Annual Performance Report—Component 3--Form Instructions
Year 2 Reporting Period (10/1/21-9/30/22)
Integrated Viral Hepatitis Surveillance and Prevention Funding for Health Departments

Component 3: Special Projects—Prevention, Diagnosis, and Treatment Related to the Infectious Disease Consequences of Drug Use

The Annual Performance Report (APR) for CDC-RFA-PS21-2103 is required for all award recipients. The instructions in this document are to be used when submitting your APR data through the online form provided by CDC. Data submitted through the online form will be reviewed by CDC and analyzed for future reports (e.g., rapid feedback report).

Recipients must also submit a copy of their APR data via www.Grantsolutions.gov no later than 120 days prior to the end of the budget period (as part of the year 3 continuation application). Please see the Notice of Funding Opportunity (NOFO) document for this cooperative agreement starting on page 68 for additional information.

Evaluation and Performance Measures are listed starting on page 29 of the NOFO. Please review that information, along with Strategies and Activities starting on page 11, before submitting your APR through the online form.

Notes:

Timelines are provided in the NOFO for each measure, however, in general:

- **Short-term outcomes** should be reached by the end of year 3. Measures associated with these outcomes should be reported annually. Recipients can define Year 1 and Year 2 goals, that are related to short-term outcomes, based on interim activities.
- **Intermediate outcomes** should be reached by the end of year 5. Measures associated with these outcomes should be reported annually. Recipients may define interim goals (for Year 1-Year 5) that are related to the intermediate outcomes to track progress.
- Outcomes for measures that are “contingent on funding” are not required to be reached unless they are funded during the course of the award. Reporting of these measures is recommended but not required.

All fields must be completed. For numeric fields: if unknown enter -999; if number is known and it is 0, enter 0.

The Reporting Period corresponds with the PS21-2103 fiscal year. For Years 2-4 this is October 1 to September 30. (Year 1 covered a briefer period, 5/1/21 to 9/30/21. For Year 5 the reporting period will summarize a longer period, 10/1/24 to 4/30/26.)

3.1—Improve access to services for people who inject drugs (PWID) in settings disproportionately affected by drug use

Setting type

- In this section, specify the high-impact settings serving PWID where services were provided during the reporting period: syringe services programs (SSP), substance use disorder (SUD) treatment programs (hospital and non-hospital based), other hospital-based programs, health centers, sexually transmitted infections clinics, mobile clinics, emergency departments, correctional facilities, homeless services, other.
    - Classify sites under the setting type in accordance with primary mission of the site. For example, a health clinic that offers syringe services as part of its core mission to offer evidence-based primary health care services should be classified under the setting type “health clinic”.
    - Similarly, a substance use disorder treatment facility that offers syringe services as part of its core mission to offer evidence-based services for substance use disorder should be classified under the setting type “substance use disorder treatment facility”.
    - A syringe services program that offers primary care services and medical treatment of opioid use disorder as part of its mission to reduce harm among persons who inject drugs should be classified under the setting type “syringe services program”.
    - Please reach out to your regional epi with any questions about how best to categorize a site providing services under component 3.
- Use the "other" fields to specify setting types that are not listed.
- Where there are multiple sites associated with a single setting type, summarize data across all those sites and submit the total for that setting type. For example, if there are three different SSP sites providing services, summarize data across all three sites and submit the total for all SSP measures.

For Measures 3.1.1.a through 3.1.5.d:

Indicate when prompted whether data reported represent individual, client-level data, service encounter-level data, or other (for example, a mix of individual- and encounter- level) as defined below. *Monthly reports of client services provided may <u>not</u> be added together to provide a yearly total for either type of data.*

- **Individual, Client-Level Data:** De-duplicated data representing services provided to unique clients (number of people that received a service). These data represent unique individuals**.**

- **Service/Encounter-Level Data:** Represents services provided but not how many clients received a service (for example, number of times service was provided).

    - ***Note that individual-level data are preferred if available.***

Indicate when prompted whether or not the service was offered in any site(s) associated with the setting type. (For example, if hepatitis B testing was offered at even just one of three SSP sites, select "yes" for hepatitis B testing service provided for the setting type "SSP".)

Measure 3.1.1.a

Report by setting type:

Number of clients served, number of PWID served during this reporting period

- **Clients served —** This is a short-term outcome (years 1–3).
  - Report the unduplicated count of clients seen at least once during the reporting period. Summarize data if multiple sites associated with a single setting type.
- **PWID served —** This is a short-term outcome (years 1–3).
  - **PWID** is defined as persons reporting current (typically within 12 months) use of non-prescription drugs by injection.
  - Report the unduplicated count of PWID seen at least once during the reporting period. Summarize data if multiple sites associated with a single setting type.
- See NOFO pages 22–26 for more information.

Measure 3.1.1.b

Report by setting type:

Number of syringes distributed during this reporting period

- **Syringes distributed —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Sterile injection equipment should be supplied as a *complete set* of all equipment needed to complete a single injection—needle, syringe, cooker, alcohol swab, etc. Sets of sterile injection equipment to inject drugs should be supplied in sufficient quantity so that all injections are performed with sterile equipment. For this measure, report the total number of syringes distributed to persons who inject drugs, stratified by setting serving PWID. Total number of syringes distributed is intended as a proxy for the number of *complete sets* of sterile injection equipment distributed.

Measure 3.1.2.a has been removed

Measure 3.1.2.b

Report by setting type:

Number of PWID assessed for opioid use disorder during this reporting period

- **PWID assessed for opioid use disorder —** This is a short-term outcome (years 1–3).

- **PWID** is defined as a person who currently (typically within 12 months) uses non-prescription drugs by injection.
- Summarize data if multiple sites associated with a single setting type.
- Report the total number of PWID (from 3.1.1.a) who were assessed for opioid use disorder. See definitions below.
- Complete a clinical interview to determine if the client meets DSM-5 criteria for opioid use disorder. The interview may be conducted by a licensed provider or a standardized interview may be conducted by appropriately trained and supervised staff, consistent with state and local regulations.
- **Opioid Use Disorder —** According to the "*Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (DSM-5)," opioid use disorder is present if the pattern of opioid use causes clinically significant impairment or distress as manifested by the presence of ≥ 2 of the following over a 12-month period:
    - Taking opioids in larger amounts or for a longer time than intended
    - Persistently desiring or unsuccessfully attempting to decrease opioid use
    - Spending a great deal of time obtaining, using, or recovering from opioids
    - Craving opioids
    - Failing repeatedly to meet obligations at work, home, or school because of opioids
    - Continuing to use opioids despite having recurrent social or interpersonal problems because of opioids
    - Giving up important social, work, or recreational activities because of opioids
    - Using opioids in physically hazardous situations
    - Continuing to use opioids despite having a physical or mental disorder caused or worsened by opioids
    - Having tolerance to opioids (not a criterion when use is medically appropriate)
    - Having opioid withdrawal symptoms or taking opioids because of withdrawal"

  Source: https://www.merckmanuals.com/professional/special-subjects/recreational-drugs-and-intoxicants/opioid-use-disorder-and-rehabilitation

Measure 3.1.2.c

Report by setting type:

Number of PWID with opioid use disorder during this reporting period

- **PWID with opioid use disorder —** This is a short-term outcome (years 1–3).
- **PWID** is defined as a person who currently (typically within 12 months) uses non-prescription drugs by injection.
- Summarize data if multiple sites associated with a single setting type.
- Report the total number of PWID (from 3.1.1.a) with opioid use disorder. Of PWID assessed for opioid use disorder (3.1.2.b), report the number of persons with opioid use disorder. Include only persons diagnosed with opioid use disorder as a result of screening for opioid use disorder during the project period. See definitions in 3.1.2.b.

Measure 3.1.2.d

Report by setting type:

Number of PWID with opioid use disorder who are linked to medication for opioid use disorder during this reporting period

- **PWID with opioid use disorder who were linked to medication for opioid use disorder —** This is a short-term outcome (years 1–3).
- **PWID** is defined as a person who currently (typically within 12 months) uses non-prescription drugs by injection.
- Summarize data if multiple sites associated with a single setting type.
- Report the total number of PWID (from 3.1.1.a) with opioid use disorder who were linked to medication for opioid use disorder. Of PWID with opioid use disorder identified in 3.1.2.c, report the number who were linked to medication for opioid use disorder. See definitions below.
- **Linkage** is defined as attendance at an initial visit to evaluate for medical treatment for opioid use disorder. “Referral” could have a variety of meanings and does not count as “linkage.” Successful linkage can be documented by review of records or direct report by a peer navigator or other reliable means.
- **Medication for opioid use disorder** includes any of three FDA-approved medical treatments for opioid use disorder: methadone, buprenorphine and naltrexone.

Measure 3.1.3.a

Report by setting type:

Number of clients tested for anti-HCV during this reporting period

- **Clients tested for anti-HCV —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Report the total number of clients (from 3.1.1.a) who were tested for anti-HCV antibody. Anti-HCV tests may include rapid point-of-care tests.
- **Testing** includes laboratory testing by any FDA-approved or validated laboratory-developed test.
- **To be counted, the test must be performed within the setting.**
- See NOFO pages 23–24 for more information.

Measure 3.1.4.a

Report by setting type:

Number of clients testing positive for anti-HCV during this reporting period

- **Clients testing positive for anti-HCV —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Of clients who tested for anti-HCV antibody (from 3.1.3.a), report the number of clients who tested positive for anti-HCV antibody.

Measure 3.1.4.b

Report by setting type:

Number of clients positive for anti-HCV that were tested for HCV RNA during this reporting period

- **Clients positive for anti-HCV tested for HCV RNA —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.

- Of clients who tested positive for anti-HCV antibody (from 3.1.4.a), report the number of clients who were tested for HCV RNA.
- **Testing** includes laboratory testing by any FDA-approved or validated laboratory-developed test.
- **To be counted, the test must be performed within the setting.**

Measure 3.1.4.c

Report by setting type:

Number of clients testing positive for HCV RNA during this reporting period

- **Clients testing positive for HCV RNA —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Of clients who were tested for HCV RNA (from 3.1.4.b), report the number of clients who had a positive result for HCV RNA. This includes test results that are detectable but not quantifiable.
- **To be counted, the test must be performed within the setting.**

Measure 3.1.4.d

Report by setting type:

Number of HCV RNA (+) clients linked to hepatitis C treatment during this reporting period

- **HCV RNA (+) clients linked to hepatitis C treatment —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Of clients who had a positive HCV RNA result (Measure 3.1.4.c), report the number who were linked to hepatitis C treatment. See definitions below.
- **Linkage** is defined as provision of medical care at the facility or attendance at the initial visit to evaluate for medical treatment of hepatitis C. “Referral” could have a variety of meanings and does not count as “linkage.” Successful linkage can be documented by review of records or direct report by a peer navigator or other reliable means.
- See NOFO page 24 for more information.

Measure 3.1.3.b

Report by setting type:

Number of clients screened for HBV (anti-HBc, HBsAg, anti-HBs) during this reporting period

- **Clients screened for HBV (total anti-HBc, HBsAg, anti-HBs) —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Report the number of clients (from 3.1.1.a) who were screened for hepatitis B, defined as receipt of testing for all of the following:
    - Total anti-hepatitis B core antibody (total anti-HBc)
    - Hepatitis B surface antigen (HBsAg); and

    - Hepatitis B surface antibody (anti-HBs).
- **To be counted, the test must be performed within the setting.**
- See NOFO pages 23–24 for more information.

Measure 3.1.4.e

Report by setting type:

Number of clients testing positive for HBsAg during this reporting period

- **Clients testing positive for HBsAg —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Of clients who were screened for hepatitis B (from 3.1.3.b), report the number who had a positive test result for hepatitis B surface antigen (HBsAg).
- **To be counted, the test must be performed within the setting.**

Measure 3.1.4.f

Report by setting type:

Number of HBV (+) clients linked to hepatitis B care during this reporting period

- **HBV (+) clients linked to hepatitis B care —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Of clients who had a positive test result for hepatitis B surface antigen (HBsAg) (from 3.1.4.e), report the number who were linked to hepatitis B care. See definitions below.
- **Linkage** is defined as provision of medical care at the facility or attendance at the initial visit to evaluate for medical treatment for hepatitis B. “Referral” could have a variety of meanings and does not count as “linkage.” Successful linkage can be documented by review of records or direct report by a peer navigator or other reliable means.
- See NOFO page 24 for more information.

Measure 3.1.3.c

Report by setting type:

Number of clients screened for HIV during this reporting period

- **Clients screened for HIV —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Report the number of clients (from 3.1.1.a) who were screened for HIV. Any licensed screening or confirmatory test for HIV may be counted in this measure.
- **To be counted, the test must be performed within the setting.**
- See NOFO pages 23–24 for more information.

Measure 3.1.4.g

Report by setting type:

Number of clients testing positive for HIV during this reporting period

- **Clients testing positive for HIV —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.

- Of clients who were screened for HIV (from 3.1.3.c), report the number who had a positive test result for HIV. Count only confirmed positive HIV results for this measure.
- **To be counted, the test must be performed within the setting.**

Measure 3.1.4.h

Report by setting type:

Number of HIV (+) clients linked to HIV treatment during this reporting period

- **HIV (+) clients linked to HIV treatment —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Of clients who had a positive test result for HIV (from 3.1.4.g), report the number who were linked to HIV treatment. See definitions below.
- **Linkage** is defined as provision of medical care at the facility or attendance at the initial visit to evaluate for medical treatment for HIV. “Referral” could have a variety of meanings and does not count as “linkage.” Successful linkage can be documented by review of records or direct report by a peer navigator or other reliable means.
- See NOFO page 24 for more information.

Measure 3.1.4.i

Report by setting type:

Number of clients referred for treatment for bacterial or fungal infections during this reporting period

- **Clients treated or referred for treatment of bacterial or fungal infections —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Report number of clients (from 3.1.1.a) who were referred to treatment for bacterial or fungal infections. Referral can be to a primary care provider, emergency department or other appropriate provider. On-site treatment or attendance at a clinical visit for medical management of the infection can also be counted for this measure.

Measure 3.1.5.a

Report by setting type:

Number of hepatitis A vaccination doses administered during this reporting period

- **Hepatitis A vaccination doses administered —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Report total doses of any hepatitis A vaccine (single antigen or combination) administered.
- **To be counted, the vaccination must be performed within the setting.**
- See NOFO page 24 for more information.

Measure 3.1.5.b

Report by setting type:

Number of clients who completed hepatitis A vaccination series during this reporting period

- **Clients who completed hepatitis A vaccination series —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Report the number of clients (from 3.1.1.a) who received the final dose of a complete hepatitis A vaccine series during the current reporting period.

Measure 3.1.5.c

Report by setting type:

Number of hepatitis B vaccination doses administered to clients during this reporting period

- **Hepatitis B vaccination doses administered —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Report total doses of any hepatitis B vaccine (single antigen or combination) administered.
- **To be counted, the vaccination must be performed within the setting.**
- See NOFO page 24 for more information.

Measure 3.1.5.d

Report by setting type:

Number of clients who completed hepatitis B vaccination series during this reporting period

- **Clients who completed hepatitis B vaccination series —** This is a short-term outcome (years 1–3).
- Summarize data if multiple sites associated with a single setting type.
- Report the number of clients (from 3.1.1.a) who received the final dose of a complete hepatitis B vaccine series.

Measure 3.1.6.a

How many new confirmed acute hepatitis B cases were reported among people reporting a history of injection drug use in your jurisdiction during this reporting period?

- **New confirmed acute hepatitis B cases reported among people reporting a history of injection drug use —** This is an intermediate outcome (years 4–5).
- Using jurisdictional surveillance data for this reporting period, report the number of cases of acute hepatitis B with reported injection drug use during the incubation period.

Measure 3.1.6.b

How many new confirmed acute hepatitis C cases were reported among people reporting a history of injection drug use in your jurisdiction during this reporting period?

- **New confirmed acute hepatitis C cases reported among people reporting a history of injection drug use —** This is an intermediate outcome (years 4–5).
- Using jurisdictional surveillance data for this reporting period, report the number of cases of acute hepatitis C with reported injection drug use during the incubation period.

Measure 3.1.6.c

How many new confirmed HIV cases were reported among people reporting a history of injection drug use in your jurisdiction during this reporting period?

- **New confirmed HIV cases reported among people reporting a history of injection drug use —** This is an intermediate outcome (years 4–5).
- Using jurisdictional surveillance data for this reporting period, report the number of cases of confirmed HIV infection with reported injection drug use as a risk factor.

Measure 3.1.7.a

Do you report hepatitis C viral clearance cascade data for reported cases among people reporting a history of injection drug use in your jurisdiction?

- **Do you report hepatitis C viral clearance cascade data for reported cases among people reporting a history of injection drug use in your jurisdiction?** This is an intermediate outcome (years 4–5).
- Respond “yes” if your jurisdiction publishes a clearance cascade for persons reporting injection drug use as a risk factor for acute or chronic hepatitis C, based on surveillance data. If a cascade is under development select “in progress” Otherwise, respond “no.” Care cascade data are counted as “reported” if published (e.g., on a website) or if shared with partners.

Additional information (challenges and successes)

Recipients must describe challenges and successes experienced when implementing Strategy 3.1 activities.

- This information should be reported in the APR form. Please do not develop a separate document to submit with your jurisdiction’s non-competing continuation application.
- When describing challenges, please indicate how CDC could provide support to your jurisdiction to complete activities in the work plan and achieve the short and intermediate outcomes.
- Also include any contextual information that would help us interpret your annual performance data.
- See NOFO page 68 for more information.