

Webinar Q&A: Putting Plans into Action: Roles and Responsibilities for Implementing Integrated HIV Prevention and Care Plans

Questions

1. [Why is there is no Consumer at Large on the Plan Review Committee for Delaware?](#)
2. [Who reports the progress on the plan activities to the Plan Review Committee in Delaware? How do you track progress on activities? Does the twice annual review of progress include review of surveillance data?](#)
3. [In Houston, were the prevention activities administered at the city level and the care activities administered at the Harris County level?](#)
4. [How many of the 80 Integrated HIV Prevention and Care Plans received include Ryan White recipients for Parts C, D, and F?](#)
5. [Did we hear correctly that there will be required submissions \(e.g., reports and documents\) by recipients to CDC, HRSA, or BOTH, around the Integrated HIV Prevention and Care Plans?](#)
6. [Do you know when we can expect to receive feedback from CDC and HRSA about our Integrated HIV Prevention and Care Plans?](#)
7. [Is there going to be guidance on how reporting on the Integrated HIV Prevention and Care Plans will relate to reports on CQM plans and EIIHA plans?](#)

Answers

1. Why is there is no Consumer at Large on the Plan Review Committee for Delaware?

It was Delaware's intention to grow the Plan Review Committee (PRC) in an intentional way, and we have made some progress there already. The original vision was to have three members on the PRC; already we have expanded that to five (including one person to represent the Delaware HIV Planning Council). It is likely that the sixth member would be a consumer. Right now Delaware is working to engage more consumers at the Planning Council level, introducing them to large group discussions and decision-making there, and ultimately recruiting a consumer representative to serve on the PRC (or at least on Delaware's Quality Management Team).

2. Who reports the progress on the plan activities to the Plan Review Committee in Delaware? How do you track progress on activities? Does the twice annual review of progress include review of surveillance data?

The members of the Plan Review Committee of Delaware compile data on the activities for which they have been assigned to act as monitor. Often the data would be submitted to them as part of their regular job responsibilities. If it is not, it is up to them to seek out that data proactively, collaborating with the community partners involved in implementing a particular

activity. If the activity is more process-oriented, progress is gauged by feedback from the participants in the process. Activities that have more concrete outputs are measured by information supplied in monthly reports to their funders. The twice annual reports of progress by the PRC to the Delaware HIV Planning Council may or may not include surveillance data, depending on the activities being implemented that year. Regardless, the Planning Council receives a broad-based review of HIV Surveillance data once a year, at the regularly-scheduled meeting in July.

3. In Houston, were the prevention activities administered at the city level and the care activities administered at the Harris County level?

The Integrated HIV Prevention and Care Plan for the Houston EMA was jointly developed by a Leadership Team and workgroups, all including representation from prevention and care recipients and both planning bodies. The City will implement prevention activities and the County will implement care activities, with collaborative monitoring.

4. How many of the 80 Integrated HIV Prevention and Care Plans received include Ryan White recipients for Parts C, D, and F?

The Integrated HIV Prevention and Care Plans, including the Statewide Coordinated Statements of Need (SCSN), are intended to have all RWHAP Parts funded in a state at the table. The SCSN requires the participation of all of the RWHAP Part Programs funded in the jurisdiction.

5. Did we hear correctly that there will be required submissions (e.g., reports and documents) by recipients to CDC, HRSA, or BOTH, around the Integrated HIV Prevention and Care Plans?

CDC and HRSA **do not** expect grant recipients to submit revisions of their Integrated Plans; however, they do expect to receive updates on progress and Plan outcomes through routine monitoring and annual progress reporting.

6. Do you know when we can expect to receive feedback from CDC and HRSA about our Integrated HIV Prevention and Care Plans?

CDC and HRSA encourage all jurisdictions and planning bodies to continue with implementing their CY17-21 Integrated HIV Prevention and Care Plans and integrated planning activities.

CDC and HRSA Project Officers will host webinars/joint calls for CDC and HRSA grant recipients, including their HIV Planning bodies, to discuss the Summary Statements in summer 2017.

7. Is there going to be guidance on how reporting on the Integrated HIV Prevention and Care Plans will relate to reports on CQM plans and EIIHA plans?

Currently, written guidance on how reporting on the Integrated HIV Prevention and Care Plans will relate to reports on CQM plans and EIIHA plans is not planned. However, the Integrated HIV Prevention and Care Plans should be the foundation of the jurisdictions' HIV prevention and care planning efforts. Therefore, it is recommended that the CQM plans and EIIHA plans reflect the HIV prevention and care planning efforts in the Integrated Plans. Please contact your Project Officers for additional guidance.