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

HIV/Syphilis Testing Task Force (90% know diagnosis)

EIS/Linkage Committee (90% engaged in care)

Clinical Management Team (90% virally suppressed)

Key Partners
• People’s Caucus
• Area Health Educ. Ctr. (AHEC)
• Ryan White AA

Actions/Community Engagement
• Fast-Track Cities Initiative
• Advocacy • Stigma
• Leadership development
• Peer Mentoring
• Health Justice Youth Council
• Re-entry from jail
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

Diagnosed: 81%
In Care: 72% 75% 63% 69%
Virally Suppressed: 87% 88% 84% 89%

With all races/ethnicities including “other”: 6,893 diagnosed; 4,979 in care; 4,337 undetectable
SEEN ANOTHER WAY...

Texas HIV Treatment Cascade for San Antonio TGA, 2018

- HIV+ Individuals Living at end of 2018: 6,893
- At Least One Visit/Lab: 5,436 (79%)
- Retained In Care: 4,979 (72%)
- Achieved Viral Suppression: 4,337 (63%)

100% → 81-72-87 → 63%

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

- Average 16 days (53 clients)
- New: Avg. 13 days, Median 10.5
- Relinkage: Avg. 21 days, Median 14.5
Median, 10.5 days (31 clients), range 0 to 35 days
Median, 14.5 days (10 clients), range 3 to 43 days
## A LONGER VIEW

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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?