	44	2	36	1	80	3
65+	6	1	3	0	9	1
SubTotals:	441	83	358	225	202	666

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

[Agency] [Grant]: RW1 [Service]: CMGMT [Service Performer]: 0

Services performed between 3/1/16 and 6/30/16

[Age Group]: AveGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]: [Contract 2]: n/a [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

SERVICE UTILIZATION REPORT

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
	AGE					
AFRICAN AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	16	1	3	0	19	1
25-34	67	3	12	1	79	4
35-44	39	2	33	0	72	2
45-54	35	1	17	0	52	1
55-64	13	0	14	0	27	0
65+	0	0	1	0	1	0
SubTotals:	170	7	80	1	250	8
ASIAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	1	0	0	0	1	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	1	0	0	0	1	0
MULTI-RACE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	1	0	1	0	2	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	1	0	1	0	2	0
NATIVE AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	0	1	0	2	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	1	0	1	0	2	0
WHITE	1	0	1	0	2	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	0	1	0	2	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	1	0	1	0	2	0

BIRTH GENDER		MALE		FEMALE		BOTH GENDERS		
RACE	AGE <sup>2</sup>	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp	
WHITE	20-24	7	6	0	0	7	6	
	25-34	27	13	3	1	30	14	
	35-44	19	7	12	5	33	12	
	45-54	24	11	13	1	30	12	
	55-64	11	2	9	0	15	2	
	65+	4	1	3	0	4	1	
SubTotals:		91	40	27	7	121	47	
ALL RACES	0-12	0	0	0	0	0	0	
	13-19	2	0	2	0	2	0	
	20-24	24	7	17	0	28	7	
	25-34	95	16	79	2	112	18	
	35-44	58	9	49	5	105	14	
	45-54	60	12	48	1	83	13	
	55-64	24	2	22	0	42	2	
	65+	4	1	3	0	5	1	
	SubTotals:		267	47	110	8	377	55
	Total:						322	

Clients Served This Period

Methods of Exposure (not mutually exclusive)

Unduplicated clients:	377	Perinatal/Transmission	5
Client visits: <sup>3</sup>	685	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	8	Transmission	1
Deaf/hard of hearing clients served:	2	Heterosexual Contact	141
Blind/sight impaired clients served:	2	MSM (not IDU)	163
Homeless clients served:	140	IV Drug Use (not MSM)	7
Transgender M to F clients served:	0	MSM/IDU	0
Transgender F to M clients served:	0	Multiple Exposure Categories	7
Clients served this period who live w/in Harris County:	289	Other risk	57
Clients served this period who live outside Harris County:	88	Multi-Race Breakdown	
Active substance abuse clients served:	37	BLK,NTV	1
Active psychiatric illness clients served:	154	BLK,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of 6/30/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/15.

Request for Service Category Increase  
Ryan White Part A and MAI

A. Name of Agency (not provided to RWPC)	ORAL HEALTH TARGETING RURAL				Control No.	
B. Contract Number (not provided to RWPC)	Part A:	or MAI:	Final Qtr:			
C. Service Category Title (per RFP)	July X	Oct:	Final Qtr:			
D. Request for Increase under (check one):	April:	Final Qtr:	Final Qtr:			
E. Amount of additional funding Requested:	\$30,000.00					
F. Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in current contract:	b. Cost/unit	c. Number of additional units requested:	d. Total: (b x c)		
1. GENERAL	1169	\$100.00	300	\$30,000.00		
2.				\$0.00		
3.				\$0.00		
4.				\$0.00		
5.				\$0.00		
6.				\$0.00		
7.				\$0.00		
8. Disbursements (list current amount in column a. and requested amount in column c.)		N/A		\$0.00		
9. Total additional funding (must match E. above):				\$30,000.00		
G. Number of new/additional clients to be served with requested increase.	75					
H. Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	a. Number of clients served per CPCDMS	b. Percent AA (non-Hispanic)	c. Percent White (non-Hispanic)	d. Percent Hispanic (all races)	e. Percent Male	f. Percent Female
1. Number of clients that received this service under Part A (or MAI) in FY 2015.* (March 1, 2015 - February 28, 2016) *If agency was funded for service under Part A (or MAI) in FY 2015 - if not, mark these cells as "NA"	301 <del>302</del>	38%	35%	27%	69%	31%
2. Number of clients that have received this service under Part A (or MAI) in FY 2016. a. April Request Period = Not Applicable b. July Request Period = 03/01/16 - 06/30/16 c. October Request Period = 03/01/16 - 09/30/16 d. 4th Qtr. Request Period = 03/01/16 - 11/30/16	167	38%	37%	24%	64%	36%



Request for Service Category Increase  
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do not include agency name or identifying information):
1.	Length of waiting time (in weeks) for an appointment for a new client:	2 - 3	0	The need for same day appointments for new patients is consistently increasing. Linkage to care for newly diagnosed is being completed daily, but we still have a limited number of new patient slots for same day appointments. We are seeing an average of 10- 15 new patients each month. New patient appt timeframes is currently 2-3 weeks, but with the steady increase of new patients the timeframe could reach 3-4 weeks without the increase in funding.
2.	Length of waiting time (in weeks) for an appointment for a current client:	1 - 2	0	Will be able to see patients same day with funding increase
3.	Number of clients on a "waiting list" for services (per Part A SOC):	0	0	
4.	Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	
J.	List all other sources and amounts of funding for similar services currently in place with agency: 1. ORAL HEALTH	a. Funding Source: RW-PART B	b. End Date of Contract: 8/31/16	c. Amount \$500,000 d. Comment (50 words or less): This contract serves the entire EMA and does not have a certain percentage targeted to rural clients.
2.				
3.				
4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax): Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount). <b>This form must be submitted electronically via email by published deadline to Carin Martin: cmartin@hcpthes.org</b>			

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

[Agency]: [Grant]: RW1 [Service]: DENT [Service Performer]: 0  
 Services performed between 3/1/15 and 2/29/16  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: ALL [Sub Cats 1]: All [Contract 2]: n/a [Sub Cats 2]: All  
 [Contract 3]: n/a [Sub Cats 3]: All  
 [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All  
 [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

BIRTH GENDER

RACE	AGE?	MALE		FEMALE		BOTH GENDERS		
		Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp	
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	
	20-24	10	10	1	11	0	11	
	25-34	23	21	7	7	30	2	
	35-44	16	16	0	17	33	0	
	45-54	17	16	1	13	30	1	
	55-64	7	6	0	4	11	1	
	65+	1	1	0	1	2	0	
	SubTotals:	74	70	43	43	117	4	
	ASIAN	0-12	0	0	0	0	0	0
		13-19	0	0	0	0	0	0
		20-24	0	0	0	0	0	0
		25-34	0	0	1	1	1	0
35-44		0	0	0	0	0	0	
45-54		1	1	0	0	1	1	
55-64		1	1	0	0	1	0	
65+		0	0	0	0	0	0	
SubTotals:		2	2	1	1	3	0	
MULTI-RACE		0-12	0	0	0	0	0	0
		13-19	0	0	0	0	0	0
		20-24	1	1	0	0	1	0
		25-34	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	
	45-54	1	1	0	0	1	1	
	55-64	1	1	0	0	1	1	
	65+	0	0	0	0	0	0	
	SubTotals:	3	2	1	1	3	2	
	NATIVE AMERICAN	0-12	0	0	0	0	0	0
		13-19	0	0	0	0	0	0
		20-24	0	0	0	0	0	0
		25-34	0	0	0	0	0	0
35-44		0	0	0	0	0	0	
45-54		1	1	0	0	1	1	
55-64		0	0	0	0	0	0	
65+		0	0	0	0	0	0	
SubTotals:		1	1	0	0	1	1	
WHITE		0-12	0	0	0	0	0	0
		13-19	0	0	0	0	0	0
		20-24	0	0	0	0	0	0
		25-34	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	
	45-54	1	1	0	0	1	1	
	55-64	0	0	0	0	0	0	
	65+	0	0	0	0	0	0	
	SubTotals:	1	1	0	0	1	1	

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
	AGEz	RACE	AGEz	RACE	AGEz	RACE
20-24	7	2	0	0	9	7
25-34	14	12	5	3	31	17
35-44	17	25	21	11	63	28
45-54	10	19	17	7	46	17
55-64	2	13	8	1	23	3
65+	1	5	0	0	6	1
<b>SubTotals:</b>	<b>127</b>	<b>76</b>	<b>51</b>	<b>22</b>	<b>178</b>	<b>73</b>
<b>WHITE</b>						
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	20	13	1	0	21	7
25-34	49	16	33	3	62	19
35-44	58	17	41	11	96	28
45-54	49	13	36	7	79	20
55-64	24	4	20	1	36	5
65+	7	1	6	0	8	1
<b>SubTotals:</b>	<b>207</b>	<b>58</b>	<b>149</b>	<b>95</b>	<b>302</b>	<b>80</b>
<b>ALL RACES</b>						

**Clients Served This Period**

Methods of Exposure (not mutually exclusive)

Unduplicated clients:	302	Perinatal Transmission	1
Client visits: <sup>3</sup>	1540	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	45	Transfusion	2
Deaf/hard of hearing clients served:	0	Heterosexual Contact	141
Blind/sight impaired clients served:	0	MSM (not IDU)	110
Homeless clients served:	99	IV Drug Use (not MSM)	7
Transgender M to F clients served:	1	MSM/IDU	0
Transgender F to M clients served:	0	Multiple Exposure Categories	9
Clients served this period who live w/in Harris County:	83	Other risk	44
Clients served this period who live outside Harris County:	219	<b>Multi-Race Breakdown</b>	
Active substance abuse clients served:	19	ASN,WHT	1
Active psychiatric illness clients served:	63	BLK,WHT	2

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of 2/29/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2015; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/14.

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

[Agency: [Grant]: RW1 [Service]: DENT [Service Performer]: 0  
 Services performed between 3/1/16 and 6/30/16  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: All [Contract 2]: n/a [Sub Cats 2]: All  
 [Contract 3]: n/a [Sub Cats 3]: All  
 [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All  
 [MA]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientOnly]: No

BIRTH GENDER		MALE		FEMALE		BOTH GENDERS	
AGE	RACE	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
0-12	AFRICAN AMERICAN	0	0	0	0	0	0
13-19	AFRICAN AMERICAN	0	0	0	0	0	0
20-24	AFRICAN AMERICAN	2	0	1	0	3	0
25-34	AFRICAN AMERICAN	9	0	5	0	14	0
35-44	AFRICAN AMERICAN	7	0	5	0	12	0
45-54	AFRICAN AMERICAN	10	0	14	0	24	0
55-64	AFRICAN AMERICAN	9	1	2	0	11	1
65+	AFRICAN AMERICAN	0	0	1	0	1	0
SubTotals:	AFRICAN AMERICAN	37	1	28	0	65	1
0-12	ASIAN	0	0	0	0	0	0
13-19	ASIAN	0	0	0	0	0	0
20-24	ASIAN	0	0	0	0	0	0
25-34	ASIAN	0	0	1	0	1	0
35-44	ASIAN	0	0	0	0	0	0
45-54	ASIAN	0	0	0	0	0	0
55-64	ASIAN	0	0	0	0	0	0
65+	ASIAN	0	0	0	0	0	0
SubTotals:	ASIAN	0	0	1	0	1	0
0-12	MULTI-RACE	0	0	0	0	0	0
13-19	MULTI-RACE	0	0	0	0	0	0
20-24	MULTI-RACE	0	0	0	0	0	0
25-34	MULTI-RACE	0	0	0	0	0	0
35-44	MULTI-RACE	0	0	0	0	0	0
45-54	MULTI-RACE	0	0	0	0	0	0
55-64	MULTI-RACE	1	1	0	0	1	1
65+	MULTI-RACE	0	0	0	0	0	0
SubTotals:	MULTI-RACE	1	1	0	0	1	1
0-12	WHITE	0	0	0	0	0	0
13-19	WHITE	0	0	0	0	0	0
20-24	WHITE	5	4	0	0	5	4
25-34	WHITE	18	6	2	2	20	8
35-44	WHITE	15	4	11	14	29	12
45-54	WHITE	15	7	4	11	26	11
55-64	WHITE	12	1	4	1	16	2
65+	WHITE	4	1	0	0	4	1
SubTotals:	WHITE	69	23	46	31	100	38
0-12	ALL RACES	0	0	0	0	0	0
13-19	ALL RACES	0	0	0	0	0	0
20-24	ALL RACES	7	11	7	15	14	15
25-34	ALL RACES	27	11	14	14	41	28
35-44	ALL RACES	32	11	11	11	43	22
45-54	ALL RACES	32	8	8	11	40	19
55-64	ALL RACES	24	2	4	1	28	3
65+	ALL RACES	4	1	0	0	4	1
SubTotals:	ALL RACES	139	53	69	62	131	124

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
AGE?	7	4	1	0	8	4
20-24	7	4	1	0	8	4
25-34	27	6	8	2	35	8
35-44	22	4	18	8	41	12
45-54	25	7	18	4	50	11
55-64	22	3	19	1	28	4
65+	4	1	3	1	5	1
SubTotals:	107	25	82	60	45	167
SubTotals:	107	25	82	60	45	167

Clients Served This Period

Methods of Exposure (not mutually exclusive)

Unduplicated clients:	167	PerinatalTransmission	1
Client visits: <sup>3</sup>	523	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	17	Transfusion	0
Deaf/hard of hearing clients served:	2	Heterosexual Contact	73
Blind/sight impaired clients served:	2	MSM (not IDU)	64
Homeless clients served:	49	IV Drug Use (not MSM)	4
Transgender M to F clients served:	2	MSM/IDU	0
Transgender F to M clients served:	0	Multiple Exposure Categories	8
Clients served this period who live w/in Harris County:	28	Other risk	29
Clients served this period who live outside Harris County:	139	Multi-Race Breakdown	1
Active substance abuse clients served:	9	BLK, WHT	1
Active psychiatric illness clients served:	39		

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day  
<sup>2</sup> Age as of 6/30/16  
<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/15.

Request for Service Category Increase  
Ryan White Part A and MAI

A. Name of Agency (not provided to RWPC)		MEDICAL TRANSPORTATION		Control No.		
B. Contract Number (not provided to RWPC)		Part A:	MAI:			
C. Service Category Title (per RFP)		July X	Oct:	Final Qtr:		
D. Request for Increase under (check one):		April:				
E. Amount of additional funding Requested:		<b>\$40,000.00</b>				
F. Unit of Service: (list only those units and disbursements where an increase is requested)		a. Number of units in current contract:	b. Cost/unit	c. Number of additional units requested:	d. Total: (b x c)	f. Percent Female
1. TRANS TRIP		162663	\$2.00	20000	\$40,000.00	
2.					\$0.00	
3.					\$0.00	
4.					\$0.00	
5.					\$0.00	
6.					\$0.00	
7.					\$0.00	
8. Disbursements (list current amount in column a. and requested amount in column c.)			N/A		\$0.00	
9. Total additional funding (must match E. above):					\$40,000.00	
G. Number of new/additional clients to be served with requested increase.		100				
H. Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>		a. Number of clients served per CPCDMS	b. Percent AA (non-Hispanic)	c. Percent White (non-Hispanic)	d. Percent Hispanic (all races)	e. Percent Male
1. Number of clients that received this service under Part A (or MAI) in FY 2015.* (March 1, 2015 - February 28, 2016) *If agency was funded for service under Part A (or MAI) in FY 2015 - if not, mark these cells as "NA"		665	54%	18%	26%	72%
2. Number of clients that have received this service under Part A (or MAI) in FY 2016.		665				
a. April Request Period = Not Applicable						
b. July Request Period = 03/01/16 - 06/30/16						
c. October Request Period = 03/01/16 - 09/30/16		205	53%	21%	23%	63%
d. 4th Qtr. Request Period = 03/01/16 - 11/30/16						37%

Request for Service Category Increase  
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this amount of request is received?	c. Comments (do not include agency name or identifying information):
	1. Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	2	0	With the increase of new medical (25) and dental patients (15) agency is experiencing a higher request of appointments for the same week transports. Due to the increase in new patients lots have more complex needs that are requiring transportation services to and from medial and dental appointments and multiple primary care providers.
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1	0	Next day with a possibility of same day service with increased funding.
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	
	4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	
J.	List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	d. Comment (50 words or less):
1.				
2.				
3.				
4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):			
	Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in item F.9.d. plus current contract amount).			
	<b>This form must be submitted electronically via email by published deadline to Carin Martin: cmartin@hcphes.org</b>			

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency]: [Grant]: RW1 [Service Performer]: 0

Services performed between 3/1/15 and 2/29/16

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]: ALL [Sub Cats 1]: All [Contract 2]: n/a [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
AGE:						
AFRICAN AMERICAN	0	0	0	0	0	0
13-19	3	0	0	0	3	0
20-24	42	2	3	0	45	2
25-34	91	1	15	1	106	2
35-44	51	3	46	1	97	4
45-54	43	2	25	0	68	2
55-64	21	0	19	0	40	0
65+	2	0	7	0	9	0
SubTotals:	253	8	115	2	368	10
ASIAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	2	0	1	0	3	0
35-44	1	0	0	0	1	0
45-54	3	1	0	0	3	1
55-64	1	0	0	0	1	0
65+	0	0	0	0	0	0
SubTotals:	7	1	1	0	8	1
MULTI-RACE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	0	0	0	1	0
25-34	1	0	1	1	2	0
35-44	1	0	0	0	1	0
45-54	1	0	1	0	2	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	4	0	4	2	6	1
NATIVE AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	0	0	0	1	0
25-34	0	0	1	1	1	0
35-44	0	0	0	0	0	0
45-54	1	1	0	0	2	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	4	0	4	2	6	1
WHITE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	0	0	0	1	0
25-34	0	0	1	1	1	0
35-44	0	0	0	0	0	0
45-54	1	1	0	0	2	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	2	1	2	2	3	1



BIRTH GENDER	MALE		FEMALE		BOTH GENDERS		
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp	
	AGE <sup>2</sup>						
WHITE	20-24	18	14	2	20	16	
	25-34	54	37	8	62	42	
	35-44	48	36	14	77	50	
	45-54	61	28	7	78	35	
	55-64	24	6	2	31	8	
	65+	9	4	3	13	7	
	SubTotals:	217	127	33	34	284	160
	SubTotals:	124					
	ALL RACES	0-12	0	0	0	0	0
		13-19	6	2	0	6	2
20-24		62	16	2	67	18	
25-34		148	38	6	174	44	
35-44		101	39	15	176	54	
45-54		109	32	8	152	40	
55-64		46	6	2	72	8	
65+		11	4	3	22	7	
SubTotals:		483	137	36	150	669	173
SubTotals:		496					

Clients Served This Period (not mutually exclusive)

Unduplicated clients:	669	PernaatalTransmission	2
Client visits: <sup>3</sup>	2154	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	84	Transfusion	8
Deaf/hard of hearing clients served:	2	Heterosexual Contact	264
Blind/sight impaired clients served:	1	MSM (not IDU)	301
Homeless clients served:	236	IV Drug Use (not MSM)	11
Transgender M to F clients served:	2	MSM/IDU	1
Transgender F to M clients served:	0	Multiple Exposure Categories	17
Clients served this period who live w/in Harris County:	505	Other risk	88
Clients served this period who live outside Harris County:	164	Multi-Race Breakdown	
Active substance abuse clients served:	23	BLK,ASN	2
Active psychiatric illness clients served:	140	BLK,NTV	2
		BLK,WHT	1
		NTV,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day  
<sup>2</sup> Age as of 2/29/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2015; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/14.

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency]: RWI [Service]: TRANS [Service Performer]: 0

Services performed between 3/1/16 and 6/30/16

[Age Group]: All [Contract 1]: All [Contract 2]: All [Contract 3]: All [Contract 4]: n/a [Contract 5]: n/a [Sub Cats 5]: All

[Contract 1]: All [Contract 2]: All [Contract 3]: n/a [Sub Cats 3]: All [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hispanic	Hispanic	Non-Hispanic	Hispanic	Non-Hispanic
	AGE	RACE	AGE	RACE	AGE	RACE
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	10	10	0	0	10	0
25-34	20	20	1	1	24	1
35-44	17	17	15	14	32	1
45-54	13	13	12	12	25	1
55-64	7	7	10	10	17	0
65+	1	1	3	3	4	0
SubTotals:	68	67	44	42	112	3
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	1	1	1	0
35-44	0	0	0	0	0	0
45-54	1	1	0	0	1	0
55-64	1	1	0	0	1	0
65+	0	0	0	0	0	0
SubTotals:	2	2	1	1	3	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	1	1	0	0	1	0
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	1	1	0	0	2	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	1	1	1	2	2
25-34	6	5	0	2	13	6
35-44	10	8	4	5	19	13
45-54	18	8	6	6	30	14
55-64	13	3	1	2	16	5
65+	5	2	1	2	8	4
SubTotals:	58	28	30	16	88	44
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	1	1	1	2	2
25-34	11	6	2	0	13	6
35-44	10	8	9	5	19	13
45-54	18	8	12	6	30	14
55-64	13	3	3	2	16	5
65+	5	2	3	2	8	4
SubTotals:	58	28	30	16	88	44
ALL RACES	0-12	0	0	0	0	0
ALL RACES	13-19	0	0	0	0	0
ALL RACES	20-24	1	1	1	1	2
ALL RACES	25-34	11	6	2	0	13
ALL RACES	35-44	10	8	9	5	19
ALL RACES	45-54	18	8	12	6	30
ALL RACES	55-64	13	3	3	2	16
ALL RACES	65+	5	2	3	2	8
ALL RACES	SubTotals:	58	28	30	16	88

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
20-24	11	10	1	0	12	2
25-34	31	25	1	6	38	7
35-44	28	20	6	18	52	14
45-54	32	23	6	18	56	15
55-64	21	18	2	11	34	5
65+	6	4	2	5	13	4
<b>SubTotals:</b>	<b>129</b>	<b>29</b>	<b>76</b>	<b>18</b>	<b>205</b>	<b>47</b>

**Clients Served This Period**

**Methods of Exposure (not mutually exclusive)**

Perinatal Transmission	205	
Unduplicated clients:		2
Client visits: <sup>3</sup>	489	0
Spanish speaking (primary language at home) clients served:	28	3
Deaf/hard of hearing clients served:	4	82
Blind/sight impaired clients served:	1	76
Homeless clients served:	61	3
Transgender M to F clients served:	2	0
Transgender F to M clients served:	0	4
Clients served this period who live w/in Harris County:	158	35
Clients served this period who live outside Harris County:	47	
Active substance abuse clients served:	6	1
Active psychiatric illness clients served:	46	1

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day  
<sup>2</sup> Age as of 6/30/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/15.

Request for Service Category Increase  
Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)	Contract Number (not provided to RWPC)	Control No.
B.	Adult Community Based Comprehensive Primary Medical Care targeted to African Americans, Hispanics, White/MSM	Part A: X	60
C.	Request for Increase under (check one):	MAI:	
D.	Request Period (check one):	July X	Final Qtr:
E.	Amount of additional funding Requested:	April: \$200,000.00	
F.	Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in current contract:	d. Total: (b x c)
1.	MD / NP / PA VISITS	2906	\$136,950.00
2.	PSYCH	600	\$11,570.00
3.	MCM	14432.48	\$37,500.00
4.	CMSL	6809.40	\$13,980.00
5.			\$0.00
6.			\$0.00
7.			\$0.00
8.	Disbursements (list current amount in column a. and requested amount in column c.)	N/A	\$0.00
9.	Total additional funding (must match E. above):		\$200,000.00
G.	Number of new/additional clients to be served with requested increase.	120	
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	a. Number of clients served per CPCDMS	f. Percent Female
1.	Number of clients that received this service under Part A (or MAI) in FY 2015.* (March 1, 2015 - February 28, 2016) *if agency was funded for service under Part A (or MAI) in FY 2015 - if not, mark these cells as "NA"	1852 1855	27% (raw# = 505)
2.	Number of clients that have received this service under Part A (or MAI) in FY 2016.	64% (raw# = 1188)	73% (raw# = 1347)
a.	April Request Period = Not Applicable	10% (raw# = 187)	74% (raw# = 978)
b.	July Request Period = 03/01/16 - 06/30/16	64% (raw# = 846)	25% (raw# = 326)
c.	October Request Period = 03/01/16 - 09/30/16	19% (raw# = 121)	64% (raw# = 343)
d.	4th Qtr. Request Period = 03/01/16 - 11/30/16		

Request for Service Category Increase  
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do not include agency name or identifying information):
1.	Length of waiting time (in weeks) for an appointment for a new client:	2 - 3	0	The need for same day appointments for new patients is consistently increasing. Linkage to care for newly diagnosed is being completed daily, but we still have a limited number of new patient slots for same day appointments. We are seeing an average of 25 new patients each month. New patient appointment timeframes are currently 2-3 weeks, but with the steady increase of new patients the timeframe could reach 3-4 weeks without the increase in funding. Currently we have \$64,490 in no pay status.
2.	Length of waiting time (in weeks) for an appointment for a current client:	1 - 2	0	Will be able to see patients same day with funding increase
3.	Number of clients on a "waiting list" for services (per Part A SOC):	0	0	
4.	Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	
J.	List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount d. Comment (50 words or less):
1.				
2.				
3.				
4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):			
	Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).			
	<b>This form must be submitted electronically via email by published deadline to Carin Martin: cmartin@hcpshes.org</b>			

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency] [Grant]: RW1 [Service]: PCARE [Service Performer]: 0  
 Services performed between 3/1/15 and 2/29/16  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: Sub Cats 1: All [Contract 2]: Sub Cats 2: All  
 [Contract 3]: Sub Cats 3: All  
 [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All  
 [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

BIRTH GENDER

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
AGE	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
African American	0	0	0	0	0	0
13-19	8	8	2	2	10	10
20-24	104	100	12	12	116	112
25-34	307	300	86	1	393	385
35-44	156	148	142	1	298	289
45-54	157	154	100	2	257	252
55-64	82	82	41	0	123	123
65+	8	8	9	0	17	17
SubTotals:	822	800	392	4	1,214	1,188
ASIAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	5	4	1	1	6	5
35-44	1	1	0	0	1	1
45-54	6	5	0	0	6	5
55-64	1	1	0	0	1	1
65+	0	0	0	0	0	0
SubTotals:	13	11	1	1	14	12
MULTI-RACE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	3	2	0	0	3	2
25-34	5	5	2	2	7	7
35-44	2	1	1	0	3	2
45-54	3	2	1	1	4	2
55-64	1	1	0	0	1	1
65+	0	0	1	1	1	1
SubTotals:	14	11	5	4	19	15
NATIVE AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	1	1	0	0	1	1
20-24	2	2	0	0	2	2
25-34	1	1	1	1	2	2
35-44	0	0	0	0	0	0
45-54	2	1	0	0	2	1
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	6	5	1	1	7	6
PAC ISLND/HAWAII	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
SubTotals:	0	0	0	0	0	0

1 Visit = time spent per client per agency per service per day  
 2 Age as of 2/29/16  
 3 If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2015;  
 encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/14.

FOOTNOTES

Unduplicated clients:	1855	PerinatalTransmission	7
Client visits: 3	10506	Hemophilia Coagulation	1
Spanish speaking (primary language at home) clients served:	222	Transfusion	14
Deaf/hard of hearing clients served:	8	Heterosexual Contact	724
Blind/sight impaired clients served:	12	MSM (not IDU)	838
Homeless clients served:	711	IV Drug Use (not MSM)	19
Transgender M to F clients served:	19	MSM/IDU	1
Transgender F to M clients served:	0	Multiple Exposure Categories	45
Clients served this period who live w/in Harris County:	1808	Other risk	264
Clients served this period who live outside Harris County:	47	Multi-Race Breakdown	
Active substance abuse clients served:	76	BLK,ASN	2
Active psychiatric illness clients served:	300	BLK,NTV	9
		BLK,WHT	5
		NTV,WHT	3

Methods of Exposure (not mutually exclusive)

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
PAC.ISLND/HAWAII	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	0	0	0	0	0	0
45-54	0	0	0	0	0	0
55-64	2	1	0	1	3	1
65+	0	0	0	0	0	0
SubTotals:	2	1	0	1	3	1
WHITE	6	0	0	0	0	0
0-12	6	0	0	0	0	0
13-19	3	3	1	1	4	4
20-24	39	33	4	3	46	37
25-34	148	111	11	4	163	122
35-44	130	100	24	17	171	124
45-54	125	81	24	11	149	94
55-64	37	15	16	7	53	22
65+	10	6	2	1	12	7
SubTotals:	492	349	106	61	45	598
ALL RACES	1,377	378	971	506	66	440
0-12	6	0	0	0	0	0
13-19	12	3	9	3	1	2
20-24	14	38	110	19	4	15
25-34	46	119	347	105	12	93
35-44	28	109	180	184	25	159
45-54	25	87	206	125	16	109
55-64	12	16	107	58	7	51
65+	1	6	12	12	1	11
SubTotals:	1,377	378	971	506	66	440
						1,855
						444
						1,411

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency] [Grant]: RW1 [Service]: PCARE [Service Performer]: 0

Services performed between 3/1/16 and 6/30/16

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]: [Sub Cate 1]: All [Contract 2] [Sub Cate 2]: All

[Contract 3]: [Sub Cate 3]: All

[Contract 4]: n/a [Sub Cate 4]: All [Contract 5]: n/a [Sub Cate 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

BIRTH GENDER

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp

RACE	AFRICAN AMERICAN		ASIAN		MULTI-RACE		NATIVE AMERICAN		PAC ISLND/HAWAII		
	0-12	13-19	20-24	25-34	35-44	45-54	55-64	65+	SubTotals:	0-12	13-19
AGE?	0	0	0	0	0	0	0	0	0	0	0
13-19	7	0	7	1	0	0	0	0	0	0	0
20-24	82	2	80	9	0	0	0	0	0	0	0
25-34	235	4	231	62	2	60	297	6	291	0	0
35-44	126	5	121	90	2	88	216	7	209	0	0
45-54	110	4	106	65	1	64	175	5	170	0	0
55-64	46	0	46	30	0	30	76	0	76	0	0
65+	2	0	2	2	0	2	4	0	4	0	0
SubTotals:	608	15	593	259	5	254	867	20	847	0	0
0-12	0	0	0	0	0	0	0	0	0	0	0
13-19	0	0	0	0	0	0	0	0	0	0	0
20-24	1	1	1	1	1	1	1	0	1	0	0
25-34	3	0	3	1	0	1	4	0	4	0	0
35-44	1	0	1	0	0	0	1	0	1	0	0
45-54	5	1	4	0	0	0	5	1	4	0	0
55-64	1	0	1	0	0	0	1	0	1	0	0
65+	0	0	0	0	0	0	0	0	0	0	0
SubTotals:	11	1	10	1	0	1	12	1	11	0	0
0-12	0	0	0	0	0	0	0	0	0	0	0
13-19	0	0	0	0	0	0	0	0	0	0	0
20-24	1	1	1	1	1	1	1	0	1	0	0
25-34	3	0	3	1	0	1	4	0	4	0	0
35-44	1	1	0	2	0	2	3	1	2	0	0
45-54	3	1	2	0	0	0	3	1	2	0	0
55-64	0	0	0	0	0	0	0	0	0	0	0
65+	0	0	0	0	0	0	1	0	1	0	0
SubTotals:	8	2	6	4	0	4	12	2	10	0	0
0-12	0	0	0	0	0	0	0	0	0	0	0
13-19	0	0	0	0	0	0	0	0	0	0	0
20-24	1	1	1	1	1	1	1	0	1	0	0
25-34	1	0	1	1	0	0	1	0	1	0	0
35-44	0	0	0	0	0	0	0	0	0	0	0
45-54	1	1	0	0	0	0	1	0	1	0	0
55-64	0	0	0	0	0	0	0	0	0	0	0
65+	0	0	0	0	0	0	1	0	1	0	0
SubTotals:	2	6	4	4	0	4	12	2	10	0	0
0-12	0	0	0	0	0	0	0	0	0	0	0
13-19	0	0	0	0	0	0	0	0	0	0	0
20-24	1	1	1	1	1	1	1	0	1	0	0
25-34	1	0	1	1	0	0	1	0	1	0	0
35-44	0	0	0	0	0	0	0	0	0	0	0
45-54	1	1	0	0	0	0	1	0	1	0	0
55-64	0	0	0	0	0	0	0	0	0	0	0
65+	0	0	0	0	0	0	1	0	1	0	0
SubTotals:	3	1	2	2	0	2	5	1	4	0	0
0-12	0	0	0	0	0	0	0	0	0	0	0
13-19	0	0	0	0	0	0	0	0	0	0	0
20-24	1	1	1	1	1	1	1	0	1	0	0
25-34	1	0	1	1	0	0	1	0	1	0	0
35-44	0	0	0	0	0	0	0	0	0	0	0
45-54	1	1	0	0	0	0	1	0	1	0	0
55-64	0	0	0	0	0	0	0	0	0	0	0
65+	0	0	0	0	0	0	1	0	1	0	0
SubTotals:	3	1	2	2	0	2	5	1	4	0	0



**FOOTNOTES**  
 1 Visit = time spent per client per agency per service per day  
 2 Age as of 6/30/16  
 3 If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016;  
 4 If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) prior to 03/01/15.

Methods of Exposure (not mutually exclusive)	Unduplicated clients:	Client visits: 3	Spanish speaking (primary language at home) clients served:	Deaf/hard of hearing clients served:	Blind/sight impaired clients served:	Homeless clients served:	Transgender M to F clients served:	Transgender F to M clients served:	Clients served this period who live w/in Harris County:	Clients served this period who live outside Harris County:	Active substance abuse clients served:	Active psychiatric illness clients served:
Perinatal Transmission	1322	6	167	4	6	438	12	0	1295	27	42	205
Hemophilia Coagulation	3614	0	12	494	627	10	1	34	187	2	5	4
Transfusion	167	12	4	494	627	10	1	34	187	2	5	4
Other risk	1295	187	4	494	627	10	1	34	187	2	5	4
Multiple Exposure Categories	0	34	4	494	627	10	1	34	187	2	5	4
MSM (not IDU)	6	10	4	494	627	10	1	34	187	2	5	4
IV Drug Use (not MSM)	438	10	4	494	627	10	1	34	187	2	5	4
MSM/IDU	12	1	4	494	627	10	1	34	187	2	5	4
Multi-Race Breakdown	27	187	4	494	627	10	1	34	187	2	5	4
BLK,ASN	42	2	4	494	627	10	1	34	187	2	5	4
BLK,NTV	205	5	4	494	627	10	1	34	187	2	5	4
BLK,WHT		4	4	494	627	10	1	34	187	2	5	4
NTV,WHT		1	4	494	627	10	1	34	187	2	5	4

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS		
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp	
<b>RACE</b>	<b>AGE2</b>						
PAC ISLAND/HAWAII	SubTotals:	2	0	1	3	3	
	20-24	0	0	0	0	0	
	25-34	1	0	0	1	1	
	35-44	0	0	0	0	0	
	45-54	0	0	0	0	0	
	55-64	1	0	1	2	2	
	65+	0	0	0	0	0	
	SubTotals:	2	0	1	3	3	
	WHITE	SubTotals:	346	254	77	48	29
		20-24	25	22	3	2	2
25-34		120	94	26	14	11	
35-44		81	60	21	31	20	
45-54		82	63	19	16	10	
55-64		30	9	21	12	4	
65+		6	4	2	2	1	
SubTotals:		346	254	92	77	48	
ALL RACES		SubTotals:	978	273	705	344	53
		20-24	110	24	86	12	2
	25-34	363	98	265	79	13	
	35-44	209	66	143	123	22	
	45-54	201	70	131	81	11	
	55-64	78	9	69	43	4	
	65+	8	4	4	5	1	
	SubTotals:	978	273	705	344	53	
	SubTotals:	326	996	1,322	291	1,322	326
	SubTotals:	996	326	1,322	291	1,322	996

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency]: [Grant]: RW1 [Service]: PCARE [Service Performer]: 0

Services performed between 3/1/16 and 6/30/16

[Age Group]: *Age Group* [Included/Excluded SubCats]: INCLUDE

[Contract 1]: All [Contract 2]: n/a [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

*MP*

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
AGE <sup>2</sup>						
RACE						

Clients Served This Period

Methods of Exposure (not mutually exclusive)

Unduplicated clients:	0	0	0	0	0	0
Client visits: <sup>3</sup>	0	0	0	0	0	0
Spanish speaking (primary language at home) clients served:	0	0	0	0	0	0
Deaf/hard of hearing clients served:	0	0	0	0	0	0
Blind/sight impaired clients served:	0	0	0	0	0	0
Homeless clients served:	0	0	0	0	0	0
Transgender M to F clients served:	0	0	0	0	0	0
Transgender F to M clients served:	0	0	0	0	0	0
Other risk	0	0	0	0	0	0
Multiple Exposure Categories	0	0	0	0	0	0
MSM/IDU	0	0	0	0	0	0
IV Drug Use (not MSM)	0	0	0	0	0	0
MSM (not IDU)	0	0	0	0	0	0
Heterosexual Contact	0	0	0	0	0	0
Transfusion	0	0	0	0	0	0
Hemophilia Coagulation	0	0	0	0	0	0
Perinatal Transmission	0	0	0	0	0	0

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of 6/30/16

<sup>3</sup> If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/15.

Request for Service Category Increase  
Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)	Outpatient/Ambulatory Medical Care	Control No.
B.	Contract Number (not provided to RWPC)	Part A: X	MAI:
C.	Service Category Title (per RFP)	August: X	Oct:
D.	Request for Increase under (check one):	Final Qtr:	
E.	Request Period (check one):		
F.	Amount of additional funding Requested:		
F.	Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in current contract:	b. Cost/unit
	1. Pcare Visits by Physician/Physician Extender	1876	\$275.00
	2. Medical Case Management	9974.68	\$25.00
	3. Service Linkage Worker	11684.2	\$20.00
	4.		\$0.00
	5.		\$0.00
	6.		\$0.00
	7.		\$0.00
	8. Disbursements (list current amount in column a. and requested amount in column c.)		\$0.00
	9. Total additional funding (must match E. above):		\$399,975.00
G.	Number of new/additional clients to be served with requested increase.		
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	a. Number of clients served per CPCDMS	b. Percent AA (non-Hispanic)
	1. Number of clients that received this service under Part A (or MAI) in FY 2015.* (March 1, 2015 - February 28, 2016) *If agency was funded for service under Part A (or MAI) in FY 2015 - if not mark these cells as "NA"	2770 2897	47% 47%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2016.	1522 1913	44% 45%
	a. April Request Period = Not Applicable		
	b. August Request Period = 03/01/16 - 06/30/16		
	c. October Request Period = 03/01/16 - 09/30/16		
	d. 4th Qtr. Request Period = 03/01/16 - 11/30/16		
		d. Percent Hispanic (all races)	d. Total: (b x c)
		24% 22%	\$249,975.00 \$112,500.00 \$37,500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$399,975.00
		e. Percent Male	e. Percent Female
		82%	18%
		81% 82%	18% 18%

Request for Service Category Increase  
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this amount of request be if full amount of request is received?	c. Comments (do not include agency name or identifying information):
1.	Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	2	2	The agency has a large number of Ryan White patients seeking primary care services, and this requested funding will allow the agency to sufficiently meet the continued demands for new Ryan White patients.
2.	Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1	1	The agency has a large number of Ryan White patients seeking primary care services, and this requested funding will allow the agency to sufficiently meet the continued demands for existing Ryan White patients.
3.	Number of clients on a "waiting list" for services (per Part A SOC):	0	0	The agency does not maintain a waiting list. The agency offers a limited number of same day appointment slots for patients.
3.	Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	The agency does not maintain a waiting list. The agency offers a limited number of same day appointment slots for patients.
J.	List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount d. Comment (50 words or less):
1.				
2.				
3.				
4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):			
	Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).			
	<b>This form must be submitted electronically via email by published deadline to Carin Martin: <a href="mailto:cmartin@hcpbes.org">cmartin@hcpbes.org</a></b>			

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency]: [Grant]: RW1 [Service]: PCARE [Service Performer]: 0

Services performed between 3/1/15 and 2/29/16

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]: [Sub Cats 1]: All [Contract 2]: [Sub Cats 2]: All

[Contract 3]: [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientOnly]: No

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic
0-12	0	0	0	0	0	0
13-19	10	0	3	0	13	0
20-24	106	2	19	0	125	2
25-34	269	4	61	2	330	6
35-44	212	6	121	1	333	7
45-54	227	2	103	2	330	4
55-64	93	1	58	3	151	4
65+	12	0	8	0	20	0
SubTotals:	929	15	373	8	1,302	23
ASIAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	4	0	0	0	4	0
20-24	10	0	3	0	13	0
25-34	16	0	2	0	18	0
35-44	11	0	1	0	12	0
45-54	1	0	1	0	2	0
55-64	1	0	1	0	2	0
65+	1	0	1	0	2	0
SubTotals:	43	0	8	0	51	0
MULTI-RACE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	1	0	0	0	1	0
20-24	5	1	4	1	6	1
25-34	6	2	4	0	6	2
35-44	6	2	4	0	6	2
45-54	1	1	0	0	1	1
55-64	1	1	0	0	1	1
65+	0	0	0	0	0	0
SubTotals:	20	7	13	1	21	7
NATIVE AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	0	0	0	1	0
25-34	3	1	0	0	3	1
35-44	1	0	1	1	2	0
45-54	6	2	4	0	6	2
55-64	2	0	1	0	3	0
65+	0	0	0	0	0	0
SubTotals:	13	3	10	1	15	4
PAC.ISLND/HAWAII	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	0	0	0	1	0
25-34	3	1	2	0	3	1
35-44	1	0	1	1	2	0
45-54	6	2	4	0	6	2
55-64	2	0	1	0	3	0
65+	0	0	0	0	0	0
SubTotals:	13	3	10	1	15	4

BIRTH GENDER	BOTH GENDERS		FEMALE		MALE		RACE		AGE	PACISLND/HAWAII		WHITE		ALL RACES		
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp		Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	28	53	81	1	4	27	50	77	50	27	50	77	50	27	50	77
	138	213	351	10	22	128	201	329	201	128	201	329	201	128	201	329
	134	221	355	8	36	126	193	319	193	126	193	319	193	126	193	319
	220	163	383	15	34	205	144	349	144	205	144	349	144	205	144	349
	127	41	168	8	17	119	32	151	32	119	32	151	32	119	32	151
	25	9	34	2	3	23	8	31	8	23	8	31	8	23	8	31
	SubTotals:															
	1,262	705	1,378	44	116	629	633	1,262	633	629	633	1,262	633	629	633	1,262
	65+	9	34	2	3	23	8	31	8	23	8	31	8	23	8	31
	55-64	47	168	8	17	119	32	151	32	119	32	151	32	119	32	151
	45-54	170	732	117	138	445	149	594	149	445	149	594	149	445	149	594
	35-44	231	717	132	161	354	202	556	202	354	202	556	202	354	202	556
	25-34	222	703	72	86	409	208	617	208	409	208	617	208	409	208	617
	20-24	56	217	21	24	140	53	193	53	140	53	193	53	140	53	193
	13-19	5	20	3	3	12	5	17	5	12	5	17	5	12	5	17
	0-12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	SubTotals:	740	2,770	420	501	1,610	659	2,269	659	1,610	659	2,269	659	1,610	659	2,269
	2,030															

Methods of Exposure (not mutually exclusive)

Unduplicated clients:	2770	Perinatal Transmission	13
Client visits: 3	9190	Hemophilia Coagulation	3
Spanish speaking (primary language at home) clients served:	311	Transfusion	16
Deaf/hard of hearing clients served:	77	Heterosexual Contact	590
Blind/sight impaired clients served:	167	MSM (not IDU)	1207
Homeless clients served:	955	IV Drug Use (not MSM)	46
Transgender M to F clients served:	21	MSM/IDU	11
Transgender F to M clients served:	1	Multiple Exposure Categories	93
Clients served this period who live w/in Harris County:	2601	Other risk	844
Clients served this period who live outside Harris County:	169	Multi-Race Breakdown	
Active substance abuse clients served:	49	ASN, WHT	1
Active psychiatric illness clients served:	216	BLK, NTV	2
		BLK, NTV, ASN, WHT	1
		BLK, NTV, HWN, WHT	1
		BLK, NTV, HWN, WHT	11
		BLK, WHT	11
		HWN, WHT	1
		NTV, HWN, WHT	1
		NTV, WHT	1

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency] [Grant]: RW1 [Service]: PCARE [Service Performer]: 0  
 services performed between 3/1/16 and 6/30/16  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]  
 [Contract 3]: Sub Cats 3: All  
 [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All  
 [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

BIRTH GENDER

AGE	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp

RACE	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
AFRICAN AMERICAN	0	0	0	0	0	0
13-19	6	6	1	1	7	7
20-24	61	61	10	10	71	71
25-34	156	151	34	32	190	183
35-44	111	110	69	68	180	178
45-54	109	108	57	56	166	164
55-64	56	55	24	22	80	77
65+	5	5	8	8	13	13
SubTotals:	504	496	203	197	707	693
ASIAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	5	4	1	1	6	5
35-44	4	4	2	2	6	6
45-54	6	6	1	1	7	7
55-64	0	0	0	0	0	0
65+	1	1	0	0	1	1
SubTotals:	16	15	5	5	21	20
MULTI-RACE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	4	3	0	0	4	3
35-44	2	2	0	0	2	2
45-54	0	0	0	0	0	0
55-64	1	1	0	0	1	1
65+	0	0	0	0	0	0
SubTotals:	7	5	0	0	8	6
NATIVE AMERICAN	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	1	0	0	1	1
25-34	0	0	0	0	0	0
35-44	1	1	0	0	1	1
45-54	2	2	0	0	2	2
55-64	1	1	1	1	2	2
65+	0	0	0	0	0	0
SubTotals:	5	4	1	1	6	4
PAC.ISLND/HAWAII	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	0	0	0	0	0	0
20-24	1	1	0	0	1	1
25-34	0	0	0	0	0	0
35-44	1	1	0	0	1	1
45-54	2	2	0	0	2	2
55-64	1	1	1	1	2	2
65+	0	0	0	0	0	0
SubTotals:	5	4	1	1	6	4

**FOOTNOTES**  
 1 Visit = time spent per client per agency per service per day  
 2 Age as of 6/30/16  
 3 If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2016; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/15.

Client's Served This Period	Methods of Exposure (not mutually exclusive)	Count
Unduplicated clients:	Perinatal Transmission	1522
Client visits: 3	Hemophilia Coagulation	3115
Spanish speaking (primary language at home) clients served:	Transfusion	197
Deaf/hard of hearing clients served:	Heterosexual Contact	39
Blind/sight impaired clients served:	MSM (not IDU)	78
Homeless clients served:	IV Drug Use (not MSM)	514
Transgender M to F clients served:	MSM/IDU	13
Transgender F to M clients served:	Multiple Exposure Categories	0
Clients served this period who live w/in Harris County:	Other risk	1431
Clients served this period who live outside Harris County:	Multirace Breakdown	91
Active substance abuse clients served:	BLK,NTV	23
Active psychiatric illness clients served:	BLK,NTV,HWN,WHT	125
	BLK,WHT	4
	HWN,WHT	1

BIRTH GENDER	MALE		FEMALE		BOTH GENDERS	
	Hispanic	Non-Hisp	Hispanic	Non-Hisp	Hispanic	Non-Hisp
AGE 2	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	2	1	1	1	3	1
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	2	1	1	1	3	1
PACISLND/HAWAII	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-34	0	0	0	0	0	0
35-44	2	1	1	1	3	1
45-54	0	0	0	0	0	0
55-64	0	0	0	0	0	0
65+	0	0	0	0	0	0
SubTotals:	2	1	1	1	3	1
WHITE	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	4	3	0	0	4	3
20-24	34	21	5	4	39	25
25-34	177	104	73	5	186	109
35-44	175	109	66	22	202	131
45-54	211	106	105	14	231	120
55-64	85	22	63	3	93	25
65+	18	5	13	2	22	7
SubTotals:	704	370	334	50	777	420
ALL RACES	0	0	0	0	0	0
0-12	0	0	0	0	0	0
13-19	10	3	7	0	11	3
20-24	96	21	75	4	112	25
25-34	342	111	231	7	386	118
35-44	295	111	184	23	394	134
45-54	328	107	221	15	406	122
55-64	143	25	118	6	177	31
65+	24	5	19	2	36	7
SubTotals:	1,238	383	855	57	1,522	440



# Affected Community Committee Report

# PREP: WHAT IS IT?

Pre-exposure prophylaxis, or PrEP, is a daily pill that can greatly reduce a person's chance of getting HIV. If a person on PrEP is exposed to HIV through sex or sharing needles, these medicines block the virus from establishing a permanent infection.

- This prescription medication, Truvada, contains two medicines (tenofovir and emtricitabine) commonly used to treat HIV.
- PrEP is for individuals who do not have HIV but are at high risk of transmission.
- Getting on PrEP also includes routine appointments for HIV testing, STI screening and safer sex education.

# PREP: WHO CAN TAKE IT

- Women
- Transgender Women
- Men
- HIV negative men who have sex with men (MSM)
- Someone with an HIV positive partner
- Other individuals that are at high risk of acquiring HIV through sexual activity

# PREP It Up! SERVICES

- FREE PrEP Consultations
- PrEP Education
- PrEP & PEP/PrEP Prescriptions
- PrEP Medication Assistance Program Enrollment
- Individual & Group PrEP Workshops
- Spreading PrEP Education and Safer Sex Practices on college and university campuses (SPECS) Tours

CALL NOW TO SCHEDULE YOUR APPOINTMENT!  
713-771-2292

# 713-771-2292

Schedule your appointment today!

Monday - Friday 8:30am - 7:30pm  
Saturday 8:30am - 2:30pm



**Bee Busy Wellness Center**  
8785 West Ballfort  
Houston, TX 77031  
(713) 771-2292  
[www.mybbwvc.org](http://www.mybbwvc.org)



Like us on Facebook  
PrEP It Up Houston



**BEE BUSY WELLNESS CENTER**  
MEDICAL - PHARMACY

# PREP It Up!

# H O U S T O N



Are you at risk of getting HIV? Then Pre-Exposure Prophylaxis, or PrEP, might be right for you.

For more information, call (713) 771-2292  
visit [mybbwvc.org](http://mybbwvc.org) > our services > PrEP

# IS PREP RIGHT FOR YOU?

Come in for a consultation at Bee Busy Wellness Center. Cost doesn't have to be a barrier. Most people qualify for access to **FREE** medication.

Call Today: (713) 771-2292

## GETTING PREP... IS AS EASY AS 1-2-3

# 01



### GET TESTED

Get tested for HIV. Know your status.

You must be HIV negative in order to be prescribed PREP.

# 02



### SEE YOUR PROVIDER

A series of lab tests and a medical exam are required. If you and your provider agree that PREP is right for you he/she will prescribe PREP.

# 03



### TAKE THE PILL

While you're taking PREP, the following should be done:

- PREP should be taken daily around the same time each day.
- Routine HIV tests and labs are required every 3 months.



**BEE BUSY WELLNESS CENTER**

MEDICAL • DENTIST

**Affected Community Committee  
2016 Community Events (as of 06/27/16)**

Point Person (PP): Committee member who picks up display materials and makes sure they are returned to the Office of Support.

<b>Day, date, times</b>	<b>Event</b>	<b>Location</b>	<b>Participants</b>
Sunday, March 6 1pm-Walk	AIDS Foundation Houston (AFH) AIDS Walk	Houston Park Downtown-1100 Bagby Street, 77002	Allen Murray will distribute Project LEAP flyers.
Friday, May 6 6 – 9 pm Contact: Herman Finley or John Humphreys	Houston Splash 2016	Double Tree Hotel – Galleria	Allen, Teresa, Curtis, Arlene, Cecilia <b>PP: Teresa ; back up Skeet</b>
Saturday, June 25 Noon – 7:00 pm	Pride Festival	Downtown near City Hall	<u>Shift 1 (11:30 am-2 pm) : PP Curtis</u> , Peta Tana, , Johnetta <u>Shift 2 (2-4:30 pm)</u> John L, Ruth, Teresa, Allen <u>Shift 3 (4:30-7 pm): PP Teresa</u> , John L.,Tracy, Rodney <b>To be Assigned:</b> Steven V, Carol, Arlene
Friday, September 16	HIV and Aging Symposium	Montrose Center	Tana, Ruth, Skeet, Curtis, Rodney <b>PP: Skeet</b>
Sunday, September 18, 2016	MISS UTOPIA	The Crowne Plaza (Brookhollow) 12801 Northwest Freeway Houston, TX 77040	<b><u>Need 3 volunteers</u></b> Carol, Peta, Skeet, Tana, Cecilia <b>PP: <u>Peta, Curtis, Skeet</u></b>
Tuesday, September 27  Contact: Herman Finley	Gay Men’s Health Summit	Hiram Clarke Multi Service Center 810 W. Fuqua St., 77045	Teresa (PP), Curtis, Allen, Cecilia, Arlene
October	Road 2 Success		
Tuesday, December 1	World AIDS Day Events		Most committee members attend events
January 2017	Road 2 Success		
<b><u>NEW DATE:</u></b> Saturday, January 21 2017 8:00 a.m. – 2:30 p.m.	HIV Testing and Prevention: Tools for Your Practice	Marriott Hotel- Medical Center 6580 Fannin St. Houston, TX 77030 (713) 796-0080	<b><u>CONFIRM IF AVAILABLE</u></b> <b><u>FOR NEW DATE:</u></b> Curtis, Cecilia, Teresa, Rodney, Isis, Allen, Tracy, Tana

## Schedule of Topics for 2016 Affected Community Committee Meetings

(revised 06-20-16)

Shaded areas indicate an off-site meeting location; black areas = meeting rooms not available

Confirmed	Month 2016	Topic	Speaker/Facilitator	Meeting Location
✓	12 noon, Tues. February 23	<ul style="list-style-type: none"> <li>• Purpose of the Council and Public Hearings</li> <li>• Participation in Health Fairs</li> <li>• Why meetings are held off-site</li> </ul>	Tori Williams	Office of Support
✓	12 noon, Tues. March 17	Joint meeting of the Affected Community, Priority & Allocations and Quality Improvement Committees	Committee Co-Chairs	Office of Support
✓	12 noon, Tues. March 22	<b><u>Training for Consumers:</u></b> The RW How To Best Meet the Need Process - Part 1	Tori Williams	Office of Support
✓	1:30 - 4 p.m., Thurs. April 14	How To Best Meet the Need Training – Part 2	Planning Council Chairs	Office of Support
✓	10:30 a.m. – 4 p.m. Tues. April 26 &/or Wed. April 27	How To Best Meet the Need Workgroups	Quality Improvement Committee	Office of Support
✓	12 noon, Tues. May 24	HIV and the Asian Community	Peta-gay Ledbetter, PhD	Hope Clinic 7001 Corporate Dr., #120 Houston, Tx 77036 713 773-0803
✓	6:30 – 8:00 p.m. WEDNESDAY June 15	HIV and the Heterosexual Community Advisory Board (CAB)	Amana Turner	Change Happens 3353 Elgin St. Houston, TX 77004
✓	12 noon, Tues. July 26	PrEP	Adonis May	Bee Busy Wellness Center 8785 West Bellfort Ave. Houston, TX 77031
✓	12 noon, Tues. August 23	<b><u>Training for Consumers:</u></b> Standards of Care, Why Should I Care?	Amber Harbolt, Health Planner, Office of Support	Office of Support
✓	12 noon, Tues. Sept. 20	Standards of Care and Performance Measures <b><u>Consumer Only</u></b> Workgroup	Carin Martin, Manager Ryan White Grant Administration	Office of Support
TENTATIVE	12 noon, Tues. October 25	HIV and the Rural Community	???	Access Health
TENTATIVE	12 noon, Tues. November 22	HIV and Substance Abuse	Pennye Rhodes, PA St. Hope Foundation	St. Hope Foundation, <b><u>Conroe</u></b>

**Possible Topics:**

Community Involvement in HIV Clinical Research Trials - Morénike Giwa

Medication Updates – Shital Patel, MD or Ben Barnett, MD OR invite all drug reps. Include info on getting Rx's FDA approved, change to generic status – how does this impact ADAP pricing?

# Operations Committee Report

# Training Topics for 2016 Ryan White Planning Council Meetings (updated: 07-11-16)

## DRAFT

Shaded area indicates an off-site meeting location	Topic	Speaker	Notes
January 21 2016	Council Orientation	N/A	Trevisio's Restaurant
February 11	Open Meetings Act Training, including info on HB 283 re: online access to local govt. bds	Venita Ray, Attorney at Law	
March 10	How To Best Meet the Need Process & Training	Robert Noble and Cecilia Ross, Co-Chairs, Quality Improvement	
April 14	Update on Retention in Care	Ann Dills, Texas Dept. of State Health Services	c/o Amber
May 12	Priority Setting Process	Peta-gay Ledbetter and Bruce Turner, Co-Chairs, Priority & Allocations Committee	
June 9	Project LEAP Presentation	Project LEAP 2016 Students	<b>OFF SITE: L. Castillo with Project LEAP</b>
July 14	Priority Setting and Allocations Processes  AFTER MTING: Q & A with Hila	Peta-gay Ledbetter and Bruce Turner, Co-Chairs, Priority & Allocations Committee  Hila Berl, EGM Consulting	
August 11	2017 Houston Area Comprehensive Prevention and Care Services Plan	Amber Harbolt, Health Planner	
September 8	PrEP Results of 2016 HIV Needs Assessment	Dr. Patel or Dr. Flash Amber Harbolt, Health Planner	
October 13	Working with Transgender Communities RWPC presentations at HRSA Conf. – Part II & III	Lou Weaver Steven Vargas and Tori Williams	
November 10	We Appreciate Our External Members EIIHA Update Update on the Affordable Care Act Election Policy	Chair, Ryan White Planning Council Amber Harbolt, Health Planner, Office of Support Carin Martin, Manager, RWGA Co-Chairs, Operations Committee	
December 8	Elections for the 2017 Officers	Co-Chairs, Operations Committee	

Suggestions: Public Speaking      HRSA Updates      TB and HIV      HIV & Oral Health      Houston Medical Monitoring Project  
 CPG Needs Assess      Update on SIRR

**2015 RWPC Attendance Records (as of 07-12-16)**

a-absent, p-present, e-excused, re-resigned, shaded-do not include in count, Ssh-came but unable to stay, NMnm- no meeting

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	
<b>Ted Artiaga</b>		p	e	p	nm	p							
Comp HIV Plan		p	nm	nm	p	p							
<b>Ruth Atkinson</b>		p	e	a	nm	e							
Operations		e	p	nm	e	nm							
Steering		e	p	p	nm	e							
<b>Rodriga Avila</b>			e	p	nm	p							
Priority & Allocations			e	nm	p	e							
<b>Connie Barnes</b>		p	e	a	nm	p							
Operations		p	p	nm	a	nm							
<b>Melody Barr</b>		p	e	e	nm	e							
Priority & Allocations		p	nm	nm	p	e							
<b>Curtis Bellard</b>		p	p	p	nm	p							
Affected Community		p	p	nm	p	p							
Comp HIV Plan		p	nm	nm	p	p							
Operations		p	p	nm	p	nm							
Steering		p	p	p	nm	p							
<b>David Benson</b>		p	p	p	nm	e							
Comp HIV Plan		p	nm	nm	a	e							
<b>Skeet Boyle</b>		p	p	e	nm	p							
Quality Assurance		p	p	nm	p	p							
Affected Community		p	p	nm	p	p							
<b>Bianca Burley</b>		p	a	p	nm	p							
Quality Assurance		e	a	nm	p	nm							
<b>Ella Collins-Nelson</b>		p	p	p	nm	p							
Priority & Allocations		p	nm	nm	a	p							
<b>Amber David</b>		p	p	p	nm	e							
Quality Assurance		p	a	nm	e	nm							
<b>Denny Delgado</b>		a	a	a	nm	a							
Comp HIV		a	nm	nm	a	a							
<b>Evelio Salinas Escamila</b>		p	e	p	nm	p							
Comp HIV		p	nm	nm	p	p							
<b>Gene Ethridge</b>		p	p	a	nm								
Affected Community		p	p	nm	e								
Operations		p	e	nm	e								
Steering		p	p	e	nm								
<b>Herman Finley</b>		a	p	a	nm	p							
Affected Community		p	p	nm	a	a							
Comp HIV		a	nm	nm	a	a							
<b>Tracy Gorden</b>		p	p	p	nm	p							
Operations		p	p	nm	p	nm							
Steering		p	p	p	nm	p							
<b>Paul Grunenwald</b>		p	p	a	nm	p							
Priority & Allocations		p	nm	nm	e	p							
<b>Steven Harris</b>													
Comp HIV													
<b>Angela F. Hawkins</b>		p	p	p	nm	p							
Priority & Allocations		p	nm	nm	p	p							
<b>Arlene Johnson</b>		e	p	p	nm	p							
Affected Community		p	a	nm	a	e							
Operations		p	e	nm	e	nm							
<b>J. Hoxi Jones</b>		p	p	p	nm	p							
Priority & Allocations		p	nm	nm	p	p							
<b>John Lazo</b>		p	p	p	nm	p							
Comp HIV Planp		p	nm	nm	p	p							
Priority & Allocations		p	nm	nm	e	p							
<b>Peta-gay Ledbetter</b>		p	p	e	nm	p							
Priority & Allocations		p	nm	nm	p	e							



<b>Nancy Miertschin</b>		p	p	p	nm	p											
Comp HIV		p	nm	nm	e	p											
Steering		p	p	p	p	e											
<b>Rodney Mills</b>		p	p	p	p	p											
Affected Community		e	p	nm	p	p											
<b>Allen Murray</b>		p	p	p	nm	p											
Comp HIV		p	nm	nm	p	p											
Affected Community		p	p	nm	p	p											
<b>Robert Noble</b>		p	p	a	nm	p											
Comp HIV		p	nm	nm	p	p											
Steering		p	p	p	p	p											
Quality Assurance		p	a	nm	p	nm											
<b>Shital Patel</b>		e	p	a	nm	p											
Comp HIV Plan		e	nm	nm	a	e											
<b>Tana Pradia</b>		p	p	p	nm	p											
Steering		p	p	p	nm	p											
Affected Community		p	p	nm	p	p											
<b>Teresa Pruitt</b>		e	p	p	nm	p											
Affected Community		p	p	nm	p	p											
Operations		p	p	nm	p	nm											
<b>Leslie Raneri</b>		p	a	p	nm	p											
Quality Improvement		p	a	nm	e	nm											
<b>Cecilia Ross</b>		e	p	p	nm	p											
Affected Community		p	p	nm	p	p											
Quality Assurance		p	p	nm	p	nm											
Steering		p	p	p	nm	p											
<b>Gloria Sierra</b>		p	p	p	nm	e											
Quality Improvement		p	p	nm	p	nm											
Comp HIV		p	nm	nm	p	e											
<b>Stephen Stellenwerf</b>		p	e	e													
Quality Improvement		p	p	nm													
<b>Carol Suazo</b>		p	p	p	nm	p											
Quality Assurance		p	p	nm	p	nm											
Steering		p	p	p	nm	p											
<b>Isis Torrente</b>		p	p	p	nm	p											
Priority & Allocations		p	p	p	e	p											
Quality Improvement		p	p	nm	p	nm											
<b>Bruce Turner</b>		p	p	p	nm	p											
Priority & Allocations		p	nm	nm	p	p											
Steering		p	p	p	nm	p											
<b>Steven Vargas</b>		p	p	p	nm	p											
Steering		p	p	p	nm	p											
<b>David Watson</b>		p	p	p	nm	p											
Operations		p	p	nm	p	nm											
<b>Larry Woods</b>		p	p	p	nm	e											
Comp HIV Plan		p	nm	nm	e	e											

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	
<b>EXTERNAL MEMBERS</b>	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	
Kevin Aloysius													
Comp HIV Plan		p	nm	nm	e	a							
Johnetta Evans-Thomas													
Affected Community		p	a	nm	a	a							
Denis Kelly													
Comp HIV Plan		p	nm	nm	p	p							
Michael Kennedy													
Quality Assurance		p	p	nm	p	nm							
Tam Kiehnoff													
Comp HIV Plan		p	nm	nm	p	p							
Osaro Mgbere													
Comp HIV Plan		p	nm	nm	a	a							
Alex C. Moses													
Quality Improvement		p	p	nm	p	p							
Esther Ogunjimi													
Comp HIV Plan		p	nm	nm	p	p							
Lionel Pennamon													
Affected Community		p	p	nm	a	a							
Quality Improvement		e	p	nm	a	nm							
Pete Rodriguez													
Quality Improvement		e	p	nm	p	nm							
Viviana Santibanez													
Affected Community		p	a	nm	a	a							
	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	

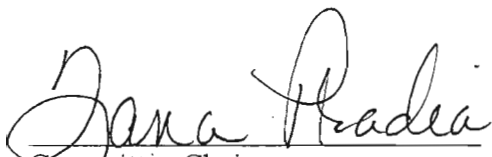
**2016 QUARTERLY REPORT  
OPERATIONS COMMITTEE**

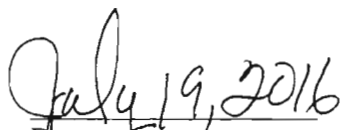
(submit July 2016)

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

1. Design and implement Orientation for Council members and new external committee members in January and February 2017.  
**Status:** *on going. Date & location already determined*
2. When necessary, address member needs for additional orientation and training, including through the Committee Mentoring Program. (Example: create more training for mentors and a "Frequently Asked Questions" form. The information for this document can be gathered from Project LEAP and others.)  
**Status:** *on going*
3. \*When necessary, review and revise the bylaws, policies, and procedures of the Ryan White Planning Council.  
**Status:** *on going. Resolved a large issue this year*
4. When necessary, review and revise policies and procedures for the Council support staff.  
**Status:** *on going*
5. \*Investigate and make recommendations regarding complaints and grievances brought before the committee in order to assure member/staff compliance with bylaws, policies, and procedures.  
**Status:** *Responded 2 issues*
6. \*Resolve any grievances brought forward.  
**Status:** *N/A at this time*
7. \*Make nominations to the CEO, which ensure the reflectiveness and representativeness of the Council.  
**Status:** *to be done in August*
8. Evaluate the performance of the Manager in conjunction with the Planning Council Chair and CEO.  
**Status:** *Done in December*
9. Ensure that the Council is complying with HRSA, County and other open meeting requirements.  
**Status:** *on going*
10. Annually, review the status of Committee activities identified in the Comprehensive Plan.  
**Status:** *N/A*

**Status of Tasks on the Timeline:**

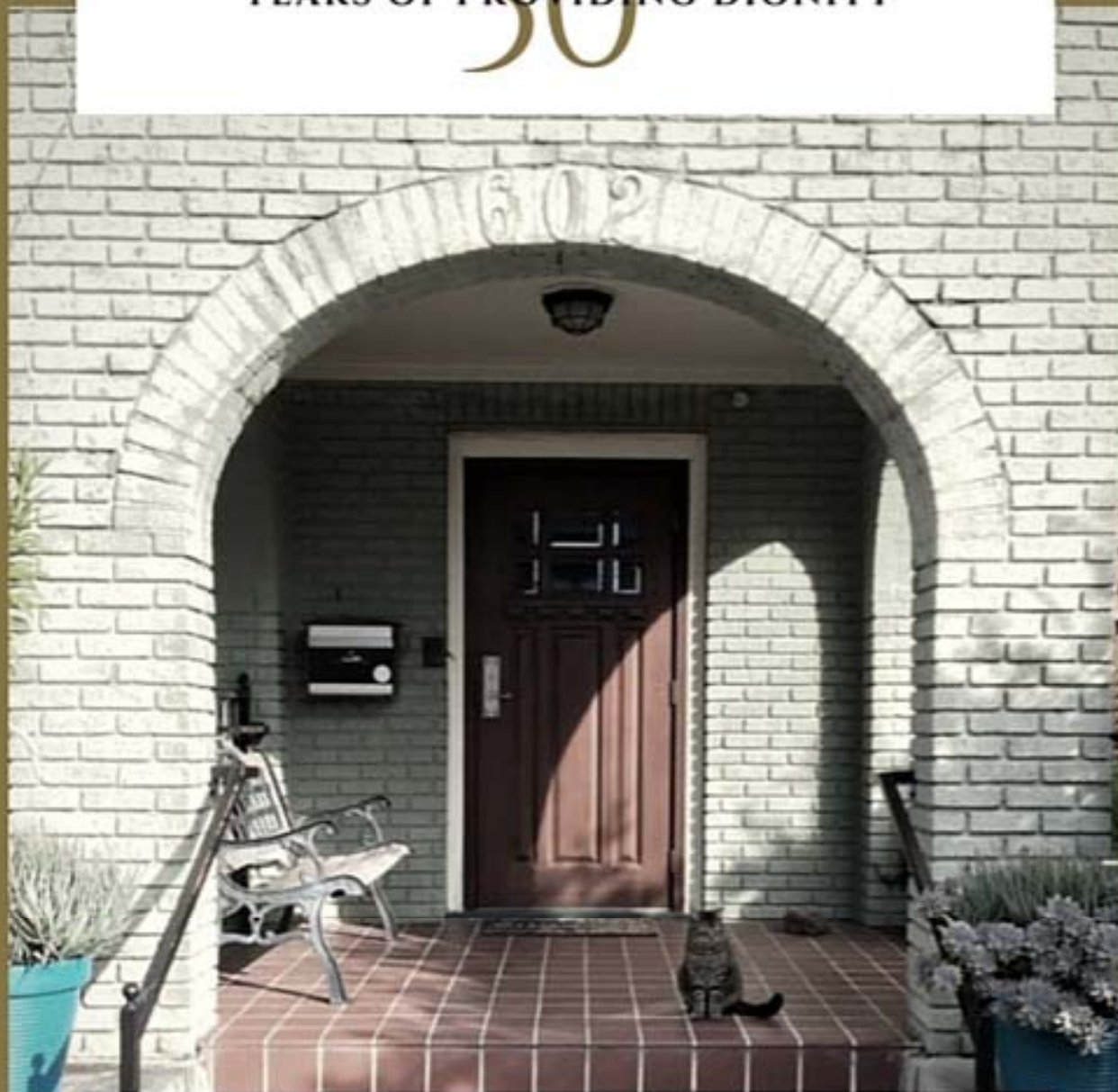
  
Committee Chairperson

  
Date

**FYI**

YEARS OF PROVIDING DIGNITY

# 30



YOU ARE CORDIALLY INVITED  
TO THE 30 YEAR RECEPTION FOR

## ΩMEGA HOUSE

SATURDAY AUGUST 27TH  
4:00PM TO 7:00PM

HIGH SCHOOL FOR THE PERFORMING AND VISUAL ARTS

4001 STANFORD STREET HOUSTON, TX 77006

RSVP TO [WWW.OMEGAHOUSE30.ORG](http://WWW.OMEGAHOUSE30.ORG)

AFFILIATED WITH HOUSTON AREA COMMUNITY SERVICES