

Integrated HIV Prevention and Care Plan: Introduction

February 12, Comprehensive Planning Committee

Objectives

Committee members will be able to:

1. Describe legislative requirements and expectations of the Ryan White Part A Integrated Plan
2. Describe the Integrated Plan fits into the Annual Ryan White Part A Planning cycle
3. Identify the components of the Austin TGA's Integrated Plan
4. List areas of focus for the 2019 Update

What is the Integrated HIV Prevention and Care Plan?

- The Integrated Plan establish the blueprint for achieving HIV prevention, care, and treatment goals
- The plan sets forth the jurisdiction's commitment to collaboration, efficiency, and innovation to achieve a more coordinated response to addressing HIV
- The plan is a joint effort between jurisdictions and planning bodies that engages persons at higher risk for HIV infection, PLWH, service delivery providers, and other community stakeholders

Expectations: RWHAP Part A Comprehensive/Integrated Plan

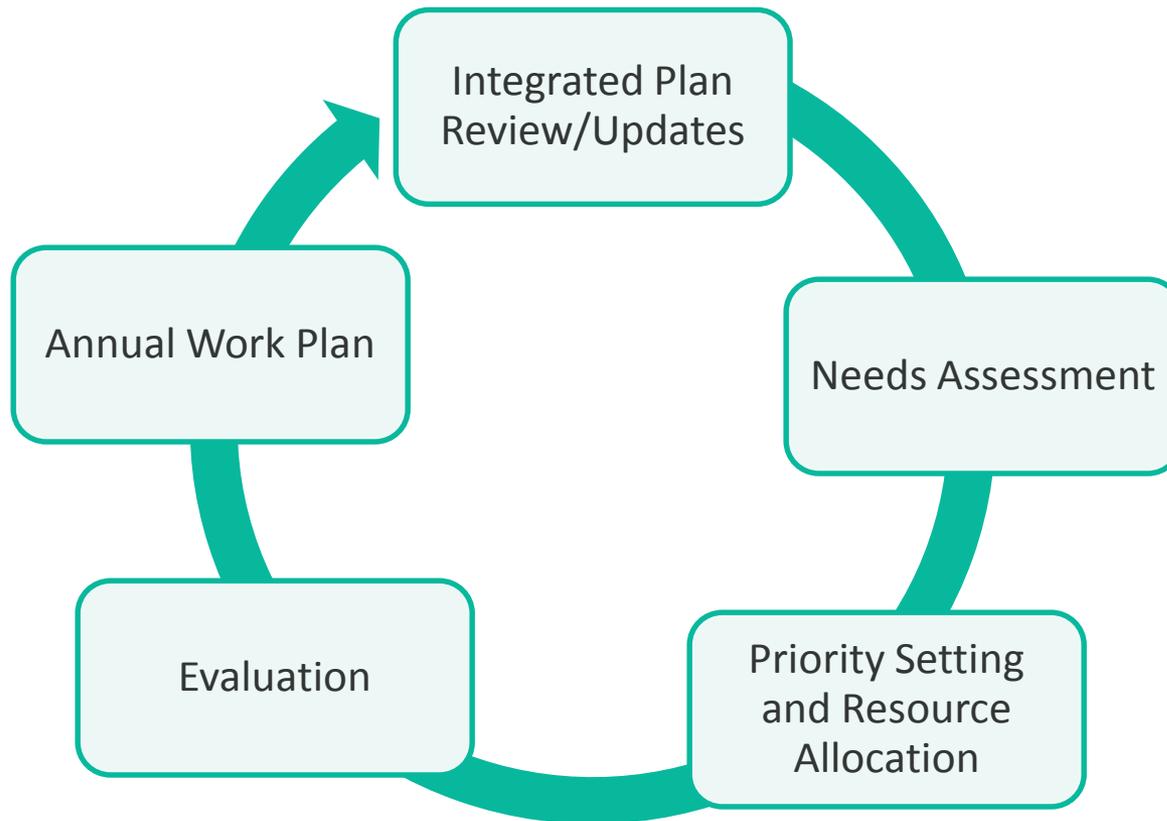
- Legislation requires preparation of comprehensive plans that set goals and objectives and guide the work of the program
- HRSA/CDC Integrated HIV Prevention and Care Plans, including the Statewide Coordinated Statement of Need (SCSN) for 2017-2022 submitted in September 2016
- PC/PBs play a lead role in plan development, review, and updating

Expectations: RWHAP Part A

Comprehensive/Integrated Plan (cont.)

- Planning bodies will use the National HIV/AIDS Strategy (NHAS) as the organizing framework for the Integrated HIV Prevention and Care Plan to achieve a more coordinated jurisdictional response to the local HIV epidemic.
 - 1) reducing new HIV infections
 - 2) increasing access to care and improving health outcomes for PLWH
 - 3) reducing HIV related disparities and health inequities
- Programs expected to regularly review Plan progress and refine objectives and strategies as needed – plan should be a living document that guides the annual planning cycle

The Annual RWHAP Part A Planning Cycle



Austin TGA Integrated Plan

- Components of the plan
- Monitoring Plan Objectives
- Updates

The Integrated HIV Prevention and Care Plan should include:

- **Goals:** a broad statement of purpose that describes the expected long-term effects of efforts consistent with the National HIV/AIDS Strategy and covering a period of 5 years
- **Objectives:** measurable statements that describe results to be achieved
- **Strategies:** the approach by which the objectives will be achieved
- **Activities:** describing how the objectives will be achieved

Integrated Plan Components

GOAL #1: Reduce new HIV infections

Objective 1: Reduce new diagnoses by 25 percent (from 327 to 246) by 2021.

Strategy 1: Provide easily accessible, appropriate, scientifically accurate information about HIV risks, prevention, and transmission to high-risk populations.

	Timeframe	Activity	Responsible Parties	Target Population	Data Indicators
A1	2017-2021 ONGOING	Support coordinated social marketing and other mass education activities focused on raising HIV awareness, including targeted messages for high risk populations (sex, age, etc.).	HIV Planning Council; City of Austin HHS (HIV Resource Administration and Communicable Disease units); Community Based Organizations	High-risk MSM, IDU, Women, Youth, Black, Hispanic	Number of social marketing messages and mass education activities; total of different types of messages

Monitoring Plan Objectives

GOAL	OBJECTIVE	BASELINE (2015)	UPDATE 2017	CHANGE	GOAL 2021	CHANGE %
	Goal 1: Reduce new HIV Infections	Objective 1: Reduce new diagnoses by 25% by 2021	N=327	N=288	12%	N=246 25%
		Objective 2: Reduce late-stage diagnoses by 25% by 2021	22% (2014)	19% (2016)	3%	16.5% 25%
	Goal 2: Increase access to care and improve health outcomes for PLWHA	Objective 1: Increase the percentage of newly diagnosed persons linked to HIV medical care within one month of diagnosis from 60% to at least 75% by 2021	60%	59%	-2%	75% 15%
		Objective 2: Increase the percentage of PLWHA who are retained in HIV medical care from 79% to at least 85%	79%	78%	-1%	85% 6%
	Goal 3: Reduce HIV-related disparities and health inequalities	Objective 1: By 2021, reduce disparities in the rate of new diagnoses by at least 15% in the following population*s:				
		Black MSM	48.7	44.1	PROGRESS	41.4 15%
		Black Women	1.7	1.5	PROGRESS	1.4 15%
		Hispanic	1.3	1.2	PROGRESS	1.1 15%
		Youth	1.4	1.6	INCREASE	1.2 15%
		IDU	5%	4.1%	PROGRESS	4.3% 15%
		Transgender			REQUESTED	

Activity- level monitoring has been by counts. Recommend moving to narrative format based on Fast Track Cities Austin monitoring structure.

2019 Update- Areas of Focus

- Alignment with other community plans
- Insure existing community activities are represented clearly in the plan
- Add specificity to
 - activities
 - timeframe
 - target population
 - responsible parties
- Others?