

# HOUSTON EMA & HOUSTON HSDA CARE CONSORTIUM

# HIV/AIDS SERVICES, ELIGIBILITY AND OUTCOMES:

A report from the 1999 Provider Survey

**Prepared for** 

# Ryan White Title I Planning Council and the Houston HIV Service Delivery Area Care Consortium

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# **SERVICES**

#### INTRODUCTION

This document reviews all services reported by Title I and Title II. Each service is described and the report shows the unit of service reported, eligibility criteria and outcomes. The data reported is from the provider survey conducted in 1999. The methodology for the Provider Survey is fully discussed in the "Needs Assessment Report: Survey and Focus Group Report Of Consumers and Providers."

#### SERVICE CATEGORIES AND UNIT OF MEASURES

The service categories used in Houston and their corresponding units of care are shown in Table 1 below, based on Consortium ranking. Table 2 shows the differences in Consortium and Council services and rankings of services for 2000-2001. A brief description of each service follows, including a description of the services offered by each provider and their expected outcomes. The information presented is based on the 1998-1999 Ryan White Title I service category definitions, descriptions provided in the Blue Book and information obtained from the 1999 provider survey. In some instances, provider names are given for a service but the description is blank. This indicates that records show that they provide the service, but no provider survey was submitted or information was left blank/incomplete.

**Table 1 Services & Unit of Measurement** 

(Based on Consortium 2000- 2001 Priorities)

SE	RVICES AND SUBSERVICES	UNIT OF SERVICE
1.	Outpatient Medical Care	
	1.1. Appointments with a doctor, nurse or their assistants in an office or clinic for a problem or to monitor HIV infection	Visit
	1.2. Lab tests for infections such as viral loads, t-cell counts	Test
	1.3. Nutritional Counseling	Visit
	1.4. Women's Primary Care	Visit
	1.5. Vision Care	Visit
2.	Drug Reimbursement	Per treatment or
	<ol> <li>Drug reimbursement - Assistance in paying for HIV related drugs – ADAP &amp; HIV HOPE</li> </ol>	prescription and per visit
3.	Case Management	15 min increments
	<ol> <li>Case management – someone who helps a client coordinate HIV/ AIDS health care (intake, follow-up, other)</li> </ol>	
	3.2. Medical case management (only funded as case management)	
4.	Transportation	
	4.1. General Transportation – assistance to access physical or mental health care on a regular or emergency basis	One way
	4.2. Transportation Voucher Program – including Metro bus tokens, passes and gas vouchers	Token, pass
5.	Housing Assistance	
	5.1. Assistance in location or obtaining suitable housing	
	5.2. Obtaining housing in a supportive housing facility	
	5.3. Long-term or short-term housing	Per month
6.	Dental care	Procedure
7.	Food Bank	
	7.1. Food Pantry	Visit
	7.2. Meals at Thomas Street	Per person/per meal
	7.3. Nutritional Supplements	
	7.4. Home-delivered meals	Per person/per meal



SERVICES AND SUBSERVICES	UNIT OF SERVICE
	ONIT OF SERVICE
8. Direct Emergency Assistance	Month
8.1. Direct financial emergency assistance – including rent, utilities, telephone, relocation allowance	Month
8.2. Household items	Visit
	VISIL
9. Substance abuse treatment / counseling, advocacy and outreach	Dov
9.1. Substance abuse treatment (not in a residential setting)	Day
9.2. Substance abuse treatment in a 24 hour a day residential setting  10. Home health care	Day
	Hour or Visit
10.1. Home health care from nurse or professional home health agency that is provided	Hour or visit
through a case manager 10.2. Homemaker care	Hour
	Hour
11. Mental Health Therapies	15 min ingraments
11.1. Professional counseling – Mental health therapy with a psychologist or social	15 min increments
worker in individual or group sessions	Visit
11.2. Outpatient Psychiatric Services	VISIL
12. Respite Care	Half day (4 hr may)
12.1. Child Day Care – in-home reimbursement system	Half day (4 hr max)
12.2. Child Day Care – medically managed child day care 12.3. Adult Day Care	Day
	Day
12.4. Volunteers/Respite care teams  13. Client Advocacy	Hour
13.1. Legal services	Hour
	Hour
<ul><li>13.2. Permanency Planning – adoption/foster care assistance</li><li>13.3. Communication Services</li></ul>	2 Hours
14. Health Education / Risk Reduction	2 Hours
14.1. Health Education / Risk Reduction Sessions	Course
14.2. Newsletters, leaflets or booklets about HIV/AIDS treatment	Newsletter
14.3. Hotline or telephone information	
15. HIV Counseling and Testing	Derresine
16. Health Insurance Continuation	Per payment
16.1. Assistance paying health insurance premiums, co-payments, and deductibles	
17. Counseling Other	45 min in avana anta
17.1. Support groups/non-mental health	15 min increments
18. Rehabilitation Care	Physical Therapy
10 Valuntaar Dragrama	Session
19. Volunteer Programs	
19.1. Volunteers or peers who assist in household or personal tasks and provide support	Hour
(Buddy/Companions)	
19.2. Volunteers providing direct client services	
20. Hospice care / Home hospice care	
20.1. In-home hospice care or intensive care at home by a nurse and home care	Per day
assistants during the end stage of HIV infection	
20.2. Hospice care, out of the home, where terminally ill PLWH/A live during the end	Per day
stage of AIDS	_
21. Referral	Per referral
22. Outreach	Contact
22.1. Street outreach	0
23. Holistic or complementary therapy – including acupuncture, massage or chiropractic	Session
care from licensed practitioner	45
24. Employment assistance / vocational counseling and training	15 minutes
25. Leadership Development	Program



# Table 2 Houston Consortium and Council Priorities for FY 2000-2001

CONSORTIUM	Consortium Priority	Council Priority	COUNCIL
Primary Medical Care, Rural	1	1	Outpatient/Ambulatory/Nutritional Services
Medication Assistance	2	2	Drug Reimbursement
Transportation, Rural	3	4	Transportation
Non-rural gas vouchers (new)			
Housing	4	5	Housing
Food Pantry	5	7	Food Bank/ meals / nutritional
Food Pantry, Rural			supplements.
Case Management	6	3	Case Management
Case Management, Special Needs			
Primary Care Case Management			
Adolescent Services			
Day Care, Pediatric	7	12	Day or Respite Care
Dental	8	6	Dental Care
Counseling	9	11	Mental Health
Counseling, Rural			
Health Insurance Premiums	10	15	Health insurance
Legal	11	13	Client Advocacy / Legal / Permanency
Legal Rural			Planning
Hospice	12	21	Hospice Care
Household Items	13	8	
Home Health	14	10	Home Health Care
Home Health, Rural			
EMI/HERR	15	14	Health Education / Risk Reduction
Volunteerism	16	19	Buddy / companion
Nutritional Counseling	17	1	Outpatient/Ambulatory/Nutritional
Nutritional Couriseting	17	'	Services
Assisted Living	18	*	
Day Care, Adult	19	12	Day or Respite Care
Employment Assistance	20	**	
Interpreter Services	21	**	
Housing Administration	22	5	Housing
Peer Counseling	23	16	Counseling (Peer / Other)
<u> </u>		8	Direct Emergency Assistance
	*	9	Substance Abuse
	*	17	Program Support
	*	20	Planning Council Support
	*	22	Referral
	*	23	Outreach
	1		0 0 1

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# **DESCRIPTION OF SERVICES**

# **Ambulatory/Outpatient Medical Care**

# Clinic-based and Community Primary Care

Primary health care services include on site physician, physician extender, nursing, phlebotomy, radiographic, laboratory, pharmacy, intravenous therapy, home health care referral, licensed dietitian, patient medication education, and patient care coordination. The agency/clinic must provide continuity of care with inpatient services and subspecialty services (either on-site or through specific referral to appropriate agencies). Services by all providers are provided in rural communities outside Harris County directly or through sub-contract

# Services provided

- Continuity of care for all stages of adult HIV infection;
- Laboratory and pharmacy services including intravenous medications (either on-site or through established referral systems);
- Access to the Texas ADAP program (either on-site or through established referral systems);
- Access to compassionate use HIV medication programs (either directly or through established referral systems);
- Access to HIV related research protocols (either directly or through established referral systems);
- On-site pelvic exams as needed with appropriate treatment and referral.

# Qualifications

All services are provided by State licensed physicians, registered nurses, nurse practitioners, pharmacists, physician assistants, State licensed dietitian, social workers and ancillary health care providers in accordance with appropriate State licensing and/or certification requirements and with knowledge and experience of HIV disease. The providers and system are Medicaid/Medicare certified.

#### Women's Primary Care

Women's Primary Care provides a continuum of HIV medical services for eligible, indigent clients with HIV disease. These services include on-site physician, physician extender, nursing, phlebotomy, radiographic, laboratory, pharmacy, intravenous therapy, home health care referral, licensed dietitian, patient medication education, and patient care coordination. The provider provides continuity of care with inpatient services. The provider ensures that subspecialty physician, primary care nursing or ancillary health care provider services are available on-site or by specific established referral protocols to appropriate agencies upon primary care physician order.



# Services Provided

- Continuity of care for all stages of adult HIV infection;
- Laboratory and pharmacy services including intravenous medications (either on-site or through established referral systems);
- Access to the Texas ADAP program (either on-site or through established referral systems);
- Access to compassionate use HIV medication programs (either directly or through established referral systems);
- Access to HIV related research protocols (either directly or through established referral systems);
- Complies with the Adult Standards for HIV Primary Medical Care Components of Medical Practice and provides state-of-the-art HIV-related primary care medicine in accordance with the most recent National Institute of Health (NIH) HIV treatment guidelines.
- On-site pelvic exams as needed with appropriate treatment and referral.

# **Qualifications**

The provider is responsible for ensuring that services are provided by State licensed physicians, registered nurses, nurse practitioners, pharmacists, physician assistants, State licensed dietitian, social workers and ancillary health care providers in accordance with appropriate State licensing and/or certification requirements and with knowledge and experience of HIV disease.

# Patient Medication Education

# Program Description

- Educators are RNs or a Master level Mental Health Professionals.
- Clients are able to form an ongoing relationship with the assigned staff member doing the patient medication education.
- Clients who prescribed ongoing medical regimens (i.e. protease inhibitors) are assessed for adherence. Clients with adherence issues related to lack of understanding, must receive more education regarding their medical regimen. Clients with adherence issues that are behavioral or involve mental health issues are referred to counseling.

#### Vision Care

Services are provided at an eye care clinic or Optometrist's office. The service sub-categories include appointments with a doctor, nurse, or their assistants in an office or clinic for a problem or to monitor HIV infection and lab tests for t-cell counts and infections such as viral loads.



# Services Provided

Services include but are not limited to:

- External/internal eye health evaluations;
- Refractions;
- Dilation of the pupils;
- Glaucoma and cataract evaluations;
- CMV screenings;
- Prescriptions for eye glasses and over the counter medications;
- Provision of eye glasses (contact lenses are not allowable);
- Referrals to other service providers (i.e. Primary Care Physicians, Ophthalmologists, etc.) for treatment of CMV, glaucoma, cataracts, etc.

# Outpatient Care Providers, Eligibility and Outcomes

Amigos Volunteers in Education and Services, Inc., Baylor College of Medicine Health Care – Pediatric, Donald R. Watkins Memorial Foundation, Inc., Fort Bend Family Health, Harris County Hospital District, Montrose Clinic (including Vision Services), UTMB – Conroe Clinic, UT Health Science Center of Houston – including Women's Immunology at LBJ Hospital & Pediatric), and KINDERx Clinic (Kids In Need of Drug Evaluation and Re-treatment clinic).

The services offered by each provider and their expected outcome are described in Table 3.

**Table 3 Outpatient services** 

Ol	OUTPATIENT SERVICES			
Ar	Amigos Volunteers in Education (AVES)			
Eli	Eligibility Service Description Outcomes			
	HIV infection symptomatic or asymptomatic Harm reduction	Outpatient medical care-for women, men and adolescents (1.1-1.4). Treatment, education and advocacy – our clients receive education sessions during each doctor visit		
3)	approach Live in Harris or Fort Bend Co.	and are invited to our on-going workshops.		



# **OUTPATIENT SERVICES, cont...**

# **Baylor Teen Clinic**

# **Eligibility**

- or younger
- 2) The majority of clients are indigent.

# **Service Description**

1) Must be 21 years Well trained multi-disciplinary staff provides gender neutral, culturally sensitive services in a confidential setting. The programs are no cost to clients and target adolescents who are at high risk for school dropout due to lack of primary health care, chemical abuse, violence, and/or teen pregnancy. The clinics network with various community groups to address adolescent medical care needs. Services offered in the Teen Health Clinics include: family planning, HIV screening/prepost test counseling, STD screening, treatment and test of cure; prenatal care, evaluation for contraception, individual counseling, crisis intervention, complete medical exam, comprehensive lab profile, sports physicals, screening for substance and alcohol abuse, parenting education, selfesteem coaching, Early Periodic Screening Diagnosis and Treatment, and case management.

#### **Outcomes**

Current patient profiles identify the high-risk teen clients as primarily African-American (65%) with Hispanic (29%) and Anglo (11%). However, the proportion of Latino teens in the clinics is consistently growing, reflecting the changing population trends in Texas and the Southern region. In 1998, the clinics saw over 12,000 adolescent patients. Of this group, 20% were males. During this time period, the clinic diagnosed 11 HIV positive teens, screened approximately 3,000 patients for HIV and also found 2,730 cases of STDs.

There was an increase in the number of adolescents served by the clinics, number of referrals to our clinical programs, and an increase in Hepatitis B, immunizations and physical examinations. There was a reduction in the prevalence of STDs and HIVs, number of counseling sessions for individuals at risk for HIV infections, number of individuals agreeing to be tested for HIV, and decrease in participates in HIV pre/post test counseling



Ol	OUTPATIENT SERVICES, cont				
Do	Donald R. Watkins Foundation				
ΕI	igibility	Service Description	Outcomes		
1)	HIV infection symptomatic or asymptomatic or diagnosed with	Provide primary care visits to eligible clients, which may include site physician, physician extender, nurses, phlebotomy, radiography laboratory, pharmacy,	Improvement of health and living status for 750 unduplicated clients with limited or no income.		
2)	AIDS Must live in Houston EMA	intravenous therapy, home health care referral, dietitians, patient medication education, and patient care coordination.	Donald Watkins provided at least 10,000 units of primary care visits to		
3)	Must meet other Ryan White Title I requirements		persons living with HIV.		

Fc	Fort Bend Family Health			
Eligibility		Service Description	Outcomes	
1)	Poverty Level or	Offers primary health care, medical case management, labs, imaging, specialty care, medications.	Treatment adherence lead to maintenance or improvement of health.	
2)	All stages of HIV Live in Houston HSDA			

Harris County Hospital District			
Eligibility	Service Description	Outcomes	
Must be HIV + or	Primary Medical Care - Provide direct	HCHD expected to be able	
with AIDS diagnosis	outpatient primary medical care services to	to delay the progression of	
	people living with HIV and AIDS at Harris	the infection and allow	
	County Hospital District facilities and	clients to have an extended	
	coordinate other services needed by clients	productive quality of life.	
	that are not accessible in our facilities.	The number of clients that	
	Services provided on site in our facilities	have been able to return to	
	include appointments with a doctor, nurse or	a meaningful productive	
	their assistants for a client specific problem	life and helping others in	
	or monitoring the progression of the	the community to deal with	
	infection, lab tests, women's primary care,	the infection increased.	
	drug assistance, physical therapy, and pain		
	management.		
Must be HIV + or	Early Intervention Program - Early	Newly diagnosed clients	
with AIDS diagnosis	intervention, primary care, linkages to other	remained as healthy as	
	community services, dental care, outreach,	possible.	
	and HIV counseling/testing.		



Ol	OUTPATIENT SERVICES, cont				
Mo	Montrose Clinic				
Eli	Eligibility Service Description Outcomes				
1) 2)	Must be up to 500% of poverty HIV infection symptomatic or asymptomatic	Provide outpatient primary care, nutritional counseling, and vision care.	Achieved lower viral load, higher t-cell, and fewer opportunistic infections. Early detection of CMV. An increase in the ability of clients to return to work. Unexpectedly, no matter how much work is invested with clients, they are not compliant with meds.		

Te	Texas Children's Hospital			
Eli	Eligibility Service Description Outcomes			
1)	Pregnant women	Pediatric and adolescent outpatient medical	Increased # of research	
	(13-55 yrs old)	care, case management, referrals, direct	participants (greater than	
	and Pediatrics	emergency assistance, transportation, HIV	100). Decreased # of	
	(0-18 years old)	testing for children and adolescents, AIDS	perinatal transmission	
2)	HIV+ or with	clinical trials for children with HIV and	(maintained less than 5%).	
	AIDS diagnosis	pregnant women with HIV.	Decreased # of	
			adolescent/adult women	
			STDs. TCH has developed	
			a camp as a new outreach	
			program, and has	
			developed a liaison with a	
			pharmacy to assist in	
			medication non-	
			compliance. Unfortunately	
			and unexpectedly,	
			recognition of patient	
			noncompliance hindered	
			funding available for	
			transportation assistance.	

UTMB – Conroe Clinic Eligibility Service Description	Outcomes
1) HIV infection, symptomatic (above 100 CD4)  Offers primary health care.	The management of patient's HIV infection slowdown/reverse
2) Harm reduction approach	progression of the disease UTMB worked in a socially complex population. Some clients made their healthcare difficult to manage.



Ol	OUTPATIENT SERVICES, cont			
U1	UT Health Science Center of Houston, Dept. of Pediatrics			
Eli	Eligibility Service Description Outcomes			
1)	Must meet Ryan	UTHSC provides primary and subspecialty		
	White income	medical care to 80 HIV infected children and		
	parameters	100 HIV exposed newborns each year. The		
2)	Between ages 0-	100 exposed infants are not included in these		
	21	numbers.		
3)	HIV infection			
	symptomatic or			
	asymptomatic			

UT Health Science Center of Houston, Women's Immunology Center at LBJ			
Hospital			
Eligibility	Service Description	Outcomes	
1) Must live in Houston	Women's Primary Care and Case	UTHSC served 300	
EMA/HSDA	Management	women, adolescents, and children. UHSC lost a	
2) HIV infection		considerate amount of	
symptomatic or asymptomatic		patients because of managed care. UTHSC is	
asymptomatic		doing same work for same	
		money but not being	
		reimbursed at same rate.	

KII	KINDERx Clinic (Kids In Need of Drug Evaluation & Re-Treatment Clinic		
Eli	gibility	Service Description	Outcomes
1)	HIV exposed in-	Provides medical care, case management,	Kinderx Clinic one-stop-
	utero	and social services to children exposed to	shop has seen a 90%
2)	Substance high	drugs, alcohol and/or HIV/AIDS, and their	immunization rate and an
	risk	families. When funding is available,	increase compliance with
3)	Live in Houston	KinderX also provides nutritional counseling	appointments.
	EMA/HSDA	and education to HIV/AIDS infected men	It was able to provide
4)	Exposed in-utero	and women.	availability of staff on their
	to drugs, alcohol,		main-site and more
	and/or		outreach.
	HIV/AIDS.		



# **Drug Reimbursement**

Local (Houston EMA only) drug reimbursement program provides pharmaceuticals to patients otherwise ineligible for medications through private insurance, Medicaid/Medicare, State ADAP or other sources. Medications available are those in the State ADAP (Levels I and II) and local Medication Plus formularies. Patients must have income no greater than 500% of the Federal Poverty Index and are limited to a maximum of \$1,500.00 per month in medications through this program.

# Drug Reimbursement Providers, Eligibility, and Outcomes

The Assistance Fund (TDH administers the ADAP program).

**Table 4 Drug Reimbursement** 

DF	DRUG REIMBURSEMENT			
Th	The Assistance Fund			
Eli	gibility	Service Description	Outcomes	
1)	Income must be	Provide long & short-term help with HIV	This service was able to	
	500% of poverty	related meds for those with no insurance.	keep clients from getting	
2)	All ages eligible		debilitating infections and	
3)	HIV infection		hospitalization.	
	symptomatic or			
	asymptomatic			
4)	Must live in 6			
	county or 10 county			
	depending on			
	program			
5)	Valid Rx from			
	doctor			



# **Case Management**

Case Management is provided at no cost to HIV/AIDS infected persons who are not able to access services without assistance. Case managers can link their clients to appropriate services and help them develop the skills and resources they need to access services on their own. A single agency may have one targeted and one untargeted team.

#### Case Management Team

Case management provides both case management, service linkage, and outreach activities. Case management is a working agreement between a client and a case manager for a defined period of time based on the client's assessed needs. The purpose of case management is to assist clients with the procurement of needed services so that the problems associated with living with the disease are mitigated. Case management is primarily home and community-based. Service linkage is a working agreement between a client and a service linkage worker for a variable period of time, based on client need, during which information, referrals and service linkage are provided on an as-needed basis. The purpose of service linkage is to assist clients who do not require the intensity of a case management relationship, as determined by service need level. Service linkage is primarily office-based.

# Key Activities

- Identifying and screening clients;
- Assessing each client's medical and psychosocial history and current service needs;
- Developing and regularly updating a service plan based upon the client's needs and choices; and implementing the plan in a timely manner;
- Providing information, referrals and assistance with linkage to medical and psychosocial services as needed;
- Monitoring the efficacy and quality of services through periodic reevaluation;
- Advocating on behalf of clients to decrease service gaps and remove barriers to services is helping clients develop and utilize independent living skills and strategies.

Services target low-income individuals with HIV/AIDS who demonstrate multiple medical and psychosocial needs. This includes, but is not limited to: primary care; specialized care; alternative treatment; medications; placement in a medical facility; emotional support; mental health counseling; substance abuse treatment; basic needs (including food, clothing, and shelter); transportation; legal services; and vocational services. Services also target clients who cannot function in the community due to barriers. This includes, but not limited to: extreme lack of knowledge regarding available services; inability to maintain financial independence; inability to complete necessary forms; inability to arrange and complete entitlement and medical appointments; homelessness; deteriorating medical condition; psychiatric illness; illiteracy; language/cultural barriers; and/or the absence of speech, sight, hearing, or mobility.

Case Managers are to serve eligible clients, especially those underserved or unserved population groups which include: African American, Hispanic/Latino, Women and Children, Veteran, Deaf/Hard of Hearing, Substance Abusers, Gay/Lesbian/Transsexual, Homeless.



# Services Delivered

Case Management/Service Linkage services are integrated into the Houston Regional HIV Care Management System (HIV/CMS). They comply with HIV/CMS Case Management/Service Linkage Standards for Care and policies and procedures as they are completed and/or revised including linkage to the Houston Case Management Uniform Reporting System (URS) database.

One of the Team Members must function as the designated F.T.E. Supervisor. The designated Supervisor is required to have at least 10% direct service time with the clients of the Team. Case Managers/Service Linkage Workers spend at least 50% (1,040 hours per FTE) of their time providing direct case management services. Direct case management services include any activities with a client (face-to-face or by telephone), communication with other service providers or significant others to access client services, monitoring client care, and accompanying clients to services.

Case Managers are required to have at least one (1) face-to-face encounter per month with all of the Team's active clients in the clients' natural environment. Indirect activities include travel to and from a client's residence or agency, staff meetings, supervision, community education, documentation, and computer input. Direct case management activities are documented in the URS according to the Case Management/Service Linkage Standards of Care.

Populations are served in their natural environment and in a culturally competent manner. Culturally competent services include, but are not limited to: services that are provided in a language and format the client understands; interpreter services; communications devices for the deaf/hard of hearing; and staff with documented prior experience, training and/or education regarding the underserved/unserved populations.

# Personnel Qualifications

Providers comply with the Houston HIV/CMS Case Management/Service Linkage Standards of Care and Position Descriptions. At least one (1) of the Case Manager FTE positions on the Case Management/Service Linkage Team are fluent in both English and Spanish (both oral and written). Case management/Service Linkage staff have at least one year of paid HIV/AIDS experience.

# Rural Case Management Team

Same as above, except services to be provided in Houston EMA counties other than Harris.

# Hispanic/Monolingual Team

Same as above, except services to be provided by staff who are bilingual and bicultural.

# Children/Adolescents Team

Same as above, except staff must have prior experience with children and adolescents.



# Medical Case Management Team

Same as the above, with the following differences. The focus of the Medical Case Management Team concept is to provide short-term intensive intervention by a team of case managers which will address service linkage, medical needs and psychosocial needs depending on client need followed by long-term availability of information, referrals and intermittent interventions, if required. Clients at all levels of need are served.

# Medical Assessment and Consultation

Medical Assessment and Consultation is performed through the participation (either directly or via consultation) of the Registered Nurse member of the Team. It includes:

- Client assessments:
- Develop a medical service plan for each client and ensure its implementation;
- Home visits;
- Interaction and advocacy with medical providers on behalf of clients;
- Monitor medical services accessed by clients and follow-up as needed;
- Transition clients out of medical case management upon completion of medical service plan and medical stabilization;
- Medical Assessment and Consultation.

# Case Management Service Providers, Eligibility, and Outcomes

Amigos Volunteers in Education and Services, Inc. (provider survey not submitted), Covenant House Texas – Adolescent Case Management, Donald R. Watkins Memorial Foundation, Inc. (provider survey not submitted), Family Service Center (urban and rural), Harris County Hospital District, Houston Area Community Services, Montrose Clinic, Montrose Counseling Center, People With AIDS Coalition, UT Health Science Center at Houston, and Diocesan AIDS Ministry – A Program of Associated Catholic Churches.



# **Table 5 Case Management Services**

CASE MANAGEMENT SERVICES			
Amigos Volunteers in Education and Services, Inc.			
Eligibility Service Description Outcomes		Outcomes	

Covenant House Texas – Adolescent Case Management (Title IV)		
Service Description	Outcomes	
Case Management for adolescents, male and female.	Provided case management to 45-48 adolescents. Increased enrollment into clinical trials and participation in HIV+ support	
	groups. Unexpectedly, Covenant House had some clients with a reluctance to participate in clinical trials and support groups.	
	Service Description Case Management for adolescents, male	

Donald R. Watkins Memorial Foundation, Inc.			
Eligibility	Service Description	Description Outcomes	

Family Service Center			
Eligibility	Service Description	Outcomes	
HIV infection	The program provides case management	Provide case management	
symptomatic or	services to HIV/AIDS persons which	services to 410 clients and	
asymptomatic	include assisting clients with procurement	6,240 direct service hours.	
	of needed services so that problems		
	associated with living with the disease are		
	mitigated. Services are primarily home		
	and community based.		

Harris County Hospital Clinic			
Eligibility	Service Description	Outcomes	
1) Must live in Harris Co.	Provide the help clients need to coordinate their HIV/AIDS health care		
2) HIV infection,	regimen. Services provided include:		
symptomatic or	client's needs assessment, intake, refer		
asymptomatic	clients in the direction where they can receive the needed care, follow up to see		
	how clients are doing and help clients to		
	be compliant with their care regimen.		



CASE MANAGEMENT SERVICES, cont			
Houston Area Community Services			
Eligibility	Service Description	Outcomes	
Must be HIV + or	Intensive case management services and	HACS was able to stabilize	
diagnosed with AIDS.	service linkage to HIV+ persons.	clients thus fostering	
	_	independence.	

<b>Montrose C</b>	linic		
Eligibility	s	ervice Description	Outcomes
1) Must be 1 2) HIV infect symptoms asymptom	tion Pratic or vi	rovide case management services to WAs who are deaf, hard of hearing, isually impaired, and/or mentally etarded.	27 clients received case management services which provided advocacy and referral for clients in the hearing world throughout their needs. Several service providers were educated on dealing better with the deaf/hard of hearing populations for improved service delivery. Unexpected outcomes:  1). At times, the client's dependency on the case manager, who is hearing but can sign, exceeded appropriate levels resulting in the need for the case manager to work harder on empowering the client.  2). Increased the awareness that other disabled groups, such as with mental retardation, have increase need for services.

Mo	Montrose Counseling Clinic		
Eli	igibility	Service Description	Outcomes
	300% of poverty level	General case management and case management specifically for substance	Expected outcome: an increase in quality of life,
2)	HIV infection symptomatic or asymptomatic	users.	an increase in medication adherence, and decrease in homelessness.
3)	Must live in Houston EMA		
4)	Must meet TCADA requirements		



CA	CASE MANAGEMENT SERVICES, cont			
Pe	People With AIDS Coalition			
Eli	Eligibility Service Description Outcomes			
2)	poverty guidelines HIV infection symptomatic or asymptomatic	Case management provides advocacy between it and the service system to ensure quality and continuum of care.	PWA provided over 11,485 units of service to the Houston EMA.	
3)	Live in Houston EMA			

U٦	UT Health Science Center of Houston, Pediatrics Dept.			
Eligibility		Service Description	Outcomes	
1)	Must meet Ryan	Provide case management services to		
2)	White income requirements HIV infection	families affected by HIV/AIDS. Ours is a family service model. One third of our cases are pediatric cases.		
2)	symptomatic or asymptomatic	cuses are pediatric cuses.		

KI	KINDERx Clinic (Kids In Need of Drug Evaluation & Re-Treatment Clinic			
Eligibility		Service Description	Outcomes	
1)	HIV exposed in-	Provides medical care, case management,	Improvement of quality	
	utero	and social services to children exposed to	service. A one-stop-shop	
2)	Substance high risk	drugs, alcohol and/or HIV/AIDS, and	with a 90% immunization	
3)	Live in Harris Co.	their families. When funding is available,	rate and an increased	
	& surrounding area	KinderX also provide nutritional	compliance with appts.	
4)	Exposed in-utero to	counseling and education to HIV/AIDS		
	drugs, alcohol,	infected men and women.		
	and/or HIV/AIDS.			

Die	Diocesan AIDS Ministry, A Program of Associated Catholic Churches				
Eli	gibility	Service Description	Outcomes		
	HIV infection symptomatic or asymptomatic	General case management - Diocesan AIDS Ministry assists HIV+ clients to access Houston Care System and other	Case managers provided service to 80 clients per year.		
2)	Must live in 11 counties of Diocesan of Galveston-Houston	social services. It moves clients toward self sufficiency in maintaining care regimen.			
1)	HIV infection symptomatic or asymptomatic	Case management for women & children – Provides intensive case management, decreasing financial	As a new program twelve single, female head-of-household clients		
2)	Must live in 11 counties of Diocesan of Galveston-Houston	assistance and support groups focused on building life skills that lead to self- sufficiency. This is a 6-month program.	participated.		



# **Transportation**

# **General Transportation**

General Transportation service is defined as transportation service provided through the use of individual EMPLOYEE or CONTRACT drivers with vehicles/vans to eligible individuals. Taxi vouchers are used only in emergency situations. General Transportation service hours are from 7am to 10 p.m. on weekdays (non-holidays), and coverage must occur for Saturday social services and medical appointments.

#### Services Provided

To provide General Transportation services to access medical and/or support services for eligible individuals. Transportation will include round trips to single destinations and round trips to multiple destinations. Taxi vouchers are provided to eligible clients only for identified emergency situations. HIV/AIDS affected others may accompany the HIV/AIDS diagnosed clients as necessary.

# <u>Transportation Vouchering Program</u>

Transportation Voucher service is defined as providing vouchers for the essential transportation of eligible clients. Vouchers consist of METRO bus tokens and passes, and gas vouchers.

Taxi vouchers cannot be purchased under this service category. Transportation Voucher service hours are from 8am to 5pm on weekdays (non-holidays), with exceptions noted under agency requirements.

# Services Provided

The intent of this funding is to provide transportation services to access medical and/or support services for eligible individuals. Clients receiving METRO bus passes are ineligible for tokens. Gasoline Voucher services are authorized for use only after reasonable alternative transportation sources have been exhausted.



# **Table 6 Client Transportation**

CL	CLIENT TRANSPORTATION			
	e Life Center			
Eli	igibility	Service Description	Outcomes	
1) 2) 3) 4)	Must have low income 0-70 years of age Diagnosed AIDS Must live in	General Transportation – to medical and support services by auto.	Better access to providers/reduction to distance, time, money and barriers. Improved quality of life. The program	
5)	Houston EMA Must agree to and sign consent for transportation, rights and responsibilities.		achieved 348.977 units of service. 800 HIV+ individuals received transportation services. More people were able to access services because of the hours of service.	
1)	Must have low income	Rural Transportation – to medical and support services	The program achieved 35,687 units of service.	
2)	0-70 years of age	support services	100 HIV+ individuals	
3) 4)	Diagnosed AIDS Must live in Houston HSDA		received transportation services. Unexpectedly, denial of transportation	
(5)	Must agree to and sign consent for transportation, rights and responsibilities.		services to the affected populations occurred. Also there were not enough funds to cover cost of transportation to UTMB.	



# **Housing Assistance**

Housing assistance includes assistance in locating and obtaining suitable, on-going or transitional shelter; costs associated with finding a residence and/or subsidized rent; and residential housing services, which are the provision of housing assistance in a group home setting. Rental and utility assistance are not part of this service. (This service is not currently funded by Title I but other funding sources available.)

# Housing Assistance Service Provider, Eligibility and Outcome

AIDS Foundation Houston and Steven's House

**Table 7 Housing Assistance** 

RF	RESIDENTIAL HOUSING SERVICES			
	DS Foundation Hou			
	igibility	Service Description	Outcomes	
1)	HIV infection symptomatic or asymptomatic Substance free/abstinence Live in HSDA/EMA	Tenant-Based Rental Association - long-term rental assistance.	Decreased homelessness and increased independence.	
<ul><li>1)</li><li>2)</li><li>3)</li></ul>	Income eligibility is established by Housing Authority HIV infection symptomatic or asymptomatic	<b>Beecher Wilson -</b> Long-term project based rent assistance.	Offered permanent housing for a minimum of 30 clients.	
2)	HIV infection symptomatic or asymptomatic Substance free/abstinence Live in HSDA/EMA	<b>Life Road -</b> Housing and support services for homeless HIV+ men/women/children.	Decreased homelessness and substance abuse. Increased adherence, permanent housing, income/skills, and independence.	
1)	Must be female w/ HIV infection symptomatic or asymptomatic Substance free/abstinence Living in HSDA/EMA	A Friendly Haven - Comprehensive housing, support, case management, mental health services for homeless HIV+ women and children.	Decreased: substance abuse, homelessness, hospital visitation, emergency room visitation, and # of hospital days. Increased: adherence, skills/income, employment, transport, and childcare.	



RESIDENTIAL HOUSING SERVICES, cont					
Steven's House	Steven's House				
Eligibility	Eligibility Service Description Outcomes				
<ol> <li>HIV infection symptomatic or asymptomatic</li> <li>Substance free/abstinence</li> </ol>	Intermediate care facility, room and board, support groups in house, C.D. support groups, 24-hour supervision, males and females, free.	Enabled residents to return to independent living. A family atmosphere was created with many previous residents visiting for dinners, special occasions or just drop-ins.			



#### **Dental Services**

Dental services include restorative dental services, oral surgery, root canal therapy, fixed and removable prosthodontics; periodontal services include subgingival scaling, gingival, curettage, osseous surgery, gingivectomy, provisional splinting, laser procedures and maintenance. Oral medication (including pain control) for HIV patients 15 years old or older is based on a comprehensive individual treatment plan.

#### Services Provided

- Individual comprehensive treatment plan;
- Diagnosis and treatment of HIV-related oral pathology, including oral Kaposi's Sarcoma, CMV ulceration, hairy leukoplakia, xerostomia, lichen planus, aphthous ulcers and herpetic lesions;
- Diffuse infiltrative lymphocytosis;
- Standard preventive procedures including oral hygiene instruction, diet counseling and home
  care program; oral prophylaxis; restorative care; oral surgery; root canal therapy; fixed and
  removable prosthodontics; periodontal services, including subgingival scaling, gingival
  curettage, osseous surgery, gingivectomy, provisional splinting, laser procedures and
  maintenance.

The provider has mechanism in place to provide oral pain medication as prescribed for clients by the dentist.

#### Agency Qualifications

The dental provider has prior experience treating HIV disease and/or on-going HIV educational programs that are documented in personnel files and updated regularly.

# Dental Service Providers, Eligibility, and Outcomes

Amigos Volunteers in Education and Services, Inc. (provider survey not submitted) and Bering Omega Community Services.

**Table 8 Dental Care** 

DE	DENTAL CARE			
Be	Bering Community Service Foundation w/ Omega House			
		Outcomes		
1)	Must be 17 years of	Provide comprehensive dental	Provided 10,000 dental visits for the	
	age and above	services for HIV+ individuals	improvement of HIV+ client health.	
2)	Must be without	including standard preventative		
	dental insurance	procedures, HIV related oral	Unexpectedly, Bering has met clients	
	except for oral	pathology, dentures, tooth	with a number of unique diagnoses.	
	medicine	extractions, and denture repairs.		



# Food Bank

# Food Pantry

A facility that provides food and related grocery items to include personal hygiene, paper products, cleaning supplies and diapers. This service does not provide food to affected persons and individuals who are caregivers for HIV/AIDS infected persons. Up to 90% of funds can be used for the wholesale purchase of food and specialty items. In addition an agency has an option of purchasing food vouchers in an amount up to 10% of its award. Agencies planning to use this option must provide the County a copy of written guidelines for the issuance, recording and safeguarding of food vouchers and receive approval of these guidelines prior to issuing food vouchers.

#### Services Provided

Operation of a food pantry for residents of the Houston EMA. Food vouchers must be issued and recorded in the name of the client only. Tobacco, liquor and pet food or pet products may not be purchased.

#### Meals At Thomas Street Clinic

One light meal, which includes some combination of fresh fruit, sandwiches, prepackaged snacks and beverage appropriate for PLWH utilizing the Harris County Hospital District's Thomas Street Clinic.

#### Services Provided

The provision of light meals at Thomas Street Clinic. The District will provide and maintain a walk-in refrigerator for storage of light meals. The District also provides staff to distribute the food daily (Monday-Friday). Provider agency is responsible for the delivery of food by 10:00 a.m. each morning the Clinic is open and for the pick of unused (if any) food by 2:00 p.m. each afternoon. Unused food is delivered to an appropriate HIV/AIDS service provider for distribution to Ryan White eligible clients.

#### **Nutritional Supplements**

Up to a 90-day supply at any given time, per client, of the following nutritional supplements: L-Glutamine; Supplemental Protein Powder; Acidophilus; Multi-Vitamins; Milk Thistle; Alpha-Lipoic Acid.

# Services Provided

The provision of the eligible nutritional supplements to clients at no more than 300% of poverty with a written referral from a physician or licensed dietitian which specifies frequency, duration and amount. The per client cap may not exceed \$1,000.00 annually. A request to exceed the cap may be made to the administrative agent based on demonstrated need by client. Information on this service will at least be communicated to health care providers funded by Titles I and II.



# Food Bank Service Providers

AIDS Foundation Houston, Brentwood Economic Community Development Corp., Healthy Lunch Box, Inc. (provider survey not submitted), Houston Challenge Foundation, the Northwood AIDS Coalition, Riverside General Hospital (provider survey not submitted).

**Table 9 Food Bank** 

FOOD BANK				
AIDS Foundation Houston				
Eligibility Service Description Outcomes				
<ol> <li>1) 150% or less of poverty level</li> <li>2) HIV infection</li> </ol>	Food pantry services (Stone Soup) and a rural voucher program.	Decreased hunger, served a minimum of 1200 clients, and improved nutrition		
symptomatic or asymptomatic		knowledge.		
3) Live in Houston EMA/HSDA				

Br	Brentwood E.C.D., Inc.			
Eligibility		Service Description	Outcomes	
1)	Income eligibility is	Provides food and related items to include	By the end of the contract	
	based on Federal	cleaning supplies, personal hygiene items,	period, Brentwood	
	Poverty Guidelines	paper products and diapers to HIV-	provided at least 500	
2)	All ages are eligible	infected persons.	unduplicated eligible	
3)	HIV infection		clients with food and	
	symptomatic or		related grocery items by	
	asymptomatic		means of a food pantry	
4)	Live in Houston		program for HIV-infected	
	EMA		individuals.	

Health Lunch Box, Inc.			
Eligibility Service Description		Outcomes	

Ho	Houston Challenge Foundation			
Eli	gibility	Service Description	Outcomes	
1)	Below poverty level	Food pantry for indigent clients	Served 1287 people with	
2)	Must live in	affected/infected with HIV/AIDS.	quality and compassionate	
	Houston		pantry service	
	EMA/HSDA			
3)	Must not be using			
	another pantry and			
	get food stamps if			
	eligible			
4)	HIV infection,			
	symptomatic or			
	asymptomatic			



FC	FOOD BANK, cont				
No	Northwood AIDS Coalition				
Eli	gibility	Service Description	Outcomes		
1)	Must be below	Provision of food/hygiene supplies and	Served 84 unduplicated		
	500% poverty level	household cleaning products.	clients with a 90%+		
2)	HIV infection		satisfaction rating.		
	symptomatic or				
	asymptomatic or w/		Unexpectedly, Northwood		
	AIDS diagnosis		AIDS Coalition goals		
3)	Live in Houston		exceeded 25%.		
	EMA				

Riverside General Hospital			
Eligibility	Service Description	Outcomes	

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# **Direct Emergency Assistance**

# **Direct Emergency Assistance**

The term "emergency" is defined as a need for funds within 24 hours to 72 hours. Agency is required to acknowledge receipt of the assistance request within 24 hours. Emergency essential living needs include housing, utilities, rent, electricity, telephone, TTY, water and gas for HIV/AIDS infected individuals. There is a limit of \$500 per client/family in a contract year.

#### Services Provided

- Rent (late rental payments are excluded)
- Utilities (gas, water and electricity)
- Telephone bills/TTY, including long distance charges up to \$25.00
- Relocation allowance not to exceed \$200.00. (This one time allowance may be given to clients relocating out of the Houston EMA.) This relocation allowance is to be included in the \$500.00 overall limit. Clients are limited to utilizing this assistance once per contract year for each individual service need unless extreme hardship is documented by the contracting agency.

The following guidelines exist in providing these services:

- Assistance must be in the form of vouchers made payable to vendors, merchants, landlords, etc. No payments may be made directly to individual clients or family members.
- Agency must operate during regular business hours, Monday through Friday from 8:00 a.m. to 5:00 p.m.
- Agency must provide services to homebound clients.
- Agency may not require a client to have a case manager as a prerequisite for assistance.

# Household Items

To provide HIV/AIDS infected persons with household items to support their independent living. No more than 20% of these funds can be used for the purchase of household items.

# Services Provided

Pickup, delivery, and storage of donated household items including, but not limited to, furniture, small appliances, kitchen utensils, bathroom accessories, and linens; purchase of basic household items that are not donated including but not limited to mattresses, etc. Contractor will make appropriate provisions (on site or voucher) for clothing to eligible indigent clients.

#### Direct Emergency Assistance Service Provider, Eligibility, and Outcomes

Brentwood E.C.D., Inc., People With AIDS Coalition, and Diocesan AIDS Ministry - A Program of Associated Catholic Churches.



**Table 10 Direct Emergency Assistance** 

DIRECT EMERGENCY ASSISTANCE				
Brentwood E.C.D., In	Brentwood E.C.D., Inc.			
Eligibility	Service Description	Outcomes		
HIV infection symptomatic or asymptomatic	Brentwood provides short-term rent, mortgage, and utility assistance to a minimum of two hundred (200) unduplicated, HIV/AIDS clients, who met the eligibility standards.	By the end of the contract period, Brentwood provided housing and supportive services to a minimum of 200 unduplicated HIV/AIDS infected clients. The program outcomes provided more assistance to clients in rent, mortgage, and utility assistance to prevent homelessness.		

Pe	People With AIDS Coalition			
Eli	gibility	Service Description	Outcomes	
	HIV infection symptomatic or asymptomatic	Direct Financial Emergency Assistance – includes rent, utilities, telephone & relocation allowance in the form of	The DEA program served 411 clients with financial assistance with 181,843 in	
	Live in Houston EMA	vouchers not to exceed \$500 on an annual basis.	vouchers.	
3)	Have emergency need			
1)	Must be at poverty level	<b>New Beginnings Household Restart -</b> provides furniture and household items to	Provided services to over 6,500 clients in the	
2)	HIV infection symptomatic or asymptomatic	eligible clients in the Houston EMA.	Houston EMA.	
3)	Live in Houston EMA			

Diocesan AIDS Ministry - A Program of Associated Catholic Churches			
Eligibility	Service Description	Outcomes	
<ol> <li>HIV infection symptomatic or asymptomatic</li> <li>Must live in 11 counties of Diocesan of Galveston-Houston</li> </ol>	Provides emergency financial assistance to secondary clients with HIV/AIDS.	Provided emergency financial assistance to 400 secondary clients with HIV/AIDS.	



DII	DIRECT EMERGENCY ASSISTANCE, cont			
St.	St. John Vianney Catholic Church Social Service			
Eli	gibility	Service Description	Outcomes	
2)	Low income HIV infection, symptomatic or asymptomatic Must be member of	St. John Vianney provides emergency services to many people including a small number of persons with AIDS, and have an AIDS care team. Emergency assistance includes case management,		
4)	parish and living in following zip codes: 77077, 77079, 77055, 77043 Referred by other agencies	buddy/companion services, direct financial assistance, household items, and food bank.		



#### **Substance Abuse Treatment**

# <u>Substance Abuse Treatment/Counseling (Level 1 & 4)</u>

A unit of service is defined as one (1) hour of substance abuse treatment.

#### Services Provided

Services for all eligible HIV/AIDS patients with substance abuse disorders. Client must not be eligible for services from other programs/providers (i.e. MHMRA of Harris County) or any other reimbursement source (i.e. Medicaid, Medicare, Private Insurance) unless the client is in crisis and cannot be provided immediate services from the other programs/providers. In this case, clients may be provided services, as long as the client applies for the other programs/providers, until the other programs/providers can take over services. All services must be provided in accordance with the Texas Commission on Alcohol and Drug Abuse Chemical Dependency (TCADA) Treatment Facility Licensure Standards. Specifically, regarding service provision, services must comply with \$148.202. Services Required In All Programs, \$148.211 Level I Treatment and \$148.214. Level IV Treatment. Providers of Level I Treatment must make such treatment available, either directly or through sub-contract, to all Title I eligible clients (including rural).

# **₫**148.202. *Services Required In All Programs* states:

- Members of the client's treatment team shall demonstrate effective communication and coordination.
- Every residential client shall have a medical history and physical examination.
- Chemical dependency education shall follow a course outline that identifies lecture topics and major points to be discussed.
- The program shall provide education about the health risks of tobacco products and nicotine addiction.
- The program shall provide HIV education based on the Model Workplace Guidelines for Direct Service Providers developed by the Texas Department of Health.
- Clients shall have access to HIV counseling and testing services directly or through referral.
- Services shall be voluntary, anonymous, and not limited by ability to pay.
- Counseling shall be based on the model protocol developed by the Texas Department of Health.
- The program shall make testing for tuberculosis and sexually transmitted diseases available to all clients unless the program has access to test results obtained during the past year.
- Services may be made available directly or through referral.
- If a client tests positive, the program shall refer the client to an appropriate health care provider and take appropriate steps to protect clients and staff.
- The program shall: provide access to appropriate health care and mental health services directly or through referral; refer pregnant clients who are not receiving prenatal care to an appropriate health care provider and monitor follow-through; and refer clients to ancillary services necessary to meet treatment goals.

# **\$**148.213. *Level I Treatment* states:

- All clients admitted to Level I Detoxification programs shall be in need of detoxification.
- Every client shall have a medical history and physical.
- Residential clients shall have the medical history and physical within 24 hours of admission. If the facility cannot meet this deadline because of exceptional circumstances, the circumstances

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shall be documented in the client record. Until a client's medical history and physical is complete, staff shall observe the client closely and monitor vital signs.

- Outpatient clients shall have the medical history and physical before admission.
- The program shall provide continuous supervision for clients.
- In residential programs, direct care staff shall be awake and on site 24 hours a day.
- During day and evening hours, at least two awake staff shall be on duty for the first 12 clients, with one more person on duty for each additional one to 16 clients.
- At night, at least one awake staff member shall be on duty for the first 12 clients, with one more person on duty for each additional one to 16 clients.
- In outpatient programs, direct care staff shall be awake and on site whenever a client is on site. Clients shall have access to on-call staff 24 hours a day.
- If the program accepts clients with acute detoxification symptoms or a history of acute detoxification symptoms, the program shall have: a licensed vocational nurse or registered nurse on duty during all hours of operation; and a physician on-call 24 hours a day.
- Level of observation shall be based on medical recommendations and program design.
- A physician shall approve all medical policies, procedures, guidelines, tools, and forms, which shall include: screening instruments (including a medical risk assessment) and procedures; treatment protocol or standing orders for each chemical the program is prepared to detoxify; and emergency procedures.
- The clinical supervisor shall be a physician, physician assistant, advanced practice nurse, or registered nurse.
- The program shall: ensure continuous access to emergency medical care; provide clients access to
  mental health evaluation and linkage with mental health services when indicated; and use written
  procedures to encourage clients to seek appropriate treatment after detoxification.
- Direct care staff shall complete training as described in \$148.114 of this title (relating to Special Training Requirements).
- Staff shall help each client develop an individualized post-detoxification plan that includes appropriate referrals.

#### **\$**148.213. *Level IV Treatment* states:

- All clients admitted to intermediate programs shall be medically stable; and able to function with minimal structure and support.
- The program shall have enough staff to provide clients with adequate support and guidance.
- The program shall set limits on counselor caseload size that ensures effective, individualized treatment and rehabilitation. Criteria used to set the caseload size shall be documented.
- The program shall be adequately staffed during hours of operation to ensure effective service delivery.
- In residential programs, the awake direct care staff-to-client ratio shall be at least 1:16 during the hours clients are awake.
- For clients transferred from Level I or admitted directly to this level of treatment, counselors hall complete a comprehensive client assessment within five individual service days of admission in residential programs; and 45 calendar days of admission in outpatient programs.
- All clients hall have an individualized treatment plan within seven individual service days of admission in residential programs; and 45 calendar days of admission in outpatient programs.



- The facility shall deliver an average of two hours of structured activities per week for each client, including at least one hour of chemical dependency education or counseling. These activities shall be designed to help clients establish a healthy, independent lifestyle.
- The program shall offer chemical dependency counseling services.
- The program design and application shall include increasing levels of responsibility for clients and frequent opportunities for clients to independently apply knowledge and practice skills in nonstructured settings.

# Agency Qualifications

The facility must be licensed by the Texas Commission on Alcohol and Drug Abuse with Level I and Level IV treatment designations.

# Substance Abuse Treatment/Counseling (Levels 3 & 4)

A unit of service is defined as one (1) client visit for substance abuse treatment.

#### Services Provided

Services for all eligible HIV/AIDS patients with substance abuse disorders. Client must not be eligible for services from other programs/providers (i.e. MHMRA of Harris County) or any other reimbursement source (i.e. Medicaid, Medicare, Private Insurance) unless the client is in crisis and cannot be provided immediate services from the other programs/providers. In this case, clients may be provided services, as long as the client applies for the other programs/providers, until the other programs/providers can take over services. Services provided must be integrated with HIV-related issues which trigger relapse. All services must be provided in accordance with the Texas Commission on Alcohol and Drug Abuse Chemical Dependency (TCADA) Treatment Facility Licensure Standards. Specifically, regarding service provision, services must comply with \$148.202 Services Required In All Programs, \$148.213 Level III Treatment and \$148.214. Level IV Treatment.

#### **₫**148.202. *Services Required In All Programs* states:

- All services shall be delivered according to a written plan.
- The program shall be culturally appropriate for the population served.
- Members of the client's treatment team shall demonstrate effective communication and coordination.
- Every residential client shall have a medical history and physical examination.
- Chemical dependency education shall follow a course outline that identifies lecture topics and major points to be discussed.
- The program shall provide education about the health risks of tobacco products and nicotine addiction.
- The program shall provide HIV education based on the Model Workplace Guidelines for Direct Service Providers developed by the Texas Department of Health.
- Clients shall have access to HIV counseling and testing services directly or through referral.
- Services shall be voluntary, anonymous, and not limited by ability to pay.
- Counseling shall be based on the model protocol developed by the Texas Department of Health.
- The program shall make testing for tuberculosis and sexually transmitted diseases available to all clients unless the program has access to test results obtained during the past year.



- Services may be made available directly or through referral.
- If a client tests positive, the program shall refer the client to an appropriate health care provider and take appropriate steps to protect clients and staff.
- The program shall provide access to appropriate health care and mental health services directly or through referral; refer pregnant clients who are not receiving prenatal care to an appropriate health care provider and monitor follow-through; and refer clients to ancillary services necessary to meet treatment goals.

#### **§**148.213. *Level III Treatment* states:

- All clients admitted to Level III shall be medically stable; and able to function with limited supervision and support.
- The program shall have enough staff to meet treatment needs within the context of the program description.
- Counselor caseloads shall not exceed 1:16.
- Direct care staff shall be awake and on site during all hours of program operation. The direct care staff-to-client ratio shall be at least 1:16 during the hours clients are awake in residential programs; and all hours of operation in outpatient programs.
- For clients transferred from Level 1 or admitted directly to this level of treatment, counselors shall complete a comprehensive client assessment within five individual service days of admission.
- All clients shall have an individualized treatment plan within seven individual service days of admission.
- The facility shall deliver an average of ten hours of structured activities per week for each client, including at least five hours of chemical dependency education and/or counseling.
- The program design and application shall include increasing levels of responsibility or clients and frequent opportunities for clients to apply knowledge and practice skills in structured and nonstructured settings.

# **\$**148.213. *Level IV Treatment* states:

- All clients admitted to intermediate programs shall be medically stable; and able to function with minimal structure and support.
- The program shall have enough staff to provide clients with adequate support and guidance.
- The program shall set limits on counselor caseload size that ensures effective, individualized treatment and rehabilitation. Criteria used to set the caseload size shall be documented.
- The program shall be adequately staffed during hours of operation to ensure effective service delivery.
- In residential programs, the awake direct care staff-to-client ratio shall be at least 1:16 during the hours clients are awake.
- For clients transferred from Level I or admitted directly to this level of treatment, counselors hall complete a comprehensive client assessment within five individual service days of admission in residential programs; and 45 calendar days of admission in outpatient programs.
- All clients hall have an individualized treatment plan within seven individual service days of admission in residential programs; and 45 calendar days of admission in outpatient programs.
- The facility shall deliver an average of two hours of structured activities per week for each client, including at least one hour of chemical dependency education or counseling. These activities shall be designed to help clients establish a healthy, independent lifestyle.
- The program shall offer chemical dependency counseling services.



 The program design and application shall include increasing levels of responsibility for clients and frequent opportunities for clients to independently apply knowledge and practice skills in nonstructured settings.

# Agency Qualifications

The facility must be licensed by the Texas Commission on Alcohol and Drug Abuse with Level III and Level IV treatment designations.

# Substance Abuse Treatment Service Providers, Eligibility, and Outcomes

Harris County Hospital District, Montrose Counseling Center, Inc., and Riverside General Hospital.

**Table 11 Substance Abuse Treatment** 

SUBSTANCE ABUSE TREATMENT			
Harris County Hospital District			
Eligibility	Service Description	Outcomes	
<ol> <li>Must be HIV + or with AIDS diagnosis</li> <li>Must live in Harris Co.</li> </ol>	Level I substance abuse treatment (outpatient detoxification) and Level IV substance abuse treatment (2 x weekly group therapy). Baylor College of Medicine is subcontracted to provide substance abuse treatment services to the Harris County Hospital population.	No program outcome measurements were in place at the time this program was operated by HCHD.	

Mo	Montrose Counseling Center			
Eligibility		Service Description	Outcomes	
	Must be 300% of poverty level Must be 17 years of	Level III and IV outpatient treatment. Level III – 10 hrs group and 1-hour individual per week. Level IV – 2 hrs of	MCC expected to assist in risk reduction, relapse prevention, and harm	
3) 4)	age or older All stages of HIV Substance free / abstinence	group and 1-hour individual per week.	reduction. Unexpectedly, some clients needed level II residential. Since there	
5)	Must live in Harris Co. & EMA		was no one in Houston that was sensitive to or trained to do HIV, Montrose reported taking some people that might be better served in residential	



SL	SUBSTANCE ABUSE TREATMENT, cont			
Ri	Riverside General Hospital			
Eligibility		Service Description	Outcomes	
1)	Federal Poverty	Substance Abuse/Dependency Treatment	Expected to give 21 clients	
	Guidelines for	for clients with HIV/AIDS. This was a	substance	
	income eligibility	60-day Treatment Program from 8am-	abuse/dependency	
2)	Must be 18 and	1pm. Clients were also allowed to access	treatment; for three or less	
	older	other services not funded by Ryan White	clients to relapse and	
3)	Must live in Harris	(support group facilitated by a counselor	return to treatment. Only	
	and surrounding	x2 evening every week.)	two clients relapsed and	
	counties		returned to treatment.	
4)	Have a history of		Riverside was not able to	
	substance abuse and		reach 21 client's goal;	
	dependency		clients did not want to stay	
			in treatment 60 days, thus	
			unable to use \$75,000 total	
			grant.	



#### **Home Health Care**

## **In-home Skilled Nursing**

A unit of In-Home Skilled Nursing care is defined as one (1) skilled nursing visit. Physician ordered skilled nursing care provided by a Licensed Vocational or Registered Nurse for HIV patients in their place of residency.

#### Services Provided

- Medication administration;
- Medication supervision;
- Central line dressing changes;
- Starting intravenous lines;
- Intravenous line and wound dressing changes;
- Phlebotomy services;
- Palliative care services:
- Nutritional support and training (including tube feedings);
- Foley catheter insertion;
- Restorative nursing, training of family/significant others in patient care techniques;
- Ongoing monitoring of patient's physical condition and communication with attending physician(s).

#### **Provider Qualifications**

Skilled Home Health Nursing Care is provided by a Licensed Vocational or Registered Nurse. Services are initiated within 48 hours of receipt of physician's order. Services are available on a 24-hour basis. Provider must coordinate patient referrals with Harris County Hospital District Thomas Street Outpatient Home Care Coordinator and other outpatient/ambulatory health care providers, including inpatient discharge planners.

#### <u>In-home Intravenous Therapy</u>

A unit of In-Home Intravenous Therapy care is defined as one (1) in-home intravenous therapy visit. Physician-ordered intravenous medication therapies administered by a registered nurse in the patient's home or residential facility.

## Services Provided

- Intravenous line initiation (including med-line catheter insertion);
- Management of central lines, administration and supervision of intravenous therapies;
- Monitoring of patient's physical condition;
- Collaboration with referring physician(s).

Services are available on a 24-hour basis. Services are delivered within 48 hours of receipt of a physician's order. Provider must have a licensed pharmacist on staff or provide pharmacy services via contract. Provider must coordinate patient referrals and supplies with Harris County



Hospital District Thomas Street Outpatient Home Care Coordinator and other outpatient/ambulatory health care providers, including inpatient discharge planners.

#### Home Health Aide Care

A unit of Home Health Aide care is defined as one (1) hour of home health aide care. This service is defined as a home visit by a Home Health Aide for the purpose of performing specific tasks to allow the patient to remain in their place of residency. Phone contact is made with the patient by the agency within 24 hours of the date of the referral, as a part of the service delivery process. A home visit with the patient by the Registered Nurse is required within 72 hours of the referral. The care plan and consent for service are to be signed during the initial home visit. Services are re-evaluated every 60 days by the Registered Nurse, or more often if necessary, to determine the adequacy of the care plan. Services are authorized by a physician.

#### Services Provided

- Personal care assistance includes bathing, grooming, oral hygiene, shampooing hair and reminders to take medication;
- Personal immediate environmental care includes changing bed linens and light laundry (2 loads);
- Meal preparation/feeding/serving/clean-up;
- Basic communication skills include talking, listening, recording and observation;
- RN assessment/monitoring, supervision of the Home Health Aide.

#### Guidelines for Termination of Services

1) The goal of the service has been attained and the patient has been rehabilitated to a point where the patient is able to manage without agency assistance. 2) Three visits by the Home Health Aide to the patient's home and the patient is not available for service (does not include hospitalization, medical appointments) and the patient fails to notify the agency to cancel or to reschedule the home visit. 3) Patient's behavior becomes abusive, unpredictable or a threat to the employee's health and safety. 4) Maintenance of the patient's care can be assumed by the willing and able adult family members or other service providers (TDH, etc.). 5) Patient or patient's family, guardian (power of attorney) requests termination of services. Referring agency is notified when and the reason why the patient is terminated from service.

## **Qualifications**

Services are performed by individuals appropriately trained and certified in the provision of home health aide, skilled nursing and intravenous therapy services including infection control to HIV patients. The providing agency is licensed by the Texas Department of Health as a Home and Community Support Services Agency. The acceptable documentation for licensure is a copy of the agency's current Home and Community Support Services Agency license from the Texas Department of Health.



#### Homemaker care

A unit of service is defined as one (1) hour of homemaker care. Homemaking services are specific tasks provided to HIV patients to facilitate their maintaining independent living and to remain in his/her home.

Patients are assessed according to the Homemaker Assessment Form by the homemaker supervisor to determine the client's level of needs. The assessment process will include the development of a service plan by the professional staff member in collaboration with the patient and his/her significant other/adult family members. The service plan will outline the duties of the Homemaker. A copy of the service plan is placed in the patient's home during the initial inhome assessment. The service plan is be revised as needed, and will include a supervisory visit.

#### Services Provided

- Environmental care includes light housekeeping, light furniture dusting sweeping/mopping/vacuuming floors, changing bed linens and light laundry (2 loads);
- Shopping;
- Meal preparation/serving/clean-up;
- Basic communication skills include talking, listening, and recording.

## Guidelines for Termination of Services

1) The goal of the service has been attained, and the patient is able to manage without agency's assistance. 2) Maintenance of patient's care can be assumed by the patient's adult family or others (TDH, etc.). 3) Patient's or family's written request for termination of service. 4) Three visits by the homemaker to the patient's home to deliver service; patient not available for service. 5) The patient's behavior becomes abusive, unpredictable or a threat to the employee and service cannot be delivered in a safe environment. The referring agency is notified if the patient is terminated from service. Reason for termination must be communicated. A patient may receive a maximum of twenty (20) hours of care per seven day period. Contractor must receive written approval from Administrative Agency to provide additional services.

#### **Qualifications**

Services are performed by individuals appropriately trained in provision of homemaker services to HIV patients and must have professional supervision. The providing agency is licensed by the Texas Department of Health as a Home and Community Support Services Agency. The acceptable documentation for licensure is a copy of the agency's current Home and Community Support Services Agency license from the Texas Department of Health.

#### Home Health Care Service Providers, Eligibility and Outcomes

Alternate Resources of Texas, Family Service Center, Memorial Hermann Home Health Care, and Visiting Nurse Association of Houston.



# **Table 12 Home Health Care**

HOME HEALTH C	HOME HEALTH CARE		
<b>Alternate Resour</b>	Alternate Resources of Texas		
Eligibility			
HIV infection symptomatic or asymptomatic	Home health care includes skilled nursing, infusion therapy, home health aide, and homemaker services.	Experienced a reduction of hospital visits and length of stay; and improved quality of care which helped improve the client's quality of life	

Family Service Center			
Eligibility	Service Description	Outcomes	
HIV infection symptomatic or asymptomatic	The program provides homemaking services to HIV/AIDS persons. To assist them, FSC performs activities of daily living in their home. This assists and facilitates the ability of clients to maintain independent living.	<ol> <li>The program outcome was to provide 10,039 units of homemaker service to 150 clients.</li> <li>93% reported being helped in maintaining independence.</li> <li>High satisfaction rates</li> </ol>	

Μe	Memorial Hermann Home Healthcare			
Eli	Eligibility Service Description Outcomes			
1)	Must be diagnosed	Our business line is home health skilled	Provided quality patient care	
	w/ AIDS.	nursing care in the home.	in the home.	
2)	Live in Harris Co.			

Vis	Visiting Nurse Association of Houston		
Eli	gibility	Service Description	Outcomes
1)	Medically and	Home Health Care, including skilled	Provided 17,711 hours of
	financially indigent	nursing, Infusion Therapy, and Home	Home Health Care and
	per Federal Poverty	Health Aide Services; and homemaker	Homemaker services to
	Guidelines	services.	HIV+ clients in EMA and
2)	HIV infection or w/		3,148 hours of Home Health
	AIDS diagnosis		Care services to HIV+
3)	Live in Houston		clients in HSDA, in order to
	EMA/HSDA		maximize quality of life,
4)	Requires doctor's		prevent or delay
	order		institutionalization, and
			provide care in a culturally
			appropriate manner.
			Unexpectedly, VNA has
			seen a decline in utilization
			of these services by HIV+
			clients, due to new drug
			therapies preventing or
			delaying onset of symptoms.

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#### **Mental Health Therapy**

## **Professional Counseling**

All Title I eligible clients living in the EMA are provided access to this service. A unit of service is described as an individual counseling session lasting a minimum of 45 minutes or one group session lasting a minimum of 90 minutes. Support Groups are defined as professionally-led (licensed therapists or counselor) groups that comprise HIV positive individuals, family members, or significant others for the purpose of providing emotional support directly related to the stress of caring for an HIV positive person. Bereavement Counseling is individual counseling which assists clients in resolving grief and mourning associated with the death of a parent/partner/family member. Counseling must be initiated within 12 months of the death of the parent/partner/family member and is provided for a short-term duration to a Title I eligible affected child, partner or other family member.

#### **Target Population**

HIV/AIDS infected and affected individuals living within the Houston Eligible Metropolitan Area (EMA).

#### Client Eligibility

For individual therapy sessions (office and non-office based):

- Client must be HIV positive or the affected significant other of an HIV positive person.
- HIV positive client must have a DSM-IV Axis I diagnosis eligible for reimbursement under the State Medicaid Plan.
- Affected significant other is eligible for services only related to the stress of caring for an HIV positive significant other or for bereavement counseling.
- Client must have an income at or less than 500% of the Federal Poverty Level.
- Client must not be eligible for services from other programs/providers (i.e. MHMRA of Harris County) or any other reimbursement source (i.e. Medicaid, Medicare, Private Insurance) unless the client is in crisis and cannot be provided immediate services from the other programs/providers. In this case, clients may be provided services, as long as the client applies for the other programs/providers, until the other programs/providers can take over services.
- Medicaid/Medicare, 3rd Party Payer and Private Pay status of clients receiving services under this grant must be verified by the provider prior to requesting reimbursement under this grant.

## For support group sessions:

- Client must be either an HIV positive person or the significant other of an HIV positive person.
- Affected significant other is eligible for services only related to the stress of caring for an HIV positive significant other.



## Outpatient Psychiatric Services

All Title I eligible clients living in the EMA are provided access to this service. A unit of service is defined as one client visit for Outpatient Psychiatric Care.

#### Services Provided

- Diagnostic Assessments: comprehensive evaluation for identification of psychiatric disorders, mental status evaluation, differential diagnosis which may involve use of other clinical and laboratory tests, case formulation, and treatment plans or disposition.
- Emergency Psychiatric Services: rapid evaluation, differential diagnosis, acute treatment, crisis intervention, and referral. To be available on a 24-hour basis, emergency room referral is permitted.
- Brief Psychotherapy: individual, supportive, group, couple, family, hypnosis, biofeedback, and other psychophysiological treatments and behavior modification.
- Psychopharmacotherapy: evaluation and medication treatment of psychiatric disorders, including, but not limited to, anxiety disorders, major depression, pain syndromes, habit control problems, psychosis and organic mental disorders. Access to an on site pharmacy must be available.
- Rehabilitation Services: some, but not necessarily all, of the following: physical, psychosocial, behavioral, and cognitive training.

## Mental Health Therapy Service Providers, Eligibility and Outcomes

Amigos Volunteers in Education and Service, Inc. (provider survey not submitted), Baylor College of Medicine – Outpatient Psychiatric Care (provider survey not submitted), Donald R. Watkins Memorial Foundation, Inc. (provider survey not submitted), Family Service Center, Harris County Hospital District, and Montrose Counseling Center

# **Table 13 Mental Health Therapy**

MENTAL HEALTH THERAPY				
Amigos Volunteers in Education and Service, Inc.				
Eligibility Service Description Outcomes				
D - I - O - II - · · ·	CM - Pain - Outration Deval in			
Baylor College of	<u>of Medicine – Outpatient Psychiat</u>	ric Care		
Eligibility	Service Description	Outcomes		
Donald R. Watki	Donald R. Watkins Memorial Foundation, Inc.			
Eligibility	Service Description	Outcomes		



MENTAL HEALTH THERAPY, cont				
Family Service Co	Family Service Center			
Eligibility	Service Description	Outcomes		
Must be HIV+.	The program utilizes solution oriented counseling to enable an individual or family to be its own source of support during times of crisis by reactivating existing coping skills or developing new ones to solve their problems.	<ol> <li>1) 10% decrease in symptoms after 30 days of treatment.</li> <li>2) 3% increase in functioning at close of treatment.</li> <li>3) #Of unduplicated cases opened in 1998: 2,041.</li> <li>4) # Of hrs of clinical services provided in 1998: 12,947.</li> <li>5) 93% of clients reported their presented problem as resolved.</li> </ol>		

Harris County Hospital District			
Eligibility	Service Description	Outcomes	
<ol> <li>Must be HIV + or with AIDS diagnosis</li> <li>Must live in Harris County</li> </ol>	Basic psychiatry services including traditional psycho-pharmacotherapy, emergency and routine diagnostic assessments, brief psychotherapy, rehab and other non-pharmacologic services, stress management, EMG/EEG-based biofeedback, cognitive restructuring, memory retraining, and sleep hygiene education. Baylor College of Medicine is subcontracted to provide psychiatric services to the Harris County Hospital	No program outcome measurements had been developed at the time this program was operated by HCHD.	
diagnosis 2) Must live in Harris	emergency and routine diagnostic assessments, brief psychotherapy, rehab and other non-pharmacologic services, stress management, EMG/EEG-based biofeedback, cognitive restructuring, memory retraining, and sleep hygiene education. Baylor College of Medicine is subcontracted to provide psychiatric	developed at the time this program was operated by	

Montrose Counseling Center		
Eligibility	Service Description	Outcomes
	Individual professional counseling.	Stress reduction,
	Group counseling with people living with	medication adherence,
	HIV disease and caregivers.	coping skills, and support
		network.



## Day/Respite Care

## Volunteers/Respite Care Teams

The use of volunteers to provide social, emotional and physical care to HIV/AIDS infected individuals which includes training these volunteers to provide in-home bedside care/support services and providing supervision and support for respite care teams dealing with the stress of caring for these clients. The intent of all the volunteer programs is to provide direct "hands on" volunteer services and not volunteers for agency administrative assistance.

#### Services To Be Provided

The provider recruits, trains, coordinates and supports a pool of volunteers to service a broad geographical area. An agency may not provide outreach or case management services under this category (See Case Management Section).

## Day/Respite Care Service Providers, Eligibility, and Outcomes

Bering Omega Comm. Services

Table 14 Day/Respite Care

DAY/RESPITE CARE	DAY/RESPITE CARE		
Bering Community Service Foundation w/ Omega House			
Eligibility	Service Description	Outcomes	
Must be 18 years or older.	Adult day care - Up to 10 hrs of adult day care w/ services including the provision of nursing care, physical therapy, exercise programs, art groups, individual & group nutritional counseling, instructional workshops, healthy socialization, field trips, peer support groups and transportation.	Bering expected to empower the clients and provide an average of 16 adult day care visits per day. Unexpected was the high number of clients in assisted living.	
<ol> <li>Can be a caregiver or</li> <li>HIV infection symptomatic or asymptomatic</li> </ol>	In-home respite care – Bering provides volunteer services to clients in their home. These services will provide socialization, companionship, and emotional support.	Bering provided self- sufficiency and self-esteem to clients and relief to the client's caregivers; but, was surprised at the number of clients that live alone.	



#### **Client Advocacy**

A unit of service is defined as one (1) hour of comprehensive legal service provided to HIV/AIDS infected individuals and/or their legal representatives by an Attorney licensed to practice in Texas. Only time spent by the Attorney working on a client's case may be billed under contracts issued under this RFP. Attorney time billed to the contract must be recorded in 1/10th of an hour increments (i.e., 6 minutes is 0.1 hours). Travel time to and from a client's residence is not billable.

Communication services are listed as a client advocacy program because the service is built into the cost of the service the client who needed the communication assistance was receiving (e.g. included in the cost of a primary care visit, or cost of a professional counseling session).

#### Services Provided

Comprehensive legal assistance includes but is not limited to estate planning, permanency planning, discrimination, entitlement, and insurance disputes. Criminal matters are not eligible for Ryan White funded legal assistance.

## Client Advocacy Service Providers, Eligibility, and Outcomes

Houston Volunteer Lawyers, Inc., N.A.A.C.P., Sign Shares, and Southeast Texas Legal Clinic.

Table 15 Client Advocacy

CL	CLIENT ADVOCACY			
Ho	ouston Volunteer L	awyers, Inc.		
Eli	gibility	Service Description	Outcomes	
1)	Must be 300% over poverty guidelines	Legal services such as representation in family law matters, landlord tenant	Expected to provide 2,014 hours of service to 350	
2)	HIV infection symptomatic or asymptomatic	disputes, consumer contracts. Social security and creditor problems. Houston Volunteer Lawyers provide medical	clients. Unexpectedly, there was an increase in requests for	
3)	Must live in Houston EMA Title II counties	directives, wills, powers of attorney, etc.	legal seminars on topics such as returning to work, immigration and family	
			law. Houston Volunteer lawyers do not have funding for such education.	



Cli	Client Advocacy, cont…			
N.	N.A.A.C.P.			
Eli	gibility	Service Description	Outcomes	
1)	Adhere to Federal Poverty Guidelines	This program provides client advocacy by way of legal services. Offering	The desired outcomes of the last funding cycle were	
2)	HIV infection, symptomatic or asymptomatic, AIDS diagnosed, or affected/effected by HIV	representation in administrative hearings, estate planning, and other legal issues/matters.	accomplished with 1159 units of service provided to 120 unduplicated clients. All clients served were satisfied with the benefits incurred as a result of legal	
3)	Live in Houston EMA		assistance being provided. Unexpectedly, some clients had legal matters that the N.A.A.C.P. program did not have the monetary resources to handle and these matters were referred out to private attorneys.	

Sig	Sign Shares (DSG, Inc.)		
Eli	gibility	Service Description	Outcomes
	HIV infection symptomatic or asymptomatic or w/ AIDS diagnosis Substance free/abstinence or w/ harm reduction status	Communication Services – For those with a hearing impairment or who are deaf or hard of hearing – Sign Shares bridges the gap between all direct service providers and patients.	Interpreter services were subcontracted to medical care providers, employers, educational facilities, and virtually all programs for reasonable accommodation. HIV/AIDS direct care providers were
			comfortably and successfully offered the
			same program to deaf and HOH persons.

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Client Advocacy, c	Client Advocacy, cont		
Southeast Texas L	egal Clinic		
Eligibility	Service Description	Outcomes	
1) 175% Poverty Federal Guidelines	Direct legal assistance by a licensed attorney to an eligible client. Services	STLC must provide approximately 2000 units	
2) HIV infection, symptomatic or asymptomatic	range from estate planning to litigation matters.	of service to eligible clients under the current funding sources. The	
3) Live in 10 County Houston HSDA		number of unduplicated clients will vary based	
4) The legal issue must be HIV related		upon the types of legal issues presented. STLC reduced the number of unduplicated clients has been noted because more litigation issues are being	
		presented as opposed to the usually large number of estate planning requests. A positive result was a greater impact in addressing discrimination issues facing the target population.	



# Health Education/Risk Reduction/Nutritional Services & Information about Treatments & Medications

#### Definition/Service

A unit of service is defined as one (1) course lasting a minimum of two (2) hours in health education and risk reduction and provided to a minimum of five (5) HIV+ infected individuals.

#### Services Provided

Services for all eligible HIV/AIDS infected individuals. This service is defined as the provision of information about medical and psychosocial support services and counseling. The services also includes the preparation and distribution of materials in the context of medical and psychosocial support services to educate clients with HIV about methods to reduce the spread of HIV. Services include, but are not limited to, health education on understanding and communicating about HIV infection; its effects on the body, emotions and interpersonal relations; and risk reduction on the transmission of HIV. Also included is information on complimentary/alternative therapies.

## Health Education/Risk Reduction/Nutritional Service Providers, Eligibility, and Outcomes

AIDS Foundation Houston, Amigos Volunteers in Education and Services, Inc. (AVES) (provider survey was not submitted), Donald R. Watkins Memorial Foundation, Inc. (provider survey was not submitted), H.O.P.E. Project, Harris Country Hospital District, Montrose Clinic, Montrose Counseling Center, N.A.A.C.P., Coalition for the Homeless of Houston/Harris Co., Inc., Diocesan AIDS Ministry – A Program of Associated Catholic Churches, Young Women's Christian Association, and City of Houston Department of Health and Human Services.

Table 16 Health Education/Risk Reduction / Nutritional Service Providers

HE	HEALTH EDUCATION/RISK REDUCTION		
ΑI	AIDS Foundation Houston		
ΕI	igibility	Service Description	Outcomes
2)	HIV infection symptomatic or asymptomatic Must live in Houston EMA/HSDA	Project IMPACT - Comprehensive HERR workshops targeting persons living with HIV.	Provided at least 87 workshops with a minimum of 5 HIV+ consumers in each workshop. Unexpectedly, AFH had to reduce # of workshops due to mobility to secure appropriate documentation by clients in order to participate in workshop. A revision in documentation protocols is needed.



HEALTH EDUCATION/RISK REDUCTION, cont				
<b>Harris Country Hosp</b>	Harris Country Hospital District			
Eligibility	Service Description	Outcomes		
1) Must be HIV + or	Health Education / Risk Reduction -			
with AIDS	An 11-week curriculum which was			
diagnosis	offered in four day cycles and four night			
2) Must live in Harris	cycles. It covered reducing the risk of			
Co.	transmitting the virus, dealing			
	emotionally with being HIV+, physical			
	impact of HIV, maintaining health,			
	managing medications, psychosocial			
	meds and support services, and HIV-			
	related illnesses.			

Montrose Clinic	Montrose Clinic			
Eligibility	Service Description	Outcomes		
	Next Step - Health Education/ Risk Reduction sections.	A 30% increase in knowledge about HIV was obtained. 300 clients received Next Step services. Appropriate referrals were given. Unexpectedly, some clients desired to have viral load testing, but funding was not available. And, the Next Step educator became a short-term case manager to help clients procure		
, i		Appropriate referrals w given. Unexpectedly, s clients desired to have w load testing, but funding was not available. And Next Step educator beca a short-term case mana		

Montrose Counseling Center		
Eligibility	Service Description	Outcomes
	Courses in residential tx and prison re:	Montrose Counseling did
	HIV, HIV/CD, STD, TB, Hep B, Case	not have a # of
	Management.	presentations it was
		required to do. Education
		programs were used to
		enhance case management.
		The expected outcomes
		were risk reduction, harm
		reduction, and identify
		positive people.

N.	N.A.A.C.P.		
ΕI	igibility	Service Description	Outcomes
1)	8 years and older	P.O.W.E.R. Program - HIV Education	The N.A.A.C.P. prevented
2)	High risk for	and prevention to at-risk African	the spread of the HIV virus
	HIV/STDs	American women.	and/or its transmission.



HEALTH EDUCATION/RISK REDUCTION, cont				

Coalition for the Homeless of Houston/Harris Co., Inc.		
Eligibility	Service Description	Outcomes
	HSCC is a forum of Homeless Service	Homeless service
	Providers that meets once a month to	providers were able to
	network and set priorities and actions to	collaborate for funding and
	address homelessness in Houston/Harris	increase services. Needs
	Co.	of homeless were met.

Diocesan AIDS Ministry – A Program of Associated Catholic Churches		
Eligibility	Service Description	Outcomes
	Provides intensive case management,	This was a new program.
	decreasing financial assistance and	Twelve single, female-
	support groups focused on building life	head-of-household clients
	skills that lead to self-sufficiency. This is	participated.
	a 6 month program	



HEALTH EDUCATION/RISK REDUCTION, cont			
	The Center For Aids: Hope & Remembrance Project		
Eligibility	Service Description	Outcomes	
Must be HIV + or with	<b>Information Center</b> - Free printed and	The information center is	
AIDS diagnosis	bulk subscriptions to national AIDS	designed to be as	
	newsletters and other literature from basic	unintrusive as possible so	
	to advanced, free Internet access, an	there is no client intake	
	extensive scientific and medical reference	process. While the Center	
	collection are provided on a walk-in basis.	does not know who 48% of	
	Treatment counseling by appointment is	our callers and visitors	
	available. Also serves as a referral to	were in 1998, it knew that	
	social service providers.	30% identified themselves	
		as PWAs and/or ASOs.	
		By utilizing the treatment	
		information resources at	
		the information center,	
		service providers were able	
		to optimize service	
		provision to clients and	
		help empower them to	
		procure the best health care	
		available.	
		PWAC used the info center	
		for monthly meetings;	
		AIDS Mastery used the	
		space some weekends. A	
		volunteer treatment	
		advocate buddy training	
		program with AIDS	
		Foundation Houston is	
		conducted at the Center.	
		Both AFH and AVES have	
		had staff rotations at the	
		Center. A journal club is	
		now taking place twice a	
		month at noon.	
Must be HIV + or with	Research Initiative/Treatment Action	Provided a broader	
AIDS diagnosis	(RITA!) - Provides a primary source of	knowledge base for	
	HIV/AIDS treatment and research	decision making purposes	
	information free of charge to PWAs,	regarding treatments.	
	AIDS service providers, clinics, hospitals,	Unexpectedly, RITA! was	
	and doctors' offices.	not included in POZ's	
		review of treatment	
		newsletters. The	
		newsletter is indexed in	
		AIDSLine.	



HEALTH EDUCATION/RISK REDUCTION, cont		
The Center For Aids: Hope & Remembrance Project		
Eligibility	Service Description	Outcomes
Must be HIV + or with	<b>Community Forums -</b> The forums	Allowed patient access to
AIDS diagnosis	provide medical updates for PWAs who	and dialogue with medical
	are heavily treated and most in need of	and scientific thought
	new options and research information.	leaders in the field in order
		to increase knowledge base
		for making decisions about
		treatments. The Center for
		AIDS is now part of the
		program planning
		committee for the annual
		Houston Conference on
		AIDS in America. We
		also have a formal working
		agreement with Harris
		County Hospital District's
		HIV Projects division.

Yc	Young Women's Christian Association		
Eli	gibility	Service Description	Outcomes
1) 2)	School-age youth Students attending Yates High School	To increase the number of low-income teens receiving education for enhancing their knowledge on HIV/STD, utilizing school-based settings.	Conducted 510 group sessions for a minimum of 11 people in school settings. The YWCA of Houston's HIV/STD program experienced positive outcomes in the past 10 months. High school students attending Yates High School have stated they are knowledgeable about HIV/STD illnesses and feel more comfortable discussing it.



HEALTH EDUCATI	ON/RISK REDUCTION, cont	
	epartment of Health and Human Serv	<u>/ices</u>
Eligibility	Service Description	Outcomes
City of Houston De Eligibility  1) Harm reduction approach 2) Must live in Houston MSA		i

will be offered prevention

case management.



## **HIV Counseling and Testing**

## **Program Description**

If someone thinks they have been exposed to HIV, they should consider taking an HIV test. This medical test is the only way to tell if someone is infected with the virus. The test can be done at a doctor's office or clinic. At many public clinics, the individual does not have to give their name, and often the test is free or at a very low cost. Typically, the testing sites give results to the individual in 10-14 days.

## HIV Counseling and Testing Service Provider, Eligibility, and Outcomes

Harris County Sheriff's Dept., Montrose Clinic, Montrose Counseling Center, and Planned Parenthood of Houston

Table 17 HIV Counseling and Testing

Hľ	HIV COUNSELING AND TESTING			
На	rris County Sheri	ff's Dept.		
Eli	igibility	Service Description	Outcomes	
1)	HIV infection,	The project offers HIV counseling, testing	Harris Co. Sheriff's Dept.	
	symptomatic or	and education through PCPE counselors.	had at least 7,000 PCPE	
	asymptomatic	It also offers HIV/STD education	Counseled and 2,200	
2)	In custody of	prevention and referrals to Early	HERR Education sessions.	
	HCSD	Intervention. The HERR education		
		counselors do not specifically target the		
		PLWH/A, in fact there is not		
		documentation as to whether or not the		
client is (+). The targeted audience is				
		women at high risk, i.e. drug users, sex		
		workers, or partners of drug users, etc.		
		The PCPE counselors provide pre-test and		
		post-test HIV counseling. The HERR		
		sessions include education about STDs,		
		and negotiation skills.		

Montrose Clinic		
Eligibility	Service Description	Outcomes
Must be 14 years or	Provide pre & post test counseling and	If someone tests positive,
older	HIV test.	Montrose Clinic helps that
		person seek early medical
		intervention.



НІ	HIV COUNSELING AND TESTING, cont		
Me	Montrose Counseling Center		
ΕI	igibility	Service Description	Outcomes
	500% of poverty level 15 years of age or older	Testing in residential tx and on street.	Montrose Counseling did not have a # of presentations they were required to do. Education
3)	HIV infection, symptomatic or asymptomatic		programs are to enhance case management. The expected outcomes were
4)	Must live in Houston EMA		risk reduction, harm reduction, and identify positive people.

Planned Parenthood of Houston		
Eligibility	Service Description	Outcomes
No requirements	Prevention counseling to identify & reduce risks, HIV testing & boost test counseling & referral to providers.  Partner elicitation.	Increased clients self- perception of risk. Helped the client negotiate plans to reduce risk and learn serostatus. Helped get positive clients to early intervention and case management.



#### **Health Insurance Continuation**

The money in this category is provided to one contractor to pay for the State's high-risk pool insurance for eligible HIV+ individuals within the EMA. Unit of service is one month of insurance coverage.

# Health Insurance Continuation Provider, Eligibility, and Outcomes

The Assistance Fund.

**Table 18 Health Insurance Continuation** 

HE	HEALTH INSURANCE CONTINUATION		
Th	The Assistance Fund		
Eli	gibility	Service Description	Outcomes
1)	Income must be	Offer assistance with copayments,	Provision of units of
	250% of poverty or	deductibles and insurance premiums for	service kept clients from
	below	up to 29 months. No cap on services, no	being patients of Harris
2)	All ages eligible	waiting list.	County Hospital Dist.
3)	HIV infection		
	symptomatic or		Unexpectedly, financial
	asymptomatic		resources were outstripped
4)	Must live in 10		by demand – i.e. could pay
	county area		for more services, but
	in/around Houston		limited due to funding.
5)	Must have		
	insurance already in		
	place		



#### **Support Groups/Non-Mental Health**

A unit of service is defined as one (1) support group session. Support groups (non-mental health) for Persons Living with HIV (PLWH) who are in need of support with issues secondary to recent developments in HIV-related treatment. Groups have at least 5 and no more than 15 participants, not including agency staff and/or facilitators. Groups meet at least weekly throughout the term of the contract year. The groups focus on changes PLWH face since the introduction of protease inhibitor (PI) class medications and multiple drug therapies.

The changes in attitudes and behaviors of PLWH who may have been preparing for terminal stage AIDS and are now healthier include: loss of disability income eligibility; returning to the workforce and the implications that may have in benefit eligibility; family and personal relationships (increased stress, questions about one's absence from the workforce for an extended period of time, etc.,); and coping with changes in personal health brought on by PI medications.

#### Agency Qualifications

Qualified agencies have a Registered Nurse (RN) with at least 2 years HIV-related experience on staff or available as a contractor to provide coordination and consultation to the group participants and facilitator in regards to medication and health issues. Groups may be facilitated by a layperson who has personal knowledge of HIV/AIDS related issues (PLWH preferred). Qualified agencies have has at least 2 years experience in the provision of HIV/AIDS related services in the greater Houston metropolitan area. Support groups are provided in community based locations which are convenient to the attendees' residence (community centers, churches, etc.).

#### Support Group Service Providers, Eligibility and Outcomes

AIDS Foundation Houston, Art League of Houston, Donald R. Watkins Memorial Foundation, Inc. (provider survey not submitted), H.O.P.E. Project, Houston Area Community Services, Inc. (provider survey not submitted), the N.A.A.C.P., and the Riverside General Hospital (provider survey not submitted).

Table 19 Support Groups, Non-Mental Health

Sl	SUPPORT GROUPS, NON-MENTAL HEALTH			
ΑI	AIDS Foundation Houston			
ΕI	igibility	Service Description	Outcomes	
<ol> <li>2)</li> </ol>	HIV infection symptomatic or asymptomatic Living in HSDA/EMA	The provision of peer facilitated support groups which focus on treatment issues, including compliance, adherence, back to work issues, credit counseling, and quantity/quality of life issues.	Completion of at least 51 support groups attended by a minimum of 3 HIV+ individuals per group.	
			Unexpectedly, AFH had to adjust number of groups due to mobility to secure needed HIV+ documentation.	

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SL	SUPPORT GROUPS, NON-MENTAL HEALTH, cont			
Ar	Art League of Houston			
Eli	gibility	Service Description	Outcomes	
1) 2)	Must be between ages 25-35 HIV infection symptomatic or asymptomatic or w/ AIDS diagnosis	Art Classes – Free weekly art classes year round funded by the city of Houston through CACHH, the Art Colony Association. A light which is provided by the National Council of Jewish Women.	Participants created individual works of art which were exhibited, used, given as gifts or sold by the students; paintings, mosaic furniture, birdhouses, decorative items.	

Donald R. Watkins Memorial Foundation, Inc.		
Eligibility	Service Description	Outcomes

Houston Area Community Services, Inc.		
<b>Service Description</b>	Outcomes	

N.	N.A.A.C.P.		
Eligibility		Service Description	Outcomes
1)	18 years and older	<b>Women Developing Solutions - Support</b>	Program was expected to
2)	HIV +	groups/nonmental health.	serve 1,094 and served
3)	Substance		1,000.
	free/abstinence		
4)	Live in City of		The positive aspect was the
	Houston		changing attitude of the
5)	Women at high-risk		clients.

Riverside General Hospital		
Eligibility Service Description Outcomes		

H.O.P.E. Project		
Eligibility	Service Description	Outcomes
Must be HIV + or with	<b>Treatment Mixer -</b> A revolving group of	PWAs came to the mixer
AIDS diagnosis	men heavily treated attend this loosely	with scientific questions in
	structured meeting facilitated by the R.N.	advance of or immediately
	to exchange information about treatment.	after a visit to their
		physician. The mixer
		empowered the PWA in
		the decision-making
		process.
		Unexpectedly, attendance
		at the mixers dropped off
		in 1998. Newly diagnosed
		men have also attended.

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#### **Rehabilitation Care**

A unit of service is a physician-ordered physical therapy and/or skilled rehabilitation service provided to HIV patients in community-based organizations, health care facilities, and/or patient's home.

#### Services Provided

Diagnostic evaluations, pain management and training/rehabilitation in the following areas: activities of daily living, neuromuscular rehabilitation, gait, mobility, speech, language and cognitive abilities.

## Rehabilitation Care Provider, Eligibility and Outcomes

UT Health Science Center for Houston Recovery Campus

**Table 20 Rehabilitation Care** 

RE	REHABILITATION CARE			
U1	UT Health Science Center for Houston Recovery Campus			
Eli	igibility	Service Description	Outcomes	
<ul><li>1)</li><li>2)</li><li>3)</li><li>4)</li></ul>	Must be medically indigent 18 years or older HIV infection symptomatic or asymptomatic Substance use history and status is required	Stabilization (medical, drug abuse, and mental health) for homeless HIV+ persons prior to entry into residential substance abuse treatment. Service initiation.	Decreased the number of people recycled through the system after they were released from Ben Taub, HCPC, etc. and helped prevent them from returning to the streets.  324 will receive stabilization; 100 will	
<ul><li>5)</li><li>6)</li></ul>	Must live in HHS Region 6 Must be homeless		receive treatment; 25% will maintain stable housing 6 months subsequent to tx; 25% will have maintained sobriety.	
			Unexpectedly, it has been impossible to get HIV case management organizations (except MCC) to participate in multidisciplinary staffing; although Consortium agencies state need for service. Such a task requires intensive on-going outreach.	



## **Volunteer and Buddy/Companion**

## Volunteers/Other

Volunteer programs provide innovative programs to benefit HIV/AIDS infected individuals. The intent of all the volunteer programs is to provide direct "hands on" volunteer services and not volunteers for agency administrative assistance.

#### Services Provided

The provider has a demonstrate a capacity to recruit, train, coordinate and support a pool of volunteers to service a broad geographical area. The services funded in this service category are used to provide respite care or "buddy" programs. These are not outreach or case management services.

## Volunteers/Community

The use of volunteers to support a variety of volunteer programs to provide support services for HIV/AIDS infected individuals which may include, but are not limited to, buddy programs, spiritual and emotional support and companionship. The intent of volunteer programs is to provide direct "hands on" volunteer services and not volunteers for agency administrative assistance.

#### Services Provided

The provider has a capacity to recruit, train, coordinate and support a pool of volunteers to service a broad geographical area.

#### Volunteer Service Providers, Eligibility, and Outcomes

AIDS Foundation Houston, Foundation for Interfaith, and PWA Coalition.

Table 21 Volunteer and Buddy/Companion

VC	VOLUNTEER AND BUDDY/COMPANION			
ΑI	DS Foundation Ho	<u>uston</u>		
Eli	gibility	Service Description	Outcomes	
1)	HIV infection	<b>Volunteer services</b> – Provides direct	Recruited and trained a	
	symptomatic or	client service through 7 specific	minimum of 150	
	asymptomatic.	programs. These include Camp, Creative	volunteers to produce	
2)	Must live in HSDA	Arts Healing, Hotline, Pediatric, Phone	19,000 hours of service to	
	or EMA.	Buddy, Senior Companion, Hospital, and	1,000 unduplicated clients	
		Stone Soup Food Pantry.	through direct client	
			service. New programs	
			were created late in 1998	
			based on a review of client	
			needs focusing on	
			treatment adherence.	



VC	VOLUNTEER AND BUDDY/COMPANION, cont			
ΑI	AIDS Foundation Houston			
Eli	gibility	Service Description	Outcomes	
	Must be between the ages of 7-16 years HIV infection symptomatic or asymptomatic	Camp HOPE - Gives children living with HIV/AIDS the chance to experience the outdoors in a safe and supportive manner – and simply to have fun.	For most of the children, these were first-time experiences. Not only did they have a good time, they also increased their self-esteem and learned what camaraderie is all about.  The camp, which won Leadership Houston's 1996 Leadership in Action Award by taking top honors in the Health and Human Services category, has been enormously successful. Initial response was so positive that Camp Hope entered into collaboration with the Camp for All Foundation to extend the annual event to a full week.	
1) 2) 3)	Must be 6 or older Can be a caregiver or symptomatic / asymptomatic Must live in greater Houston	Camp H.U.G the first and only camp program in the greater Houston area specifically designed for HIV+ children, their siblings, and their parents or caregivers. It provides nurturing environments in which children with HIV/AIDS can experience life as "normal kids". Also, parents and caregivers are invited to attend an afternoon psychosocial workshop led by an expert on children and families living with HIV/AIDS.	Recreation has been the main purpose of Camp H.U.G. – children can enjoy an afternoon of horseback riding, team sports, fishing, canoeing, arts and crafts, nature studies, swimming and other water sports.	

Fo	Foundation for Interfaith		
Eli	gibility	Service Description	Outcomes
1)	Income verification	Provide 36,000 hours to 170 unduplicated	
	is necessary	clients and supervise 605 volunteers	
2)	HIV infection	organized into Care Teams.	
	symptomatic or		
	asymptomatic		
3)	Live in Houston		
	HSDA		



VOLUNTEER AND BUDDY/COMPANION, cont			
People With AIDS Coalition – Houston, Inc.			
Eligibility	Service Description	Outcomes	
Must be 18 years of age	Provide support for HCHD/TSC as well	PWA expected to provide	
or older	as host special events for clients.	16,000 units (hours) of	
		service throughout the	
		Houston EMA.	



## **Hospice Care/Home Hospice Care**

#### Services Provided

Services must include, but are not limited to:

- Medical and nursing care,
- Palliative care,
- Psychosocial support,
- Spiritual guidance, and
- Bereavement services for the patient and surviving family members.

Physical therapy services can be made available on a subcontract basis.

## Agency Qualifications

Providers are licensed by the Texas Department of Health as a hospital, special hospital, special care facility or Home and Community Support Services Agency (with Hospice Designation). Agency must be Medicaid and Medicare certified.

## Hospice Care Service Provider, Eligibility, and Outcomes

Bering Omega Community Services.

# **Table 22 Residential Hospice**

RE	RESIDENTIAL HOSPICE			
Bering Community Service Foundation w/ Omega House				
Eli	gibility	Service Description	Outcomes	
1.	Must be 18 years of	Hospice to PWAs in the terminal stage of	Provided 24 hr nursing	
	age and older	their illness in a serene and attractive	assisted by 90 highly	
2.	Less than 6 months	surrounding while offering spiritual and	trained patient care	
	prognosis	psychosocial support for resident families	volunteers.	
		and partners.		
			Unexpectedly, Bering saw	
			an increase in clients the	
			last several months.	



#### Referral

# **Program Description**

# Referral Service Providers, Eligibility and Outcomes

AIDS Foundation Houston, Coalition for the Homeless of Houston/Harris Co., Inc., and Montrose Clinic.

# **Table 23 Referrals**

RE	REFERRAL SERVICES			
ΑI	AIDS Foundation Houston			
Eli	Eligibility Service Description Outcomes			
<ol> <li>1)</li> <li>2)</li> </ol>	HIV infection symptomatic or asymptomatic Living in	Referrals, needs assessment, advocacy, benefits counseling, and follow-up.	Increased access to available, appropriate, affordable and acceptable services.	
	HSDA/EMA			

Coalition for the Homeless of Houston/Harris Co., Inc.		
Eligibility	Service Description	Outcomes
	Data/Network – Coalition provides I & R for call-in agency staff or individual requesting services to avoid becoming homeless or emergency shelter when homeless. Referral is also made to substance abuse programs when requested.	Individuals received assistance in what they requested, i.e. food, clothing, shelter, utility or rent assistance, etc.
Agency fee of \$25,	<b>Homeless Services Coordinating</b>	Same as Data/Network -
individual fee of \$10 to	Council (HSCC) – Same as	homeless service providers
be member of HSCC.	Data/Network + HSCC is a forum of	collaborated for an
	Homeless Service Providers that meets once a month to network and set priorities and actions to address homelessness in Houston/Harris Co.	increase in funding and services. Needs of homeless were met.

Mo	Montrose Clinic		
Eli	gibility	Service Description	Outcomes
1)	Must be 18 years of	<b>HIV Research</b> – Provide clients access to	Clients had positive health
	age or older	clinical drug trials. Clinical trials are a	outcomes. New drugs
2)	Various disease	way for PLWH/A to help advance	were approved by FDA.
	state criteria	research and have access to "cutting	
3)	Must have	edge" treatments. All drugs used now are	
	physician referral	only available because others participated	
		in clinical trials.	

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#### **Outreach and Prevention**

#### Program Description

Outreach and prevention, in the sum of all efforts, intended to stop the further transmission of HIV; education that is intended to prevent transmission of HIV to non-infected persons. Activities provide relevant information in a way that is understandable to the individual, including offering advise and suggestions, identifying alternatives and their probable consequences, modeling behaviors, teaching problem-solving techniques, or clarifying perceptions. (Not currently or previously funded with RW Title I funds in Houston, part of Service Linkage Worker responsibilities under Case Management).

Outreach includes programs which have as their principal purpose as identifying people with HIV disease so that they may become aware of and may be enrolled in care and treatment services. It does not include HIV counseling and testing nor HIV prevention education.

#### Services Provided

- Planned and delivered in coordination with local HIV prevention outreach programs to avoid duplication of effort;
- Targeted to populations known through local epidemiology data to be at a disproportionate risk of HIV infection:
- Be conducted at times and in places where there is a high probability that HIV-infected individuals will be reached;
- Be designed with quantified program reporting that will accommodate local effectiveness evaluation.

## Outreach Service Providers, Eligibility and Outcomes

Houston Area Community Services, Montrose Counseling Center, N.A.A.C.P., Diocesan AIDS Ministry – A Program of Associated Catholic Churches, and MHRA of Harris Co.

Table 24 Outreach and Prevention

OUTREACH AND PREVENTION			
Houston Area Community Services,			
Eligibility	Service Description	Outcomes	
HIV + or diagnosed with AIDS.	Provide outreach services to engage persons who never used the HIV system of Care to utilize it.	Served at least 800 people of HIV infection. One negative outcome was that many clients had already been in the HIV/CMS at one point in time.	



OUTREACH AND PREVENTION, cont		
N.A.A.C.P		
Eligibility	Service Description	Outcomes
	HIV/AIDS and STD education. Self-	
	esteem empowerment.	

Montrose Counseling Center			
Eligibility		Service Description	Outcomes
1)	•	Montrose Counseling does street outreach in Fort Bend Co.	Montrose Counseling did not have a # of
2)	Must be at risk for HIV		presentations they were required to do. Education
3)	Currently using substances or have history		programs are to enhance case management. The expected outcomes were
4)	Live in Houston EMA/HSDA		risk reduction, harm reduction, and the identification of positive people.

Diocesan AIDS Ministry – A Program of Associated Catholic Churches			
Eligibility	Service Description	Outcomes	
<ol> <li>Targets faith-based groups</li> <li>Must live in 11 counties of Diocesan of Galveston - Houston</li> </ol>	Developing and maintaining Parish outreach to promote education and information related to Diocesan AIDS Ministry and HIV/AIDS.	Provided outreach services to at least 6 parishes, 2 St. Vincent de Paul Conferences, 6 faith-based organizations in Galveston and 2 interfaith activities.  The Interfaith Planning Committee did an outreach project through several pantries and food programs. 600 educational flyers went out.	

MHMRA of Harris Co./PATH		
Eligibility	Service Description	Outcomes
	Outreach to homeless mentally ill, psychiatric services, rehab, case management, dual diagnosis services, substance abuse programming, housing referrals.	Served approximately 840 clients during FY98. Contacted 2100 homeless during FY98. Total funds for FY98 \$369,000. Stabilized homeless mentally ill population both through psychiatric and through housing.

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# **Employment Assistance/Vocational Counseling and Training**

## **Program Description**

For someone living with HIV, staying productive and active is important for both financial and emotional reasons. Several agencies in the Houston area have programs that will train, counsel, and refer people looking for jobs. If able to work, a person with HIV can benefit from a steady paycheck, possible health insurance, improved self-esteem and more choices.

# Employment Assistance/Vocational Counseling & Training Service Providers

AIDS Foundation Houston and Nightingale Adult Day Center

**Table 25 Employment Assistance** 

EMPLOYMENT ASSISTANCE			
AIDS Foundation Houston			
Eligibility		Service Description	Outcomes
1)	HIV infection	Spirit Wellness Center - Outreach,	Helped 50% of clients
	symptomatic or	employment resources, job search and to	become employed.
	asymptomatic	place clients in employment services.	Discovered that 50% of
2)	Living in	The do nutrition counseling to increase	clients that take classes
	HSDA/EMA	knowledge.	increase their knowledge.

Nightingale Adult Day Center			
Eligibility	Service Description	Outcomes	
Must be over age     15     HIV infection     symptomatic or     asymptomatic     Live in Houston     EMA	Vocational counseling, job seeking assistance and job placement.	Provided 8,000 units of service to 123 unduplicated clients with 94 clients finding employment. Have found that people completing classes are finding employment. Large number of clients has not fully completed classes.	



# **Leadership Development**

Program Description

# Leadership Development Service Provider, Eligibility, and Outcomes

People With AIDS Coalition (PWA)

**Table 26 Leadership Development** 

Leadership Development			
People With AIDS Coalition			
Eligibility	Service Description	Outcomes	
Must live in Houston EMA	Project L.E.A.P. is a 96-hour training program that teaches infected and affected individuals how to advocate for funding for HIV/AIDS.	Upon completion, 30	
		programs and activities occurred.	