

## **AREA 12**

# **HIV/AIDS PATIENT CARE COMPREHENSIVE PLAN FOR 2009-2012**

*WHERE ARE WE NOW?*

*WHERE DO WE WANT TO GO?*

*HOW DO WE GET THERE?*

## SECTION I

### WHERE ARE WE NOW: *WHAT IS OUR CURRENT SYSTEM OF CARE?*

---

- ☑ Planning Consortia composition (membership), number and types of meetings, and the process by which meetings are called/held.
- ☑ Epidemiologic Data and Profile
- ☑ Needs Assessment process and findings
- ☑ Calculation of Unmet Need
- ☑ Description/prioritization of disparities, barriers, and service gaps
- ☑ Service Prioritization (*incl. Statewide Coordinated Statement of Need*)
- ☑ Prevention Programs
- ☑ Resource Inventory

## SECTION II

---

# WHERE DO WE NEED TO GO: *WHAT SYSTEM OF CARE DO WE WANT?*

- ☑ Information and process used to prioritize services and allocate funds
- ☑ Description and justification of current allocations

## **SECTION III**

---

### **HOW WILL WE GET THERE: *HOW DOES OUR SYSTEM NEED TO CHANGE TO ASSURE AVAILABILITY AND ACCESSIBILITY OF CORE SERVICES?***

- Vision, Mission, and Guiding Principles of PCHAP
- Description of initiatives to reduce Perinatal transmission
- Goals, Objectives, and Tasks for 2009-2012

# **SIGNIFICANT THEMES AND TRENDS**

*(Taken from Section I)*

---

- 1. The number of PLWHA in Area 12 has more than doubled in less than 10 years.**
- 2. More females are getting infected, but men still out-number women by 2 to 1.**
- 3. The rate of new infections is still increasing among racial/ethnic minorities.**
- 4. Florida experiences a relatively high rate of “in-migration,” but funding does not follow.**
- 5. There is an increasing trend in utilization of Health Insurance Continuation assistance.**
- 6. An expansion of Ryan White eligibility criteria is expected within 1 year.**
- 7. Risky sexual behavior continues to be the most frequent cause of HIV transmission.**
- 8. There is an under-utilization of Mental Health and Substance Abuse Treatment services.**

# DEVELOPING GOALS AND OBJECTIVES

---

## HRSA Themes: *(these will now be the goals for the state)*

1. Identify individuals who know their HIV status and are not receiving services, to informing the individuals and enable them to utilize services.
2. Eliminate disparities in accessing services among affected subpopulations *(i.e.: minorities, women, MSM, substance users, sex workers, etc.)*.
3. Coordinate the provision of services with programs for HIV prevention *(including outreach and early intervention)*.
4. Coordinate the provisions of services with programs for the prevention and treatment of substance abuse.
5. Address adherence initiatives.
6. Minority AIDS Initiative *(issues of minority access and disparity in the area)*.
7. Program coordination and linkages between Parts A, B, C, D and AETC.
8. Build capacity in your area.

## AREA 12 – GOAL 1

*Identify individuals who know their HIV-positive status and are not receiving services; to inform and enable those individuals to access and utilize available HIV/AIDS services.*

**OBJECTIVE:** Reduce the proportion of reported PLWHA who are 'not in care' by 18% (from 35% to 17%).  
*(This would reduce our rate of unmet need to match the Statewide average rate.)*

1. Survey all registered HIV Counseling and Testing sites in Area 12 for referral and linkage protocols for persons newly diagnosed with HIV.
2. Identify and rank causes for persons not entering care, or not staying in care.
3. Develop strategies to address the primary barriers that prevent PLWHA from entering and/or remaining in care.
4. Present strategies and recommendations to providers and provide a forum for collaborative implementation of recommended strategies.
5. In year 2, develop and initiate a coordinated multi-agency implementation plan employing the recommended strategies formulated by the consortia.
6. In year 3, sustain adopted strategies, re-assess for effectiveness (evaluate), and refine policies and procedures as needed to reach target rate.

## AREA 12 – GOAL 2

### ***Eliminate disparities in accessing services among affected subpopulations***

*(including: minorities, women substance users, MSM, sex workers, and persons in geographically isolated areas).*

**OBJECTIVE: Reduce or eliminate at least 2 access disparities for PLWHA.**

1. Obtain data regarding persons who are HIV-positive but not in care.
2. Develop a methodology to quantify, measure, and rank disparities.  
*(Obtain technical assistance from Bureau of HIV/AIDS Epidemiology staff as needed.)*
3. Prioritize access disparities among HIV-positive persons in Area 12.
4. Develop strategies to address and reduce at least 2 access disparities, including the reduction of at least 1 system barrier within the Ryan White Part B service network.
5. In year 2, develop and initiate an implementation plan to reduce the disparities.
6. Implement strategies, educate providers and raise community awareness.  
*(Including at least one cultural competency training opportunity for providers).*
7. In year 3, evaluate, and implement changes as needed to assure effectiveness.

## AREA 12 – GOAL 3

*Coordinate the provision of Patient Care services with programs for HIV Prevention, Substance Abuse Treatment, Mental Health Counseling, and Treatment Adherence.*

**OBJECTIVE A:** Consolidate all existing/available HIV/AIDS services directories into a single comprehensive directory for all persons who are HIV-infected or at high risk of HIV transmission.

1. Review and update existing directory entries/information from all available sources.
2. Compile updated information and organize into a user-friendly directory format.
3. Produce and distribute comprehensive directory to all HIV/AIDS service providers and partners.
4. Review and update directory information as needed.

## AREA 12 – GOAL 3

*Coordinate the provision of Patient Care services with programs for HIV Prevention, Substance Abuse Treatment, Mental Health Counseling, and Treatment Adherence.*

---

**OBJECTIVE B:** Increase the proportion of PLWHA who access and utilize Mental Health Counseling and/or Substance Abuse Treatment services along with Primary Medical Care in Area 12.

1. Obtain and review local baseline data on substance abuse among PLWHA.
2. Survey enrolled PLWHA who access Wellness Assessment services about their substance use and mental health needs, their likelihood to utilize available counseling services, and potential barriers to entering counseling/treatment.
3. Assess and prioritize local needs and barriers surrounding mental health and substance abuse (MH/SA) treatment services for Area 12 PLWHA.
4. Develop and implement collaborative strategies to address barriers to MH/SA.
5. Evaluate success and develop/implement strategy revisions as needed.