

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

Capturing the community's vision for an ideal system of HIV prevention and care for the Houston Area

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

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	jective to Be Measured	Recommended Data Source (Reference)	Baseline (year)	2021 Target	Notes
*	OBJECTIVE 1: Number of new HIV infections diagnosed in the Houston Area	DSHS eHARS	1,386 (2014)	↓ at least 25% ≤1004 (NHAS target)	Regionis EMA
*	OBJECTIVE 2: Percentage of individuals with a positive HIV test result identified through targeted HIV testing who are informed of their HIV+ status	DSHS HIV Testing & Awareness Data	94.4% (2014)	Maintain or increase ≥94.4% (local target)	Regionis EMA Target exceeds NHAS 90% goal
*	OBJECTIVE 3: 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)	Regionis EMA
*	OBJECTIVE 4.1: Percentage of new HIV diagnoses with an HIV stage 3 diagnosis within one year	DSHS Late Diagnoses Data	25.9% (2014)	↓ at least 25% =19.4% (DHAP target)	Regionis EMA
*	OBJECTIVE 4.2: Percentage of new HIV diagnoses with an HIV stage 3 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
*	OBJECTIVE 5: 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)	
*	OBJECTIVE 6: 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)	Regionis EMA
	OBJECTIVE 7: Proportion of Ryan White HIV/AIDS Program clients who are virally suppressed	CPCDMS	80.4% (2014)	Maintain or increase ≥80.4% (local target)	
*	OBJECTIVE 8: 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)	Regionis EMA
*	OBJECTIVE 9: Number of gay and bisexual men of color and women of color receiving pre- exposure prophylaxis (PrEP) education each year	HHD	To be developed	≥2000 (local target)	Among HIV-negative clients seen by HHD frontline staff (i.e. DIS and SLWs) and HHD-funded contractors

Strategy: Prevention and Early Identification

Goals:

- 1. Reduce new HIV infections
- 2. Increase awareness of HIV
- 3. Increase awareness of HIV status
- 4. Ensure early entry into care
- 5. Increase access to ARV therapy for treatment and prevention
- 6. Address the HIV prevention needs of high incidence communities
- 7. Reduce community risk factors for HIV infection

Solutions:

- 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
- 2. Expand opportunities for HIV testing for the general public and in high-incidence populations and communities
- 3. Increase the timeliness of the linkage to care for newly-diagnosed HIV+ individuals
- 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.
- 5. Expand opportunities for HIV and sexual health education for the general public and high-incidence populations and communities. (Originally Sol. 6)

Benchmarks

Strategy: Fill Gaps in Care and Reach the Out of Care

Goals:

- 1. Ensure early entry into care
- 2. Reduce Unmet Need
- 3. Increase retention in continuous care
- 4. Improve health outcomes for People Living with HIV (PLWH)
- 5. Increase viral suppression

Solutions:

- 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
- 2. Expand retention and engagement activities with in-care PLWH, focusing on community education system enhancements, and health literacy
- 3. Adopt strategies to retain and/or reengage PLWH to return to care, particularly those receiving care outside of Ryan White

Benchmarks

Strategy: Address the Needs of Special Populations

Goals:

- 1. Prevent new HIV infections among the special populations
- 2. Reduce barriers to HIV prevention and care for the special populations
- 3. Strengthen the cultural and linguistic competence of the HIV prevention and care system¹

Special Populations Selected Based on Available Data:

- Youth (aged 13-24)
- Homeless (incl. those who have persistent housing instability)
- Incarcerated/Recently Released (I/RR) (within the past 12 months)
- Injection Drug Users (IDU)
- Men who have Sex with Men (MSM)
- Transgender and Gender Non-conforming
- Women of Color
- Aging (aged 50 and up)

Solutions:

- 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.
- 2. Close gaps in targeted interventions and services to better meet the HIV prevention and care needs of special populations.
- 3. Improve data management systems to better reveal information on the HIV epidemiology, risks outcomes, and needs of historically under-sampled populations and support Data-to-Care.

Benchmarks

Strategy: Improve Coordination of Effort and Adapt to Healthcare System Changes

Goals:

- 1. Increase awareness of HIV among all Greater Houston Area health and social service providers
- 2. Increase the availability of HIV-related prevention and care services and providers
- 3. Reduce barriers to HIV prevention and care
- 4. Partner to address co-occurring public health problems that inhibit access to HIV prevention and care
- 5. Monitor and respond to state and national-level changes in the health care system

Solutions:

- 1. Launch proactive efforts to unify stake-holders and to engage new and non-traditional partners in achieving the HIV prevention and care mission
- 2. Support technical assistance and training to current HIV-related service providers and extend training to potential providers
- 3. Increase communication of HIV-related issues through media to educate and mobilize the public and providers
- 4. Optimize and explore new ways to utilize technology to: (a) link people at risk for or living with HIV (PLWH) to resources; and (b) assist providers with real-time referrals for clients to HIV prevention and care services
- 5. Strengthen coordination of data systems within the HIV care system, HIV prevention and care; and HIV prevention and care service providers and the broader health care delivery system

Benchmarks