

# The Integrated Plan 2022-2026

Presentation to the Philadelphia HIV Integrated Planning Council

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# Today's Presentation

- Background
- Sections Overview
- HIPC Participation



# Background

- An umbrella document that sets out local recommendations for all HIV care and prevention services, including but not limited to the RWHAP and CDC prevention funding
- Plan issued by CDC and HRSA in 2015 and 2021
- Intended to:
  - Reduce reporting burden and duplicated efforts experienced by Federal recipients including the Philadelphia EMA
  - Streamline the work of planning groups and health departments
  - Promote collaboration and coordination in the use of data, in community engagement, and in designing systems of HIV prevention and care
- The Plan is developed to inform program planning, resource allocation, evaluation, and continuous quality improvement over a 5-year period

Integrated HIV Prevention  
and Care Plan Guidance,  
including the Statewide  
Coordinated Statement of  
Need, CY 2022- 2026

Division of HIV/AIDS Prevention

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention  
Centers for Disease Control and Prevention

HIV/AIDS Bureau

Health Resources and Services Administration

June 2021



# Federal Expectations

Integrated plans should:

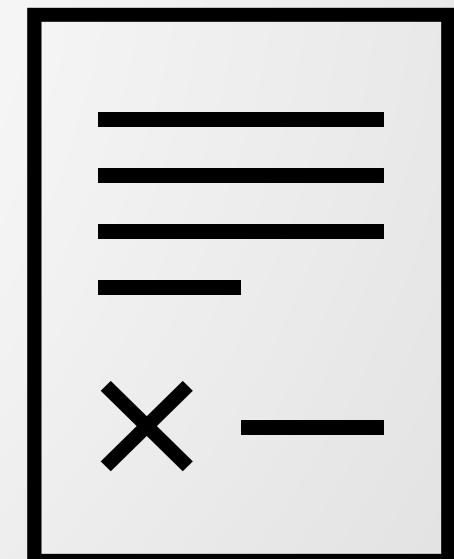
- Reflect the community's vision regarding how best to deliver HIV prevention and care services
- Show how the various local and state plans – including Ending the HIV Epidemic Plan – work together to further the goals of the National HIV/AIDS Strategy
- Be used by recipients and their HIV planning bodies as roadmaps to guide implementation and other activities throughout the year
- Allows for use of existing HIV plans to satisfy requirements

# Sections to Be Completed

#	Section
I	Executive Summary of the Integrated Plan and SCSN
II	Community Engagement and Planning Process
III	Contributing Data Sets and Assessments
IV	Situational Analysis
V	Goals and Objectives
VI	Integrated Planning Implementation, Monitoring and Jurisdictional Follow Up
VII	Letter of Concurrence

## Section I: Executive Summary

- To provide a description of the Plan, including the Statewide Coordinated Statement of Need (SCSN) and the approach the jurisdiction used to meet the requirements of the guidance



## Section II: Community Engagement and Planning Process

- To describe how the jurisdiction approached the planning process, engaged community members and stakeholders, and fulfilled legislative and programmatic requirements including:
  - SCSN
  - RWHAP Part A and B planning requirements including those requiring feedback from key stakeholders and people with HIV



## Section III: Contributing Data Sets and Assessments

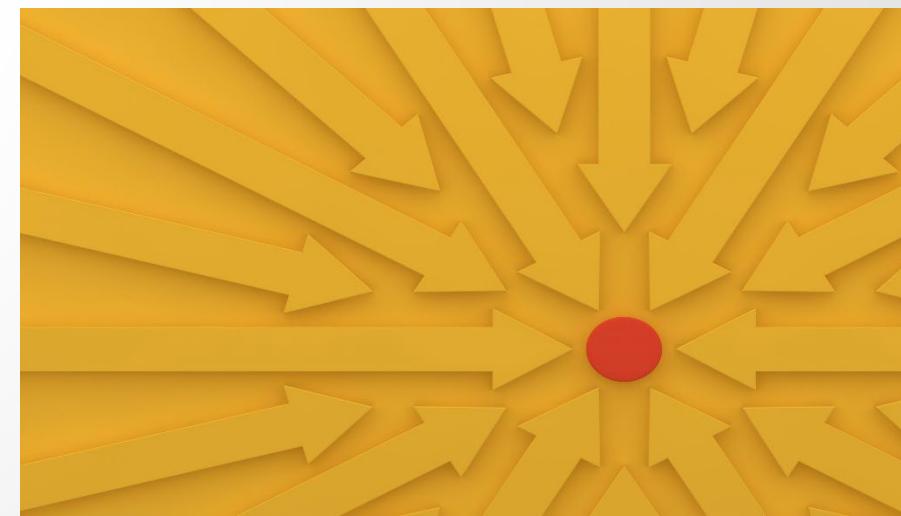
- Describes the qualitative and quantitative data used by the jurisdiction to analyze how HIV impacts the jurisdiction, to determine service needs, to identify barriers, and to assess gaps in the service system
- Fulfills legislative mandate for a SCSN as well as the relevant Part A and CDC planning requirements

## Section IV: Situational Analysis

- Provides an overview of the strengths, challenges, and needs including structural and systemic issues impacting populations disproportionately impacted by HIV and resulting health disparities
- Lays the groundwork for strategies to be included in the Plan's Goals and Objectives section
- Describes the needs of priority populations

## Section V: 2022-2026 Goals and Objectives

- Provides a coordinated approach for all HIV prevention and care funding
- Describe activities in the Plan
- Addresses focus areas for scaling up efforts to end the epidemic: Diagnose, Treat, Prevent, and Respond
- Includes health equity activities



## EXAMPLE GOAL STRUCTURE Diagnose XX% of people with HIV

Key activities and strategies	1.1: Increase routine testing in XX Emergency Departments, acute care settings, etc.
Key partners	Health departments, community-based organizations, FQHCs, correctional facilities, school-based clinics, women's health services/prenatal service providers, hospitals, etc.
Potential funding sources	CDC HIV Prevention and Surveillance Programs, RWHAP, Bureau of Primary Health Care (FQHCs), state and/or local funding, Medicaid, etc.
Estimated funding allocation	\$X.X million
Outcomes reported annually	# of newly identified persons with HIV
Monitoring data sources	EMR data, surveillance data
Expected impact on the HIV Care Continuum	Increase the number of people who know their HIV diagnosis by XX% and linked to medical care within XX days by XX%
Expected impact on EHE activities	Increase in the number of people linked to PrEP from an HIV testing setting
Community perspective	TBD

## Section VI: Integrated Planning Implementation, Monitoring and Jurisdictional Follow Up

- Describes the infrastructure, procedures, systems and tools to be used for the Plan's:
  - Implementation
  - Monitoring
  - Evaluation
  - Improvement
  - Reporting/dissemination

## Section VII: Letter of Concurrence

- Describes how the planning body was involved in the development of the Integrated Plan
- Important that the HIPC understand and agree with the Plan

# HIPC Participation

What	When
Meeting 1: Planning Overview and Q&A	September 8
Meeting 2: Review of Goals and Objectives	October 13
Meeting 3: Concurrence	November 10



<https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/integrated-hiv-dear-college-6-30-21.pdf>