Understanding the Annual Planning Cycle

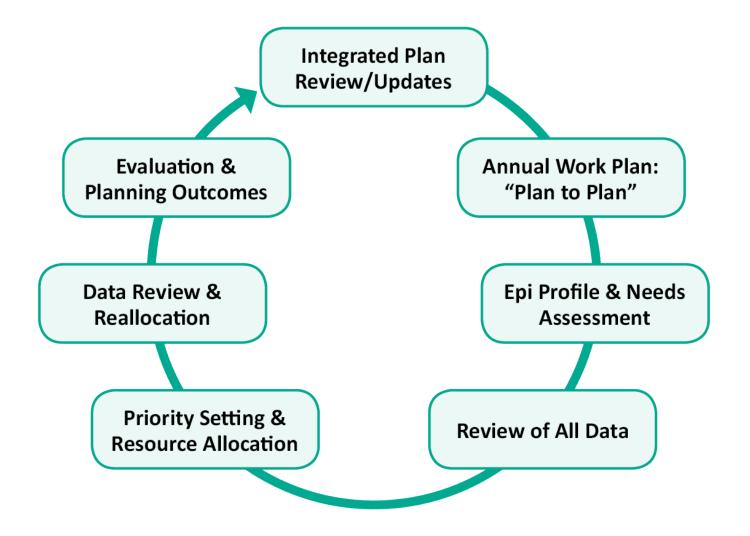
Office of HIV Planning September 2020

## **Training Objectives**

Following the training, participants will be able to:

- 1. List and describe each component of the RWHAP Part A annual planning cycle
- 2. Identify the entities responsible for each of the major annual planning tasks
- 3. Describe the roles of individual PC members in the annual planning cycle
- 4. Provide examples of PC-recipient collaboration needed for successful annual planning

#### The Annual RWHAP Part A Planning Cycle



### Expectations: RWHAP Part A Comprehensive/Integrated Plan

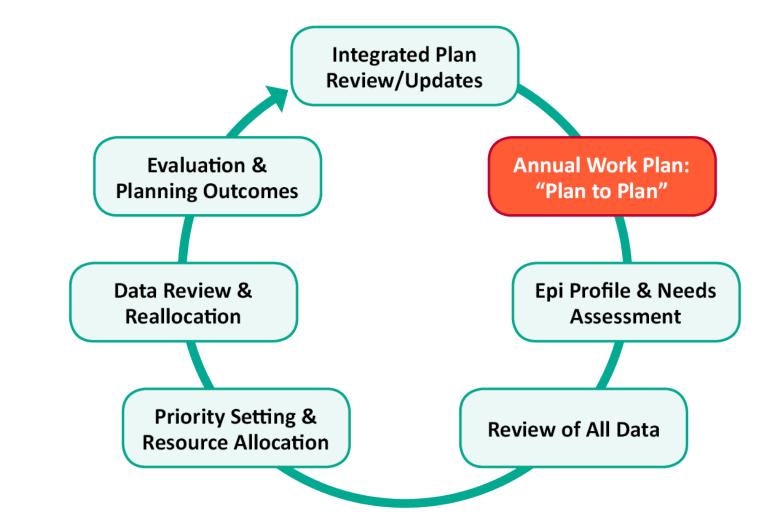
Legislation requires preparation of comprehensive plans that set goals and objectives and guide the work of the program

HRSA/CDC Integrated HIV Prevention and Care Plans for 2017-2022 submitted in September 2016, updated in 2018

PC play a lead role in plan development, review, and updating

Regular review of Plan progress and refine objectives and strategies as needed – plan should be a living document that guides the annual planning cycle

### Annual Work Plan: "Plan to Plan"



#### **Expectations: Annual Work Plan**

Annual work plan for PC – to guide the planning process, based on:

- Current HRSA/CDC Integrated Prevention and Care Plan
- Work plan in annual application
- Legislative and administrative requirements
- Local structures and processes

Committee workplans to coordinate task completion

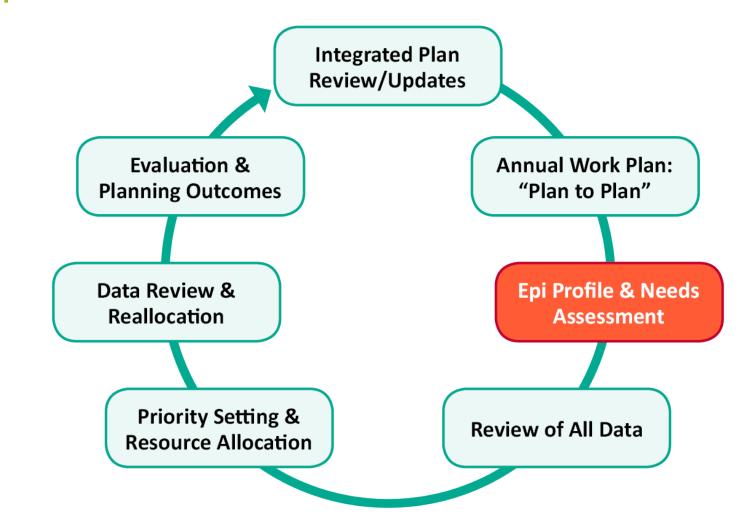
OHP keeps a master planning schedule with all trainings, needs assessments, deadlines, and membership related events

Continuing attention to engaging people with HIV and other diverse community stakeholders in the planning process

#### Work Plan Format: Example

Task/Event	Deliverable	Timing (Start/End)	Primary Responsibility	Notes/ Concerns
Needs Assessment	<ul> <li>Special Study on impact of COVID-19</li> </ul>	August- December	Comprehensive Planning Committee	Implement survey by September 30th
Data Presentation	EPI presentation from Dr. Brady	February- March 2021	OHP/AACO	Schedule with Dr. Brady
Regional Allocations Meetings	<ul> <li>Allocation by category – 3 scenarios</li> </ul>	June - August	Finance Committee, Executive Committee, OHP	Schedule virtual meetings in two parts
Application Submission	Application – submitted online	July - September	Recipient, OHP	OHP and AACO staff work together to ensure planning sections are completed

### Epi Profile and Needs Assessment



#### Expectations: Epidemiologic Profile (Epi Profile)

Describes the HIV epidemic in the service area, includes surveillance and service system data

Described the general population characteristics of the EMA as well

Focuses on the social and demographic groups most affected by HIV and the behaviors that can transmit HIV

Prepared by OHP staff and updated every 2-3 years

#### Expectations: Needs Assessment

Needs assessment should explore:

What services are needed

What services are being provided

What service barriers and gaps exist, overall and for particular populations, in and out of care

Includes input from people living with HIV on their service needs, barriers, and gaps

Uses other data sources to describe PLWH who are in and out of care, as well as those who do not know their HIV status.

#### **Expectations: Needs Assessment**

Includes information on current services and provider capability and capacity:

Resource Inventory identifies full range of services (resources) available to PLWH, including medical and support services, regardless of funding source (hivphilly.org)

By comparing PLWH needs with system of care data, PC can identify gaps in services overall and for particular subpopulations

#### Needs Assessment: Sound Practices

Multi-year needs assessment plan

Use of multiple approaches:

Quantitative (numerical) measures – like survey data

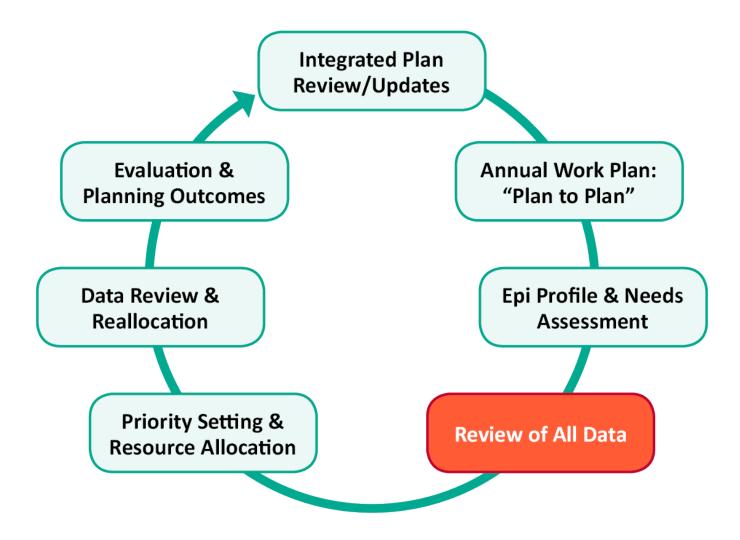
Qualitative (non-numerical)methods – like focus groups

Periodic large-scale data gathering from PLWH, seeking a sample "representative" of all PLWH in the area (consumer survey)

Innovative approaches to include PLWH in & out of care

Use of technology to reach PLWH without excluding those who have limited access to it – a balance is needed

#### **Review of Data**



#### Types of Data Needed for RWHAP Part A Planning

Epidemiologic Profile

Unmet Need Estimate & Profile (PLWH who are out of care)

Unaware PLWH Estimate & Characteristics (PLWH who don't know their status)

Assessment of PLWH Service Needs and Barriers

**Resource Inventory** 

HIV Care Continuum data

Client Characteristics & Service Utilization

Service Expenditures data

HIV Testing and Diagnoses

Clinical Quality Management (CQM) data

Monitoring, Performance and Clinical Outcome Measures

#### Expectations: Use of Data

Major focus on data-based decision making by the PC and recipient (AACO)

Use of many types of data from multiple sources

Includes program data, provided regularly by the recipient, in formats useful for analysis

Subrecipient (provider) data provided in the aggregate, by service category – never with provider identified

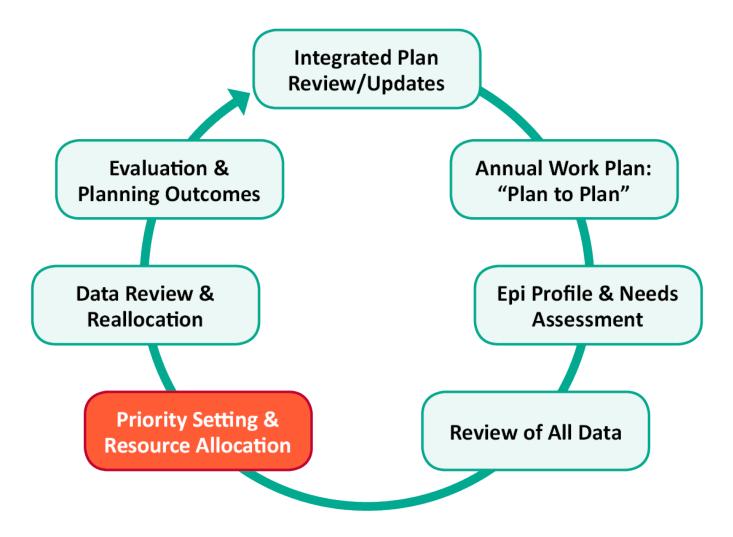
Presentation and discussion of data at PC meetings

Formal data presentation to summarize data from all sources at start of the Priority Setting and Resource Allocation (PSRA) process (OHP/AACO)

#### **Expectations: Review of All Data**

Data needs refined annually and negotiated with recipient Data provided in clear, user-friendly formats PC members trained on assessing and using data Data from various sources reviewed and compared Assessment of the quality of different data sets/reports "Triangulation" of data: comparisons of data from multiple sources/studies to see if findings are consistent

#### **Priority Setting and Resource Allocation**



#### Expectations: Priority Setting and Resource Allocation (PSRA)

#### Most important responsibility of PC

Should actively involve the whole PC (not just a committee) Includes:

**Priority setting:** deciding what services and program support categories are most important for PLWH in the EMA or TGA and putting them in priority order (done separately from allocations)

**Resource allocation:** deciding the amount of RWHAP Part A funds that should go to each priority service category

Directives to the recipient on how best to meet these priorities

**Reallocation** as needed during the year

#### **PSRA: Sound Practices**

Provide data presentations and discussions throughout the year – and use them for training on understanding and using data

Have – and enforce – a policy and process to manage conflict of interest

Base decisions on the data, not personal experiences or preferences

#### **Ensuring Fairness and Avoiding Grievances**

Every PC must have a grievance procedure regarding funding, and can face a grievance if the PSRA process does not follow established policies and procedures

For a fair process that is unlikely to face a grievance:

- Have an updated, written PSRA process and follow it
- Recognize and manage Conflict of Interest
- Involve the whole PC in decision making

Ensure that members understand that they must plan for all PLWH in the EMA

Make decisions data-based

#### Members as Advocates & Planners

Members often come as Advocates:

Bring passion

Provide a voice for their communities or for PLWH subpopulations their organization serves

Learn to advocate on behalf of other subpopulations that may not be directly represented in PC deliberations

#### Members as Advocates & Planners

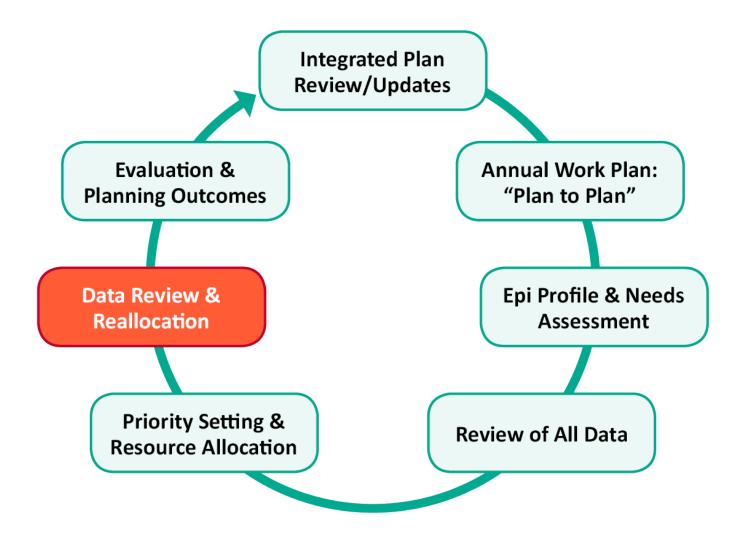
Members must learn when/how to be Planners:

- Consider the entire community all PLWH
- Seek Win-Win versus Win-Lose
- Listen and ask questions
- Come prepared review data and reports

Make decisions based on data – not "impassioned pleas"

Understand boundaries

#### Data Review and Reallocation



## Expectations: Expenditures Data Review and Reallocation

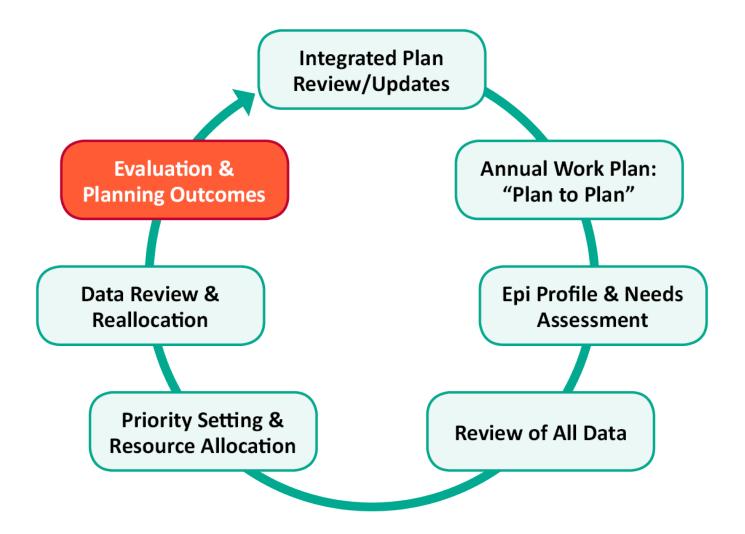
Regular review of planned and actual monthly expenditures by service category – from recipient (Finance Committee)

Training provided on how to read and understand financial reports

Identify trends in expenditures and service utilization and reasons for them – including serious under- or over-expenditures

Reallocate funds when necessary, so all funds are spent on needed services – PC must approve moving funds from one service category to another

#### **Evaluation and Planning Outcomes**



#### **Expectations: Evaluation and Planning Outcomes**

Completes the updated planning cycle

Includes a "review of variances"

Actual versus planned level of services (e.g., clients and subpopulations served, units of service, expenditures)

Actual versus planned quality measures and client/program outcomes

Requires comparing PSRA-approved priorities and allocations with actual use of funds

Provides an assessment of the planning process

Provides data for refining the HRSA/CDC Integrated Prevention and Care Plan

#### Integrated prevention-care planning body

Planning requirements for RWHAP Part A unchanged

HRSA/CDC Integrated HIV Prevention and Care Plan review and updating likely to receive additional attention – including periodic written revision of the plan

Time needed for regularly receiving, reviewing, and discussing data on prevention topics (interventions, HIV awareness, testing, PrEP and nPEP, prevention for positives, treatment as prevention) – including links between prevention and care needs and services

[PrEP = Pre-Exposure Prophylaxis; nPEP = non-occupational Post-Exposure Prophylaxis]

#### Key Planning Challenges

Need for Sufficient:

**Knowledge:** community planning, RWHAP legislation, Conflict of Interest (COI) management

**Skills:** needs assessment, analysis & use of data, group decision making, negotiations, group process

**Resources:** for needs assessment, data analysis, PC staffing & support

**Data:** client characteristics, service utilization, costs, service needs, barriers & gaps

#### Responsibilities: Committees

- Understanding and implementation of assigned tasks such as:
- Needs assessment (Comprehensive Planning)
- Integrated/comprehensive plan reviews and updates (shared)
- Obtaining and review of data from the recipient (shared)
- Data presentations (shared)
- PSRA, including development of directives (Finance)
- Review of program expenditures by service categories and recommendations for reallocation (Finance)
- Annual PC calendars and work plans (shared)

#### **Responsibilities: Executive Committee**

Coordinate the work of other committees, including any joint planning tasks by several committees

Review committee work products and recommendations and ask for changes if needed prior to consideration by the full PC

Monitor progress and deadlines on key tasks

Set/discuss PC meeting agendas

Agree on special planning-related meetings such as data presentations and PSRA

Governance, policies and procedures

#### **Responsibilities: Planning Council**

Review of committee findings, products, and recommendations

- Active discussion and decision making about PSRA: priorities, resource allocation, and reallocation
- Identification of issues that need to be addressed by the PC

#### Responsibilities: Individual Members

- Participate in training and ask for additional training or oneon-one advice if needed
- Read background materials and review data prior to meetings
- Always attend data presentations prior to PSRA decision making
- Learn about the role of your committee and help ensure it does its work well and on time
- Ask questions it will help everyone learn

#### Responsibilities: PC Support Staff (OHP)

Serve as liaison with the recipient to obtain data, reports, and other information needed by the PC for decision making

Ensure that committees and full PC have needed information and logistical support for each meeting

Staff committees and PC meetings

Provide technical expertise in various tasks such as needs assessment and data review

Review progress and help PC ensure that planning tasks are completed on time

Write needs assessment reports, EPI Profile, integrated plan, and other documents

## **Shared Responsibilities**

Most legislative responsibilities are shared – for example:

**Needs assessment:** PC as lead, but recipient ensures cooperation from subrecipients in data gathering

**Integrated/comprehensive planning:** PC as lead, but recipient participates in developing objectives and implementing tasks – and usually takes the lead in assessing progress

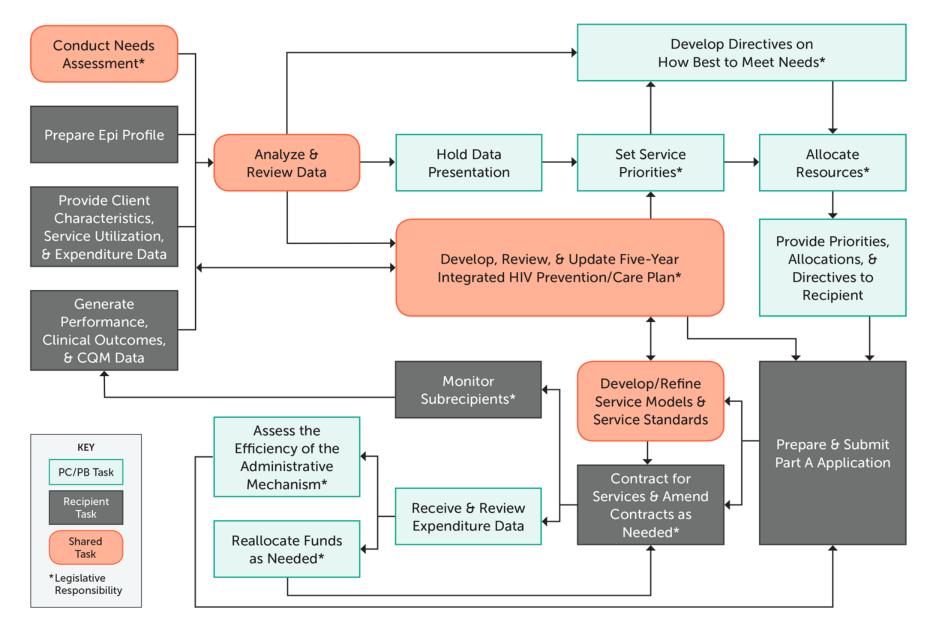
#### Shared Responsibilities

Even where one entity has full responsibility, the other often provides data or support:

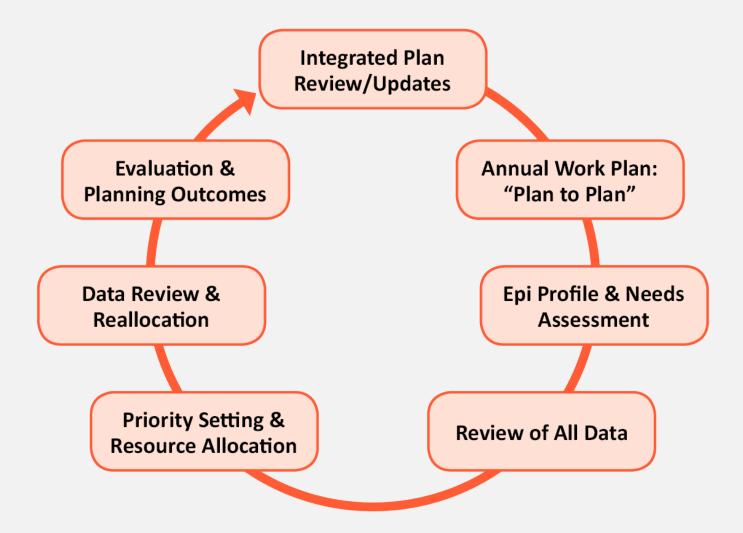
**PSRA:** PC responsible, but recipient provides a great deal of data (client characteristics, service utilization, performance measures, aggregate quality management data)

**Preparation of the annual application:** Recipient responsible, but PC provides needs assessment data, PSRA decisions and process, letter of assurance or concurrence

#### Annotated Flow Chart of the Annual RWHAP Part A Planning Cycle



## Planning Cycle Components



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Applications will be reviewed this Fall.

## Join us on September 25th

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