

FAST-TRACK CITIES QUARTERLY UPDATE



**JOINT MEETING WITH
END STIGMA END HIV ALLIANCE
SEPT. 18, 2019**

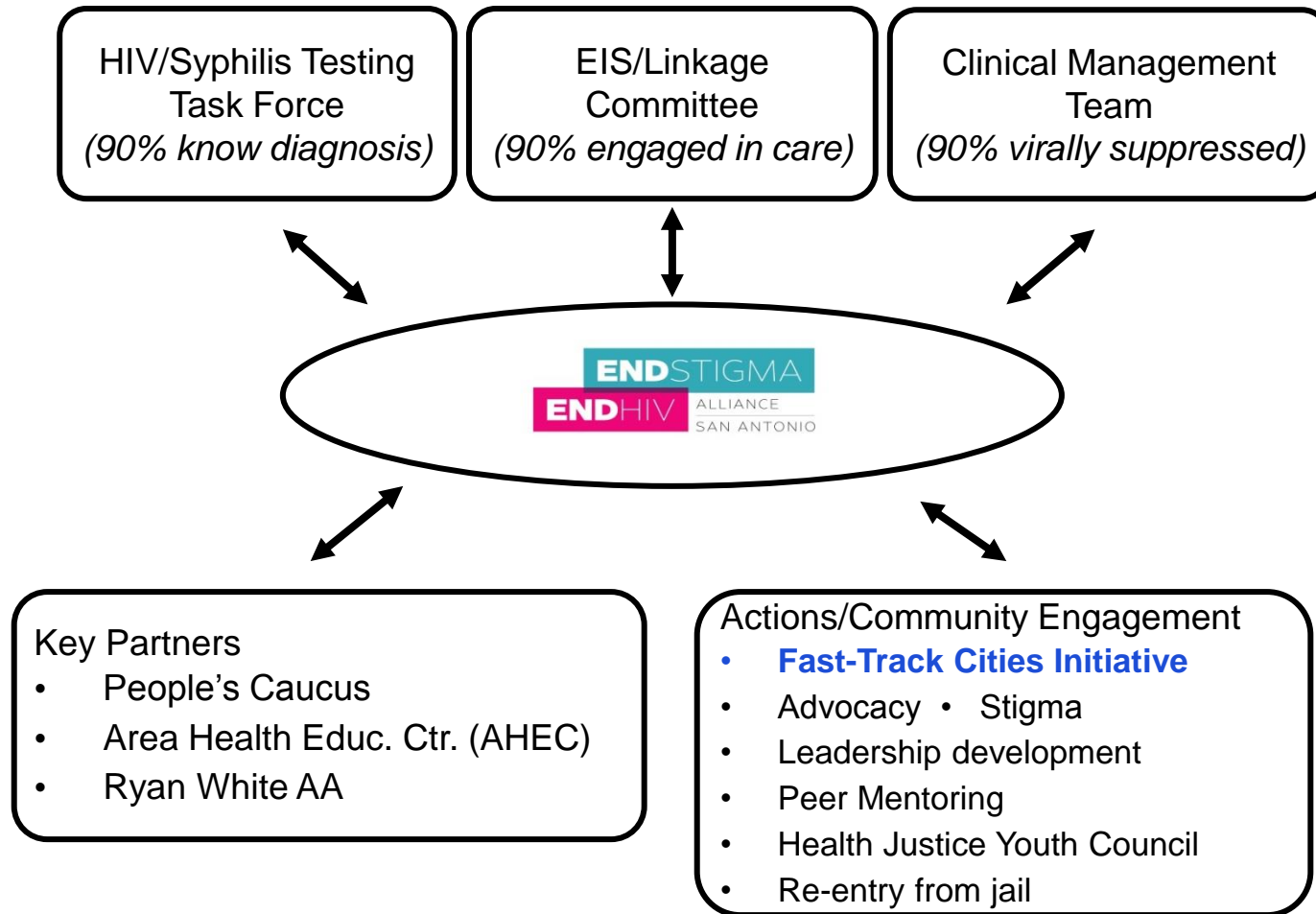


WHAT IS FAST-TRACK CITIES?


- City-county initiative launched in December 2017 with 90-90-90 goals
- Data gathering and transparency arm of ESEHA—quarterly reports to community, posted online at fast-trackcities.org
- Administrative support and steering committee member of ESEHA



OUR STRUCTURE



TACKLING STIGMA & THE 90S

- **Syringe services funded by County (\$80K)** 
- **One hospital funded to do ED opt-out HIV testing**
- **Peer mentor phones, website, cards**
- **New direction for HJYC**
- **Rapid Start: Press conference in early October. At least 12 Rapid Start patients since June 1***

*Rapid Start patients need positive confirmatory (serum) test before referral

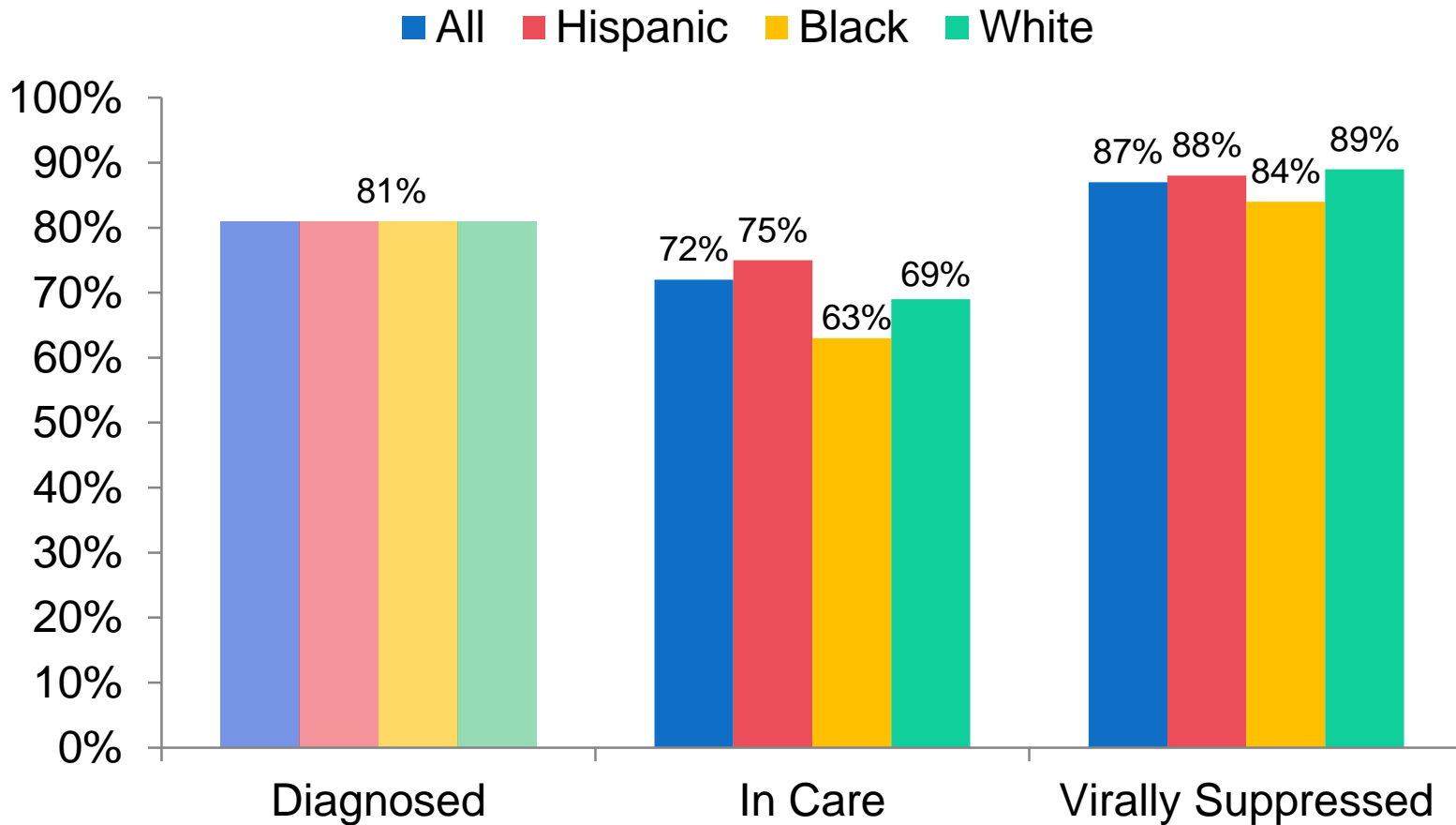
TACKLING STIGMA & THE 90S

Bexar County Jail Linkage Initiative Update:

- From 1/29/19 – 4/28/19, successfully linked 4 out of 7 patients released from BCJ to care (57%)
- From 5/1/19 -8/1/19, successfully linked 0 of 6
- Possible DSHS support for a Discharge Planning Coordinator

90-90-90 UPDATE

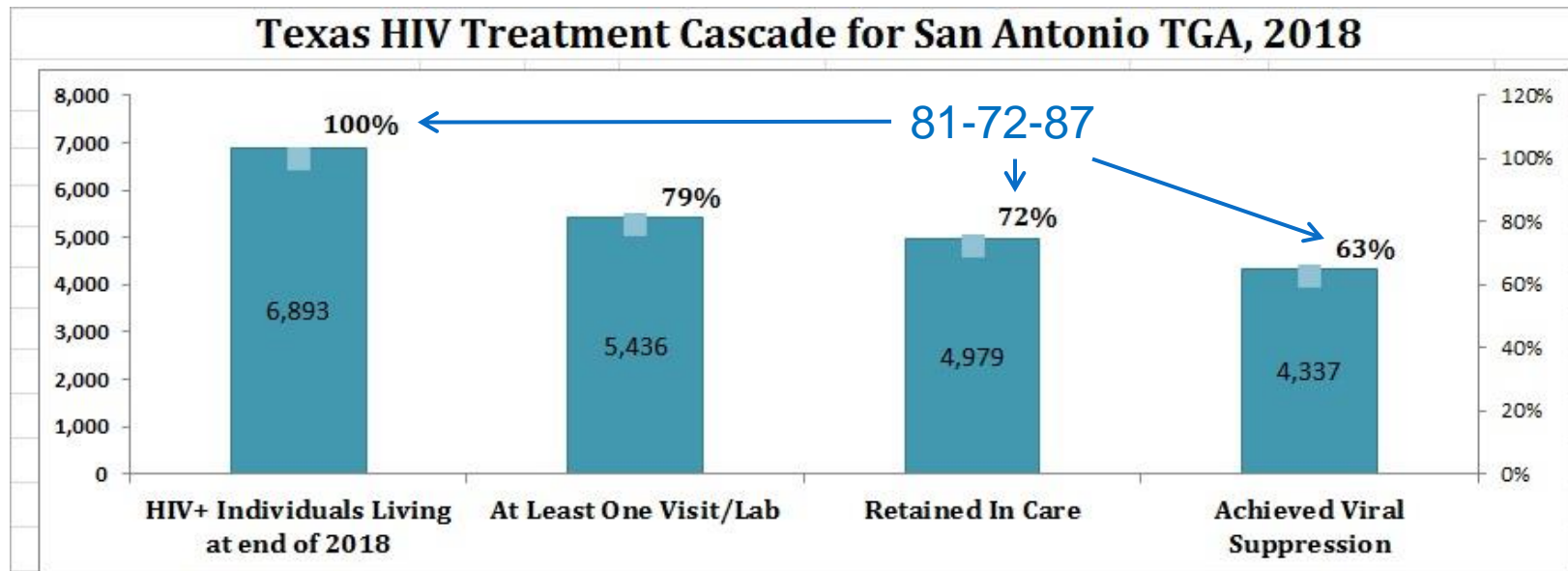
San Antonio TGA: **81-72-87**
State of Texas: 81-70-86



Source: Texas DSHS, Aug. 2019.

With all races/ethnicities including "other": 6,893 diagnosed; 4,979 in care; 4,337 undetectable

SEEN ANOTHER WAY...



HIV+ Individuals at end of 2018 - No. of HIV+ individuals (alive) at the end of 2018.

At Least One Visit in 2018 - No. of PLWH with a met need (at least one: medical visit, ART prescription, VL test, or CD4 test) in 2018.

Retained in Care is number of PLWH with at least 2 visits or labs, at least 3 months apart or suppressed at end of 2018.

Achieved Viral Suppression at end of 2018 - No. of PLWH whose last viral load test value of 2018 was ≤ 200 copies/mL.

FAST FACTS

- Almost **1 in 5 people** in Texas with HIV don't know they have it. Ditto for San Antonio.
- Breakdown for young folx in San Antonio (ages 13 to 24):
81-68-85
- We are worse than state average in percent of diagnosed 2- to 12-year olds—state average 19% undiagnosed, Bexar 22%



LINKAGE TO CARE (APRIL 1-JUNE 30)

Goal: Interval until first appointment with a medical provider is less than 7 days by May 2019

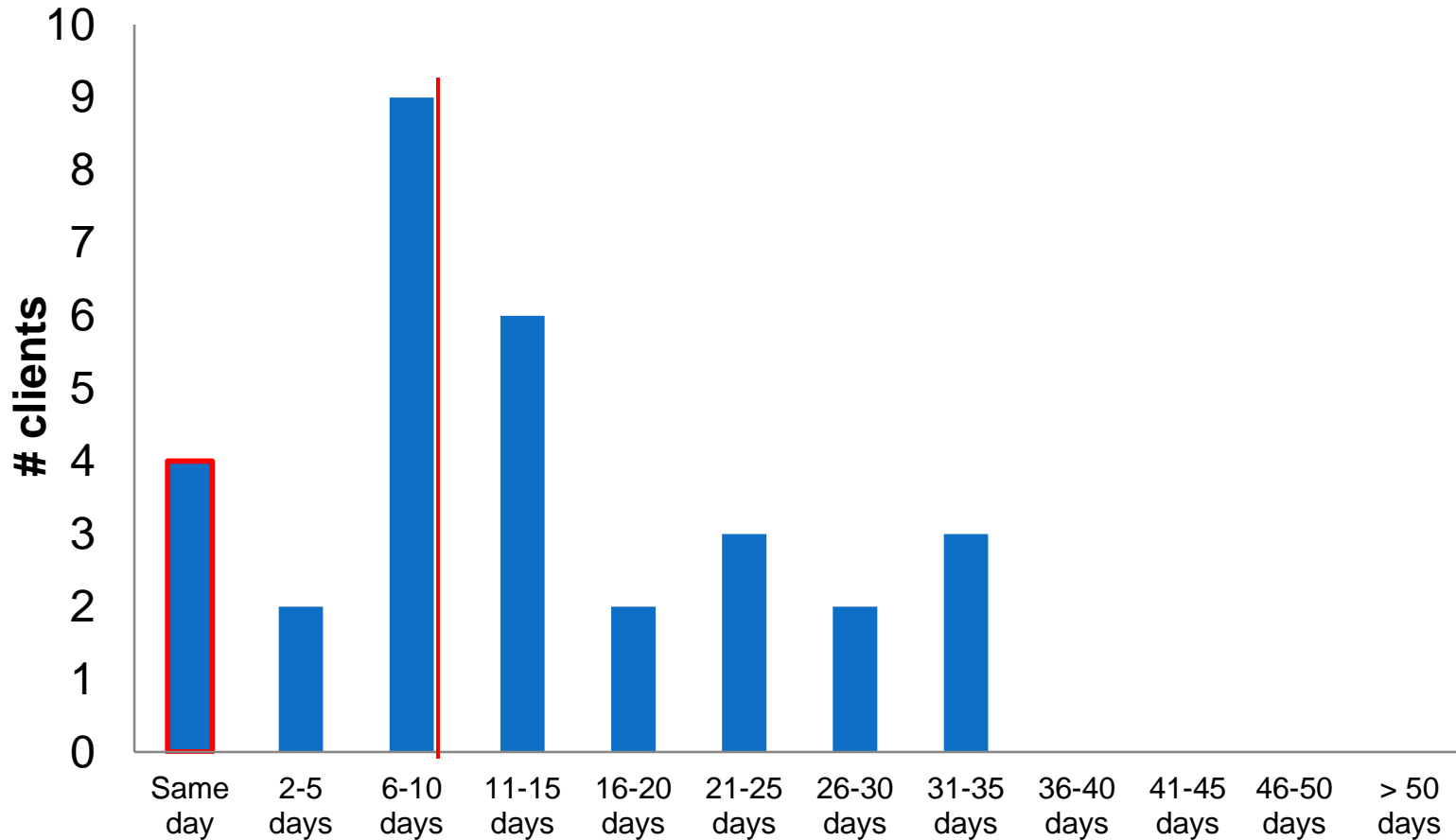
Time until first contact with *any service provider* (ARIES)

- Average 16 days (53 clients)

Time until first appointment with *medical provider* (5 agencies)

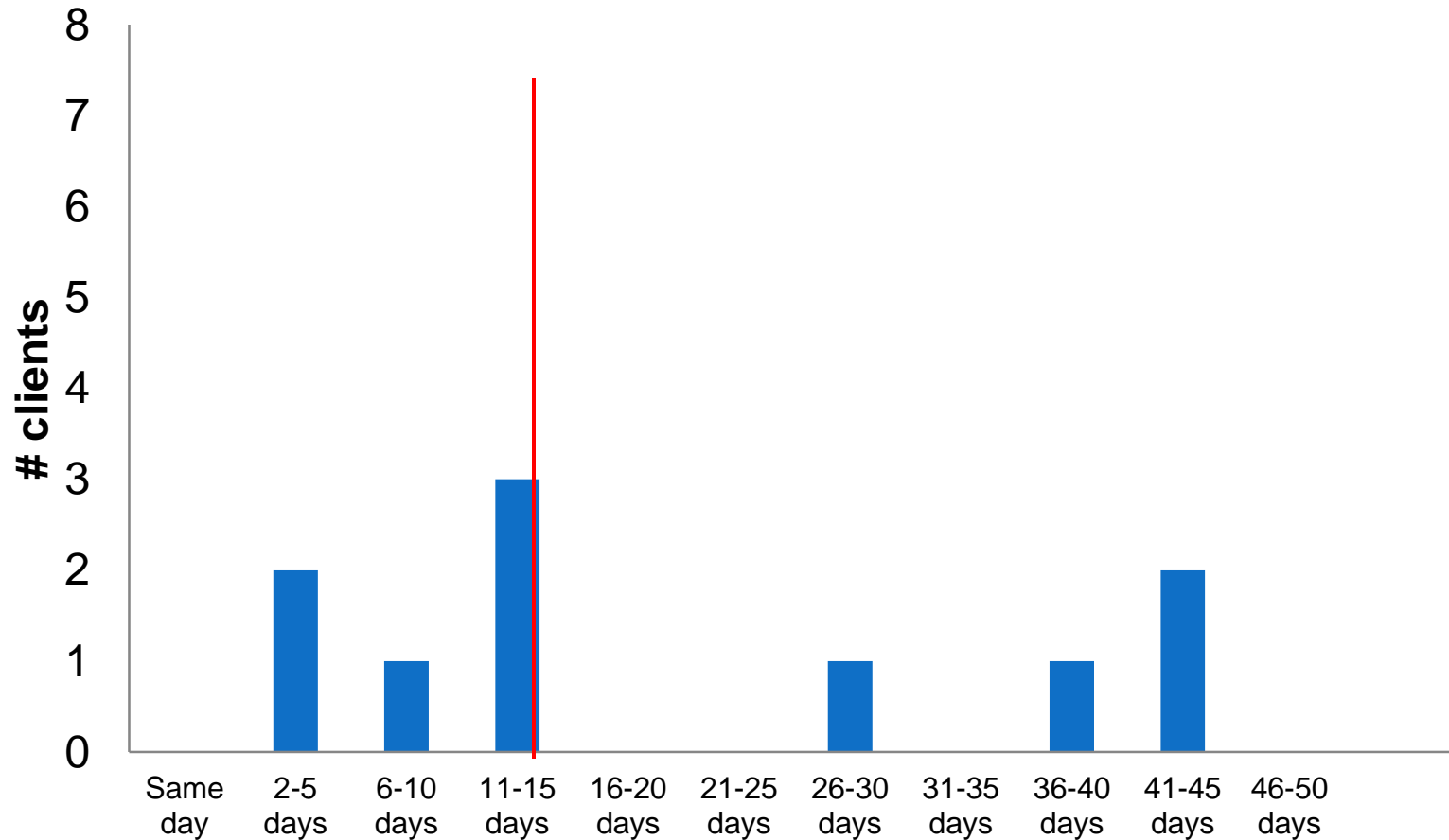
- New: Avg. 13 days, Median 10.5
- Relinkage: Avg. 21 days, Median 14.5

LINKAGE: NEW DIAGNOSIS



Median, 10.5 days (31 clients), range 0 to 35 days

LINKAGE: RE-LINKAGE



Median, 14.5 days (10 clients), range 3 to 43 days

A LONGER VIEW

	2018				2019	
	Q1	Q2	Q3	Q4	Q1	Q2
ARIES	7	6	7	7	7	16
EIS—new diagnosis --average	--	17	14	15	27	13
EIS—new diagnosis --median	--	--	13	11	19	11
EIS—re-linkage --average	--	23	25	15	12	21
EIS—re-linkage --median	--	--	24	9	7	15

1. *Great variation from quarter to quarter (small sample sizes)*
2. *Hard to draw conclusions still (keep observing)*
3. *ARIES data was closer to ours this quarter*

VIRALLY SUPPRESSED

Of those engaged in care (2 visits at least 90 days apart /12 months) how many had most recent viral load <200 copies/mL

In 4 out 5 clinics:

- 3/2018 and 4/2019: of 2816 PLWH 78.4% suppressed
- 8/2018 and 7/2019: of 2744 PLWH 86.4% suppressed

DISCUSSION

Trees: Now that we've collected our own data for a while—are we collecting the right data? Do we want to change anything in our process?



Forest: Based on our limited data, are there gaps in our strategies?

DISCUSSION

**1 in 5 undiagnosed—what we're doing isn't working.
Brainstorm...**

When people test negative: Are we referring to PrEP?