

# Examples of collaborative integrated prevention and care planning activities

As Ryan White HIV/AIDS Program (RWHAP) Part A and B recipients and CDC Division of HIV/AIDS Prevention (DHAP) funded prevention programs move towards greater integration, their respective planning bodies must find new models of working together.

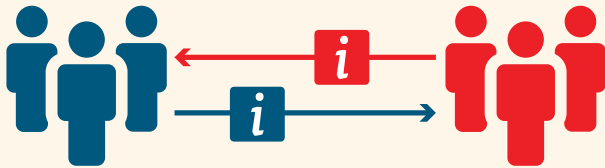
Below are five examples of integrated prevention and care planning activities; two that emphasize developing joint communication and data sharing activities and three that focus on restructuring the actual composition, membership, or operating policies of planning bodies. While there is no recommended approach for integrated planning for every jurisdiction, there are a number of factors that should be

considered when determining the best approach to establishing integrated prevention and care planning in your jurisdiction. These include:

- Resources, including staff time
- Funding sources
- History of collaboration or integration between prevention and care planning bodies
- Leadership, culture, and working style of each planning body in question
- Legislative mandates and planning requirements of each planning body in jurisdiction

## INTEGRATED COMMUNICATION AND DATA SHARING ACTIVITIES

The following examples maintain existing planning body structures, but add joint activities and/or protocols for information sharing between existing groups.



### Information Sharing

Information sharing activities between prevention and care planning bodies include presentations, reports, webinars, conference calls, and other activities that work to inform each planning body about the work of the other.

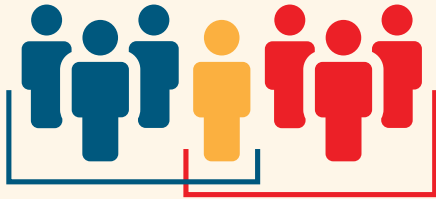


### Integrated Information Gathering and/or Data Analysis, or Other Joint Projects or Activities

Integrated information gathering or data analysis includes data-based collaboration through activities such as joint needs assessment activities, evaluations, special studies, service-focused roundtables with providers and clients, joint town halls or other consumer input activities, and analysis and discussion of jurisdictional HIV Care Continuum data. This integrated activity might also include joint service planning and development, such as joint strategy development or funded joint efforts like the Care and Prevention in the United States (CAPUS) initiative.

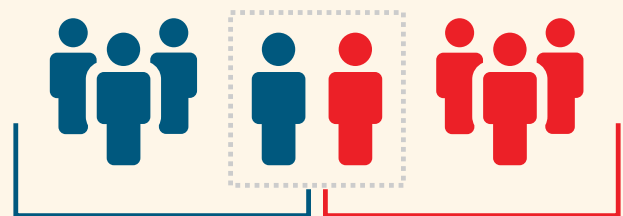
# INTEGRATED STRUCTURES

The following examples of integration involve modifying existing planning body structures to integrate prevention and care perspectives. This can be achieved through some amount of overlapping membership from prevention and care planning bodies or merger of prevention and care planning bodies into one decision-making group.



## Cross Representation

Planning bodies with cross representation involve one or more members of each planning body serving as a member of the other body. The purpose is to facilitate information sharing and collaboration between the two groups.



## Integrated Committee of a Larger Planning Body

This model involves a standing committee of a Planning Body, such as a Ryan White planning council or statewide advisory group, carrying out collaborative planning tasks for both prevention and care. In this example, the standing committee includes membership from both prevention and care planning bodies.



## Unified Prevention-Care Planning Body

A unified prevention-care planning body takes shape as a single statewide or Part A regional planning body that is responsible for carrying out both prevention and care planning.

**For additional resources on integrated HIV/AIDS planning,  
visit [www.targetHIV.org/IHAP](http://www.targetHIV.org/IHAP)**

This document was prepared by JSI Research & Training Institute, Inc. (JSI) and is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U69HA30144, Integrated HIV Planning Implementation. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.