

Goals and Objectives for the Integrated Plan 2022-2026

Presentation to the Philadelphia HIV Integrated Planning Council

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Background

- The Philadelphia EMA's new Integrated Plan is being developed to inform program planning, resource allocation, evaluation, and continuous quality improvement over a 5-year period.
- The EMA's final Integrated Plan 2022-2026 including the HIPC's Letter of Concurrence will be submitted to CDC and HRSA by December 9, 2022.

Integrated HIV Prevention and Care Plan Guidance, including the Statewide Coordinated Statement of Need, CY 2022- 2026

Division of HIV/AIDS Prevention

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
Centers for Disease Control and Prevention

HIV/AIDS Bureau

Health Resources and Services Administration

June 2021

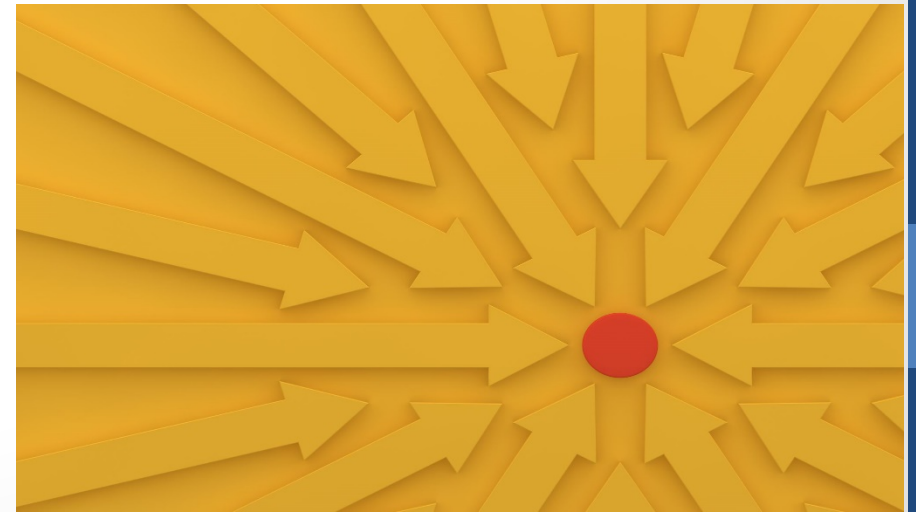


Integrated Plan Table of Contents

#	Section
I	Executive Summary of the Integrated Plan and SCSN
II	Community Engagement and Planning Process
III	Contributing Data Sets and Assessments
IV	Situational Analysis
V	Goals and Objectives 
VI	Integrated Planning Implementation, Monitoring and Jurisdictional Follow Up
VII	Letter of Concurrence

Section V: 2022-2026 Goals and Objectives

- Provides a coordinated approach for all HIV prevention and care funding
- Plans activities that are specific, measurable, achievable, relevant, and time-bound (SMART)
- Addresses the four strategies for scaling up efforts to end the epidemic:
 - ✓ Diagnose
 - ✓ Treat
 - ✓ Prevent
 - ✓ Respond
- Includes health equity activities



Incorporated Recommendations(1)

- HIPC Recommendations:
 - Expand upon housing needs
 - Discuss transportation needs
- Treat - Goal 2: Increase engagement in HIV medical care to 95% among PLWDH
 - Objective 1: Address social and structural influencers of health to reduce barriers to engagement in HIV
 - ✓ Pursue the implementation of a transitional housing program to assist PLWH who are rent burdened or experiencing homelessness with the goal of permanent housing by providing short term transitional housing with an intensive medical case management component.
 - ✓ Support homelessness prevention activities by providing direct emergency financial assistance for rent and utilities in the EMA.
 - ✓ Ensure medical case managers continue to assess and address housing instability when developing assessments and completing and reviewing clients' service care plans.
 - ✓ Address transportation barriers for medical appointments and other necessary services.

Incorporated HIPC Recommendations (2)

- HIPC Recommendations:
 - Define PLWDH and create an acronym glossary at the beginning of the plan; explain the purpose of using PLWDH versus PLWH.
 - Under Prevent; Goal 1: Consider an Objective 4 that reiterates “Increase Uptake of Antiretroviral Therapy” as it relates to prevention (U=U).
 - Under Treat; Goal 2; Objective 2: “Emphasize the need for non-digital and diverse mechanisms to disseminate information and address the digital divide as a barrier.”
 - Ensure individuals are receiving important information; address barriers that exist for disseminating educational materials and any difficulties that may occur during the materials review process.

Incorporated HIPC Recommendations (3)

- The term “PLWDH” will be incorporated in the plan.
- Prevent - Goal 1: Use biomedical interventions to reduce new HIV diagnoses by 75%
 - Objective 1: 50% of people with a PrEP indication will be prescribed PrEP
 - ✓ Increase uptake of ART as a method of prevention (U=U)
- Treat - Goal 2: Increase engagement in HIV medical care to 95% among PLWDH
 - Objective 2: Provide public-facing information on the availability of HIV treatment and supportive services for PLWH
 - ✓ Increase visibility of and increase the awareness of the Ryan White funded service delivery system to people who are under-insured and uninsured to reduce barriers to care related to affordability.
 - ✓ Reduce HIV Stigma by including health equity and cultural humility approaches to future funding request for proposals that address provider-initiated stigma and bias.
 - ✓ Develop and distribute rights-based consumer medical education, including tool- kits for PLWDH.
 - ✓ Increase the capacity of PDPH-funded HIV care providers to implement evidence-based new and expanded activities, through targeted technical assistance activities to improve health outcomes of PLWDH.
 - ✓ Maintain a public online data dashboard presenting local EHE-related information that displays key performance indicators for providers. Shared information will include retention and viral suppression metrics for individual Ryan White funded medical facilities.
 - ✓ Continue ongoing data dissemination to key community partners and internal and external stakeholders to increase knowledge, close information gaps, and provide educational resources to empower PLWDH to improve their health.
 - ✓ Promote awareness among providers and PLWDH regarding the availability of injectable ART options, which may contribute to improved engagement in care and VLS for patients with barriers to adherence.
 - ✓ **Ensure that non-digital and diverse mechanisms are used to disseminate information to address the digital divide.**

Diagnosis – Goals

1. To diagnose 95% of persons living with HIV by 2026
2. Eliminate disparities in non-clinical HIV testing
3. ~~Strengthen the HIV workforce including collaboration with NJ and PA DOH.~~

DIAGNOSIS

Goal 1: To diagnose 95% of persons living with HIV by 2026

Objectives

- Promote routine opt-out HIV screenings and diagnostic testing in 50 healthcare and other institutional settings by 2026
- Maintain HIV testing services in non-clinical settings
- Implement novel HIV testing initiatives

DIAGNOSIS

Goal 2: Eliminate disparities in non-clinical HIV testing

Objectives

- Increase the number of partners to address syndemics to reduce new HIV diagnoses
- ~~Increase HIV testing among priority populations by 20%.~~
- Enhance health equity efforts through policy and process improvements
- Evaluate HIV testing programs to address disparities in priority populations on an annual basis

Treatment – Goals

1. By 2026, 95% of people living with HIV will be virally suppressed
2. Increase engagement in HIV medical care to 95% among PLWDH
3. Reduce HIV-related disparities in HIV outcomes

TREAT

Goal 1: By 2026, 95% of people living with HIV will be virally suppressed

Objectives

- Increase uptake of iART among eligible persons newly diagnosed with HIV to 95%
- Re-engage 95% of PLWH out of care in HIV medical care
- Assess the needs of people aging with HIV, including long-term survivors and more recently diagnosed PLWDH over 50 and identify and implement strategies to support identified needs

TREAT

Goal 2: Increase engagement in HIV medical care to 95%
among people with diagnosed HIV

Objectives

- Address social and structural influencers of health to reduce barriers to engagement in care for persons with diagnosed HIV
- Provide public-facing information on the availability of HIV treatment and supportive services for people living with diagnosed HIV

TREAT

Goal 3: Eliminate HIV-related disparities in HIV outcomes

Objectives

- Address health equity disparities in Ryan White funded HIV care facilities
- Expand the evaluation of HIV care programs to reduce health disparities
- Provide training related to health equity issues and key populations to all subrecipients

Prevent – Goals

1. Use biomedical prevention strategies to reduce new HIV diagnoses by 75%
2. Increase the number of access points for evidence-based harm reduction services
3. Reduce disparities in HIV-related prevention services in priority populations

PREVENT

**Goal 1: Use biomedical prevention strategies to
reduce new HIV diagnoses by 75%**

Objectives

- 50% of people with a PrEP indication will be prescribed PrEP
- Ensure access to Nonoccupational Post Exposure Prophylaxis (nPEP or PEP)
- Support Perinatal Prevention Services for pregnant individuals

PREVENT

**Goal 2: Increase the number of access points for
evidence-based harm reduction services**

Objectives

- Expand access to harm reduction supplies through novel approaches
- Expand SSP service delivery

PREVENT

Goal 3: Reduce disparities in HIV-related prevention services in priority populations

Objectives

- Monitor local disparities along the status-neutral continuum
- Reduce HIV-related disparities in new diagnoses among priority populations
- Increase and support health promotion activities for HIV prevention in the communities where HIV is most heavily concentrated

Respond – Goals

1. Identify and investigate active HIV transmission clusters and respond to all HIV outbreaks
2. Ensure data sharing with the PA and NJ Departments of Health

RESPOND

**Goal 1: Identify and investigate active HIV transmission clusters
and respond to all HIV outbreaks**

Objectives

- Maintain a robust core HIV public health data system to identify outbreaks of HIV
- Maintain outbreak response plans and structures to respond to outbreaks and clusters that require an escalated response
- Intervene in all clusters that are identified

RESPOND

Goal 2: Assure data sharing with the PA and NJ Departments of Health

Objectives

- Expand data sharing with the Pennsylvania Department of Health
- Implement data sharing agreement with the New Jersey Department of Health

Workforce Development

- A critical component to achieving the goals of Diagnose Treat, Prevent and Respond
- Goal is to strengthen the HIV workforce to provide quality services
 - Provide training related to health equity issues and other work-related topics
 - Expand on the radical-customer-service approach at the provider level
 - Support efforts of funded providers to diversify their HIV workforce





Thank you!