HOUSTON AREA HIV SERVICES RYAN WHITE PLANNING COUNCIL

We envision an educated community where the needs of all persons living with and/or affected by HIV 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 living with and/or affected by HIV by taking a leadership role in the planning and assessment of HIV resources.

AGENDA

12 noon, February 8, 2018 Meeting Location: 2223 W. Loop South, Room 532 Houston, Texas 77027

I. Call to Order

- A. Welcome and Moment of Reflection
- B. Adoption of the Agenda
- C. Approval of the Minutes
- D. Award a 2017 Leadership Certificate to Tracy Gorden
- E. Training: To be announced

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 status. All meetings are audio taped by the Office of Support for use in creating the meeting minutes. The audiotape and the minutes are public record. If you state your name or HIV status it will be on public record. If you would like your health status known, but do not wish to state your name, you can simply say: "I am a person living with HIV", before stating your opinion. If you represent an organization, please state that you are representing an agency and give the name of the organization. If you work for an organization, but are representing 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. **Comprehensive HIV Planning Committee**
 - Item: Update on Special Study Social Determinants Recommended Action: FYI: Dr. Mgbere reported that the Houston Health Department experienced difficulty with running the Medical Monitoring Project software due to license expiry, but the issue was resolved. Dr. Mgbere anticipated the requested data would be available by the holidays.

Ted Artiaga and Steven Vargas, Co-Chairs

Cecilia Oshingbade, Chair, **RW** Planning Council

2018 Timeline of Critical Council ActivitiesOpen Meetings Act Training

• End of Year Petty Cash Procedures

Report from the Office of Support

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IV.

Item: Update on Special Study – Out of Care *Recommended Action:* FYI: See attached flyer, interview guide, starter codebook, and emerging themes. As of the December meeting, six interviews were completed, two were scheduled, and staff were screening calls to schedule more interviews. Interviews have been conducted in various locations which seems to be helpful for participants.

Item: 2018 Epidemiological Profile *Recommended Action:* FYI: Staff is working on population level data from the American Community Survey from the US Census Bureau for Houston/Harris County, the EMA, and the HSDA.

Item: 2018 Committee Goals

Recommended Action: FYI: The Committee voted to recommend expanding Goal #1 in 2018 to read: "Assess, evaluate, and make ongoing recommendations for the Comprehensive HIV Prevention and Care Services Plan and corresponding areas of the End HIV Plan."

Item: Committee Quarterly Report *Recommended Action:* FYI: See the attached Comprehensive HIV Planning Committee Quarterly Report.

- B. Affected Community Committee No report
- C. Quality Improvement Committee No report.
- D. Priority and Allocations Committee No report
- E. Operations Committee *Item*: 2018 Mentor/Mentee Luncheon *Recommended Action*: FYI: The 2018 Mentor/Mentee Luncheon had to be cancelled due to inclement weather.

Item: 2018 Council Orientation *Recommended Action*: FYI: Verbal update on the 2018 Council Orientation, which was hosted by the 2017 Operations Committee.

Rodney Mills and Tana Pradia, Co-Chairs

Denis Kelly and Gloria Sierra, Co-Chairs

Peta-gay Ledbetter and Bruce Turner, Co-Chairs

Ella Collins-Nelson and Johnny Deal, Co-Chairs

Tori Williams, Director

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VIII.	New Business (30 seconds/report)A. HOPWAB. Community Prevention Group (CPG)C. Update from Task Forces:	Krystal Shultz Denis Kelly
	 Sexually Transmitted Infections (STI) African American Latino MSM Transgender Hepatitis C Urban AIDS Ministry Youth 	Herman Finley S. Johnson-Fairley Gloria Sierra Ted Artiaga Viviana Santibanez Steven Vargas Ella Collins-Nelson
	D. HIV and Aging	Bruce Turner
	E. Positive Women's Network	Tana Pradia
	F. END HIV Houston	Venita Ray
	G. Ryan White Part C Urban and Part D	Nancy Miertschin
	H. Texas HIV Medication Advisory Committee	Nancy Miertschin
	I. Texas HIV Syndicate	Amber Harbolt
	J. Legislative Updates	Denis Kelly
	K. Texans Living with HIV Network	Venita Ray
IX.	Announcements	

Report from Ryan White Grant Administration

Report from The Resource Group

Medical Updates

V.

VI.

VII.

X. Adjournment

Carin Martin, Manager

Shital Patel, MD

S. Johnson-Fairley, Health Planner

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 living with and/or affected by HIV by taking a leadership role in the planning and assessment of HIV resources.

MINUTES

12 noon, Thursday, December 14, 2017 Meeting Location: Ryan White Offices, 2223 W. Loop South, Rm 532; Houston, Texas 77027

MEMBERS PRESENT	MEMBERS PRESENT	OTHERS PRESENT
Cecilia Ross, Chair	Shital Patel	Bobby Cruz
Tracy Gorden, Vice Chair	Tana Pradia	Hugo Perez, HCPHS
Carol Suazo, Secretary	Teresa Pruitt	Adrian Stuart, HCPHS
Ted Artiaga	Viviana Santibanez	
Connie Barnes	Gloria Sierra	STAFF PRESENT
David Benson	Isis Torrente	Ryan White Grant Administration
Skeet Boyle	Steven Vargas	Carin Martin
Bianca Burley	Larry Woods	Heather Keizman
Ella Collins-Nelson		Tasha Traylor
Amber David		
Johnny Deal	MEMBERS ABSENT	The Resource Group
Evelio Salinas Escamilla	Curtis Bellard	Sha'Terra Johnson-Fairley
Angela F. Hawkins	Herman Finley, excused	
Arlene Johnson	Paul Grunenwald, excused	Office of Support
Denis Kelly	J. Hoxi Jones, excused	Tori Williams
Peta-gay Ledbetter	Allen Murray, excused	Amber Harbolt
Tom Lindstrom	Robert Noble	Diane Beck
Osaro Mgbere	Krystal Perez, excused	
Nancy Miertschin	John Poole	
Rodney Mills	Venita Ray, excused	

Call to Order: Cecilia Ross, Chair, called the meeting to order at 12:10 p.m.

During the opening remarks, Ross said that Chris and Ramiro asked her to thank members of the Planning Council and staff for all of the well wishes, food and more that they have received. They feel loved and cared for. Ross extended thanks to the following individuals who gave up their Saturday mornings to help with Road 2 Success on November 4th and Camino hacia tu Salud on November 11th: Tana, Steven, Teresa, Isis, Carol and John P. The events could not have taken place without the generous gift of time and muscle provided by the volunteers. Flyers for the last Road 2 Success event were at the

information table. Members were asked to help distribute this information broadly. Ross continued by stating that the 2018-2019 Blue Books had arrived! The new book includes information about PrEP. Members were encouraged to go to the second floor and pick up a couple of cases of Blue Books for clients, co-workers and friends, once the meeting has adjourned.

Adoption of the Agenda: <u>Motion #1</u>: it was moved and seconded (Boyle, Johnson) to adopt the agenda. Motion carried unanimously.

Approval of the Minutes: <u>Motion #2</u>: it was moved and seconded (Barnes, Kelly) to approve the November 9, 2017 minutes. **Motion carried.** Abstentions: Benson, Collins-Nelson, Escamilla, Gorden, Johnson, Mgbere and Pruitt.

Training: People First Language: Tana Pradia, Poz Strike Force, presented the attached information.

Public Comment and Announcements: None.

Reports from Committees

Comprehensive HIV Planning Committee: Steven Vargas, Co-Chair, reported on the following: Special Study: Out of Care Interviews: Harbolt stated that six interviews have been conducted so far, two more are scheduled and she is screening calls daily. The committee will look at the emerging themes this afternoon. Please share the attached flyer.

Quality Improvement Committee: Gloria Sierra, Co-Chair, reported on the following:

Reports from the Administrative Agency – Part A/MAI: See the attached reports:

- FY17 Procurement, dated 11/15/17
- FY16 Service Utilization, dated 11/15/17

Reports from the Administrative Agency – Part B/SS: See the attached reports:

- FY17/18 Procurement Part B, dated 10/10/17
- FY16/17 Procurement State Services, dated 10/10/17
- Health Insurance Assistance Service Utilization, dated 10/09/17 and 09/12/17

FY 2018 Standards of Care and Performance Measures – Part A/MAI: <u>Motion #3:</u> To approve the attached documents entitled: Recommendations from the Ryan White Planning Council, which include comments from the following:

- 2017 Comprehensive Plan Activities
- Affected Community Committee
- Consumer Feedback
- Community Workgroup
- No recommended changes to the Performance Measures.

Motion Carried.

FY 2018-2019 Standards of Care and Outcome Measures – Part B/SS: The FY 2018-2019 Standards of Care for Part B and State Services will be reviewed by the Quality Improvement Committee in February 2018.

FY 2018-2019 DSHS Standards of Care for Health Insurance: No input recommended.

Affected Community Committee: Rodney Mills, Co-Chair, reported on the following:

2017 World AIDS Day: Committee members signed up to participate in a number of community World AIDS Day observances. See the attached calendar of events.

Road 2 Success: Members of the Affected Community Committee hosted Road 2 Success on Saturday, November 4, 2017 and Camino hacia tu Salud on Saturday, November 11, 2017. See the attached list with details regarding these two events and others.

Road 2 Success – January 13, 2018: Please note that the Affected Community Committee is hosting the final Road 2 Success in the series on Saturday morning, January 13, 2018. Please see the attached flyer, in English and in Spanish, and please take additional flyers from the sign-in table to distribute to friends who might benefit from participating in the event.

Quarterly Committee Report: See the attached 2017 Quarterly Committee Report.

Operations Committee: Nancy Miertschin, Co-Chair, reported on the following: Project LEAP 2017: See the attached Project LEAP 2017 Final Evaluation Report.

Project LEAP 2018: <u>Motion #4:</u> Approve the attached service definition with recommended changes for Project LEAP 2018. Motion Carried.

Project LEAP 2018: <u>Motion #5:</u> Approve the attached Student Selection Guidelines with no recommended changes for Project LEAP 2018. Motion Carried.

NOTE: Amendments to the bylaws require two-thirds (2/3) of the entire membership of the Council and must be submitted to full Council at least 15 days prior to voting. Members were notified in writing regarding the proposed amendments to the bylaws 15 days prior to voting.

Updated/Revised Council Policies: <u>Motion #6:</u> Approve the attached Ryan White Planning Council bylaws (recommended changes are underlined and in bold text). Motion carried unanimously.

Important Dates in 2018: Please note the following important meeting dates in 2018:

- Mentor Luncheon Thursday, January 18, 2018
- All-day Council Orientation Thursday, January 25, 2018

Quarterly Committee Report: Please see the attached Quarterly Committee Report.

Election of Officers for the 2018 Planning Council: See the attached list of nominees. Miertschin opened the floor for additional nominations; Torrente was nominated for Chair and Kelly and Torrente were nominated for Vice Chair. Each candidate on the ballot stated their qualifications for their respective positions.

Ballots were distributed. Williams reminded members that, per the election policy, voters must write their name on each ballot. Ballots without the voter's name will not be counted in the election results.

While ballots were being tallied the following certificates were presented:

- Leadership members of the 2017 Steering Committee
- Appreciation members who are retiring and RWGA, TRG and OS staff
- Perfect Attendance for Council and/or standing committees

Ross also acknowledged the individuals who attended the presentation of the World AIDS Day Resolution at Commissioner's Court in November: Burley, David, and Miertschin.

The following individuals were elected by ballot: Chair - Cecilia Ross and Vice Chair - Skeet Boyle.

<u>Motion #7</u>: it was moved and seconded (Vargas, Escamilla) to accept Carol Suazo as Secretary by acclamation. Motion carried unanimously.

Priority and Allocations Committee: No report.

Positive Connections Ad Hoc Committee: Steven Vargas, Co-Chair, reported on the following: Analysis of Smartphone-Based App Project: See two attached articles regarding evaluations of the Positive Links app.

Evaluation of the Houston Positive Links App Project: <u>Motion #8:</u> Approve the attached evaluation measures for the Houston Positive Links App Project. Motion Carried. Abstention: Boyle

Committee Meeting Updates: At the last meeting, Monday December 4, 2017, the committee came up with questions for an external evaluation. See attached. The Office of Support will work with the grant administration and Thomas Street Health Center staff to put together a project timeline. The committee will meet in the Spring to review the implementation report.

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

Report from Ryan White Grant Administration: Carin Martin, Manager, reported that we are in the final quarter of 2017 and they are working with providers to spend down funds. Emergency Financial Assistance was added to the primary care bundle and the RFP process has been completed. Medical Transportation and Rural Primary Care was also bid. They currently have an open position for a financial analyst.

Report from The Resource Group: Sha'Terra Johnson-Fairly, Health Planner, reported that they released an RFP and are receiving proposals. They are currently looking for external reviewers, including those living with HIV - please refer anyone who is interested to her. They have a position open for a planning assistant to work on the End HIV plan.

Medical Updates: Patel submitted the attached report.

Updates from Task Forces

African American: David said that members distributed approximately 1,000 HIV information packets on World AIDS Day at Fannin Street near the bus station. Bread of Life was there with water and snacks and the mobile unit tested 15 individuals.

Latino: Sierra said their members are hosting a health fair at the Denver Harbor Multiservice Center on Monday, December 18, 2017 from 10 am to 2 pm.

MSM: Artiaga submitted the attached report.

Hepatitis C: Vargas submitted the attached report.

Urban AIDS Ministry: David said that St. John's Church lit a candle three times in acknowledgement of World AIDS Day, touching about 1,500 people.

HIV and Aging Coalition: Kelly said they had their annual Christmas party on December 2, 2017; it was well attended and he thanked everyone for coming out to support them.

Positive Women's Network (PWN): Pradia said they are selling Christmas floral arrangements to raise funds to pay for registration for five women to attend a leadership summit in Myrtle Beach, South Carolina.

END HIV Houston: Vargas said that the workgroups were called together yesterday to talk about what they are doing and the processes for getting some of the work done. He is chairing the access to care workgroup and they are using the crosswalk that Harbolt and Ray developed to see what's been done so far and what has not. There was a conference call with the State regarding their plan, Harbolt was also on that call. Harbolt was able to share some of the recommendations for incarcerated/recently released

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Respectfully submitted,

to be implemented statewide.

Victoria Williams, Director

Draft Certified by Council Chair:

Final Approval by Council Chair:

Ryan White Part C Urban and Part D: Miertschin said that they received the notice of grant award for the Part C grant which starts again on January 1, 2018; it was a partial award.

Texas HIV Medication Advisory Committee: Miertschin said that they will be meeting January 5, 2018 in Austin. There is one new drug up for approval.

Legislative Updates: Kelly said that there will be a vote Tuesday on the tax bill which includes some health care items.

Announcements: Ross said that this is the last meeting of the year. She thanked everyone for their participation and valuable input this year.

Adjournment: The meeting was adjourned at 1:31 p.m.

Date _____

Date _____

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Date _____

Council Voting Records for December 14, 2017

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Comprehensive HIV Planning Committee Report



Participate in the Houston Area Out of Care Special Study

If you are living with HIV, and have had at least two periods of 12 months or longer when you did not get HIV medical care, we want to hear about your experience!

Your answers are 100% anonymous. Participation in the study consists of a friendly 30-35 minute interview about your experiences leaving and getting back in to HIV care; we will provide a gift card and a meal for your time.

Our hope is that this study will generate several recommendations to enhance the Houston HIV system to help keep people healthy and in care.

To see if you qualify to participate in this study, call or email our office:

Phone: (713) 572-3724 Fax: (713) 572-3740 Email: Amber.Harbolt@cjo.hctx.net (Put "Special Study" in the subject line)

This study ends January 31, 2018 and gift cards are limited, so act soon!

If you have any questions about the study, the Ryan White Planning Council, or how you can be involved in planning HIV services in the Houston Area, please give us a call or send us an email. We would love to hear from you!

Houston Area Ryan White Planning Council Office of Support 2223 West Loop South, Suite 240 Houston, Texas 77027 Phone: (713) 572-3724 Fax: (713) 572-3740 www.rwpcHouston.org



Participe en el Estudio especial fuera de atención del Área de Houston

Si vive con VIH, y ha tenido por lo menos dos periodos de 12 meses o más en los que no obtuvo cuidado médico para VIH, ¡queremos escuchar sobre su experiencia!

Sus respuestas son 100% anónimas. La participación en el estudio consiste en una entrevista amistosa de 30 a 35 minutos sobre sus experiencias al dejar y regresar a los cuidado de VIH; le proporcionaremos una tarjeta de regalo y una comida por su tiempo

Nuestra esperanza es que nuestro estudio genere varias recomendaciones para mejorar el sistema de VIH de Houston para ayudar a las personas a mantenerse saludables y bajo atención.

> Para saber si califica para participar en este estudio, llame o envíe un email a nuestra oficina:

Teléfono: (713) 572-3724 *Fax:* (713) 572-3740 *Email:* Amber.Harbolt@cjo.hctx.net (Escriba "*Special Study*" en la línea de asunto)

Este estudio finaliza el 31 de enero de 2018 y las tarjetas de regalo son limitadas, ¡actúe pronto!

Si tiene cualquier pregunta sobre el estudio, sobre Ryan White Planning Council, o sobre cómo se puede involucrar en la planeación de servicios de VIH en el Área de Houston, por favor llámenos o envíenos un email. ¡Nos encantar escucharlo!

Oficina de Soporte de Ryan White Planning Council del Área de Houston 2223 West Loop South, Suite 240 Houston, Texas 77027 Teléfono: (713) 572-3724 Fax: (713) 572-3740 <u>www.rwpcHouston.org</u>

2017 Out of Care Special Study – Screening Questions

ID Number (See Log Sheet):

Date:

1. Have you been diagnosed with HIV?

Yes	Go to question #2
No	STOP. Participant is not eligible.

2. Since you were diagnosed, have you ever had a period of <u>12 months or longer</u> where you did not Seen a doctor for HIV, take HIV medication, or had a test for your HIV viral load or CD4 (t-cell) count?

Yes	Ask for the number of Out of Care periods:; then go to question #3
No	STOP. Participant is not eligible.

3. In the past 12 months, have you done any of the following?

	Yes	No (If <u>all</u> are "No", participant is currently Out of Care)
Seen a doctor for HIV		
Taken HIV medication		
 Had a test for your HIV viral load or CD4 (t-cell) count 		

4. *At the end of the survey*, ask for the callers Name and Mailing address to send their \$10 McDonald's gift card:

Name		
Address		
Apt #		
City, Zip Code		
Would you like Resource Guid	Yes 🗆	No 🗆

Out of Care Special Study Emerging Themes: Interviews 001-004

Emerging themes are concepts that begin to develop in the first phase of qualitative data analysis. Emerging themes are not representative of the whole sample and are not conclusions in themselves, but can indicate areas to delve into in the later stages of analysis.

- 1. The need for proactive education and service linkage for those newly diagnosed in emergencies rooms
- The need for proactive/warm hand-off coordination between pre-discharge planners and service linkage/case management for those recently released (ex: calling clients with reminder to come in for 1st appointment post-release)
- 3. Culture shift for newly diagnosed/new to Ryan White that could be contributing to the observed lack of awareness about services; new clients not knowing what wraparound services to ask for as they move from regular private/public care to Ryan White care system:
 - a. "I didn't know [about gas cards]. I thought it was like a regular doctor's office. You don't ask for gas at the doctor."
- 4. Teaching skills for self-advocacy to support retention and facilitate return to care
- 5. Stigma/fear of stigma in the workplace keeping people underemployed/OOC (rights of PLWH in the workplace, fear of disclosure, fear of job loss, stress from concealing, concerns about insurability at a new job).
- 6. Of this small sample, informants who experienced persistent homelessness entered or returned to care because another knowledgeable person within that social circle directed them to services. This may indicate an opportunity collaborating with/training lay health workers/community health workers to service as street/homeless "ambassadors" of HIV services available in Houston.
- 7. Special concerns for medication adherence for those engaged in sex work; carrying medication presents risks of disclosure, violence, and financial risk.
- Wraparound services being used for survival, rather than accessing and staying in care:
 a. I'll go [to the clinic for labs] one time, get that Q card, and you won't see me
 - a. I'll go [to the clinic for labs] one time, get that Q card, and you won't see me anymore."
- RW resource cycle for PLWH experiencing homelessness resulting in RW clients being technically "in care" for multiple years, but rarely on medications and experiencing decreasing health/quality of life issues (see next page)
- 10. Informants saw welcome/orientation/peer navigation procedure as helpful for PLWH entering a new clinic when compared to entering clinics run like a private medical office.
 - a. "Welcome, you're home now." versus "Private, nobody wants to be seen."

"Back on track (RW resources, d'sdiility/SSI) (Ned, SNAP, etc.) Back in cove for resources RW Clivents for After substrational 20+ years, "in care", but health decline and "High Horse " Reject medical care, and instead Use resources acquired for drugs (barter/left), surdual, or improve circumstances (housing, car, etc.) resource has Aten Health declines, VCD4, "Dynamite TVL, loss of HIU-progressive due HIV-progression due to not taking R QoL

Starter Codebook:

C – *Change* – Statements about what could be changed to improve the HIV prevention and care system

K – *Knowledge* – Statements regarding knowledge or lack of knowledge about HIV services (**Only code child nodes!**)

K-IK– *I Knew* – Statements regarding affirmative knowledge about HIV services

K-IDK – *I Didn't Know* – Statements regarding lack of knowledge about HIV services

O – Other – Other notable observations

OOC – *Reasons* OOC – Statements in which informants gave reasons for falling out of care

RTC – *Support RTC* – Statements in which informants stated what helped them return to care

2017 QUARTERLY REPORT COMPREHENSIVE HIV PLANNING COMMITTEE

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

1. *Assess, evaluate, and make ongoing recommendations for the Comprehensive HIV Plan.

Done throughout the year. Today made recommendations for 2018 adjustment to this goal.

- 2. *Determine the size and demographics of the estimated population of individuals who are unaware of their HIV status. Created FY18 EIIHA Plan
- 3. *Work with the community and other committees to develop a strategy for identifying those with HIV who do not know their status, make them aware of their status, and link and refer them into care. Created FY18 EIIHA Plan, currently ionducting an OOC study
- 4. *Explore and develop on-going needs assessment and comprehensive planning activities including the

identification and prioritization of special studies. Ongoing; OOCH study currently in pregress concurrently with social determinants special study.

5. *Review and disseminate the most current Joint Epidemiological Profile.

Committee Chairperson

Currently working on Epi Profile

12/14/2017

Houston Area HIV Services Ryan White Planning Council Office of Support 2223 West Loop South, Suite 240, Houston, Texas 77027 713 572-3724 telephone; 713 572-3740 fax

MEMORANDUM

To: Members, Ryan White Planning Council External Members, Ryan White Committees

Copy: Carin Martin

From: Tori Williams, Director, Office of Support

Date: January 25, 2018

Re: End of Year Petty Cash Procedures

The fiscal year for Ryan White Part A funding ends on February 28, 2018. Due to procedures in the Harris County Auditor's Office, it is important that all volunteers are aware of the following end-of-year procedures:

- 1.) Council and External Committee members must turn in all requests for petty cash reimbursements at or before 2 p.m. on Friday, February 9, 2018.
- Requests for petty cash reimbursements for childcare, food and/or transportation to meetings before March 1, 2018 <u>will not be reimbursed at all if they are turned in</u> <u>after March 30, 2018.</u>
- 3.) The Office of Support may not have access to petty cash funds between March 1 and May 31, 2018. This means that volunteers should give Rod the usual reimbursement request forms for transportation, food and childcare expenses incurred after March 1, 2018 but the Office may not be able to reimburse volunteers for these expenses until mid to late May 2018.

We apologize for this significant inconvenience. Please call Tori Williams at the number listed above if you have questions or concerns about how these procedures will affect you personally.

(OVER FOR TIMELINE)

March 1 Feb 9 Feb 28 March 30 .2018. 2018 .2018 2017. Beginning of Turn in all End of Turn in any remaining receipts fiscal year 2017 receipts fiscal year 2017. for fiscal year 2017 or you

No money

available to write

checks until April

the end of May

will not be reimbursed for

any expenses incurred between

March 1, 2017 and Feb. 28, 2018

J:\Council\2018 Documents\Memo - Council re Petty Cash - 01-25-18.doc

AFFECTED COMMUNITY

Meetings are on the Mondays following Council starting at 12 noon.

February 12	July 16
March 12	August 13
March 13*	September 17
April no meeting	October 15
May 14	November 12
June 18	December no mtg

COMPREHENSIVE HIV PLANNING

Meetings are on the second Thursdays starting at 2:00 pm:

February 8	August 9
March 8	September 13
April 12	October 11
May 10	November 8
June 14	December 13
July 12	

OPERATIONS

Meetings are on the Tuesdays following Council starting at 10 am:

February 13	August 14
March 13	September 18
April 17	October 16
May 15	November 13
June 19	December no mtg
July 17	

(as of 01/29/18)

PLANNING COUNCIL

Meetings are the second Thursdays starting at 12 noon:

February 8 March 8 April 12 May 10 June 14 July 12 August 9 September 13 October 11 November 8 December 6

PRIORITY & ALLOCATIONS

Meetings are on the fourth Thursdays starting at 12:00 pm:

February 22	July 26
March 13*	August 23
March 22	September 27
April 26	October 25
May 24	November no mtg
June 15, 18 & 19	December no mtg
<u>Wed</u> . June 27	

QUALITY IMPROVEMENT

Meetings are on the Tuesdays following Council starting at 1:00 pm:

February 13August 14March 13*September 18April 17October 16May 15November 13June 19December no mtgJuly 17July 17

STEERING

Meetings are on the first Thursdays starting at 12 noon:

February 1	Aug
March 1	Sep
April 5	Octo
May 3	Nov
June 7	Nov
July 5	Dec
	meet

August 2 September 6 October 4 November 1 November 29 December – meeting on Nov 29

*Joint meeting of the Affected Community, Priority and Allocations and Quality Improvement Committees.

** Time to be announced

BOLD = Special meeting date, time or place

Timeline of Critical 2018 Council Activities

(Revised 01-30-18)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location. The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 713 572-3724.

General Information: The following is a list of significant activities regarding the 2018 Houston Ryan White Planning Council. Consumers, providers and members of the general public are encouraged to attend and provide public comment at any of the meetings described below. For more information on Planning Council processes or to receive monthly calendars and/or meeting packets, please contact the Office of Support at 713 572-3724 or visit our website at: www.rwpchouston.org.

Routinely, the Steering Committee meets monthly at 12 noon on the first Thursday of the month. The Council meets monthly at 12 noon on the second Thursday of the month.

Thurs. Jan. 25	Council Orientation.
Thurs. Feb. 1	12 noon. First Steering Committee meeting for the 2018 planning year.
Feb. date TBD	10:00 am. Orientation for new 2018 External Committee Members.
Thurs. Feb. 8	12 noon. First Council meeting for the 2018 planning year.
Mon. Feb. 12	5:00 pm. Deadline for submitting Proposed Idea Forms to the Office of Support. The Council is currently funding, or recommending funding, for 17 of the 28 allowable HRSA service categories. The Proposed Idea Form is used to ask the Council to make a change to a funded service or reconsider funding a service that is not currently being funded in the Greater Houston area with Ryan White Part A, Part B or State Services dollars. The form requires documentation for why dollars should be used to fund a particular service and why it is not a duplication of a service already being offered through another funding source. Anyone can submit a Proposed Idea Form. Please contact the Office of Support at 713 572- 3724 to request a copy of the required forms
Feb. 22	12 noon. Priority & Allocations Committee meets to approve the policy on allocating FY 2018 unspent funds, FY 2019 priority setting process and more.
Feb. 22 March	
	2018 unspent funds, FY 2019 priority setting process and more.
March	 2018 unspent funds, FY 2019 priority setting process and more. EIIHA Workgroup meeting. 5 pm Deadline for submitting a Project LEAP application form. See April 4 for description of
March Thurs., March 1	 2018 unspent funds, FY 2019 priority setting process and more. EIIHA Workgroup meeting. 5 pm Deadline for submitting a Project LEAP application form. See April 4 for description of Project LEAP. Call 713 572-3724 for an application form.

(Continued)

Timeline of Critical 2018 Council Activities

(Revised 01-30-18)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location. The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 713 572-3724.

Thurs. April 5	12 noon. Steering Committee meets.
Thurs. April 12	12 noon. Planning Council meets.
	1:30 – 4:30 pm. Council and Community Training for the How to Best Meet the Need process. Those encouraged to attend are community members as well as individuals from the Quality Improvement, Priority & Allocations and Affected Community Committees. Call 713 572-3724 for confirmation and additional information.
Tentative: April 16 and/or 18	Workgroups for proposed ideas, as well as Outreach and Referral for Health Care and Support Services.
Tues. April 24	 10:30 am – 4:00 pm. How To Best Meet the Need Workgroups #1 and #2 at which the following services for FY19 will be reviewed: Ambulatory/Outpatient Medical Care (including Emergency Financial Assistance, Local Pharmacy Assistance, Medical Case Management & Service Linkage – Adult, Rural and Pediatric) Clinical Case Management Health Insurance Premium & Co-pay Assistance Medical Nutritional Therapy (including Nutritional Supplements) Mental Health Substance Abuse Treatment/Counseling Non-Medical Case Management (Service Linkage at Testing Sites) Oral Health – Untargeted & Rural Vision Care Call 713 572-3724 for confirmation and additional information. 3:00 pm – 5:00 pm. How To Best Meet the Need Workgroup #3 at which the following services will be reviewed: Early Intervention Services
	 Early Intervention Services Home & Community-based Health Services (Adult Day Treatment) Hospice Linguistic Services Transportation (van-based-Untargeted & Rural) Call 713 572-3724 for confirmation and additional information.
April 26	12 noon. Priority & Allocations Committee meets to allocate Part A unspent funds.
Mon. May 7	5:00 pm. Deadline for submitting Proposed Idea Forms to the Office of Support. (See February 12 for a description of this process.) Please contact the Office of Support at 713 572-3724 to request a copy of the required forms.

Timeline of Critical 2018 Council Activities

(Revised 01-30-18)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location. The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 713 572-3724.

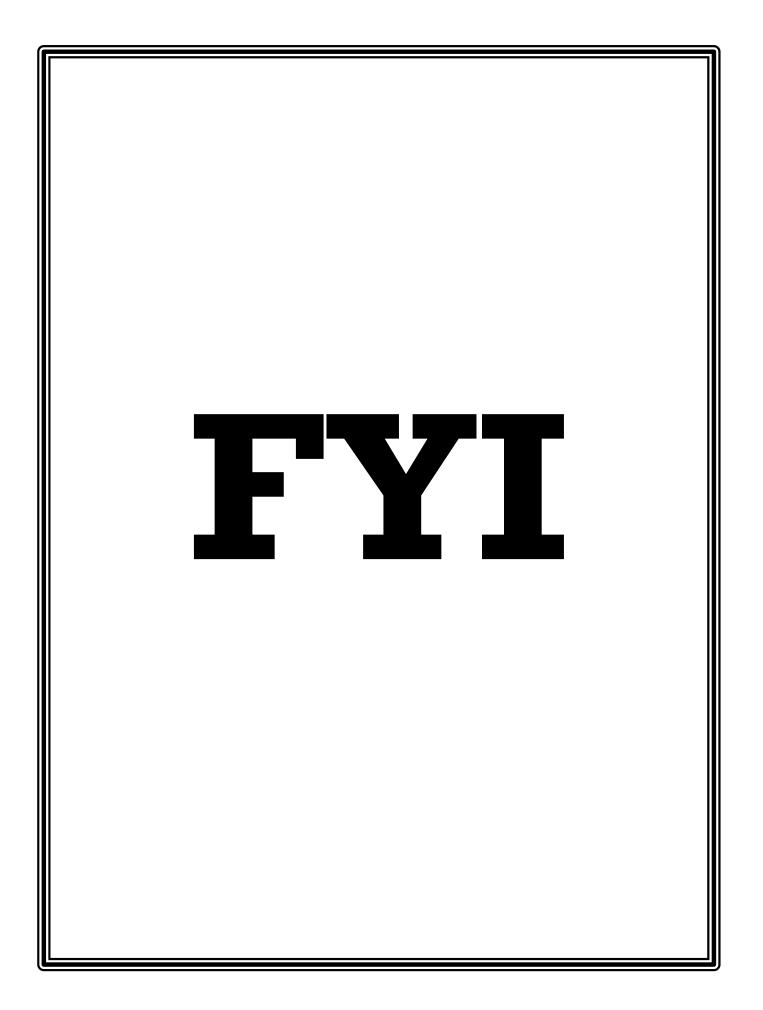
May 15	10 am. How to Best Meet the Need Workgroup meets for recommendations on the Blue Book. The Operations Committee reviews the FY 2019 Council Support Budget.
May 15	1 pm. Quality Improvement Committee meets to approve the FY 2019 How to Best Meet the Need results and review subcategory allocation requests . Draft copies are forwarded to the Priority & Allocations Committee.
Mon. May 21	7:00 pm., Public Hearing on the FY 2019 How To Best Meet the Need results.
Tues. May 22	10:00 am. Special Quality Improvement Committee meeting to review public comments regarding FY 2019 How To Best Meet the Need results .
May 24	12 noon. Priority & Allocations Committee meets to recommend the FY 2019 service priorities for Ryan White Parts A and B and <i>State Services</i> funding.
Thurs. June 7	12 noon. Steering Committee meets to approve the FY 2019 How to Best Meet the Need results.
Thurs. June 14	12 noon. Council approves the FY 2019 How to Best Meet the Need results. Project LEAP students present the results of their needs assessment to the Council, hence the meeting may be at an off-site location.
June 15, 18 & 19	11 am -4 pm. Special Priority & Allocations Committee meetings to draft the FY 2019 allocations for RW Part A and B and <i>State Services</i> funding.
June 19	1 pm. Quality Improvement Committee reviews the results of the assessment of the administrative mechanism and hosts Standards of Care training.
Wed. June 27	12 noon. The Priority & Allocations Committee meets to approve the FY 2019 allocations for RW Part A and B and <i>State Services</i> funding. LEAP students will be in attendance.
Mon. July 2	7 pm. Public Hearing on the FY 2019 service priorities and allocations.
Tues. July 3	10 am. Special meeting of the Priority & Allocations Committee to review public comments regarding the FY 2019 service priorities and allocations .
July/Aug.	Workgroup meets to complete the proposed FY 2019 EIIHA Plan.
Thurs. July 5	12 noon. Steering Committee approves the FY 2019 service priorities and allocations.
Thurs. July 12	12 noon. Council approves the FY 2019 service priorities and allocations.

Timeline of Critical 2018 Council Activities

(Revised 01-30-18)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location. The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 713 572-3724.

July 26	12 noon. If necessary, the Priority & Allocations Committee meets to address problems Council sends back regarding the FY 2019 priority & allocations . They also allocate FY 2018 carryover funds . (<u>Allocate even though dollar amount will not be avail. until Aug</u> .)
Thurs. Aug. 2	ALL ITEMS MUST BE REVIEWED BEFORE BEING SENT TO COUNCIL – THIS STEERING COMMITTEE MEETING IS THE LAST CHANCE TO APPROVE ANYTHING NEEDED FOR THE FY 2019 GRANT . (Mail out date for the August Steering Committee meeting is July 26, 2018.)
Aug. 13	Consumer Training on Standards of Care and Performance Measures.
Mon. Sept. 10	5:00 pm. Deadline for submitting Proposed Idea Forms to the Office of Support. (See February 12 for a description of this process.) Please contact the Office of Support at 713 572-3724 to request a copy of the required forms.
Sept. 17	Consumer-Only Workgroup meeting to review FY 2019 Standards of Care and Performance Measures.
Sept. 18	1 pm. Joint meeting of the Quality Improvement, Priority & Allocations and all Committees to review data reports and make suggested changes.
Sept. 17	Consumer-Only Workgroup meeting to review FY 2019 Standards of Care and Performance Measures.
Oct. 16	10 am. Review and possibly update the Memorandum of Understanding between all Part A stakeholders.
October or November	Community Workgroup meeting to review FY 2019 Standards of Care & Performance Measures for all service categories.
Oct. 25	12 noon. Priority & Allocations Committee meets to allocate FY 2018 unspent funds.
Nov/Dec/Jan.	Review the evaluation of 2018 Project LEAP. Operations Committee also hosts a How to Best Meet the Need Workgroup to make recommendations on 2019 Project LEAP.
November	The Resource Group contacts all stakeholders to see if changes need to be made to the Ryan White Part B/State Services Letter of Agreement.
Thurs. Nov. 8	12 noon. Council recognizes all external committee members.
Tues. Nov. 13	9:30 am. Commissioners Court to receive the World AIDS Day Resolution.
Sat. Dec. 1	World AIDS Day.
Dec. 6	12 noon. Due to a national meeting, the date for the December Council meeting will be earlier than usual. 2019 Council officers will be elected at the meeting.

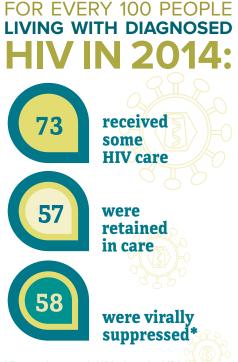


Evidence of HIV Treatment and Viral Suppression in Preventing the Sexual Transmission of HIV

HIV treatment has dramatically improved the health, quality of life, and life expectancy of people living with HIV (Cohen, 2011; Farnham, 2013; Farnham, 2013; Samji, 2013). Moreover, since breakthrough research in 2011 also showed the profound impact of HIV treatment in preventing the sexual transmission of HIV among heterosexual HIV-discordant couples, HIV treatment has transformed the HIV prevention landscape (Cohen, 2011). The Centers for Disease Control and Prevention (CDC) has worked with prevention partners across the nation to prioritize efforts to maximize the impact of HIV treatment in prevention and has responded with new initiatives that help diagnose HIV-infected individuals earlier, link or reengage them to effective HIV care and treatment, and support adherence to HIV treatment, with the ultimate goal of achieving viral suppression (https://www.cdc.gov/hiv/pdf/funding/announcements/ps18-1802/cdc-hiv-ps18-1802-factsheet.pdf).

These interventions across the care continuum (https://www.cdc.gov/hiv/ pdf/library/factsheets/cdc-hiv-care-continuum.pdf) are essential to help those living with HIV stay healthy, live longer, and reduce the risk of further transmission to partners. Additionally, to increase awareness of the full range of prevention strategies now available, CDC has worked to implement multiple education campaigns and provide online risk reduction tools and resources with information on different prevention strategies and their effectiveness (https://www.cdc.gov/actagainstaids/ index.html; https://wwwn.cdc.gov/hivrisk/; https://effectiveinterventions. cdc.gov/).

Over the past year, as new research has provided even stronger evidence



* People living with HIV who take HIV medicine as prescribed and get and stay virally suppressed have effectively no risk of sexually transmitting HIV to HIV-negative partners.

on the prevention benefit of HIV treatment and viral suppression, CDC has joined with other federal agencies as part of an effort led by the U.S. Department of Health and Human Services (HHS) to review the latest evidence and ensure that these findings are communicated in a way that is consistent and accurate. As part of CDC's continued efforts to communicate evidence around effective prevention strategies, this fact sheet summarizes the latest scientific evidence regarding the effectiveness of HIV treatment and viral suppression in preventing the sexual transmission of HIV, and provides an update on evolving prevention messages developed by the HHS workgroup,¹ as well as CDC's next steps to evaluate and update messages in our communications and prevention activities.

The Evidence

In 2011, the interim results of the HPTN052 clinical trial were released (Cohen, 2011) demonstrating a 96% reduction in HIV transmission risk among heterosexual HIV-discordant couples for those starting antiretroviral therapy (ART) versus those delaying ART initiation. In addition to the powerful initial results, subsequent analyses published in 2016 demonstrated that there were no HIV transmissions between these couples when the HIV-positive partner had a suppressed viral load (defined as having a viral load less than 400 copies per milliliter) (Cohen, 2016).

Some HIV infections were observed among couples in the treatment condition; however, most of these were not genetically linked to the primary HIV-positive partner in the study, indicating that they came from another partner outside the study. Only a limited number of linked sexual transmissions of HIV were observed; however, this

 The HHS workgroup includes senior leaders, communicators, and subject matter experts from the Office of HIV/AIDS Infectious Disease Policy (OHAIDP) in HHS, the Centers for Disease Control and Prevention (CDC), National Institutes for Health (NIH), Health Resources and Services Administration (HRSA), and Substance Abuse and Mental Health Services Administration (SAMHSA).

> National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention Division of HIV/AIDS Prevention



was while the HIV-positive partner was not virally suppressed. In other words, linked HIV transmissions only occurred either:

- In the months *after* the HIV-positive partner began ART but *before* the HIV-positive partner was virally suppressed, or
- When the ART regimen failed and the HIV-positive partner did not maintain viral suppression.

Two recently conducted studies, PARTNER and Opposites Attract, have reported similar results on the effectiveness of taking ART and achieving and maintaining viral suppression in preventing the sexual transmission of HIV — that is, no linked infections were observed while the HIV-positive partner was virally suppressed while the couples engaged in condomless sex with no exposure to pre-exposure prophylaxis (PrEP) (Rodger, 2016; Bavinton, 2017). In these two studies, viral suppression was defined as less than 200 copies per milliliter, although most HIV-positive participants were undetectable in the PARTNER study (<50 copies/mL; Rodger, 2016). These studies also quantified the extent of sexual exposure. Over 500 heterosexual couples, with about half having a male HIV-infected partner (PARTNER), and more than 650 male-male couples (Opposites Attract) from 14 European countries, Australia, Brazil, and Thailand engaged in over 70,000 episodes of condomless vaginal or anal intercourse, while also not taking PrEP, during approximately 1,500 couple years of observation.

The studies reported transmission risk estimates and their corresponding 95% confidence intervals as:

- PARTNER study (Rodger, 2016): 0.0 (0.00 0.30) per 100 couple years
- Opposites Attract study (Bavinton, 2017): 0.0 (0.00 1.56) per 100 couple years

When combining the data from both PARTNER and Opposites Attract studies, the combined transmission risk estimate is 0.0 (0.0 - 0.25) per 100 couple years (unpublished data). Relevant person-time data have not been reported for HPTN052 to be combined with these two studies. CDC is now working with HPTN052 investigators to examine these data. When HPTN052 data can be combined with these two studies, the upper bound of a combined transmission risk estimate is expected to be smaller than 0.25 per 100 couple years including additional years of follow-up time.

Updating Prevention Messages

Given the significance of these recent findings, HHS convened scientific and communication leadership across several federal agencies to review the latest evidence and develop updated messages to communicate that evidence to the public in a clear, concise, consistent, and accurate manner.

In September 2017, the HHS workgroup agreed on the following interim message, to be tested with multiple audiences, which summarizes the scientific evidence of the effectiveness of HIV treatment and viral suppression in preventing the sexual transmission of HIV:

People living with HIV who take HIV medicine as prescribed and get and keep an undetectable viral load have effectively no risk of transmitting HIV to their HIV-negative sexual partners.

The term "effectively no risk" was selected by the HHS workgroup as the interim language to describe the magnitude of the estimated risk of transmitting HIV to a sexual partner when an HIV-positive individual is taking ART daily as prescribed and then achieves and maintains an undetectable viral load. "Effectively no risk" was chosen to reflect the fact that there have been no linked infections observed in studies among thousands of sexually active HIV-discordant couples engaging in female-male and male-male sex without a condom or PrEP over several thousand person-years of follow-up, while the HIV-positive partner is virally suppressed.

Although these studies provide extremely strong evidence, they are based on a finite number of observations that result in point estimates (zero) and corresponding 95% confidence intervals that indicate the precision or uncertainty associated with those estimates. In these studies, the lower bounds of confidence intervals are all zero, but the upper bounds of the confidence intervals are very small but greater than zero, which implies the possibility of a non-zero risk. Although these three studies found no cases of HIV transmission over several thousand person-years of follow-up, these data, even when combined, cannot statistically rule out the possibility that the true risk is greater than zero.

Because "effectively no risk" might have different meanings in different audiences or populations, the HHS workgroup agreed that message testing was critical to evaluate the understanding of this interim message and to determine how best to communicate the evidence and potential challenges with successfully implementing this prevention strategy among people living with HIV and their sexual partners.

Maximizing the Effectiveness of the Prevention Strategy in Practice

The success of this prevention strategy is contingent on achieving and maintaining an undetectable viral load. Data show, however, that not all HIV-positive individuals on ART are virally suppressed, while even fewer maintain viral suppression over time. CDC's national surveillance data estimate that 58% of persons living with diagnosed HIV in the United States in 2014 were virally suppressed, defined as less than 200 copies/mL at most recent test (CDC, 2017). In addition, while most (about 80%) HIV-positive persons in the United States in HIV clinical care (defined as either receiving HIV medical care or having a viral load test) were virally suppressed at their last test, almost 20% were not (CDC, 2016; CDC, 2017; Marks, 2016). Also, about two-thirds achieved and maintained viral suppression over twelve months, which means about one-third (or about 33%) did not maintain viral suppression over that time period (CDC, 2016; Marks, 2016).

To help all individuals living with HIV and their partners get maximal benefit from this prevention strategy, it will be important to give providers, those living with HIV, and their partners clear information regarding the challenges with achieving and maintaining viral suppression. These challenges include the following:

- **Time to viral suppression:** Most people will achieve an undetectable viral load within 6 months of starting ART. Many will become undetectable very quickly, but it could take more time for some.
- **Importance of regular viral load testing:** Regular viral load testing is critical to confirm that an individual has achieved and is maintaining an undetectable viral load. Just because someone was virally suppressed in the past does not guarantee they are still virally suppressed. It is not known if viral load testing should be conducted more frequently than currently recommended for treatment to achieve maximal protection if relying on treatment and viral suppression as a prevention strategy.
- Adherence challenges: Taking HIV medicines as prescribed is the best way to achieve and maintain an undetectable viral load. Poor adherence, such as missing multiple doses in a month, could increase a person's viral load and their risk for transmitting HIV. People who are having trouble taking their HIV medicine as prescribed can work with health care providers to improve their adherence. If an individual is experiencing adherence challenges, other prevention strategies could provide additional protection until the individual's viral load is confirmed to be undetectable.
- **Stopping HIV medication:** If an individual stops taking their HIV medicine, their viral load can increase very quickly (e.g., within a few days) and eventually returns to around the same level it was before starting their HIV medicine. People who have stopped taking their HIV medicine should talk to their health care provider as soon as possible about their own health and consider using other strategies to prevent sexual HIV transmission.
- **Protection against other STIs:** Taking HIV medicine and achieving and maintaining an undetectable viral load does not protect you or your partner from getting other sexually transmitted infections. Other prevention strategies are needed to provide protection from STIs.

Next Steps in Communicating the Evidence

To help ensure prevention partners are aware of the effectiveness of this powerful HIV prevention strategy, CDC summarized the scientific evidence and the interim HHS-wide prevention message in a Dear Colleague Letter (https://www.cdc.gov/hiv/library/dcl/dcl/092717.html) for National Gay Men's HIV/AIDS Awareness Day (NGMHAAD) on September 27, 2017. CDC is currently updating key web pages to summarize the evolving science and message updates (https://www.cdc.gov/hiv/risk/art/index.html).

CDC is currently conducting message testing to better understand how to most effectively communicate the science on optimal use of HIV treatment and viral suppression for prevention and the real world requirements for its success. We will continue to update campaigns, websites, and other communications materials as messaging evolves and is improved based upon research findings.

References

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Coffee Social with Poztive people and Poztive Friends

Empire Café located at 1732 Westheimer Rd. Houston 77098. 1/2 PRICE Dessert and free COFFEE Refills. 2nd and 4th Monday from 2PM till 4PM.

We are meeting January 8th and January 22nd to have a social and meet old and new friends. This Social will be held every Month. Please join our NEW SOCIAL. For more info call Denis at 832-578-9891.



Website: AgingCoalition.org

FaceBook: HIV and Aging Coalition Houston

Meetings: 1:30 PM Third Monday of each month (educational)

Facilitators: Bruce Turner (at large) Fred Reninger (Montrose Center)

2018 Beneficiary of Houston Bears

2017 Beneficiary of Houston Firedancers

2018 Calendar Special events

Long-term Survivors Day celebration (first weekend in June) Christmas Party (Generally first weekend in December) Dates to be determined and posted on Web site and Facebook page

Suggested social activity: Coffee social second and fourth Mondays at Empire Cafe 2:00 PM