

Integrated Plan Guidance: The Integrated HIV Prevention and Care Plan is required to align with the goals of the National HIV/AIDS Strategy (NHAS) and to use the principles and the intent of the HIV Care Continuum to inform the needs assessment process and the service delivery implementation. The Integrated HIV Prevention and Care Plan should respond to the needs identified in Section I of the Integrated HIV SCSN/Needs Assessment guidance and align with the three NHAS goals: (1) reducing new HIV infections; (2) increasing access to care and improving health outcomes for PLWH; and (3) reducing HIV related disparities and health inequities.

3 NHAS Goals

Two SMART objectives per goal

Three strategies per objective: 1) Activities/interventions - Identify any activities specifically aimed at addressing gaps along the HIV Care Continuum. 2) Targeted population; 3) Responsible parties for implementing the strategy

For each activity: 1) Time line and resources needed to implement the activity; 2) Identify data sources and measures. Metrics should be consistent with the most current HHS Core Indicators and the NHAS Indicators.

General, not in FTC	Unique to Planning Council	Duplicative of FTC	Unsure	Completed		
	AUSTIN INTEGRATED HIV PREVENTION AND CARE PLAN					
Timeframe	Activity	Responsible Parties	Target Population	Data Indicators	Notes/FTC Alignment	
	G1	Reduce new HIV infections				
	Obj 1	Reduce new diagnoses by 25 percent (from 327 to 246) by 2021.				
	Strategy 1	Provide easily accessible, appropriate, scientifically accurate information about HIV risks, prevention, and transmission to high-risk populations.				
1	2017-2021 ONGOING	Support coordinated social marketing and other mass education activities focused on raising HIV awareness, including targeted messages for high risk populations (sex, age, etc.).	HIV PC; HRAU and CDU; Community Based Organizations	High-risk: MSM,IDU,Wome n,Youth,Black,His panic	<div>Number of social marketing messages and mass education activities</div> <div>Total of different types of messages</div>	1.2.1
2	2017-2021 ONGOING	Promote culturally and linguistically appropriate prevention efforts (such as community mobilization efforts and peer approaches that encourage community members who interact with target populations to be HIV prevention advocates), including reviewing current CLAS standards and the annual review and implementation methodologies.	HIV PC; HRAU and CDU	Community members who interact with target populations	<div>Number of prevention efforts</div> <div>Number of community mobilization efforts</div> <div>Number of peer support programs</div>	3.1.6, 3.2

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	Timeframe	Activity	Responsible Parties	Target Population	Data Indicators	Notes/FTC Alignment
3	2017-2021 PROJECT	Evaluate and expand Prevention with Positives interventions including treatment adherence, HIV prophylaxis, and behavior change interventions for HIV+ individuals and their partners.	HIV PC; HRAU; Ryan White Part A Case Management Providers	HIV+ individuals	Number of clients receiving Prevention with Positives interventions,	1.3, 3.1.6
				Partners of HIV+ individuals	Number of negative people who receive Prevention with Positives interventions who remain negative	
4	2017-2021 ONGOING	Sustain condom distribution for: (a) the general public and (b) for high-risk populations and communities.	HIV PC; CDU; HIV Task Force	General Population;	Number of access points for free condoms	
				High-risk MSM, IDU,Women, Youth, Black, Hispanic		
	Strategy 2	Provide easily accessible, scientifically accurate information about area HIV trends to community providers and policymakers to inform the delivery of prevention services.				
5	2017 ANNUAL MEETING	Convene area HIV prevention providers to highlight trends and gaps in local HIV data on prevention and transmission.	HIV PC; HIV Task Force; CDU	HIV prevention providers	Report produced	FTC
6	2017-2021 ANNUAL REPORT	Educate policymakers on changing governmental policies that create barriers to HIV prevention information and tools (e.g. provide annual report including testing data and recommendations to COA Health and Human Services committee).	HIV PC; HRAU and CDU; DSHS Epidemiology Division	COA	Number of education actions	Want PC- specific or is FTC work sufficient?
				Travis County	Number of government policies changed	
	Strategy 3	Expand local capacity and infrastructure for prevention services.				
7	2017-2021 ONGOING	Advocate for the COA to designate funding for PrEP to high risk populations.	HIV PC; HRAU and CDU); DSHS Epidemiology Division; Austin PrEP Access Project, HIV Task Force	COA City Council	Number of times information and requests are sent to City Council	HIV PC specific? Or can we group into larger FTC PrEP initiatives?
					Amount of PrEP funding designated from COA	

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AUSTIN INTEGRATED HIV PREVENTION AND CARE PLAN									
Timeframe		Activity		Responsible Parties	Target Population	Data Indicators		Notes/FTC Alignment	
8	2017-2018 PROJECT	Develop guidelines to expand community- wide access to PrEP and nPEP.		HIV PC; HRAU and CDU); DSHS Epidemiology Division; Austin PrEP Access Project	People at risk for HIV	Guidelines developed		1.1	
						Number of people using PrEP and NPEP			
						Number of access points /providers prescribing			
9	2017-2018 PROJECT	Develop a toolkit for private medical doctors for how to provide PrEP/nPEP and how to link a newly diagnosed individual to the Ryan White HIV/AIDS Program.		HIV PC; HRAU and CDU; DSHS Epidemiology Division; Austin PrEP Access Project	Private medical doctors	Creation of toolkit		1.3	
						Number of private medical doctors who receive toolkit			
						Number of private medical doctors who link to HIV care			
10	2017-2021 PROJECT	Evaluate and improve the integration of appropriate harm reduction approaches into prevention programming.		HIV PC; HIV Task Force; HRAU and CDU; Austin Harm Reduction Coalition	High-risk MSM, IDU, Women, Youth, Black, Hispanic	Number of harm reduction approaches implemented			
11	2017-2021 ONGOING	Advocate for early Treatment as Prevention approaches to be incorporated into existing prevention programming.		HIV PC, HIV Task Force	HIV Providers	Number of persons who are virally suppressed		1.2, 1.3	
						Number of new diagnoses			
						Number/percent of providers who incorporate Treatment as Prevention approaches			

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AUSTIN INTEGRATED HIV PREVENTION AND CARE PLAN													
Timeframe		Activity		Responsible Parties		Target Population		Data Indicators		Notes/FTC Alignment			
		Objective 2		Reduce late-stage diagnosis (AIDS defining CD4 within 12 months of initial diagnosis) by 25% (from n=71 to n=54) by 2021.									
		Strategy 1		Tackle misperceptions, stigma, discrimination and knowledge deficits to break down barriers to HIV testing.									
12		2017-2021 ONGOING		Support coordinated social marketing and other mass education activities focused on HIV testing as prevention, including targeted messages focusing on existing misperceptions, and social stigma in high-risk populations (sex, age, etc).		HIV PC; HRAU and CDC		High-risk MSM, IDU, Women, Youth, Black, Hispanic		Number of social marketing and mass education activities		1.2.1	
13		2017-2021 ONGOING		Promote culturally and linguistically appropriate prevention efforts, such as community mobilization efforts and peer approaches that encourage community members who interact with target populations to be HIV prevention advocates.		HIV PC; HRAU and CDC		Community members who interact with target populations		Number of prevention efforts		Multiple	
										Number of community mobilization efforts			
										Number of peer support programs			
		Strategy 2		Support HIV testing and routine opt-out screenings in medical settings.									
14		2017-2021 ONGOING		Sustain targeted HIV testing by community- based organizations to high-risk populations.		HIV PC; CDU; HIV Task Force		High-risk MSM, IDU, Women, Youth, Black, Hispanic		Number of HIV testing for high-risk populations by community based organizations			
15		2017-2021 PROJECT/ ONGOING		Expand non- targeted routine, opt-out HIV testing in facilities serving high-risk populations.		HIV PC; HRAU and CDU; HIV Task Force; HIV Syndicate; DSHS		TGA area medical care providers		Number of routine opt-out HIV screenings preformed in medical settings		2.1	
										Number of providers/ organizations implementing opt-out testing			
		Strategy 3		Coordinate with community providers to promote awareness of and linkage to supportive services and increase testing efforts.									

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16	2017-2019 PROJECT (Similar Activity in G1O1S1A1)	Identify and promote holistic, age- appropriate universal sexual health education curricula and strategies to be implemented by community partners.		HIV PC; APH; HIV Task Force; Youth/Adult Council, The Q		General population, UT, AISD, other TGA ISDs and schools	Number of curricula identified		4.3.3		
							Number of strategies identified				
							Number of curricula/strategies employed				
17	2017-2019 PROJECT	Develop centralized web-based resource guide of supportive services available to HIV providers and HIV community.		HIV PC; HRAU and CDC Resource Administration, APH IT)		PLWHA; HIV Providers		Number of website visits			
18	2017-2021 ONGOING	Increase awareness and use of non- traditional testing sites with expanded hours and mobile services designed to reach vulnerable populations.		HIV PC; HRAU and CDU; HIV Task Force		High-risk MSM, IDU, Women, Youth, Black, Hispanic; other vulnerable populations	Number of mobile and non-traditional testing sites		3.2		
							Number of tests performed at these sites				
							Number of available testing hours				
							Number of visits to austintexas.gov/department/where-get- tested				
							Number of mobile testing promotion activities				
	Goal 2	Increase access to care and improve health outcomes for people living with HIV									
	Objective 1	Increase the percentage of newly diagnosed persons linked1 to HIV medical care within one month of diagnosis from 60% percent to at least (75) percent by 2021.									
	Strategy 1	Improve coordination, communication, and alignment between (1) testing/ prevention providers and (2) HIV medical-service providers.									
19	2017-2018 PROJECT	Survey newly diagnosed people on their linkage experience and create strategies to improve linkages to care.		HIV PC; HRAU; Ryan White Medical Providers Health Center; DSHS		Newly diagnosed individuals		Survey created		2.3	

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AUSTIN INTEGRATED HIV PREVENTION AND CARE PLAN										
Timeframe		Activity		Responsible Parties	Target Population	Data Indicators		Notes/FTC Alignment		
20	2017-2018 PROJECT	Investigate and identify systematic barriers to linkage to care and evaluate opportunities to improve and execute strategies that result in successful linkage to care.		HIV PC; HRAU; Ryan White Medical Providers Health Center; DSHS	HIV service providers	Number of Committee meetings with this as an agenda item		2.3		
						Report on key findings				
21	2018-2019 PROJECT	Facilitate the development of a community definition of HIV care coordination, and assess the coordination between (1) testing/prevention providers and (2) HIV service providers.		HIV PC; COA (Quality Improvement Committee) HIV Taskforce; DSHS	Medical Service Providers and HIV	Number of people linked to care		2.3		
					Prevention Providers					
	Strategy 2	Increase awareness and access to HIV-related support services available in the community upon HIV diagnosis.								
22	2017-2019 PROJECT	Conduct a survey of what barriers exist for newly diagnosed individuals that prevent or delay access to support services.		HIV PC; HRAU	Newly diagnosed individuals	Creation of Needs Assessment Survey		completed.		
						Number of survey respondents				
						Percent of newly diagnosed people that were knowledgeable about or have accessed support services				
23	2020-2021 PROJECT	Develop training for front line staff designed to facilitate conversations about available services for HIV+ individuals and reduce barriers for attending their first medical appointment. Develop Ryan White services brochure for clients.		HIV PC; HRAU and CDU); HIV Taskforce	Front line workers including prevention specialists from Ryan White funded agencies	Training created		Multiple		
						Client brochure created				
						Number of front line workers educated				
						Number of brochures distributed				
						Survey results from linkage survey				

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AUSTIN INTEGRATED HIV PREVENTION AND CARE PLAN													
Timeframe		Activity		Responsible Parties		Target Population		Data Indicators		Notes/FTC Alignment			
		Strategy 3		Increase access to providers of clinical care for people living with HIV.									
24		2017-2021 ANNUAL MEETING		Host forum/town hall addressing HIV clinical and service topics, including, but not limited to: care of transgender clients, CLAS standards, times of services, number of HIV service providers, and geographic availability of HIV services.		HIV PC; HRAU		HIV Clinical and Service Providers		Number of forums held		Completed/ FTC	
								HIV+ individuals		Number of attendees			
25		2017 PROJECT		Research alternative clinic models to reach clients, including Telemedicine.		HIV PC; COA HHHS		HIV Clinical Providers		Completion of study and if warranted, creation of recommendations for implementation		3.2	
26		2018-2021 ONGOING		Advocate for the creation of mobile medical clinics and co-locating HIV services with other mobile services such as food distribution and needle exchange.		HIV PC		HIV care and service providers; Policy makers		Number of mobile clinics		3.2	
										Number of mobile services available			
27		2017-2021 ONGOING		Promote Affordable Care Act through enrollment into the marketplace for those who are living with HIV.		HIV PC; HRAU		PLWH		Number of PLWH with health insurance		3.1.3	
										Number of PLWH with Medicaid			
										Number of clients utilizing Health Assurance Premium and Cost Sharing Assistance			
		Objective 2		Increase the percentage of PLWHA who are retained in HIV medical care from 79 percent to at least (85) percent.									
		Strategy 1		Strengthen a comprehensive, patient-centered approach to HIV care that addresses HIV-related co- occurring conditions and chronic disease management.									
28		2017-2021 ONGOING		Promote and collaborate with peer support programs, support groups, meet ups, and events.		HIV PC; HRAU		PWLH		Number of events and programs		PC Recommendation	
								Community AIDS Service Organizations					

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29	2017-2021 PROJECT	Launch a re-linkage to care project that develops an expedited into care system for recently released HIV+ individuals.	HIV PC; HRAU	Recently released HIV+ Individuals Medical Providers	Project implementation	2.1.3 FTC is focused on testing in jails, not re-linkage
30	2017-2021 PROJECT	Educate providers regarding patient- centered care.	HIV PC; HRAU	Medical Providers	Number of providers educated	4.6
31	2017-2021 ONGOING	Promote the use of case management to support those living with HIV.	HIV PC; HRAU	HIV+ Individuals Service providers	Number of Ryan White clients utilizing service	Not in FTC, but vauge. Consider removing
32	2017-2021 PROJECT	Explore the potential of integrating HIV medical and related services into a “one-stop” shop so all appointments can be done at the same place and time.	HIV PC; HRAU	HIV+ Individuals	Project implementation	3.2
33	2017-2021 ONGOING	Provide prioritized, safety net, core medical and support services for Ryan White eligible clients using Ryan White funding sources.	HIV PC	HIV+ Individuals	Number/percent of clients who receive each type of core medical and support service	
	Strategy 2	Increase access to housing, behavioral health services, and other support services for people living with HIV.				
34	2017-2021 ONGOING	Coordinate with local Ryan White and Non- HIV Ryan White service providers to increase access to services.	HIV PC; HRAU	Service Providers	Number of local service providers coordinated with through events or referrals	Completed. FTC.
35	2017-2021 PROJECT	Integrate behavioral health screening with HIV related services.	HIV PC; HRAU	Service Providers	Number of Ryan White clients who have been screened for behavioral health issues as part of a medical visit	Completed? FTC.
	Strategy 3	Support medical adherence education.				
36	2017-2021 ONGOING	Encourage providers to integrate ongoing messaging on the importance of medical adherence for health outcomes into all HIV medical and support services.	HIV PC; HRAU, HIV Ryan White Medical Service Providers	Service Providers; HIV+ Individuals	Number of providers who receive outreach regarding medical adherence education	1.3
					Viral suppression rates	

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AUSTIN INTEGRATED HIV PREVENTION AND CARE PLAN											
Timeframe		Activity		Responsible Parties		Target Population		Data Indicators		Notes/FTC Alignment	
Goal 3		Reduce HIV-related disparities and health inequities									
Objective 1		By 2021, reduce disparities in the rate of new diagnoses* by at least 15% in the following populations: * Target rates were adjusted to reflect the Goal 1 target of a 25% reduction in new diagnoses overall for the Austin TGA. ** Measures shown are ratios of the disparity rate in the specified group to the overall rate in the Austin TGA.									
		Priority Population	Baseline (2015) (Ref: Table 2)	Ratio of group rate to Austin TGA rate at baseline**	2021 Target	Ratio of group rate to Austin TGA rate- 2021 Target**					
		Austin TGA	16.3 per 100,000	1	12.2 per 100,000	1					
		Black MSM	794.0 per 100,000	48.7	505.1 per 100,000	41.4					
		Black Women	27.9 per 100,000	1.7	17.1 per 100,000	1.4					
		Hispanic	21.3 per 100,000	1.3	13.6 per 100,000	1.1					
		Youth	22.3 per 100,000	1.4	14.6 per 100,000	1.2					
		IDU	5% of newly diagnosed	--	4.3% of newly diagnosed	--					
		Transgender	No baseline available	--	Establish baseline	--					
Strategy 1		Adopt structural approaches and promote evidence-based programs to prevent HIV infection in high- risk communities.									
37	2017-2021 ONGOING	Promote and sustain biomedical interventions, such as PrEP.	HIV PC; HRAU and CDU; Austin PrEP Access Project;	Gay black men, Women, Hispanic, Transgender, Youth, IDU	Number/percent of target population using PrEP and NPEP	1.1,1.2,1.3					
		Increase availability, accessibility, and utilization of sterile injection equipment.	Austin Harm Reduction Coalition		Number/percent of target population using needle exchange program					(harm reduction component duplicative of #10)	

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Timeframe		Activity		Responsible Parties		Target Population		Data Indicators		Notes/FTC Alignment			
38		2017-2021 ANNUAL MEETING/REPORT		Sustain CDC approved evidence-based behavioral interventions (EBIs) for HIV infected individuals and their partners such as CLEAR, Healthy Relationships, Mpowerment, and Condom distribution.		HIV PC; HRAU and CDU; Evidence-Based Behavioral Intervention (EBI) Providers		Gay black men, Women, Hispanic, Transgender, Youth		Number of new diagnoses among target populations			
				Have local EBI programs provide annual updates/presentation to Planning Council.									
		Strategy 2		Research, understand, and implement effective communication strategies customized to each of the subpopulations with health inequities.									
39		2017-2018 PROJECT		Address bias, stigma, and discrimination against populations with disparities in social marketing and other mass education activities using Austin specific facts/data (i.e. Present data on the risk for target populations on radio stations geared to different ethnicities; conduct anti- stigma activities with large audiences, and do a targeted campaign at different local events: Day of Remembrance, National week of prayer, etc.)		HIV PC; HRAU and CDU; Office of Support, Population representatives		Gay black men, Women, Hispanic, Transgender, Youth, IDU		Number of social marketing and mass education activities		1.2.1	
		Strategy 3		Educate providers regarding the needs of vulnerable populations.									
40		2017-2021 PROJECT		Require trauma informed care training of HIV prevention and care staff regarding the needs of those who have experienced violence and trauma		HIV PC; HRAU; HIV Service Providers		HIV Service Providers		Number of persons trained		4.4.1	
		Strategy 4		Establish baseline data on the Transgender population									
41		2017-2021 PROJECT		Research best practices for collecting data on Transgender populations and implement strategies locally/statewide		HIV PC; HRAU; HIV Service Providers		HIV Data Collection/ Management personnel		Establishment of a data plan			
										Develop baseline			

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AUSTIN INTEGRATED HIV PREVENTION AND CARE PLAN											
Timeframe		Activity		Responsible Parties		Target Population		Data Indicators		Notes/FTC Alignment	
	Objective 2	By 2021, reduce health related disparities in Viral Load Suppression by increasing Viral Load Suppression to 80% for each of the following populations, in line with the National HIV/AIDS strategy:									
	Priority Population	Baseline (2015)		Percent Increase in Suppression Rate							
	Black MSM	64%		16%							
	Black Women	69%		11%							
	Hispanic	69%		11%							
	Youth	58%		22%							
	IDU	69%		11%							
	Transgender*	No baseline available		Establish baseline							
	White (Comparison Group)	76%		4%							
	Austin TGA	71%		80%							
	Strategy 1	Reduce economic disparities to improve access to care.									
42	2017-2018 PROJECT	Develop a resource education campaign promoting local HIV resources and services (for example, Ryan White services including support groups, child care, transportation vouchers, workforce development opportunities, peer navigation programs, planning council membership opportunities, etc.) targeted at HIV+ consumers in waiting rooms at area medical and dental facilities, food banks, etc.		HIV PC; HRAU; HIV Service Providers		HIV+ Individuals		Number of programs/providers participating		Lack of awareness is key finding from Needs Assessment	
								Number of locations promoting campaign materials		Duplicative of #17	

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Timeframe		Activity		Responsible Parties		Target Population		Data Indicators		Notes/FTC Alignment	
Strategy 2		Educate providers regarding the needs of vulnerable populations.									
43	2017-2021 TRAINING	Require cultural competence training for frontline HIV prevention and care staff to have: (a) standard minimum training topics (CLAS standards); and (b) methods for measuring change in knowledge, skill, and ability. Additional training topics may include transgender health, intimate partner violence, behavioral health, mental health, substance abuse, language barriers, aging, etc.		HIV PC; HRAU; HIV Service Providers		HIV Prevention and Care Service Providers		Number of trained persons		4.4.1	
Strategy 3		Research, understand, and implement effective communication strategies customized to each of the subpopulations with health inequities.									
44	2017-2021 ONGOING/ ANNUAL MEETING	Establish or maintain formal partnerships between the Austin Area HIV Planning Bodies and agencies or individuals representing high-risk populations; seek technical assistance and training on how the needs of these high-risk populations can be advanced; and host annual meeting to discuss best practice activities that are working to help high risk populations remain in care.		HIV PC; HRAU; HIV Service Providers; HIV Task Force		Gay black men, Women, Hispanic, Transgender, Youth, IDU		Number of partnerships established		Completed. Development of FTC.	
								Number of trainings or technical assistance received			
								Viral suppression rates			

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Timeframe		Activity		Responsible Parties		Target Population		Data Indicators		Notes/FTC Alignment	
Goal 4		Achieve a more coordinated local response to the HIV epidemic									
Objective 1		By 2021, increase Ryan White non-conflicted consumer representation on the Austin HIV PC to at least 33%, fulfilling the HRSA requirement.									
Strategy 1		Research, understand, and implement effective communication strategies customized to each of the subpopulations with health inequities.									
45	2017 PROJECT	Identify and address barriers to HIV PC participation by engaging PLWHA in the Austin TGA through instruments such as surveys, focus groups and key informant interviews.	HIV PC; HRAU; COA Office of Innovation; COA Communications and Public Information Office	HIV+ Individuals	Number of PLWHA engaged		completed				
					Number of survey respondents						
46	2017 PROJECT	Study other EMA/TGA’s identified as having successful consumer engagement practices to develop potential new practices to recruit PLWHA as Planning Council members.	HIV PC; HRAU	HIV+ Individuals	Number of best practices identified						
47	2017 PROJECT/ ONGOING	Develop consumer engagement plan including consideration of an advertisement to reimburse members who are living with HIV for expenses they incur in serving as planning council members, such as travel or child care.	HIV PC; HRAU	HIV+ individuals	Number of advertisement opportunities taken						
Strategy 2		Launch proactive efforts to engage new and non-traditional partners in achieving the HIV PC mission.									

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AUSTIN INTEGRATED HIV PREVENTION AND CARE PLAN										
Timeframe		Activity		Responsible Parties	Target Population	Data Indicators		Notes/FTC Alignment		
48	2018-2021 PROJECT	Participate in community conversations with broad-based Austin-area health, social service, and community coalitions/groups in order to engage new and non- traditional partners.		HIV PC; HRAU; COA Office of Innovation; COA Communications and Public Information Office	Community groups whose mission and work is aligned with identified priorities affecting target pops	Number and diversity of partners engaged		Completed. FTC.		
	Strategy 3	Coordinate with the community to provide outreach to consumers.								
49	2018-2021 ONGOING	Coordinate with community groups who work with target populations by participating in events that promote HIV awareness.		HIV PC; APH	Groups who coordinate events: faith community, AIDS Candlelight Memorial, AIDS Walk, Pride Parade etc.	Number and diversity of partners engaged		Completed. FTC.		
	Obj 2	Improve the HIV system of care through advocacy for agenda items for collaborative meetings.								
	Strategy 1	Address significant barriers to care and work to improve the HIV system of care through coordination of effort between the organizations.								

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	AUSTIN INTEGRATED HIV PREVENTION AND CARE PLAN					
Timeframe	Activity	Responsible Parties	Target Population	Data Indicators	Notes/FTC Alignment	
50	2017-2021	Sustain formal partnerships with the Housing Opportunities for People with AIDS (HOPWA) program and other housing and homelessness prevention coalitions and groups to address housing instability among PLWHA.	HIV PC; APH ; COA Neighborhood Housing and Community Development Office	e.g. Austin Housing Coalition, ECHO; One Voice Central Texas; A/TC Reentry Roundtable, Integral Care, and Central Health; HOPWA	Number and diversity of partners engaged	Annual presentations from HOPWA and HUD. Completed?
51	2017-2021 ONGOING	Target local and regional behavioral health providers and coalitions for coordination of activities.	HIV PC; APH	e.g. Austin Police Department; Integral Care; Central Health and Austin State Hospital	Number and diversity of partners engaged	
52	2017-2021 ONGOING	Sustain formal partnerships with transportation service providers in the TGA	HIV PC; APH	e.g. Capital Metro, the Transit Empowerment Fund (TEF), and ATX Safer Streets	Number of agenda items	FTC is engaging Cap Metro
	Strategy 2	Participate in regional and statewide advocacy efforts focused on adequate funding, efficient program administration and decreasing the administrative burden of Ryan White activities.				

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53	2017-2021 ONGOING	Promote ACA marketplace enrollment for those who are living with HIV.		HIV PC; APH		Ryan-White eligible PLWHA; DSHS; Austin City Council; Central Health		Number of collaborative agenda items		3.1.3	
								Number of HIV+ people who are insured			
54	2017-2021 ONGOING	Support ongoing statewide efforts to improve Medicaid access for people living with HIV as outlined in the Texas State SHARP Report.		HIV PC; APH; HIV Syndicate		Ryan-White eligible PLWHA; TDSHS; Austin City Council; Central Health		Number of education actions		3.1.3, 3.1.5	
								Number of government policies changed			
								Number of HIV+ people who have Medicaid			
55	2017-2021 ONGOING	Advocate for designated funding for PrEP to appropriate populations.		HIV PC		State Legislature Budget		Amount of PrEP funding designated from State Budget			
56	2017-2021 ONGOING	Advocate for state standards for testing to include opt-out testing statewide.		HIV PC		State Testing Standards		Number of routine opt-out HIV screenings preformed in medical settings		2.1	
								Number of providers/organizations implementing opt-out testing			
	Strategy 3	Annually coordinate and communicate with community-based groups who impact the lives of those living with HIV, on the progress of the Integrated HIV Prevention and Care Plan									
57	2017-2021 ANNUAL REPORT	Educate community-based organizations and other stakeholders on the progress of the Integrated HIV Prevention and Care Plan.		HIV PC; APH		Community-based groups; PLWHA		Dashboard of progress on planned activities and core medical and support services		4.2.1 Ambassador program for FTC.	