

Measuring HIV Planning Effectiveness: Assessment Tools for Integrated HIV Planning Bodies

June 3, 2021
1:00-2:00 PM EST



INTEGRATED HIV/AIDS PLANNING
TECHNICAL ASSISTANCE CENTER



Q&A Feature

If you have questions during the call, please use the Q&A feature. To do so:

Click on “Q&A”
located along the
bottom of your
screen



About the IHAP TAC

SUPPORTS

Ryan White HIV/AIDS
Program Parts A & B
recipients and
planning bodies



CONDUCTS

national and targeted
training and technical
assistance activities



FOCUSES

on integrated planning
including implementation
and monitoring of
Integrated HIV
Prevention and
Care Plans



Delay of Integrated Plan Guidance for 2022-2026

- Guidance for preparation of Integrated HIV Prevention and Care Plans for 2022-2026 has been postponed due to the COVID-19 pandemic
- [February 2021 letter from HRSA and CDC HIV program leaders](#)
 - Outlines expectations for continued use of existing Integrated Plans
 - Encourages jurisdictions to refine ongoing planning efforts, incorporating Ending the HIV Epidemic planning and community engagement activities



Coordination with Ending the HIV Epidemic (EHE) plans

HRSA has noted:

- Jurisdictions' EHE plans and Integrated Prevention and Care Plans should align
- The forthcoming Integrated Prevention and Care Plan Guidance will incorporate the four EHE pillars: diagnose, treat, prevent, respond
- Pieces of EHE plan submission may be used to meet Integrated Plan requirements



Webinar Objectives

Following the webinar, participants will be able to:

- 1.** Discuss the need to evaluate the effectiveness of state and local integrated HIV prevention and care planning efforts.
- 2.** List barriers that integrated HIV planning bodies face to effective HIV planning in their communities.
- 3.** Summarize the adaptable tools available for conducting a self-assessment of HIV planning effectiveness.
- 4.** Understand how to adapt the tools for your own planning body.


HealthHIV Introductions



Today's Agenda

- Review the state of HIV planning bodies and their barriers to effective planning
- Introduce HealthHIV's HIV Planning Body Assessment Tools
- Discuss lessons learned from HIV planning bodies that have implemented the assessment tools
- Review how to use the tools as a self-assessment
- Wrap up and Q&A

State of HIV Planning Bodies



Ending
the
HIV
Epidemic



Need for HIV planning
to end the epidemic



Integration of prevention
and care bodies



Many responsibilities
and priorities



Adaptation to COVID-19
pandemic



Awaiting release of Integrated
HIV Prevention and Care Plan
Guidance for 2022 - 2026

Challenge: Barriers to Effective Planning

- Planning burnout among key stakeholders
- Aligning funder priorities for integrated HIV prevention and care planning activities and plan development
- Engaging community and members in integrated HIV planning in ways that are meaningful, representative, inclusive and equitable
- Uncertainty on developing metrics and measuring HIV planning's impact on community health outcomes
- Limited feedback loops that track planning body accomplishments and provide updates to community
- Inefficiency in updating policies and procedures to reflect the changing HIV and healthcare landscapes

Effectiveness Defined

“Effectiveness” is defined by how well the planning body’s structure, policies and procedures, and consumer engagement supports its ability to carry out its mission and objectives.

Solution: HIV Planning Body Assessment

- HealthHIV developed first-of-its-kind HIV planning body assessment tools
- Fielded with eight diverse HIV planning bodies over two years
- **Rationale for tool:** Gather community and HIV planning member insights and feedback to improve effectiveness of HIV planning

Appendix 1. Survey Guide

The following survey is part of a mixed-methods assessment of your current HIV planning practices, structure, and stakeholder engagement efforts. This process will help your planning body better understand how to ensure and improve its effectiveness and role in ending the HIV epidemic.

Participation and transparency in this assessment process is essential. The anonymous, online survey will collect your feedback, which will be de-identified and reported in aggregate to ensure confidentiality of all respondents.

Member Information

1. I am an employee or board member of the following organizations (Check all that apply.)

- AIDS service organization/community-based organization (ASO/CBO) serving priority populations
- Health department (state, local)
- Healthcare
- Other medical
- Mental health
- Other government
- Other non-profit
- Foundation
- Social sector
- None of the above
- Other, please specify

2. How would you describe your location?

- Urban
- Suburban
- Rural

3. How knowledgeable are you about the following areas? (4 = advanced)

- Adolescent and young adult
- AIDS service organization
- Behavioral health
- Case management
- Corrections/law enforcement
- Aging with HIV
- Epidemiology and surveillance
- Faith-based community
- Federal health policy
- Financial analysis

Appendix 2. Key Informant Interview Guide

The following key informant interview (KII) guide is part of a mixed-methods assessment of your current HIV planning practices, structure, and stakeholder engagement efforts. This process will help your HIV planning body better understand and improve its role in ending the HIV epidemic. Your participation and voice in this assessment process is essential. We will be conducting several key informant interviews and administering an anonymous, online survey to collect feedback.

You have been selected as a key informant interviewee. Please let me know when you are available for a 60-minute phone interview between the dates of ____ and _____. All information collected during your interview will be de-identified and reported in aggregate to ensure your confidentiality. We value your honesty and transparency in this process.

Demographics/Background:

- What is your current title/role?
- How many years have you worked in the HIV field?

Current Role/Engagement with [HIV planning body]:

- Why did you join the [HIV planning body]?
- What committee(s) do you serve on? Do you serve in a leadership role?
- How many years have you served on the [HIV planning body]?
- How long do you plan to stay on the [HIV planning body]?
- Do you anticipate ending your term of service from the [HIV planning body] in the 1-2 years? (If so, why?)
- What do you see as your role/purpose on the [HIV planning body]?
- What has been your biggest success in engaging with the [HIV planning body]?
- What is the biggest obstacle(s) you've encountered in engaging with the [HIV planning body]?
- What have you gained from engagement with the [HIV planning body]? (personally and/or professionally)

HIV Planning Purpose/Effectiveness:

- What would you define as the state/local health department's key roles in HIV planning?
- [Optional for Part A]* What would you define as the Ryan White HIV/AIDS Part A Program recipient's key roles in HIV planning?
- How would you describe the [HIV planning body]'s relationship with your health department and/or Ryan White HIV/AIDS Program Part A recipient?
- What would you define as the community member's key roles in HIV planning?
- How would you describe the [HIV planning body]'s relationship with the communities affected by the HIV epidemic?
- Do you believe that the [HIV planning body] (as a whole) is currently fulfilling its intended role? Why or why not?
- How does the [HIV planning body] currently measure effectiveness/success?

Assessment Tools



Anonymous Survey

- All members and key stakeholders
- 40 questions (multiple choice and open ended)
- Fielded online (via SurveyMonkey™)



Key Informant Interviews (KIIs)

- 6-8 members selected with diverse perspectives
- 28 open ended questions
- Conducted by phone in 60 minutes

Assessment Topics

Areas of assessment:

- Membership demographics, background and skills
- Member engagement and understanding of role
- Planning body structure & policies
- Recruitment and orientation activities
- Relationship with external stakeholders
- How Integrated HIV Prevention and Care Plan outcomes are measured
- Engagement in EHE
- Key successes and areas for improvement
- Future goals/anticipated challenges

Purpose of Assessment

Goal

Identify key strengths and areas for improvement related to the effectiveness of an HIV planning body's:

- Operating structure,
- Policies and procedures,
- Membership, and
- Stakeholder/consumer engagement.

Outcomes

Clear, actionable findings and implications based on a confidential survey, key informant interviews, and documents review shared back to the planning body to facilitate reflection and solutions development.

Lessons Learned & Testimonies from 2021 Assessment Cohort

Planning Body Assessment Cohort



3 state level



1 city level



**2 in the Midwest
1 in the South
1 on the West Coast**



2 low incidence areas



1 medium incidence area



1 high incidence area

HIV Planning in 2021

- Adaptation/ transition to virtual meetings - more accessible, but less interactive/personal
- Agendas not conducive to discussion or time constraints
- Lack of comprehensive, population-specific data within jurisdictions
- Need to evaluate internal biases and inequities
- Conflicting priorities among key members/stakeholders
- Steep learning curve for new members
- Insufficient orientation on prevention and care terminology, and interpretation of epi and other Integrated Plan metrics data
- Some jurisdictions are tracking Integrated Plan metrics more closely than others
- Formalities interfering with substantive and accessible meetings

Speaker Introductions



Darin Rowles
HIV Supports Manager,
Minnesota Department of
Human Services

Part B Representative -
Minnesota Council for
HIV/AIDS Care and
Prevention



Bridget Gordon
Co-Chair, Integration
Advisory Board

LA Commission on
HIV



David Lee

Associate Director, Drew
Center for AIDS
Research, Education,
and Services

Co-Chair - LA
Commission on HIV

Panel Questions

- Why did your planning body choose to participate in the assessment of HIV planning effectiveness?
- How did timing and other factors contribute to the desire to participate?
- What was the planning body hoping to get out of the assessment?
- What did you learn through the assessment process that will support your integrated planning efforts and the development of your 2022-2026 Integrated Plans?

Implementing Assessment Tools with Your Planning Body

Assessment Timeline



Phase 1: Stakeholder Engagement, Weeks 1 - 3

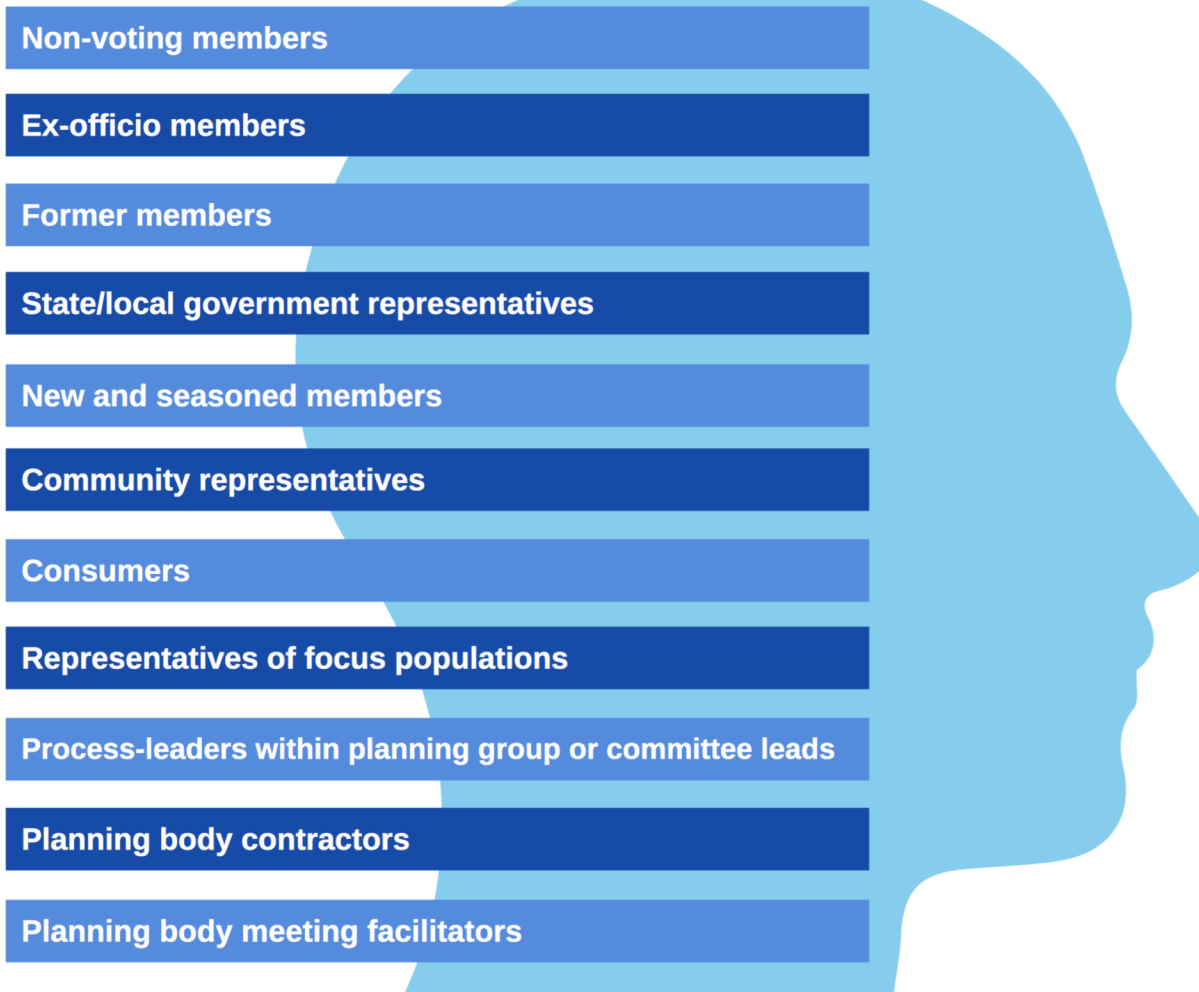


Phase 2: Assessment Implementation, Weeks 2-10



Phase 3: Reflection & Solutions Development, Weeks 11-16

Key Partners and Stakeholders



Tips for Self-Assessment

- Define roles, secure buy-in, and establish consistent lines of communication from the beginning.
- Adapt the tool for each use, and update it regularly!
 - Allow input from a variety of members in different roles.
 - Consider who will lead implementation of the assessment.
- Aim for 90% participation from members.
 - Incentivize participation and compensate participants for the time and effort they have provided, if possible.
- Take measures to protect member confidentiality.
- Select a diverse group of members for key informant interviews.
- Use KIIs to supplement open-ended questions in the survey.
- Use findings from tools to facilitate discussion around solutions.

Access the Tools - Next Week!

- *HIV Planning Body Self-Assessment Guide* will be available for download on the IHAP TAC website
- IHAP TAC will send email notifications when the tool and webinar recording are available on:
<https://targethiv.org/ihap>
- Questions now? Email Eve@HealthHIV.org

Questions

Please chat your questions into the Q&A box located at the bottom of your screen.





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Thank you!

Contact us at ihaptac@jsi.com!

Obtain more information, join our mailing list, request TA, or share your experiences or resources.



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