

Roles and Responsibilities for Prevention and Care Planning Bodies and Integrated Planning



The following crosswalk document provides information on the roles and responsibilities of HRSA HAB and CDC DHAP Planning Bodies in Integrated HIV Prevention and Care Planning and related activities, such as Needs Assessments and Statewide Coordinated Statement of Needs. The information provided is from relevant legislative and regulatory documents that guide and inform the work of these planning bodies; source documents are cited throughout the crosswalk.

Note: Given increased coordination and integration of prevention and care planning bodies, the division of planning tasks as they are described below may not accurately reflect the HIV planning process in your jurisdiction. For example, if a Ryan White HIV/AIDS Program (RWHAP) Part A Planning Council has integrated with a statewide RWHAP Part B planning body, the unified planning group would be responsible for jointly undertaking all planning tasks prescribed to RWHAP Part A and Part B.

FOR REFERENCE

- Integrated Plan Guidance: hab.hrsa.gov/sites/default/files/hab/Global/hivpreventionplan062015.pdf
- RWHAP Part A Manual: hab.hrsa.gov/sites/default/files/hab/Global/happartamanual2013.pdf
- RWHAP Part B Manual: hab.hrsa.gov/sites/default/files/hab/Global/habpartbmanual2013.pdf
- CDC HIV Planning Guidance: www.cdc.gov/hiv/pdf/p/cdc-hiv-planning-guidance.pdf
- Ryan White HIV/AIDS Program legislation - title XXVI of the Public Health Service Act: hab.hrsa.gov/sites/default/files/hab/program-grants-management/legislationtitlexxvi.pdf

1. Establishment of a Planning Body

“All CDC/DHAP and HRSA/HAB funded jurisdictions (the 50 states, RWHAP Part A-funded Eligible Metropolitan Areas and Transitional Grant Areas, directly-funded CDC HIV prevention cities, Puerto Rico, the United States Virgin Islands, and the United States Affiliated Pacific Island jurisdictions) are required to have a planning process that includes the development of a Comprehensive Plan and the establishment of either an HIV Planning Group, Planning Council, or Advisory Group, hereafter, referred to as ‘planning body.’” (Integrated Plan Guidance, p 4)

HIV Prevention	RWHAP Part A	RWHAP Part B
<p>Jurisdictions are required to establish HIV Prevention Planning Groups (HPG).</p> <p>“If there is more than one HPG in the state, the health department is responsible for deciding the best way to integrate state, regional, and local HIV Planning Group activities... For states with regional planning groups, planning efforts should be combined.” (2012 HIV Planning Guidance, p 27).</p>	<p>Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs) are required to establish an HIV Services Planning Council (Planning Council) [Section 2602(b)(1)] of the Public Health Service (PHS) Act. A Planning Council is a legislatively mandated jurisdiction-wide planning body for RWHAP Part A programs in EMAs and TGAs. It has legislatively defined responsibilities for planning and decision making.</p> <p>The 2006 RWHAP legislation requires TGAs to have a community planning process but they are not required to establish a Planning Council as their planning body. However, the HRSA HAB Division of Metropolitan HIV/AIDS Programs (DMHAP) has strongly urged TGAs to establish and/or maintain Planning Councils.</p>	<p>RWHAP legislation requires Part B Recipients to engage in a “public advisory planning process” [Section 2617(b)(7)(A)] but does not require an ongoing planning body. Recipients may convene planning meetings in order to conduct important needs assessment, priority setting, and resource allocation processes without having a permanent planning body. If a recipient chooses to create a consortium, which is a specific type of planning body, the legislation does provide specific requirements. [Section 2613]</p> <p>“The RWHAP Part B grantee can choose to oversee planning itself through Statewide or regional planning bodies, or the State can assign the responsibility to consortia. Consortia are associations of public and nonprofit health-care and support service providers and community-based organizations that the State contracts with to provide, for a specific region(s) or the entire State, planning, resource allocation and contracting, program and fiscal monitoring, and required reporting.” [Part B Manual, p 69]</p>

2. Planning Body's Accountability

HIV Prevention	RWHAP Part A	RWHAP Part B
HPG is advisory and reports to the recipient.	Planning Council is an independent decision-making body that reports to the Chief Elected Official (CEO) and works in partnership with the recipient, but not under its direction. It is not intended to be advisory. [Part A Manual, pp 102-103]	Planning body is advisory and reports to the recipient.

3. Planning Body Primary Functions

HIV Prevention	RWHAP Part A	RWHAP Part B
To inform the development or updates to the Integrated HIV Prevention and Care Plan intended to reduce HIV infections in the jurisdiction.	Carry out needs assessment and comprehensive planning and determine the allocation of RWHAP Part A funds within the EMA or TGA, in order to provide a continuum of care that meets the most critical service needs of eligible people living with HIV/AIDS (PLWH), including traditionally underserved populations, PLWH who have been out of care, and individuals who do not yet know their HIV status. [Section 2602(b)(4)].	Work with the recipient, bring diverse experience and input into needs assessments, Integrated HIV Prevention and Care Plan development, and priority setting; make recommendations for resource allocation. [Sections 2617(b), 2613(b), 2618(a), and 2621(c) and Part B Manual, p 69]

4. Planning Body Involvement in Planning Related Tasks and Activities

4a. Integrated Planning

Planning bodies have an important role in developing and using the Integrated HIV Prevention and Care Plan in their jurisdictions:

- “The Integrated HIV Prevention and Care Plan should include information on who is responsible for developing the Integrated HIV Prevention and Care Plan within the jurisdictions (i.e., RWHAP Part A planning councils, RWHAP Part B advisory groups, and CDC HIV planning bodies).” [Integrated Plan Guidance, p 4]
- “HIV planning bodies should use this living document [the 2017-2021 Integrated HIV Prevention and Care Plan, including Statewide Coordinated Statement of Need] as a roadmap to guide its HIV prevention and care planning throughout the year.” [Integrated Plan Guidance, p 2]

HIV Prevention	RWHAP Part A	RWHAP Part B
<p>The Integrated Plan Guidance specifies that:</p> <ul style="list-style-type: none"> • “The Integrated HIV Prevention and Care Plan development is a joint effort between jurisdictions and planning bodies.” (p 13) • HPGs should “submit a letter of concurrence to the goals and objectives of the Integrated HIV Prevention and Care Plan from the co-chairs of the planning body and the health department representatives” (p 15) <p>HPG roles include:</p> <ul style="list-style-type: none"> • Promote and support, as appropriate and feasible, the implementation of the Integrated HIV Prevention and Care Plan in conjunction with the recipient. 	<p>RWHAP Part A Planning Councils play a critical role in development of the Integrated HIV Prevention and Care Plan for the organization and delivery of health and support services, which addresses unmet need, is coordinated with HIV prevention and substance abuse treatment programs, is consistent with the Statewide Coordinated Statement of Need (SCSN), and “includes a strategy for identifying individuals who know their HIV status and are not receiving such services and for informing the individuals of and enabling the individuals to utilize the services, giving particular attention to eliminating disparities in access and services among affected subpopulations and historically underserved communities, and including discrete goals, a timetable, and an appropriate allocation of funds.” [Section 2602(b)(4)(d)]</p> <p>Planning Council roles include the following:</p> <ul style="list-style-type: none"> • Develop a planning process and assign responsibility to a committee • Set goals for the continuum of care and other areas of Planning Council responsibility and help develop goals and objectives in areas of shared responsibility • Implement components of the Integrated Plan that involve Planning Council responsibilities • Monitor progress in implementing the Plan 	<p>RWHAP Part B Planning bodies provide input into the development of the Integrated HIV Prevention and Care Plan, which describes the organization and delivery of HIV health care and support services, addresses unmet need, is coordinated with HIV prevention and substance abuse treatment programs and other support services, and is consistent with the Statewide Coordinated Statement of Need (SCSN) (see below) and the CDC required HIV Prevention Comprehensive Plan. [Section 2617(b)(5)]</p> <p>Planning bodies can play the following roles:</p> <ul style="list-style-type: none"> • Provide input on a workplan for the development of the Integrated Plan • Where relevant, assist with data collection by reviewing draft tools, open doors to stakeholder groups, help arrange and facilitate town hall meetings, collect key stakeholder or survey data, etc. • Help develop goals and objectives to be included in the Plan • Review a draft of the Integrated Plan and provide feedback • Annually, review progress in implementing the Integrated Plan and provide input regarding necessary changes

4b. Coordination that is directly related to needs assessment and comprehensive planning

“HRSA and CDC encourage RWHAP and HIV prevention programs at the local and state levels to integrate planning activities; such activities encompass joint comprehensive needs assessment, information and data sharing, cross representation on prevention and care planning bodies, coordinated/combined projects, combined meetings, and fully merged planning bodies...Activities to collaborate...are necessary in the development of an integrated plan” (HRSA/CDC letter announcing the Integrated Plan Guidance, June 19, 2015).

HIV Prevention	RWHAP Part A	RWHAP Part B
<p>HPGs should work with the recipient to ensure that HPG composition contributes to collaborative planning, by including representatives of RWHAP planning groups, etc.</p> <p>Responsible for proactively engaging other planning bodies and federal grant recipients during the planning process.</p>	<p>RWHAP Part A Planning Councils help ensure coordination with other Ryan White programs and HIV-related services.</p> <p>Responsible for coordinating with prevention planning bodies and programs in the areas of planning body membership, conducting planning activities (e.g., needs assessments), and service delivery coordination (e.g., early intervention services, outreach). [Section 2602(b)(4)(C) and (H)]</p> <p>Should collaborate with other publicly funded programs on needs assessment, estimation and assessment of unmet need, and development of the Plan, including strategies to coordinate services with HIV prevention and substance abuse prevention and treatment, including outreach and early intervention services.</p>	<p>RWHAP Part B planning bodies help ensure coordination with other RWHAP programs and other HIV-related services.</p> <p>Explore ways to maximize resources for comprehensive planning, including the possibility of sharing some costs with other planning bodies, RWHAP Parts, and HIV- related efforts in the region.</p>

4c. Needs Assessment: A core component of an HIV prevention and care plan, as described in the Integrated Plan Guidance

HIV Prevention	RWHAP Part A	RWHAP Part B
<p>Integrated Plan Guidance encourages involvement of planning bodies including HPGs in needs assessments related to development of the integrated plan. “CDC Grantees are... strongly encouraged to utilize a wide variety of representatives to identify resources and gaps in HIV prevention and care services” [Integrated Plan Guidance, p 6], and HPGs can help to ensure such varied input.</p>	<p>Planning Council takes primary responsibility for needs assessments, which are a partnership activity of the Planning Council, recipient, and community.</p> <p>Section 2602(b)(4)(a) and (b) of the RWHAP legislation requires Part A Planning Councils to conduct needs assessments that: “determine the size and demographics of the population of individuals with HIV/AIDS”; “determine the needs of such populations, with particular attention to: (i) individuals with HIV/AIDS who know their HIV status and are not receiving HIV-related services; (ii) disparities in access and services among affected subpopulations and historically underserved communities; and (iii) individuals with HIV/AIDS who do not know their HIV status.”</p> <p>The Planning Council is expected to:</p> <ul style="list-style-type: none"> • Directly or through a consultant, design, plan, and conduct a needs assessment • Oversee the needs assessment and development of the resource inventory to utilize during priority setting, allocation, and reallocation processes 	<p>RWHAP Part B planning bodies advise and support the recipient in developing and implementing a needs assessment process to inform planning and decision making. [Sections 2617(b), 2618(a), and 2621]</p> <p>Planning body may:</p> <ul style="list-style-type: none"> • Provide insight and input into planning and design of data collection tools • Help arrange town halls or community forums • Review draft results and provide feedback • Help share results of the needs assessment with other programs serving similar populations • Encourage cross-Part collaboration in needs assessment

4d. Statewide Coordinated Statement of Need (SCSN): The SCSN is legislatively mandated. Per Section 2617(b) (6) of the PHS,

“...an assurance that the public health agency administering the grant for the State will periodically convene a meeting of individuals with HIV/AIDS, members of a Federally recognized Indian tribe as represented in the State, representatives of grantees under each part under this title, providers, and public agency representatives for the purpose of developing a statewide coordinated statement of need;...” The SCSN is also a core component of an HIV Prevention and Care Plan, as described in the Integrated Plan Guidance.

HIV Prevention	RWHAP Part A	RWHAP Part B
<p>HPG members should participate in the Part B-led SCSN process in the state.</p>	<p>RWHAP legislation requires a Planning Council to:</p> <ul style="list-style-type: none"> • “Develop a comprehensive plan for the organization and delivery of health and support services” that... (iii) is compatible with any State or local plan for the provision of services to individuals with HIV/AIDS [including the SCSN]” [Section 2602(4)(D)] and “participate in the development of the statewide coordinated statement of need initiated by the State public health agency responsible for administering grants under RWHAP Part B.” [Section 2602(b)(4)(F)]. 	<p>RWHAP Part B planning bodies must participate in the implementation of an SCSN, a written statement of need developed through a collaborative process with other Parts of the RWHAP, resulting in a document reflecting the input and approval of all RWHAP Parts, including:</p> <ul style="list-style-type: none"> • Convening SCSN meeting(s) • Recruiting the legislatively required participants and other appropriate participants • Assisting with drafting the SCSN document and/or reviewing drafts

For additional resources on integrated HIV/AIDS planning, visit www.targetHIV.org/IHAP

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