

FAST-TRACK CITIES QUARTERLY UPDATE



**JOINT MEETING WITH
END STIGMA END HIV ALLIANCE
JUNE 17, 2019**

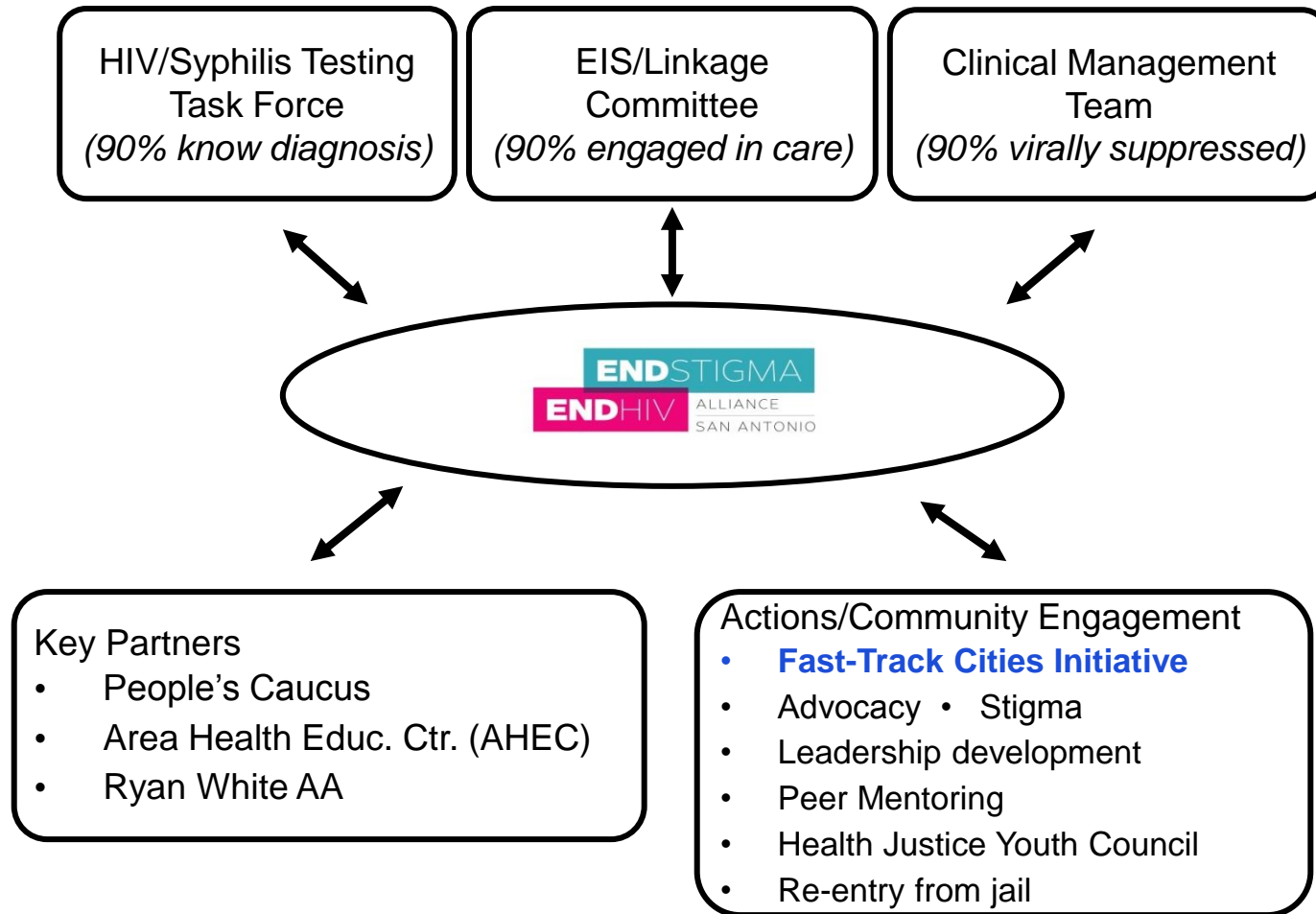


WHAT IS FAST-TRACK CITIES?

- 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



BIG PICTURE



NEW SINCE LAST QUARTER

- **Bexar County Jail successfully linked 4 out of 7 released inmates to care (57%) since February!**
 - Nationally, in one review article: 28% by 3 months, 58% by 6 mo., 73% by 12 mo. after release¹
 - Kudos to everyone involved
- **Rapid Start pilot as of June 1**
- **Peer mentor delay—new warmline logistics**
- **PrEP work group met May 6**
 - Seeking primary care PrEP “champions”



1. Nijhawan et al. (2015.) The HIV care cascade before, during, and after incarceration: a systematic review and data synthesis. *Amer J Public Health*;105(7):e5-e16.

OTHER UPDATES

- **Presentations**

- 5 School Health Advisory Councils (South San, Judson, Southwest, East Central, Edgewood)
- CDC National HIV Prevention Conference
- Texas Public Health Association conference

- **Housing:**

- SPNS released data on 74 people enrolled since 2017
 - 24 have found stable employment
 - 20 stable housing
 - 18 stable housing and employment
- Beverly Johnson attending housing meetings for me

LINKAGE TO CARE (OCT. 1-DEC. 31)

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

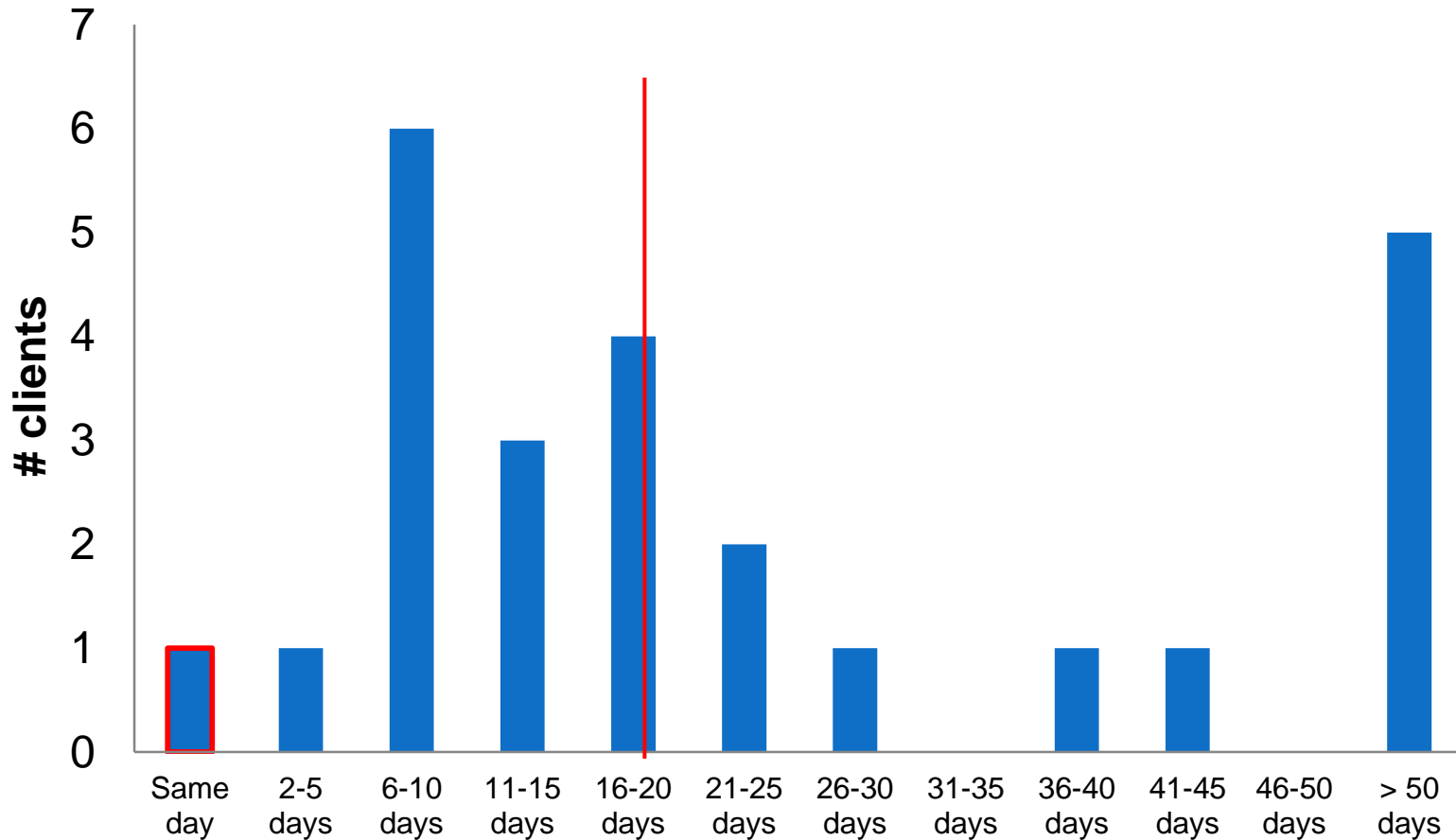
Time until first contact with *any service provider* (ARIES)

- Average 7.0 days

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

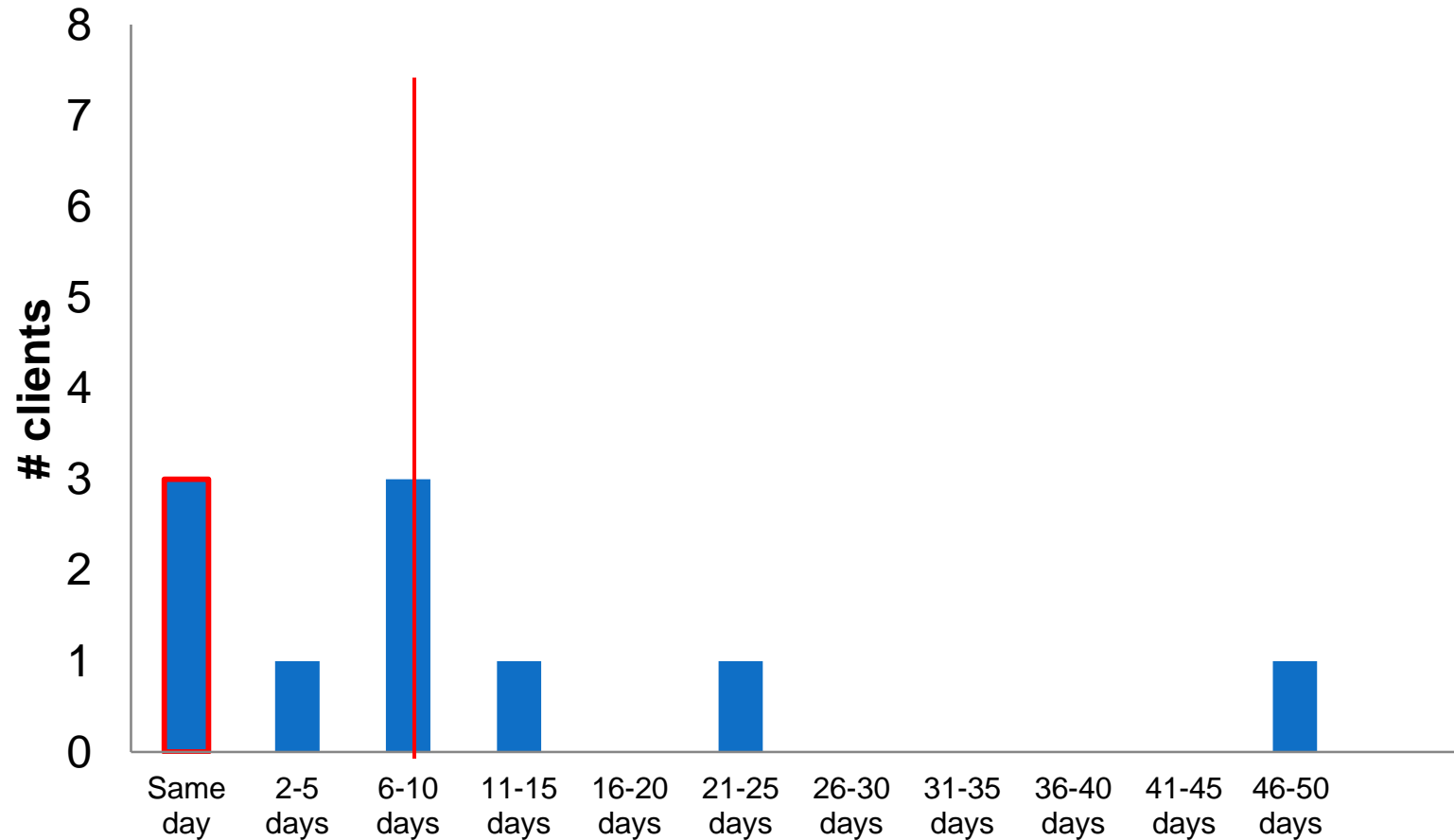
- New: Avg. 27.4 days, Median 19
- Relinkage: Avg. 11.7 days, Median 7

LINKAGE: NEW DIAGNOSIS



Median, 19 days (25 clients), range 1 to 91 days

LINKAGE: RE-LINKAGE



Median, 7 days (10 clients), range 1 to 51 days

A LONGER VIEW

| | 2018 | | | | 2019 |
|--------------------------------|------|------|------|------|------|
| | Q1 | Q2 | Q3 | Q4 | Q1 |
| ARIES | 6.97 | 6 | 7 | 7.4 | 7 |
| EIS—new diagnosis --average | -- | 17.4 | 14.1 | 14.8 | 27.4 |
| EIS—new diagnosis --median | -- | -- | 13 | 11 | 19 |
| EIS—re-linkage --average | -- | 23 | 25 | 15.2 | 11.7 |
| EIS—re-linkage --median | -- | -- | 24 | 8.5 | 7 |

How good are our data?

113 new linkages reported in one quarter, vs. 26 to 33 in other quarters

% UNDETECTABLE

- **86%?**
 - From DSHS, pulled July 3, 2018 from EHARS
 - New data will be available in August
- **78.4%?**
 - 5 clinics, out of 2,207 clients between Apr. 1, 2018 and Mar. 31, 2019.
- **40%?**
 - ARIES, pulled June 3, 2019, for 53 clients diagnosed between Jan. 1, 2019 and Mar. 31, 2019

HOLDING OURSELVES ACCOUNTABLE: NACCHO GOALS, MAY 2018

By May 4, 2019, 2 out of 5 jails, detention centers, specialty courts and at least 2 hospital emergency departments will integrate HIV testing into the intake process. **Result: Zero so far**

By May 4, 2019, ensure that baseline average number of days between 1st contact with a linkage specialist and 1st appointment with a medical provider is less than 7 days. **Result: 16.4 days since June 2018**

By May 4, 2019, qualified peer mentors will support 50-60 newly diagnosed individuals with HIV by providing 1-2 contacts via phone and face-to-face within one month of referral date. **Result: 0 so far**

We need new target dates; also can modify goals...

“WHAT ARE WE GOING TO BE WHEN WE GROW UP?”

Interactive exercise about the things we are already doing

1) Raising awareness and changing social norms

- Mobilizing community
- Devising community solutions

2) Advocating for systems and policy change

- Systems change
- Policy change

3) Facilitating shared measurement and accountability