



**INTEGRATED
HIV/AIDS
PLANNING**
TA CENTER

MAY 19, 2022

**CHARTING THE COURSE FOR THE
NEXT FIVE YEARS: 2022-2026**
GOALS, OBJECTIVES, AND STRATEGIES

DIGITAL WEBINAR COMPANION GUIDE

INTRODUCTION

This webinar companion guide offers attendees a resource to supplement the information covered during the webinar and extend the webinar's benefits beyond the allotted presentation time. It contains:

- [Presenter bios](#)
- [Presentation slides](#)
- [Prompts for additional discussion](#)
- [Integrated planning resources](#)

State and local jurisdictions across the country are working on their response to the [Integrated HIV Prevention and Care Plan Guidance, including the Statewide Coordinated Statement of Need, CY 2022-2026](#). The IHAP TAC is hosting a monthly webinar and peer learning series to support these efforts. The fourth webinar in our series, *Charting the Course for the Next Five Years: 2022-2026 Goals, Objectives, and Strategies*, focuses on Section V of the Integrated Plan Guidance - 2022-2026 Goals and Objectives. This section details the “what” and “how” of your Integrated Plan, and will serve as the playbook for health departments, service providers, stakeholders, and people with HIV through 2026.

By the end of this webinar, participants will be able to:

- Articulate changes to the joint CDC and HRSA epidemiologic profile guidance
- Understand how to meet submission requirements for Section V
- Describe the benefits of creating SMARTIE goals and objectives
- Identify best practices for developing Integrated Plan goals and objectives
- Access IHAP TAC resources

PRESENTER BIOS



Naomi Ardjomand-Kermani

Naomi received their Bachelor's degree from New College of Florida, where they studied Bioinformatics and Biology. They went on to earn their Master of Public Health in Social & Behavioral Sciences, with a focus on queer & transgender health promotion, from the University of Florida. For the past five years, they have worked for Suncoast Health Council, as a Planning Manager for the Tampa – Saint Petersburg EMA's West Central Florida Ryan White Care Council. Nay is also the founder of a capacity-building consulting agency, A Different Kind of Different.



Katie Scussel

Katie obtained her Bachelor's degree from New College of Florida, where she studied Environmental Anthropology. Katie went on to graduate with her Master of Public Health, concentrating in Health Education, from the University of South Florida, College of Public Health. Katie works for Suncoast Health Council as a Ryan White Planning Manager and has worked in planning council support for the Tampa-St. Petersburg EMA for the past five years.



Charting the Course for the Next Five Years: 2022-2026 Goals, Objectives, and Strategies

May 19, 2022
3:00 - 4:00 pm EST



INTEGRATED HIV/AIDS PLANNING
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About the Integrated HIV/AIDS Planning Technical Assistance Center



INTEGRATED HIV/AIDS PLANNING
TECHNICAL ASSISTANCE CENTER

Webinar and peer learning series - Month #5!

Integrated planning webinar and peer learning series goals

- Review and discuss the guidance section by section
- Highlight jurisdictional efforts
- Address emerging and ongoing questions
- Facilitate peer engagement and learning

More information available at TargetHIV.org/ihap

- Participation in the webinar is *not* required for the peer learning session

Today's objectives

By the end of the webinar, participants will be able to:

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Agenda

- Updated epidemiologic profile guidance overview
- Section V overview
- Jurisdictional presentation - West Central Florida Ryan White Care Council
- Q&A
- Announcements
 - Upcoming IHAP TAC events
 - Integrated planning resources

Have a question?

Have a question for one of the presenters? Please use the Q&A feature.

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



Poll #1

Were you involved in the
CY 2017-2021 integrated
planning process?



Poll #2

Has your jurisdiction made a
decision related to the
organizing principle of goals
(NHAS vs. EHE strategies)?



Recently updated:

*Integrated Guidance for
Developing Epidemiologic
Profiles: HIV Prevention and
Ryan White HIV/AIDS
Program Planning*



Integrated guidance for developing epi profiles

- Guidance was first released in 2014, updated in March 2022
- Programmatic requirement for CDC DHP recipients and a programmatic/legislative requirement for RWHAP Parts A/B
- Intended to assist jurisdictions in compiling and interpreting epi data
 - Provides one set of guidance to help develop integrated epi profiles
 - Advises jurisdictions on how to interpret data in ways that meet the needs of both prevention and care programs
 - Helps reduce duplicative evaluation efforts of health departments and planning groups

<https://www.cdc.gov/hiv/pdf/guidelines/cdc-hiv-guidelines-developing-epidemiologic-profiles-2022.pdf>

Epi profile guidance – five chapters

1. Describes the purpose of the guidance, identifies the audience for the document, and outlines what end users will learn
2. Describes how to determine the scope, content, and organization of the profile; describes development process and how to obtain and analyze data
3. Describes 4 domains containing a total of 9 core epidemiologic questions that help to describe the general population and the population of persons with HIV in a jurisdiction
4. Describes how to make the profile user-friendly, write the narrative, and disseminate the profile
5. Considers special issues that may arise during the writing of the profile (e.g. areas with low morbidity and minimal data)

Updated epi profile guidance: what's new

- Key changes include:
 - Recommendations and examples for incorporating data on the social determinants of health that act as barriers to HIV prevention, testing, and care
 - New core questions that align with the updated NHAS and EHE initiative

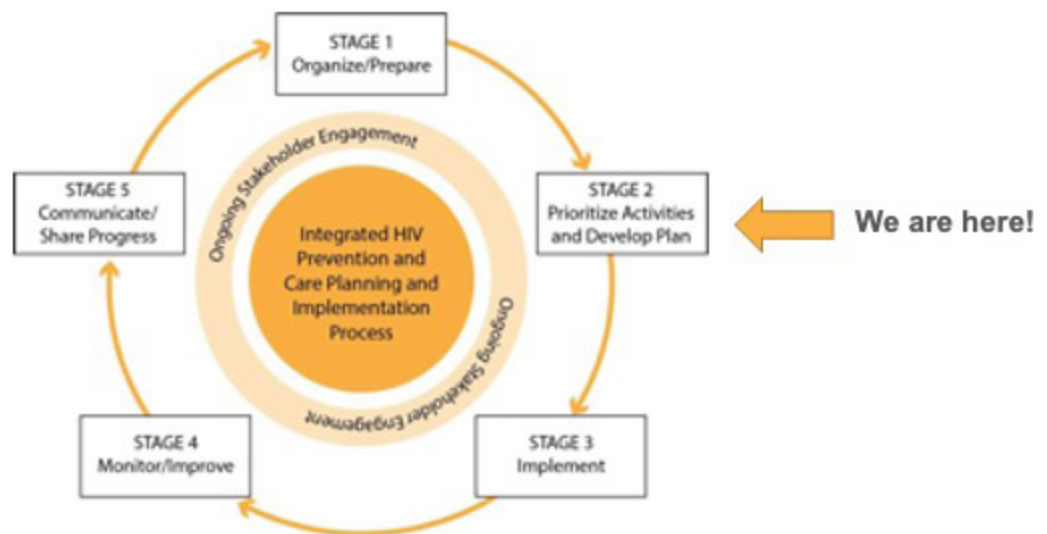
Reminder!

- Integrated Plan guidance does not require the full epi profile
- Jurisdictions are required to submit an **epi snapshot** as part of their integrated plan submission
 - Snapshot is a summary of the most recent epi profile for the jurisdiction
 - Highlight key descriptors of people diagnosed with HIV and at-risk for exposure to HIV in the jurisdiction using both narrative and graphic depictions
 - Provide specifics related to the number of individuals with HIV who do not know their HIV status, as well as the demographic, geographic, socioeconomic, behavioral, and clinical characteristics of persons with newly diagnosed HIV, all people with diagnosed HIV, and persons at-risk for exposure to HIV

Section V: 2022-2026 Goals and Objectives



Stages of integrated planning



Section overview

- Goals and objectives should:
 - Reflect strategies for a unified, coordinated approach for all HIV prevention and care funding
 - Address health equity
 - Address identified barriers and needs
- May update and/or use portions of other plans
 - Include goals that cover the entire HIV service delivery system and geographic area
 - Describe changes made

Goals and objectives should be:

- Written in SMART format
- Structured to include strategies that accomplish the following:
 - Diagnose all people with HIV as early as possible
 - Treat people with HIV rapidly and effectively to reach sustained viral suppression
 - Prevent new HIV transmissions by using proven interventions
 - Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them

Section requirements

- Include at least three goals and objectives for each of the four areas

Integrated HIV Prevention and Care Plan Guidance, CY 2022-2026 FAQs

Question #7: How many goals should the jurisdiction include for each focus area (i.e., Diagnose, Treat, Prevent, and Respond)?

There should be at least 3 goals and/or objectives for each of the four focus areas.

Section format

Integrated HIV Prevention and Care Plan Guidance, CY 2022-2026 FAQs

Question #4: How should goals and objectives should be ordered? Should jurisdictions mirror the NHAS goals or the EHE plan?

There is not a required format for submitting goals and objectives; however, HRSA and CDC strongly encourage jurisdictions to use the sample template provided in Appendix 2 in the Guidance. If not using the template, ensure all the information in the sample is included. Each jurisdiction should work with their planning bodies to determine a structure that will allow for full implementation and concurrence by the planning body. When setting goals, the jurisdiction should ensure that they advance the national strategies set out in NHAS. To ensure a unified response throughout the jurisdiction, Integrated Plan submissions should also align with existing HIV prevention plans, including but not limited to the EHE plan.

Appendix 2: Example Goal Structure

Diagnose (EXAMPLE)

Goal 1: To diagnose XX people with HIV in 5 years.

Key Activities and Strategies:

- 1) Increase routine testing in XX ERs, acute care settings, etc.
- 2) Increase public awareness campaigns focused on getting tested and treated in XX neighborhoods/venue to reach demographic XX

Key Partners: Health departments, community-based organizations, FQHCs, correctional facilities, school-based clinics, sexual health clinics, women's health services/prenatal services providers, hospitals, etc.

Potential Funding Resources: CDC HIV Prevention and Surveillance Programs, RWHAP, Bureau of Primary Health Care (Health Centers), State and/or Local Funding, Medicaid, etc.

Estimated Funding Allocation: \$X

Outcomes (reported annually, locally monitored more frequently): # of newly identified persons with HIV

Monitoring Data Source: EMR data, surveillance data

Expected Impact on the HIV Care Continuum: Increase the number of people who know their HIV diagnosis by XX% and linked to medical care within 90 days by XX%

Explanation of terminology from the NHAS

- Objectives provide direction for the attainment of the goal
- Strategies represent approaches to achieve the objective
 - Note: The NHAS does not include activities. Activities are included in the Federal Implementation Plan.
- Numerous objectives and strategies could fit under more than one goal. However, each one has been placed under the goal with which it most closely aligns.

NHAS Table 3

Definitions of Elements of the Strategy

National HIV/AIDS Strategy	Federal Implementation Plan
<p>Goals: Broad aspirations that enable a plan's vision to be realized</p> <p>Objectives: Changes, outcomes, and impact a plan is trying to achieve</p> <p>Strategies: Choices about how best to accomplish objectives</p>	<p>Action Steps: Specific activities that will be performed to implement the strategies and achieve the goals of the plan</p> <p>Progress Reports: Reports on progress, successes, and challenges</p>

Describe your approach!

- Describe how the section is organized
- Indicate which of the four areas your goals and/or objectives are associated with
- Some examples:
 - **Example 1:** Similar to Appendix 2, our plan organizes our goals by the four areas (diagnose, prevent, treat, and respond). There are at least three goals for each area.
 - **Example 2:** Our plan organizes our objectives by the four NHAS goals. For each objective, we indicate which of the four focus areas it is most clearly or directly aligned with. See Table 1 for a summary of the objectives for each of the four areas.

What does it mean to be SMARTIE?

- From SMART (**S**pecific, **M**easurable, **A**chievable, **R**ealistic, **T**imebound)...to SMARTIE*
 - **Inclusion:** Provides an opportunity to bring traditionally excluded individuals and groups into processes, activities, and decision-making in a way that shares power
 - **Equity:** Means including an element of fairness or justice to address systemic injustice, inequity, or oppression
- For more information and examples of SMARTIE goals and objectives, check out [Be a SMARTIE: An Equity-Forward Approach to Goal Setting](#)¹ as well as other resources in the webinar companion guide.

¹Bibbs, M. (2021, January 5) Be a SMARTIE: An Equity-Forward Approach to Goal Setting. The Alford Group. Available at: (<https://alford.com/be-a-smartie-an-equity-forward-approach-to-goal-setting/>)

Speakers



Naomi Ardjomand-Kermani
(they/them)

Ryan White Planning Manager
West Central Florida Ryan
White Care Council



Katie Scussel
(she/her)

Ryan White Planner
West Central Florida Ryan
White Care Council

Integrated Plan Section V

Goals and Objectives

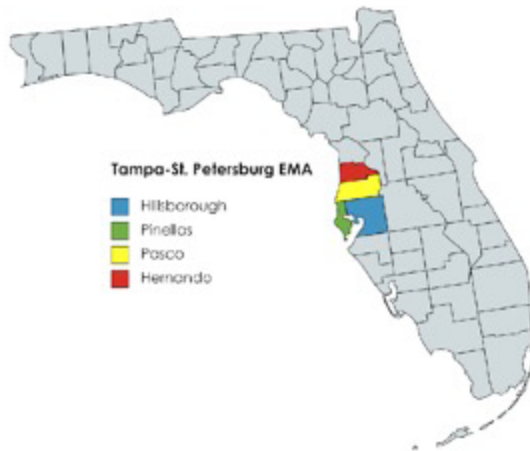
TAMPA ST. PETERSBURG EMA

MAY 2022

Prepared by:  **SUNCOAST**
HEALTH COUNCIL

On behalf of:  **Hillsborough**
County Florida

Tampa-St. Petersburg EMA Overview



4 County Part A EMA: Hernando, Hillsborough, Pasco and Pinellas

2 funded *Ending the HIV Epidemic (EHE)* counties

- Hillsborough receives *both* CDC and HRSA

West Central Florida Ryan White Care Council, a combined Part A and Part B planning body

- 4 additional counties in TSA: Polk, Hardee, Highlands, and Manatee

Part A Integrated Plan (HRSA)

- Combined consortia working parallel with State IP



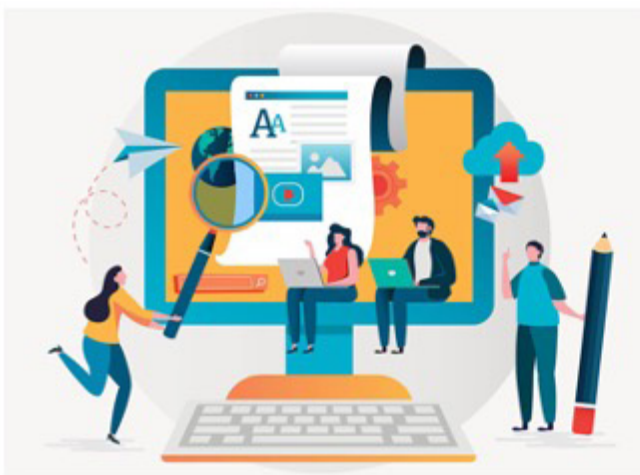
2017-2021

- Written in **2016**, primarily by former staff
- Planning Council Support Staff charged with monitoring
- Monitoring tool adapted from **Miami-Dade County EMA**
- Progress *reported* to Planning Council's former Planning and Evaluation Committee

2017-2021 Monitoring Tool Example

NHAS 2020 GOAL #1: REDUCE NEW HIV INFECTIONS (2019 IMPLEMENTATION)										
PREVENTION										
Objectives	Strategies	Activities / Measurements	Responsible Entities	Data Indicators	2019 Goal	April 2019	July 2019	Nov 2019	Feb 2019	Total to Date
A. By January 2019, increase the number of providers offering PrEP in the EMA by 50%.	Strategy 2: Develop a system for PrEP delivery within the Tampa/St. Petersburg EMA	2.a. Identify potential PrEP providers	Department of Health	Number of identified providers		23 (Area 6 as of 2018)				23 (Area 6 as of 2018)
		2.b. Identify resources available for clinical consultation and education	AIDS Education and Training Center	Number of trainings offered/consultations in the EMA Number of healthcare providers attending each training		2 As of 2018				2 As of 2018
		2.c. Identify best practices to finance PrEP	Department of Health, Healthcare Providers	Discussion of best practices with the HIV Planning Partnership	✓	✓	✓	✓	✓	✓

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Monitoring

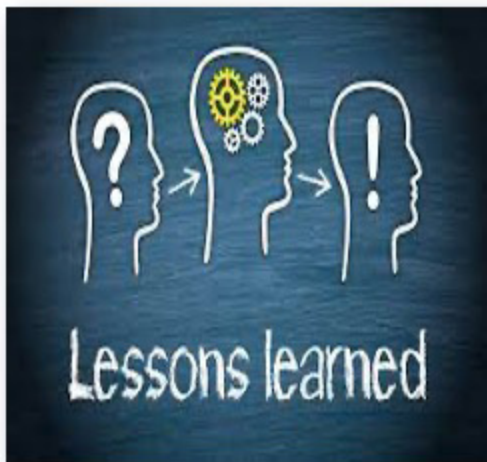
Barriers

- Some goals, objectives, and strategies could not be reported
- Lack of *baseline* data
- Lack of clear roles and responsibilities for data collection
- Staff turnover between when plan was written and when monitoring began

Response

- Revised plan: *living document*
- Kept overarching goals but updated some of the activities and data indicators to capture what we could track
- Made note of needed adjustments for 2022 – 2026 IP to *meet community needs* and ensure measurable data

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Community Involvement

- Those tasked with data collection involved in **planning** process
- Emphasis on **community** responsibility
- Shifting planning body **culture views** and *values*: cultural humility workshop series

Certain populations not reflected in previous plan

- For example: Lack of goals specific to *transgender* populations

Goals with trackable data were met **successfully**



2022 IP Process

Began drafting plan in January 2022

- Internal September deadline
- Ongoing community input for any needed revisions *prior* to plan submission

Convened regular writing team meetings

- Representation from Planning Council Support, Part A, Part B, Part D, Quality Management, Health Department (Prevention), The AIDS Institute, and others
- Planning Council members invited to join



2022 Integrated Plan Process: Incorporating Lessons Learned

Focus group-style town halls

- Gather input from community at-large
- Meaningful Involvement of People with HIV/AIDS (MIPA)

Updated language

- People first, non-stigmatizing

Regular monitoring early on

- Adjustments as needed

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Questions?

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



Leave Meeting

Upcoming series events

- **Peer Learning Session**
 - May 24, 3:00-4:00 pm EST
- **Next Webinar**
 - TBD

Registration details available at <https://targethiv.org/library/ihap-webinars>.

NEW TOOL: HIV Prevention, Care, and Treatment Resource Inventory Compiler

Supports:

- **Data Collection:** Captures information necessary for completing the resource inventory section of the IP submission
- **Resource Inventory Table Creation:** Generates a table in PDF format for IP submission
- **Funding Analysis Dashboard:** Analyzes the collected data with six pre-programmed options

Available at: <https://targethiv.org/library/hiv-prevention-care-and-treatment-resource-inventory-compiler>

Want IHAP TAC support to use the tool? Contact us!

The IHAP TAC can help!

- New to Integrated Planning or Need a Refresher?
 - Online Course: An Introduction to HIV Prevention and Care Planning
 - Access at www.targethiv.org/ihap
- Visit our website at www.targethiv.org/ihap
- Join our mailing list at <https://targethiv.org/ihap/subscribe>
- Contact us at ihaptac@jsi.com to request tailored technical assistance

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Thank you!



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PROMPTS FOR ADDITIONAL DISCUSSION

As you reflect on the webinar content, consider these prompts for discussion with your colleagues and integrated planning partners.

- What were some of the challenges with monitoring the previous Integrated Plan's goals and objectives? How are you addressing those challenges for the 2022-2026 Integrated Plan?
- What HIV measures currently constitute some kind of "dashboard" in your jurisdiction? What measures, if any, are lacking?
- In addition to "other HIV plans" such as EHE, Getting to Zero, etc., what are some other documents your jurisdiction has produced that have descriptions of goals and objectives, community engagement and planning processes, contributing data sets and assessments, and implementation, monitoring, and follow up plans? For instance, what was included in the most recent Ryan White HIV/AIDS Program Part A or Part B grant application? What performance measures are in your jurisdiction's most recent Clinical Quality Management Plan?
- How can you revise SMART objectives to ensure they include measures of inclusion and equity?
- How can you make your epi profile user friendly and accessible to planning group members and program staff?

GLOSSARY OF TERMS

Check out the [IHAP TAC glossary](#) for terms specifically related to integrated planning.

Other terms that are helpful to be familiar with as you begin to develop your Plan:

- **Epidemiologic profile:** A programmatic requirement for CDC DHP recipients and a programmatic/legislative requirement for RWHAP Parts A/B, this comprehensive collection of HIV prevention and care related data serves as the foundation for the **epidemiologic snapshot** (a required piece of each submitted Integrated HIV Prevention and Care Plan). The epidemiologic profile can support HIV planning, designing, and implementing prevention and care activities and the evaluation of those activities, and informing policy decisions and documenting prevention and care needs for underserved groups.
- **SMART goal or objective:** An acronym used to develop goals or objectives that stands for specific, measurable, achievable, realistic, timebound.
 - References to support development of SMART goals: <https://www.cdc.gov/publichealthgateway/phcommunities/resourcekit/evaluate/develop-smart-objectives.html>
- **SMARTIE goal or objective:** An acronym used to develop goals or objectives that stands for specific, measurable, achievable, realistic, timebound, inclusion, and equity. While the Integrated HIV Prevention and Care Plan Guidance requires SMART goals/objectives, we encourage jurisdictions to consider the addition of inclusion and equity when developing objectives. The addition of inclusion and equity promotes representation from socially and economically marginalized individuals and groups when creating the objectives, and includes an element of justice in objectives.
 - References to support the development of SMARTIE goals and objectives
 - <https://www.managementcenter.org/resources/smartie-goals-worksheet/>
 - <https://www.cdc.gov/cancer/dcp/about/foa-dp22-2202/pdf/smartie-objectives-508.pdf>

ACRONYM LIST

- CDC DHP - Centers for Disease Control and Prevention, Division of HIV Prevention
- CY - Calendar Year
- EHE - Ending the HIV Epidemic in the U.S.
- EMA - Eligible Metropolitan Area
- HAB - HIV/AIDS Bureau
- HRSA - Health Resources and Services Administration
- IHAP TAC - Integrated HIV/AIDS Planning Technical Assistance Center
- IP - Integrated Plan
- JSI - JSI Research & Training Institute, Inc.
- MIPA - Meaningful Involvement of People with HIV/AIDS
- NHAS - National HIV/AIDS Strategy
- PrEP - Pre-Exposure Prophylaxis
- RWHAP - Ryan White HIV/AIDS Program
- SCSN - Statewide Coordinated Statement of Need
- SMART - Specific, measurable, achievable, realistic, timebound
- SMARTIE - Specific, measurable, achievable, realistic, timebound, inclusion, equity
- TA - technical assistance
- SCSN - Statewide Coordinated Statement of Need
- TA - technical assistance

INTEGRATED PLANNING RESOURCES

[Integrated Guidance for Developing Epidemiologic Profiles \(CDC and HRSA\)](#)

CDC and HRSA have updated the epidemiologic profile guidance to reflect new data sources and new core questions that align with the [National HIV/AIDS Strategy \(2022–2025\)](#) and the [Ending the HIV Epidemic in the U.S.](#) initiative.

[HIV Prevention, Care and Treatment Resource Inventory Compiler \(IHAP TAC\)](#)

The HIV Prevention, Care, and Treatment Resource Inventory Compiler is a new tool that supports the collection and analysis of funding information about all HIV resources in the jurisdiction. The tool generates a formatted table for the Integrated Plan and includes a dashboard for data analysis.

[Integrated HIV Prevention and Care Plan Guidance, Including the Statewide Coordinated Statement of Need, CY 2022-2026 \(CDC and HRSA\)](#)

This guidance outlines the planning requirements for RWHAP Parts A and B recipients and all DHP-funded state and local health departments.

[Integrated HIV Prevention and Care Plan Guidance, CY 2022-2026 Frequently Asked Questions \(CDC and HRSA\)](#)

This joint HRSA and CDC resource clarifies recipient questions about the Integrated HIV Prevention and Care Plan Guidance, including the Statewide Coordinated Statement of Need, CY 2022-2026.

[An Introduction to Integrated HIV Prevention and Care Planning \(IHAP TAC\)](#)

This self-paced, online course serves as an introduction to the fundamentals of integrated planning, and is designed for anyone who is new to integrated HIV prevention and care planning or anyone who would like a refresher on the basics.

[Fillable CY 2022 – 2026 CDC DHP and HRSA HAB Integrated Prevention and Care Plan Guidance Checklist \(IHAP TAC\)](#)

The checklist is a new feature required in the submission of the Integrated Plans for 2022-2026. Use this fillable checklist to outline which elements required new content and which elements were developed as part of another jurisdictional plan. The checklist details submission requirements for jurisdictions including RWHAP legislative requirements and SCSN; allows recipients to create an Integrated Plan that meets local needs; and asks recipients to identify page number(s) within the document/plan where the requirement is listed.

[Integrated HIV Prevention and Care Planning Online Resource Guide \(IHAP TAC\)](#)

This Online Resource Guide is intended to support RWHAP Parts A and B recipients, CDC HIV prevention recipients, and their planning bodies with the ongoing integrated planning and the development, implementation, and monitoring of their Integrated HIV Prevention and Care Plans. The guide includes resources, tools, and tips to help inform and guide jurisdictions' work in integrating HIV planning and implementation efforts across prevention, care, and treatment delivery systems.

Need More?

[Visit our website](#) to access more resources and learn about upcoming events.

Stay in touch! [Sign up for our listserv](#) to receive up-to-date information about new resources and upcoming learning opportunities.

Thank you for your participation!



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About the IHAP TAC: The HRSA-funded **Integrated HIV/AIDS Planning Technical Assistance Center** (IHAP TAC) supports Ryan White HIV/AIDS Program Parts A and B recipients, CDC DHP-funded recipients, and their respective HIV planning bodies with integrating planning, including the development, implementation, and monitoring of their Integrated HIV Prevention and Care Plans. We provide national and individualized training and technical assistance and facilitate peer-to-peer learning.