






ONE: Identify persons with HIV infection and uninfected persons at risk for HIV infection.								
(1)1. Outcome: Increased number of persons who are aware of their HIV status.	SELECTED INDICATORS	PERFORMANCE:  Exceeding Goal.  Meeting Goal.  Not Meeting Goal. X = Cumulative Result/No Goal.						
		Q #1	Q #2	Q #3	Q #4	YTD	GOAL	
<p>➤ How many Vermonters at HIGHEST RISK for HIV were TESTED through HIV TRL-ASO this quarter?</p> <p><i>HIV TRL-ASO = HIV Testing, Referral & Linkage through AIDS Service Organizations</i></p>	# HIGHEST RISK TESTED TRL ASO	25	27			52	X	X
<p>➤ What percent of Vermonters TESTED through HIV TRL-ASO were MSM?</p>	# MSM TESTED TRL ASO	17	17			34 of 52: 65%	50% OF ALL TESTS	
<p>➤ What percent of Vermonters TESTED through ALL HIV TRL programming were MSM?</p> <p><i>TRL-ASO & TRL-PrEP Embedded Program</i></p>	# MSM TESTED TRL ASO & TRL PReP	31	33			64 of 82: 78%	50% OF ALL TESTS	

ONE: Identify persons with HIV infection and uninfected persons at risk for HIV infection.								
(1)2. Outcome: Increased participation in HIV partner services among persons with diagnosed HIV infection.	SELECTED INDICATORS	PERFORMANCE: ↑ Exceeding Goal. ⇒ Meeting Goal. ↓ Not Meeting Goal. X = Cumulative Result/No Goal.						
		Q #1	Q #2	Q #3	Q #4	YTD	GOAL	
➤ Total number PLWH REFERRED TO PARTNER SERVICES	# REF TO PARTNER SERVICES	4	19			23	X	X
○ Through CLEAR services	#PWID REF TO PS	0	0			0	X	X
○ Through TRL PReP Program	# TESTED REF to PS	1	1			2	X	X
○ Through TRL ASO Program	# TESTED REF to PS	0	0			0	X	X
○ Through NonMedical Case Management	# NMCM REF to PS	1	1			2	X	X
○ Through Medical Case Management	# MCM REF to PS	2	17			19	X	X
○ Through Psychosocial Support	# PSYSOC REF to PS	0	0			0	X	X
➤ Total number of referred PLWH LINKED TO PARTNER SERVICES	# LINK TO PARTNER SERVICES						X	X

TWO: Provide comprehensive HIV-related prevention services for persons living with diagnosed HIV infection (PLWH).								
(2)1. Outcome: Increased linkage to and retention in HIV medical care among PLWH.	SELECTED INDICATORS	PERFORMANCE: Exceeding Goal. Meeting Goal. Not Meeting Goal. X = Cumulative Result/No Goal.						
		Q #1	Q #2	Q #3	Q #4	YTD	GOAL	
➤ How many Vermonters at HIGHEST RISK tested HIV positive (+)?	# HIGHEST RISK TESTED HIV+	1	1			2	X	X
➤ What percentage of Vermonters at HIGHEST RISK TESTED HIV positive (+) were LINKED TO MEDICAL CARE within three (3) WEEKS of diagnosis?	% HIGHEST RISK TESTED HIV+: LINKED TO MED CARE 3WKS	1	1			2 of 2: 100%	90%	
➤ What percent of PLWH SERVED with Non-Medical Case Management had ~1 MEDICAL APPOINTMENT within last six (6) MONTHS ?	% SERVED NMCM: ~1 MED APP W/IN LAST 6 MO		260			260 of 287: 91%	90%	
➤ What percent of PLWH SERVED with PSYCHOSOCIAL Support , were CONNECTED TO BIOMEDICAL intervention and/or ADHERENCE counseling this quarter?	% PLWH SERVED w/PSYCHOSOCIAL: CONNECTED TO BIOMED/ADH	15	16			57% <small>WEIGHTED</small>	100%	
➤ What percent of active-patient PLWH served with Out-Patient Ambulatory Medical Care (OPAC) , had ~ one (1) MEDICAL APPOINTMENT within last six (6) MONTHS ?	% PLWH SERVED W/OPAC: ~1 MED APP <6 MO		295			295 of 354: 83%	90%	
➤ How many PLWH assessed for navigation services were SERVED with NAVIGATION services this quarter? ASD: Assessed; SRV: Served	# PLWH SERVED W/NAVIGATION	Service Provider Contract Under Revision				--	--	--

TWO: Provide comprehensive HIV-related prevention services for persons living with diagnosed HIV infection.								
(2)3. Outcome: Increased HIV viral load suppression among PLWH	SELECTED INDICATORS	PERFORMANCE: ↑↑ Exceeding Goal. ⇒ Meeting Goal. ↓↓ Not Meeting Goal. X = Cumulative Result/No Goal.						
		Q #1	Q #2	Q #3	Q #4	YTD	GOAL	
➤ How many unduplicated PLWH are ACTIVE PATIENTS in Medical Case Management (MCM) ?	# PLWH ACTIVE PTS in MCM	209	354			--	X	X
➤ What percent of ACTIVE PATIENTS in MCM <u>PRESCRIBED</u> ARV?	% ACTIVE PTS in MCM PRESCRIBED ARV	280*	338			98% <small>WEIGHTED</small>	100%	↓↓
➤ How many PLWH on HAART with Viral Load > 200 copies were served in MCM ?	# PLWH ON HAART w/VL > 200 in MCM	11	18			29	X	X
➤ What percent PLWH ON HAART with Viral Load > 200 were linked to ADHERENCE COUNSELING two (2) or more times, at least three (3) MONTHS apart, this quarter?	% PLWH ON HAART w/VL > 200 LINKED to ADH CNSL ~2 IN > 3 MO	7	12			66%	90%	↓↓
➤ What percent PLWH with Viral Load > 200 in MCM (including Treatment Adherence) experienced INCREASE in ADHERENCE SCORE ?	% PLWH ON HAART w/VL > 200 in MCM INC ADH SCORE	1	0			5% <small>WEIGHTED</small>	60%	↓↓
➤ How many PLWH SERVED with NAVIGATION services, OBTAINED appropriate BIOMEDICAL intervention and/or ADHERENCE COUNSELING this quarter?	#PLWH SERVED W/NAV: OBT BIOMED/ADH	Service Provider Contract Under Revision				--	--	--






TWO: Provide comprehensive HIV-related prevention services for persons living with diagnosed HIV infection.								
(2)4. Outcome: Decreased risk behaviors among PLWH at risk for transmission	SELECTED INDICATORS	PERFORMANCE: ↑ Exceeding Goal. ⇒ Meeting Goal. ↓ Not Meeting Goal. X = Cumulative Result/No Goal.						
		Q #1	Q #2	Q #3	Q #4	YTD	GOAL	
➤ How many PLWH SERVED with Non-Medical Case Management in 6mo reporting period?	# PLWH SERV NMCM		287			287	X	X
➤ How many client REQUESTS FOR MEDICAL TRANSPORTATION made in this quarter?	# REQUESTS MED TRANSPORT	239	269			508	X	X
➤ How many MEDICAL TRANSPORTATION VOUCHERS were issues this quarter?	# MED TRANSPORT VOUCHERS	171	213			348	X	X
➤ How many PHYSICAL MEDICAL TRANSPORTS provided by case managers?	# MED TRANSPORT BY CM	68	56			123	X	X
➤ How many PLWH SERVED with Non-Medical Case Management have received Emergency Financial Assistance?	# PLWH SERV NMCM REC'D EFA	169	139			308	X	X
➤ How many PLWH SERVED with Non-Medical Case Management receiving EMERGENCY FINANCIAL ASSISTANCE NEW this quarter?	# PLWH SERV NMCM REC'D EFA <u>NEW</u>	169	30			199	X	X
➤ How many PLWH SERVED with Non-Medical Case Management that RECEIVED EFA are STABLY HOUSED this quarter?	# SERV NMCM: REC'D EFA STABLY HOUSED	159	129			93% WEIGHTED	95%	↓↓
➤ How many MP+ GROUPS held this quarter?	# MP+ GPS	0	0			0	X	X

➤ How many Mixed Status (+/-) MGROUPS (MPGS) held this quarter?	# (+/-) MGPS	1	2			3	X	X
➤ How many HIV+ MSM completed an MP+ GROUP?	# MSM PLWH: MP+	0	0			0	10	↓↓
➤ How many MSM completed a Mixed Status (+/-) MGROUP (MGP)?	# MSM: (+/-) MGP	11	14			25	46	⇒
➤ How many PLWH PATIENTS NEW to CLINIC and SEEN by MEDICAL PROVIDER?	# PTS NEW to CLINIC SEEN BY MED PRVDR	12	2			14	X	X
➤ What percent of NEW PATIENTS were SCREENED FOR NUTRITIONAL NEEDS?	% NEW PTS SCRND for NUTR NEEDS	5	2			7 of 14: 50%	90%	↓↓
➤ How many patients SCREENED POSITIVE for NUTRITIONAL NEEDS?	# PTS SCRND + NUTR NEEDS	48	12			60	X	X
➤ What percent of patients SCREENING POSITIVE for NUTRITIONAL NEEDS had FIRST APPOINTMENT with DIETICIAN (phone or in person) in 6 mo report period?	% PTS SCRND + NUTR NEEDS had 1 ST APPT w/DIETICIAN		12			12 of 60: 3%	90%	↓↓
➤ Out-Patient Ambulatory Medical Care (OPAC): How many ACTIVE PATIENTS in 6 month reporting period?	# OPAC ACTIVE PTS		354			354	X	X
➤ OPAC: What percent of ACTIVE PATIENTS have had AT LEAST ONE (~1) MEDICAL VISIT within last six months?	% OPAC ACTIVE PTS ~1 MED VISIT		295			295 of 354: 83%	80%	↑↑
➤ OPAC: How many ACTIVE PATIENTS were HIV+ MSM?	# OPAC ACTIVE PTS HIV+ MSM	184	61			246	X	X
➤ OPAC: What percent of HIV+ MSM were TESTED FOR GONORRHEA?	# OPAC HIV+ MSM TESTED GONORRHEA	46	11			22% WEIGHTED	50%	↓↓

➤ OPAC: What percent of HIV+ MSM were TESTED FOR SYPHILIS ?	# OPAC HIV+ MSM TESTED SYPHILIS	49	10			21% WEIGHTED	50%	↓↓
➤ OPAC: What percent of ACTIVE PATIENTS have SUPPRESSED VIRAL LOAD < 200cp/ml , drawn within last 12 months?	% OPAC ACTIVE PTS w/VIRAL LOAD < 200	252	317			317 of 354: 90%	90%	⇒
➤ OPAC: How many ACTIVE PATIENTS received HIV DIAGNOSIS in LAST 3 MOS ?	# OPAC ACTIVE PTS REC'D HIV DIAG in < 3 MO	2	0			2	X	X
➤ OPAC: What percent of ACTIVE PATIENTS receiving HIV diagnosis in last 3 months were PRESCRIBED ARV ?	# OPAC PTS REC'D HIV DIAG < 3 MO PRESCRIBED ARV	2	0			2 of 2: 100%	95%	↑↑
➤ What percent of PLWH , twelve years and older (12+) have been SCREENED FOR CLINICAL DEPRESSION ?	% PLWH 12+ SCR FOR CLIN DEPRESSION	76%	88%			82% WEIGHTED	EST BASE-LINE	⇒
➤ What percent of PATIENTS with an HIV diagnosis (HIV+) RECEIVED MENTAL HEALTH TREATMENT SERVICES ?	% PTS REC'D MH TREATMENT SERVICES	4%	1%			3% WEIGHTED	EST BASE-LINE	⇒
➤ What percent of PATIENTS with an HIV diagnosis (HIV+) were SCREENED FOR SUBSTANCE USE ?	% HIV+ PTS SCR for SUB USE	72%	92%			82%	EST BASE-LINE	⇒
➤ What percent of PATIENTS with an HIV diagnosis (HIV+) received SUBSTANCE ABUSE TREATMENT services?	% HIV+ PT RECEIVED SA TRTMNT	3%	4%			4% WEIGHTED	EST BASE-LINE	⇒

THREE:	Provide comprehensive HIV-related prevention services for HIV-negative persons at risk for HIV infection.									
(3)1. Outcome: Increased referral of persons eligible for PrEP.	SELECTED INDICATORS	PERFORMANCE: ↑↑ Exceeding Goal. ⇒ Meeting Goal. ↓↓ Not Meeting Goal. X = Cumulative Result/No Goal.								
		Q #1	Q #2	Q #3	Q #4	YTD	GOAL			
TRL-ASO PROGRAM										
○ How many MSM were TESTED for HIV through TRL-ASO?	# MSM TESTED	17	17			34	X	X		
○ What percent of MSM TESTED for HIV through TRL-ASO were ASSESSED FOR PrEP with the CDC assessment tool?	# MSM TESTED: ASSD FOR PrEP	6	15			21 of 34: 62%	100%	↓↓		
○ What percent of MSM that SCORED ten or higher (10+) on the CDC PrEP assessment tool were offered REFERRAL TO PrEP services?	# MSM SCORED 10+: REF TO PrEP	1	7			8 of 9: 89%	100% OF 10+ MEN	↓↓		
TRL-PrEP PROGRAM										
○ How many MSM were TESTED for HIV through TRL-PrEP program?	# MSM TESTED	14	16			30	25/QTR 100	↓↓		
○ What percent of MSM TESTED for HIV through TRL-PrEP were ASSESSED FOR PrEP with CDC assessment tool?	# MSM TESTED: ASSD FOR PrEP	13	15			28 of 30: 93%	100%	↓↓		
○ What percent of MSM that SCORED ten or higher (10+) on CDC assessment tool were offered REFERRAL TO PrEP services?	# MSM SCORED 10+: REF TO PrEP	11	13			24 of 24: 100%	100% OF 10+ MEN	⇒		

THREE:	Provide comprehensive HIV-related prevention services for HIV-negative persons at risk for HIV infection.							
(3)2. Outcome: Increased prescription of PrEP to persons for whom PrEP is indicated. (PCVT)	SELECTED INDICATORS	PERFORMANCE: ↑ Exceeding Goal. ⇒ Meeting Goal. ↓ Not Meeting Goal. X = Cumulative Result/No Goal.						
		Q #1	Q #2	Q #3	Q #4	YTD	GOAL	
TRL-ASO PROGRAM								
➤ How many MSM tested SCOREd ten or higher (10+) on CDC PrEP assessment tool?	# MSM TRL-ASO SCORE 10+	2	7			9	X	X
➤ What percent of MSM that SCOREd ten or higher (10+) on the CDC PrEP assessment tool were offered REFerral TO PrEP services?	# MSM SCORE 10+: REF TO PrEP	1	7			8 of 9: 89%	100% OF 10+ MEN	↓
➤ Of MSM offered REFerral to PrEP services, how many ACCePTeD REFerral?	# MSM REF PrEP: ACCPTD REF	1	3			4	X	X
➤ vxWhat percent of MSM accepting REFerral to PrEP were LINKED to medical setting for PrEP care?	# MSM REF PrEP: LINKED	0	0			0 of 4: 0%	100% OF MEN ACCPT REF	↓
TRL-PrEP PROGRAM								
➤ How many MSM tested SCOREd ten or higher (10+) on CDC PrEP assessment?	# MSM TRL-PrEP SCORE 10+	11	13			24	X	X
➤ Of MSM that SCOREd ten or higher (10+) on the CDC PrEP assessment tool how many were offered REFerral TO PrEP services?	# MSM SCORE 10+: REF TO PrEP	11	13			24 of 24: 100%	100% OF 10+ MEN	⇒
➤ Of MSM offered REFerral to PrEP services, how many ACCePTeD REFerral?	# MSM REF PrEP: ACCPTD REF	6	8			14	X	X
➤ How many MSM accepting REFerral to PrEP LINKED to medical setting for PrEP care?	# MSM REF PrEP: LINKED	2	4			6 of 14: 43%	100% OF MEN ACCPT REF	↓

FOUR: Conduct community-level HIV prevention activities.								
(4)2. Outcome: Increased access to syringe service programs for persons who inject drugs.	SELECTED INDICATORS	PERFORMANCE:  Exceeding Goal.  Meeting Goal.  Not Meeting Goal. X = Cumulative Result/No Goal.						
		Q #1	Q #2	Q #3	Q #4	YTD	GOAL	
➤ How many IDU clients ENROLLED in CLEAR?	# IDU ENR CLEAR	5	3			8	15	
➤ How many IDU clients ENGAGED through CLEAR services?	# IDU ENG CLEAR	0	1			1	15	
➤ Number SYRINGES exchanged/mo: IN	# SYR IN						X	X
➤ Number SYRINGES exchanged/mo: OUT	# SYR OUT						X	X
➤ Total unduplicated SSP Membership	# SSP MBR						X	X
➤ Number NEW Members (MBR) EXCHANGING SYRINGES	# NEW MBR EXCH SYR						X	X
➤ Number MEMBER VISIT/Encounters	# MBR VISIT						X	X
➤ Number SECONDARY EXCHANGES	# SEC EXCH						X	X
➤ Number Members RECEIVING HIV TRL	# MBR REC HIV TRL						X	X
➤ Number members (MBR) RECEIVING Hepatitis C Virus TESTING per quarter	# MBR REC HCV TEST						X	X
➤ Number POSITIVE HCV TESTS	# +HCV TEST						X	X
➤ Number NEGATIVE HCV TESTS	# -HCV TEST						X	X
➤ Number indeterminate (?) HCV TESTS	# ?HCV TEST						X	X