

Goal / Pillar	Strategy	Strategy / Activities	Activity #s	Total
Initiatives	A	Implement Data-to-Care (D2C) approaches to reengage PLWH in care	1, 2, 3	4
		Identify persons with previously diagnosed HIV who are not in care.	1A1	
		Provide linkage to, re-engagement in, and retention in HIV medical care services for persons with previously diagnosed HIV who are not in care.	1A2	
		<i>Maintain and improve the state-wide D2C program for all regional jurisdictions.</i>	<i>1A3</i>	
		Develop a D2C process that identifies and establishes a continuum of care for PLWH that exit the correction systems within Pennsylvania.		
	B	Expand status neutral navigation and linkage services (SNNLS) across the Commonwealth	4, 5, 6	3
		Develop and implement status neutral navigation and linkage services (SNNLS) that Promote Risk Reduction measures, including incorporating risk reduction into capacity building (CB).	1B4	
		Equip all CMHDs to provide status neutral linkage services/interventions.	1B5	
		Develop status-neutral training, education, or guidance based on pending CDC guidance.	1B6	
	C	Support and expand PrEP screenings and services	7, 8, 9, 10, 11	5
		Increase number of Participating Provider Agreements (PPAs) providers prescribing PrEP.	1C7	
		Promote and increase access to new PrEP medications as they become available.	1C8	
	Ensure linkage to and retention in PrEP services for clients by the CMHD's and relevant providers throughout the grant cycle.	1C9		
	Develop collaborations with Department of Drug & Alcohol Programs (DDAP) providers to expand PrEP screening to people who inject drugs (PWID).	1C10		
	Support research into expanding PrEP access and uptake among underserved populations, including women of color.	1C11		
D	Expand sexually transmitted diseases (STD) Data-to-PrEP Initiative	12	1	
	Enhance current use of STD Data-to-PrEP to identify clients for PrEP referrals.	1D12		

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1: PREVENT ~ 25 Actv	E	Continue and enhance condom distribution	13, 14, 15, 16	5
		Facilitate purchase of specialty condoms with federal funding.	1D13	
		Continue and enhance distribution of condoms in priority/high incidence areas.	1D14	
		Continue and enhance distribution of condoms to priority populations.	1D15	
		Ensure that CMHDs maintain robust condom distribution programs to ensure the effective distribution of condoms within their individual communities across the commonwealth.	1D16	
		Establish and maintain a process for expired PADOH condom supplies to be re-distributed across the commonwealth.		
	F	Support Social Media Campaigns that advance prevention efforts	17, 18, 19, 20	4
		Identify campaigns for appropriate dual messaging around HIV, STD & Hepatitis C Virus (HCV).	1F17	
		Expand PrEP education campaigns across the state.	1F18	
		Identify with HPCP a minimum of one other social marketing campaign opportunity related to HIV and stigma and/or other intersectional issues or social determinants.	1F19	
		Support regional grantee media campaigns to educate and engage regionally prioritized populations.	1F20	
	G	Continue Post Exposure Prophylaxis (PEP) activities	21, 22	2
		<i>Conduct a biennial needs assessment for PEP for HIV.</i>	<i>1G21</i>	
		<i>Develop an initiative to address gaps in the provision of PEP including capacity, education, and resources; including a focus campaign for service providers across the Commonwealth.</i>	<i>1G22</i>	
	H	Support Perinatal Prevention Services	23, 24, 25	5
		Conduct site and telehealth/remote visits to birthing facilities to improve the disease reporting ability of local clinicians.	1H23	
		Conduct case surveillance for people who are pregnant and diagnosed with HIV and/or syphilis, and their infants after birth.	1H24	
		Conduct perinatal exposure reporting for HIV and congenital syphilis.	1H25	
		Develop and maintain communications for notices of perinatal prevention services between Department of Drug and Alcohol Programs and the Division of HIV Health.		
		Develop and maintain a client facing toolkit w/ a timeline of services needed during pregnancy for prevention of HIV and related conditions.		

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2: DIAGNOSE ~ 17 Activities	A	Continue and expand HIV Testing		4
		Increase efforts to support private providers conducting HIV testing.	2A26	
		Provide/facilitate capacity building for clinical testing.	2A27	
		<i>Identify and support health care and non health care providers that have diagnosed individuals with HIV with a toolkit showing providers via categories; brick & mortar sites, non-clinical sites, and mobile sites.</i>	2A28	
		Increase HIV testing with priority populations.	2A29	
	C	Continue Participating Provider Agreements	36, 37, 38	3
		Assess the feasibility to add “early initiation of Anti-Retroviral Treatment (ART) and PrEP” language to the PPA to enhance efficacy among HIV testing providers.	2C36	
		<i>Continue to support and monitor PPA agreements throughout the commonwealth including Technical Assistance opportunities with Division contracted services.</i>	2C37	
		Collaborate with Division of Immunizations to enhance outreach and education for public health emergencies that impact communities impacted by HIV.	2C38	
	D	Continue and enhance Partner Notification Services	39, 40, 41	3
		Increase partner elicitation among newly identified/diagnosed individuals with HIV.	2D39	
		Increase the number of partners identified with an unknown HIV status.	2D40	
		Refer 100% of individuals in priority opulations who test positive for HIV to PS.	2D41	
	E	Implement State Opioid Response (SOR) Grant, HIV/Viral Hepatitis Service Integration Project	42	0
		Increase awareness of, and expand access to, HIV and viral hepatitis testing, education, and prevention services in facilities treating persons with substance use disorder.	2E42	

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3: TREAT ~ 16 Activities	B	Continue the Special Pharmaceutical Benefits Program (SPBP) Medication Adherence Program	47, 48, 49	3
		Identify SPBP clients who need additional support to become adherent to HIV medication treatment regimens.	3A47	
		Provide clinical consultation to clients and their providers to ensure optimal adherence with HIV medication treatment regimens.	3A48	
		Increase HIV viral suppression among SPBP clients.	3A49	
	C	Continue the Minority AIDS Initiative (MAI)	50, 51	3
		Re-Engage PLWH who are lost to care back into treatment & access to medications.	3A50	
		Increase the participation numbers of BIPOC PLWH populations in AIDS Drug Assistance Program (ADAP)/SPBP and other medication assistance programs.	3A51	
		Track and increase participation of BIPOC led grant recipients to improve awareness within BIPOC PLWH populations of available services to maintain their care continuum.		
	D	Support RW Regional Grantees	52, 53, 54, 55	4
		<i>Develop and maintain a state RWPB Handbook.</i>	3A52	
		Develop Frequently Asked Questions (FAQ) for Regional Grantees.	3A53	
		Hold Quarterly meetings with Regional Grantees.	3A54	
		<i>Develop and distribute a toolkit to HIV providers focused on integrating Hepatitis testing and treatment into their settings including client facing materials for education awareness.</i>	EA55	
	E	Develop and support a Case Management Workgroup	56, 57	2
		<i>Review the RW Program Standards at least once per year and update as necessary.</i>	3A56	
		<i>Complete a Case Management Standards Update at least one per year.</i>	3A57	
F	Enhance the SPBP Customer Service Line	58	1	
	<i>Develop call standards for the CSL; update website to assist end users find FAQs information to reduce reported higher volume driving themes/topics. [move to Activity B within the Pillar 3: Treat]</i>	3F58		

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4: RESPOND ~ 14 Activities	A	Maintain the Pa. Cluster and Outbreak Detection and Response Plan	59, 60, 61, 62, 63	6
		Initiate an Outbreak Response Plan (ORP) within 72 Hours of an outbreak declaration.	4A59	
		Enact continuous evaluation of the ORP throughout the course of a determined outbreak.	4A60	
		Conduct an overall evaluation of the activities of the ORP once a determined outbreak has been contained.	4A61	
		Develop a final report to summarize the activities of the ORP for a determined outbreak once the outbreak has been contained and evaluated.	4A62	
		Ensure that all CMHDs have a CDR Plan as required through the HIV Prevention grant.	4A63	
		Coordinate with grantees annually to review current CORDP for jurisdictions to assure comprehensive understanding across the Commonwealth of grantee expectations and outcomes.		
	B	Facilitate monitoring by statewide stakeholder bodies	64, 65	3
		Convene and support the HIV Planning Group to monitor and evaluate the progress of the Integrated HIV Prevention & Care Plan (IHPCP) narrative, data, and activities.	4B64	
		Convene and support SPBP Advisory Council to review and update the SPBP formulary.	4B65	
		Develop and maintain an ongoing webspace that makes HPG and IHPCP work publicly available with continuous updates on activities, meetings, and projects.		
	C	Continue and enhance HIV Surveillance	66, 67, 68, 69, 70	6
		Ensure completeness of laboratory data including CD4+ T-lymphocyte (CD4) and VL results that will be used to determine linkage to care for persons newly diagnosed with HIV.	4C66	
		Maintain structural strategies to ensure data security and confidentiality in the collection, review, and use of all data managed by the DOH.	4C67	
	Enhance geocoding and data linkage capacity to enhance knowledge of the influence of social determinants on risk for disease and continuum of care outcomes.	4C68		
	Finalize CAREWare Centralization Project for data completeness and security.	4C69		
	Ensure complete reporting of newly diagnosed individuals with HIV to the Pa DOH.	4C70		
	Consistently educate stakeholders on data security and confidentiality policies to meet current technological standards.			
D	Ensure comprehensive monitoring and evaluation	71, 72	2	
	Create a data dashboard depicting HIV data relative to the Division's work.	4D71		
	Create a dashboard to monitor and evaluate progress on IHPCP goals.	4D72		

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Activities	A	Expand capacity and educational messaging addressing HIV, comorbidities, and social determinants of health	73, 74, 75, 76	5	
		Include/partner with representatives from Viral Hepatitis and STD in outreach efforts to affiliates or when establishing/building new working relationships.	5A73		
		Support and promote HIV anti-stigma campaigns and related surveys and campaigns (such as PrEP awareness) as identified by the Division and/or HPG.	5A74		
		Support culturally competent HIV-related messaging to key and underserved/under resourced communities, such as individuals experiencing aging and/or long-term survivorship, rural communities, or young black Men who have sex with men (MSM) and transwomen.	5A75		
		Monitor proposed/pending state legislation and provide legislative assessments or analysis as requested on their potential impacts on PLWH and communities at risk for HIV, including but not limited to issues such as HIV decriminalization, syringe service programs, aging, discrimination, employment, housing, poverty, health care, etc.	5A76		
		Engage stakeholders with lived experience to assure alignment within current and newly established messaging campaigns thru adequate methods for encouraging participation for knowledge recognition.			
		B	Expand Division and related service partners' training and internal capacity/competency	77, 78, 79	4
			Incorporate trainings that speak to appropriate and person-centered language into all aspects of the Division and related service partners' work, including specific trainings that speak to the needs of people aging with HIV, PWD and HIV, and people experiencing long-term survivorship.	5B77	
			Incorporate Trauma Informed Care trainings into all aspects of the Division and related service partners' work.	5B78	
			Conduct Act 148, and other relevant data security and confidentiality trainings to all relevant staff and the HPG.	5B79	
		Ongoing training for all funding recipients made available annually to assure staff are compliant to new and current policies with evidence based research including optional continuation education credits.			

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5: SUPPORT ~ 19	C	Support the HIV Planning Group (HPG) and SPBP Advisory Council	80, 81, 82, 83, 84, 85, 86	7
		Ensure the HPG, as the body representing HIV Prevention and Care services stakeholders in Pa., meet and make recommendations to the Division on HIV related issues, policies and procedures, and community needs and experiences.	5C80	
		Ensure reflective membership and diverse community engagement in the HPG and its planning processes, statewide outreach will occur in townhall meeting formats and other formats as identified and approved by the HPG and Division.	5C81	
		<i>Ensure that the HPG meetings are inclusive of representation of relevant planning partners and agencies from associated/intersectional services (Example agencies include Viral Hepatitis, STD, and Departments such as Education, Aging, DDAP, Corrections, Medicaid, etc.); should a statewide partner be unavailable, regional representation may be utilized as a substitute.</i>	5C82	
		Facilitate HPG research and proposals for improving employment opportunities and resources for PLWH.	5C83	
		Facilitate an HPG workgroup for research and proposals for improving outcomes and resources for people aging with HIV and people experiencing long-term survivorship.	5C84	
		Facilitate an HPG workgroup for research and proposals for improving HIV-related disparities among communities of color.	5C85	
		Ensure the SPBP Advisory Council, as the body representing RW ADAP stakeholders in Pa., advises the SPBP and the Division on the SPBP formulary and programmatic policies and procedures.	5C86	
	D	Enhance Capacity Building/Technical Assistance Trainings	87, 88, 89, 90, 91	5
		Develop and maintain a Case Management training curriculum that includes special conditions and populations, including but not limited to aging, long-term survivorship, and disability.	5D87	
		Develop a Division PowerPoint and maintain annually or as needed.	5D88	
		Internally assess CB assistance needs and develop and implement a CB assistance plan if warranted.	5D89	
		Ensure training needs are identified during annual on-site monitoring of contracted providers as well as through a bi-annual (every other year) capacity needs assessment distributed to both prevention and care providers.	5D90	
		Develop and maintain annual training schedules based on capacity needs assessment.	5D91	

Totals: 27

Total Activities: 100