

(m) How will you train, support, and retain staff to provide these interventions?

(n) How will you ensure services are culturally sensitive and relevant?

(o) How will you ensure client confidentiality?

(p) What are your baseline levels, projected one-year interim, and five-year target levels of performance for the following core program indicators relevant to your program:

(1) Proportion of persons living with HIV and their sex and injection drug-using partners who are HIV negative or who do not know their HIV status that completed the intended number of sessions for each of the prevention interventions supported by this program announcement.

(2) Proportion of persons at very high risk for HIV infection who completed the intended number of sessions for each of the prevention interventions supported by this program announcement.

(3) Percent of HIV infected persons who, after a specified period of participation in each of the prevention interventions supported by the program announcement, report a reduction in sexual or drug-using risk behaviors or maintain protective behaviors with seronegative partners or with partners of unknown status.

(4) Percent of contacts with unknown or negative serostatus receiving an HIV test after PCRS notification.

(5) Percent of contacts with a newly identified, confirmed HIV-positive test among contacts who are tested.

(6) Percent of contacts with a known, confirmed HIV-positive test among all contacts.

F. Evaluation and Monitoring Intervention Activities

Suggested length: five pages.

1. You must:

(a) Collect and report client-level data.

(b) Collect and report standardized process and outcome monitoring data consistent with CDC requirements.

(c) Enter and transmit data for CDC-funded services on CDC's browser-based system or describe plans to make a local system compatible with CDC's system. (There is a description of PEMS in Attachment IV.)

(d) Collect and report data consistent with CDC requirements to ensure data quality and security and client confidentiality.

(e) Collaborate with CDC to assess the impact of HIV prevention activities and participate in special projects upon request.

2. In your application, please describe your:

(a) Current system of data collection and methods for reporting HIV prevention activities including data system specifications and data management information systems.

(b) Capacity to collect and report client-level data for HIV prevention services and the effect of those services on client HIV risks and health service utilization.

(c) Plans to identify and address barriers and facilitators to the collection of client-level demographic and behavioral characteristics.

(d) Plans to ensure that data quality and security are consistent with CDC requirements and guidelines.

(e) Willingness to collaborate with CDC in the design and implementation of other evaluation projects.

(f) Technical assistance needs to meet evaluation and monitoring requirements.

(g) Baseline level, one-year interim, and five-year overall target levels of performance for the following core indicator: proportion of client records with the CDC-required demographic and behavioral risk information.

G. Referral Activities

Suggested length: four pages.

1. For services not available through your organization, you must:

(a) Collaborate with other agencies to increase the number of persons who receive comprehensive services including prevention, testing, medical care, mental health, and drug abuse treatment.

(b) Develop a formal agreement such as a memorandum of understanding with each collaborating agency serving persons identified through your program within six months of funding.

(c) Track referral activities and their outcomes. You must document the type of referral (e.g. mental health, housing), date of referral, and outcome of referral (such as completion of first appointment).

(d) Collect and report data on referrals, including core performance indicators, as directed in the PEMS and Evaluation Guidance.

2. In your application, you must:

(a) Describe your plans to develop a referral network to ensure that clients identified through your program have access to comprehensive services including access to primary care, life-prolonging medications, and essential support services that will maintain HIV-positive individuals in systems of care.

(b) Provide documentation of any formal agreements with providers and other agencies where your clients may be referred.

(c) Specify baseline levels, projected one-year interim, and five-year overall

performance levels for the following core indicator: The mean number of outreach contacts required to get a person living with HIV, and their sex and injection drug-using partners, or an individual at very high risk for HIV infection, to access referrals made under this program announcement.

H. Collaboration and Coordination With the HIV Prevention Community Planning Process and Local Health Department

Suggested length: three pages.

1. You must:

(a) Collaborate and coordinate activities with the HIV prevention CPG and local health department. Collaboration activities may include participating in the needs assessment process, reviewing and commenting on plans, presenting an overview of your project activities to the CPG in their jurisdiction and making clients available for focus groups and other planning activities. Coordination activities may include sharing progress reports, program plans, and monthly calendars with state and local health departments, CPGs, and other organizations and agencies involved in HIV prevention activities serving your target population.

(b) Participate in the HIV prevention community planning process. Participation may include involvement in workshops, attending meetings, serving as a member of the CPG, and becoming familiar with and utilizing information from the community planning process, such as the epidemiologic profile, needs assessment data, and intervention strategies. Membership in the CPG is not required, and it is determined by the group's bylaws and selection criteria.

2. In your application, describe your plans to:

(a) Participate, collaborate, and coordinate with the HIV prevention CPG.

(b) Participate, collaborate, and coordinate with the local health department.

(c) Participate in the HIV prevention community planning process.

I. Capacity Building

Suggested length: four pages.

1. You must:

(a) Conduct a capacity-building needs assessment.

(b) Develop a comprehensive capacity-building plan based on the outcomes of the needs assessment.

(c) Share any new CBA needs that develop during the project period with your project officer.

(d) Attend a grantee orientation for administrative and programmatic staff.