

FY 2023 Ending the HIV Epidemic - Primary Care HIV Prevention (PCHP) Non-Competing Continuation (NCC) Example Project Work Plan Update

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration FOR HRSA USE ONLY Application Tracking Number Application Tracking Number

Project Work Plan Update

- The purpose of Ending the HIV Epidemic Primary Care HIV Prevention (PCHP) funding is to support current or new efforts to expand HIV prevention services¹ that decrease the risk of HIV transmission in geographic locations identified by Ending the HIV Epidemic in the U.S. Submission and approval of your Non-Competing Continuation (NCC) progress report, to include this Project Work Plan Update, will provide funding for the next PCHP budget period (September 1, 2023 through August 31, 2024).
- You will use this part of the form to:
 - o Document progress on activities included in your PCHP work plan,
 - o Note updates to activities included in your PCHP work plan, and
 - O Describe new activities to support achievement of the PCHP objectives (increase the number of patients counseled and tested for HIV, increase the number of patients prescribed pre-exposure prophylaxis (PrEP), and increase the percentage of patients diagnosed with HIV who are linked to care and treatment within 30 days of diagnosis).
- Access the Fiscal Year (FY) 2023 PCHP NCC Instructions, available on the <u>PCHP technical assistance webpage</u>, for detailed guidance on how to complete this form.

¹ The Centers for Disease Control and Prevention (CDC) describes HIV prevention to include multiple strategies, such as pre- and post-exposure prophylaxis, and taking antiretroviral therapy as prescribed. HIV prevention services are part of comprehensive primary care services.

Pre-populated from the Project Work Plan					
Focus Area	Activity	Activity Selection Rationale	Activity Progress	Activity Progress Update	Lessons Learned
PrEP prescribing	Support PrEP adherence through care integration and coordination support that address co-existent behavioral health conditions and health-related social needs.	patients to needed enabling and social services, including	 □ Not yet started ⋈ Partially implemented □ Fully implemented □ Will not fully implement □ New 	 PrEP use has increased as more patients are connected to enabling and social services through the hiring and onboarding of our case manager. PrEP adherence has increased as a result of the newly hired case manager's required follow-up with patients. 	Connecting patients to enabling and social services is an effective way to facilitate PrEP usage.
	Purchase for patient use home oral HIV test kits and home specimen kits for laboratory to support adherence to PrEP follow-up test recommendations.	Health Center by limiting the number	 □ Not yet started □ Partially implemented □ Fully implemented ⋈ Will not fully implement □ New 	• Early evidence shows varying test accuracy. We are suspending this activity while we advance our understanding of the evidence.	 Next time, we need to ensure that the resource investment aligns with the evidence.
Outreach	Organize and participate in community health fair events to attract and enroll community	community health events will facilitate identifying new and existing patients at	 ☑ Not yet started ☐ Partially implemented ☐ Fully implemented ☐ Will not fully implement 	Due to COVID precautions both planned community health events have postponed to 2023.	• N/A

Pre-populated from the Project Work Plan					
Focus Area	Activity	Activity Selection Rationale	Activity Progress	Activity Progress Update	Lessons Learned
	members; raise awareness of HIV, PrEP, post-exposure prophylaxis (PEP); and provide HIV prevention education.		□ New		
Testing	• Enhance the electronic health record with clinical decision support to facilitate the consistent use of clinical guidelines on HIV testing, prevention, referral, and treatment, as well as appropriate management of PrEP.	Establishing internal protocols that support the consistent use of workflows and clinical guidance will improve consistent and appropriate application of CDC HIV testing guidelines to increase the number of patients tested for HIV.	 □ Not yet started □ Partially implemented ☑ Fully implemented □ Will not fully implement □ New 	• Internal protocols have been established, staff have been trained, and the protocols are in use. Workflow data is being collected and will be analyzed quarterly to assess the number of patients tested for HIV and to assure appropriate application of CDC HIV testing guidelines.	 Although establishing internal protocols took more time than expected, this helped enable consistent workflows and ensured completion of data collection. Therefore, investing more time in the earlier stages is an effective strategy.
Workforce Development	Hire primary care providers and clinical pharmacists who can deliver HIV prevention services, including follow-up HIV testing, prescribing PrEP and PEP, cooccurring condition management, and	 Adding 0.5 FTE to an existing family physician to expand the role will increase the number of PrEP prescriptions and HIV tests, and management of substance use disorder and mental 	 □ Not yet started □ Partially implemented □ Fully implemented □ Will not fully implement ☑ New 	We have identified the family physician who is able to expand their role at our health center and are in contract negotiations. We anticipate concluding negotiations and onboarding this	• N/A

Pre-populated from the Project Work Plan					
Focus Area	Activity	Activity Selection Rationale	Activity Progress	Activity Progress Update	Lessons Learned
	HIV treatment.	health conditions.		provider over the summer.	

Barriers You will use this part of the form to document any barriers or issues encountered in implementing	the approved PCHP activities.	
Are there or do you anticipate any issues or barriers in the use of the funding and/or implementing the planned activities consistent with your approved FY 2022 PCHP application or non-competing continuation?	□Yes ⊠No	
	If yes, comments are required.	