**CY 2022 – 2026 CDC DHP and HRSA HAB Integrated Prevention and Care Plan Guidance Checklist**

| **Requirement:** | **New Material and/or**  **Existing Material Used to Meet Requirement:** | **Document Title/File Name of Existing Material**  **Attached to Meet**  **Requirement** | **Page Number(s) Where**  **Requirement is**  **Addressed in Existing Material** | **Notes (If Applicable)** |
| --- | --- | --- | --- | --- |
| **Section I: Executive Summary of Integrated Plan and SCSN** |  |  |  |  |
| 1. Executive Summary of Integrated Plan and SCSN | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text. | Click or tap here to enter text. |
| 1. Approach | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Documents Submitted to Meet Requirements | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| **Section II: Community Engagement and Planning Process** |  |  |  |  |
| 1. Jurisdiction Planning Process | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Entities Involved in Process | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Role of the RWHAP Part A Planning Council/Planning Body (not required for state only plans) | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Role of Planning Bodies and Other Entities | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Collaboration with RWHAP Parts – SCSN Requirement | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Engagement of People with HIV – SCSN Requirement | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Priorities | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Updates to Other Strategic Plans Used to Meet Requirements | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| **Section III: Contributing Data Sets and Assessments** |  |  |  |  |
| 1. Data Sharing and Use | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 2. Epidemiologic Snapshot | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 3. HIV Prevention Care and Treatment Resource Inventory | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Strengths and Gaps | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Approaches and Partnerships | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 4. Needs Assessment | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Priorities | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Actions Taken | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Approach | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| **Section IV:**  **Situational Analysis** |  |  |  |  |
| 1. Situational Analysis | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Priority Populations | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| **Section V:**  **2022-2026 Goals**  **and Objectives** |  |  |  |  |
| Goals and Objectives Description | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Updates to Other Strategic Plans used to Meet Requirements | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| **Section VI:**  **2022-2026**  **Integrated**  **Planning**  **Implementation, Monitoring and Jurisdictional Follow Up** |  |  |  |  |
| 1. 2022-2026 Integrated Planning Implementation Approach | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Implementation | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Monitoring | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Evaluation | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Improvement | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Reporting and Dissemination | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Updates to Other Strategic Plans Used to Meet Requirements | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| **Section VII: Letters of Concurrence** |  |  |  |  |
| 1. CDC Prevention Program Planning Body Chair(s) or Representative(s) | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. RWHAP Part A Planning Council/Planning Body(s) Chair(s) or Representative(s) | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. RWHAP Part B Planning Body Chair or Representative | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. Integrated Planning Body | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |
| 1. EHE Planning Body | Choose an item. | Click or tap here to enter text*.* | Click or tap here to enter text*.* | Click or tap here to enter text*.* |