

## Appendix 1: FOCUS Plan of Action Template

**Frontlines of Communities in the  
United States  
(FOCUS)**

**PLAN OF ACTION**

*Frontlines of Communities in the  
United States  
(FOCUS)*

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## **I. Focus Overview**

### **Frontlines of Communities**

FOCUS is designed to work with community, health and hospital systems, health providers, civic leaders, advocates and policymakers in the quest for sustainable solutions to the nation's HIV/AIDS epidemic. A limited number of partners are selected in geographic areas or communities acutely impacted by HIV/AIDS epidemic. Partners include local health departments, hospitals, community health centers/community clinics, STI clinics, community organizations and others. FOCUS is grounded in the belief that a comprehensive local approach, which engages partners at every level and is focused on systems change and long-term program sustainability, is the best way to reach the undiagnosed and ultimately decrease the rate of new infections.

FOCUS promotes and supports evidence-based best practices. By making community-driven investments that build upon and challenge experiences and successes of our partners, FOCUS seeks to improve the work being done to reverse the HIV/AIDS epidemic. Wrapped around these investments are policy and reform goals that support the 2006 Centers for Disease Control recommendations on routine opt-out HIV/AIDS testing.

### **FOCUS Goals**

- Reduce the number of undiagnosed individuals and link them to care
- Decrease the number of late diagnoses of HIV infection
- Make routine HIV screening a standard of care within healthcare settings
- Normalize the HIV testing process

### **FOCUS Objectives**

- Identify healthcare settings to implement and monitor routine opt-out screening in an efficient manner and non-burdensome manner so that it is accepted by providers and patients
- Reach a greater proportion of the undiagnosed in FOCUS targeted cities by supporting innovative and best practice screening and linkage to care programs in non-traditional settings
- In collaboration with local Departments of Health work to develop more accurate localized measurements of the number

of undiagnosed in targeted cities by race/ethnicity, age and gender as legally available

- Identify and amplify new voices by empowering non-traditional change agents and local champions
- Generate greater modern day awareness of HIV/AIDS by highlighting partners and their success and challenges via a comprehensive communications/publications strategy

## **II. General Overview of City or Region**

- Racial/ethnic breakdown
- Socioeconomic breakdown, poverty and disparities
- LGBTQ population information
- Other relevant demography
- Local economy
- Incarceration data

## **III. Epidemiological Profile: City/Regional Overview of HIV/AIDS**

**[Local epidemiological data, charts and graphs]**

*Race and Ethnicity*

*Age*

*Other demographics & Risk Groups*

*Deaths*

*Late stage diagnosis*

*Testing trends*

*Geographic breakdown*

*Data tables*

## **IV. HIV/AIDS Prevention and Control**

### **Prevention Efforts: State or Region**

- History and overview
- Public health jurisdiction
- Funding sources

- Local resources
- Leadership
- Political considerations
- Strategic changes

**Citywide HIV Prevention Efforts:**

a. Resources: List and summaries of relevant prevention programs and their funding sources:

- ASOs
- Public-private partnerships
- Health care providers
- MSM initiatives
- Women's initiatives
- IDU, syringe exchange programs
- Linkage to Care
- Social media marketing efforts

Other efforts

- Data sharing efforts
- Policy and legislation
- Other sectors (corrections, schools, etc.)

b. Coordinating bodies  
 - Planning Councils

c. Additional efforts

**V. FOCUS Goals: Reaching the undiagnosed**

1. Reduce the number of undiagnosed individuals and maintain high linkage to care
2. Decrease the number of late diagnosis of HIV infection
3. Make routine screening a standard of care
4. Normalize the testing process

<b>Demographic Focus</b>	<b>Institutional &amp; Community Focus</b>
<ul style="list-style-type: none"> <li>◆ Race</li> <li>◆ Gender</li> <li>◆ Age</li> </ul>	<ul style="list-style-type: none"> <li>◆ Geographically mapped high prevalence communities</li> </ul>

<ul style="list-style-type: none"> <li>◆ Other demography</li> </ul>	<ul style="list-style-type: none"> <li>◆ Community Health Centers</li> <li>◆ Public and Urban Hospitals</li> <li>◆ Select Community Settings: STD Clinics, Charity Clinics, DMV</li> </ul>
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**VI. PLAN OF ACTION to support FOCUS Goals 2012 - 2013**

**Strategy 1:** [Example: Enhance buy-in and capacity of routine opt-out testing in health care settings that serve low income, high prevalence communities].

*Goal:* [Example: Identify, inform, and engage health care providers on CDC recommended opt-out HIV testing as standard of care in health settings to address gaps in testing offers].

*Objective:* [Example: Engage 3 new high volume community health centers within high prevalence areas]

**[Sample] Activities:**

- Partner with medical associations whose members are strategically positioned in the community and have capacity to routinize HIV testing
- Identify clinical settings that serve target populations
- Assess opportunities to work with Federally Qualified Health Centers and primary health clinics
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- Assess knowledge and implementation of routine, opt-out testing

**Strategy 2:** [Example: Enhance capacity for routine HIV testing and linkage to care, aiming to target urban, high volume hospitals]

*Goal 1* Increase the number of hospitals that incorporate testing into emergency care, primary care, and outpatient clinic services.

*Objective 1:* Add two high volume urban hospitals with the capacity to implement and routinize testing

**[Sample] Activities:**

- Assess opportunities to engage local urban hospital emergency departments for implementation of opt-out testing.
- Explore partnerships with local emergency departments to transition from counselor-based, intermittent testing to screening that is fully integrated as a normal part of ED flow. Assess and support the use of the most sensitive testing technologies
- Work with hospital leadership to assess gaps, needs and organizational system changes needed to implement routine screening. via

**Timeline for Partnership Development and Implementation**

**VII. ACTIVE PROGRAM MODELS**

<b>[Partner Name]</b> <b>Target Communities:</b> <b>Partnership Period:</b>		
<i>Project Model:</i>  <i>What is being tested?</i>	<i>Why Selected</i>	<i>Goals:</i>  <i>Progress:</i>

**CONCEPT STAGE:**

<b>[Partner Name]</b> <b>Target Communities:</b> <b>Partnership Period:</b>		
<i>Project Model:</i>  <i>What is being tested?</i>	<i>Why Selected (DRC)</i>	<i>Goals:</i>

**Key Voices and Influencers**

Contact Name	Title/Affiliation	Status	Notes


FOCUS Advisory Board Members:

- [Name, Title, Affiliation]

VIII. **Attachments & Appendices**