

(e) Ensure that clients receive test results, particularly those who test positive.

(f) Provide support (*e.g.*, financial, technical assistance, training, and coordination) to health care providers to increase the identification of HIV-positive persons through strengthening current CTR services or creating new services. Work with departments of corrections to encourage and, when appropriate, support routine voluntary HIV screening and referral in correctional facilities. Strengthen outreach into communities to increase the number of HIV infections diagnosed by increasing the number of high-risk persons participating in HIV counseling, testing, and referral services.

(g) Collect and report HIV CTR data as will be specified in the new Program Evaluation and Monitoring System (PEMS), including core program performance indicators. Report HIV CTR activities on a quarterly basis as specified in the Technical Reporting Section of this Announcement.

(h) Seek opportunities to integrate and enhance HIV CTR and STD services.

(i) Collect and report data that will provide useful and accurate information on the status and function of the HIV counseling, testing, and referral system. Ensure that there is sufficient capacity to collect and store electronic data and that data are secure.

*In your application:*

(a) Describe your plan to provide HIV CTR services, including:

- How you will establish or improve efforts to identify newly infected persons and to test persons most at risk for HIV.

- How you will improve the provision of test results (especially positive results).

- How you will expand the availability of HIV CTR services, especially in areas where testing is not currently available and where high-risk populations would seek testing.

- Your plan for providing referrals and tracking the completion of referrals for persons with positive test results.

- How you will provide HIV prevention interventions and risk reduction counseling for high-risk persons who have negative HIV test results.

- How you will work with medical care entities to encourage and support routine HIV screening in high prevalence settings.

(b) Specify a base-line level, one-year interim target, and five-year overall target level of performance for each of the following core program performance indicators:

- Indicator B.1: Percent of newly identified, confirmed HIV-positive test results among all tests reported by CDC-funded HIV counseling, testing, and referral sites.

- Indicator B.2: Percent of newly identified, confirmed HIV-positive test results returned to clients.

(2) Partner Counseling and Referral Services (PCRS)

*All recipients must:*

(a) Ensure that PCRS is a high priority within the jurisdiction's HIV prevention activities. These services must be consistent with the most current PCRS guidelines as found in HIV Partner Counseling and Referral Services Guidance (December 30, 1998).

(b) Provide PCRS for HIV-infected persons who have been tested anonymously or confidentially in CDC-funded sites. Ideally, PCRS should be offered to all persons with positive test results, regardless of where they were tested. Make a good faith effort to notify sexual or needle-sharing partners. PCRS efforts should be documented. Collaborate with the STD program and other health care providers to provide PCRS.

(c) Develop a plan to implement new techniques and approaches to increase PCRS, using such things as social networks and incentives.

(d) Collect and report PCRS data consistent with core data elements as will be specified in PEMS, including core program indicators.

*In your application:*

(a) Describe your current system for providing HIV Partner Counseling and Referral Services. Also describe your plan to provide PCRS for individuals who travel and migrate across jurisdictions within the Pacific, Hawaii, and the U.S. mainland, and how you will address the provision of PCRS for clients coming to or from non-health department/non-ministry of health settings.

(b) Specify a base-line level, one-year interim target, and five-year overall target level of performance for each of the following core program performance indicators:

- Indicator C.1: Percent of contacts with unknown or negative serostatus who receive an HIV test after PCRS notification

- Indicator C.2: Percent of contacts with a newly identified, confirmed HIV-positive test among contacts that are tested

- Indicator C.3: Percent of contacts with a known, confirmed HIV-positive test among all contacts

(3) Prevention for HIV-Infected Persons

*All recipients must:*

(a) Provide prevention services to persons infected with HIV/AIDS. These services could include individual or group HIV risk reduction and prevention counseling.

(b) Provide HIV risk reduction counseling to HIV-positive persons when they are given their test results, and continue to seek opportunities to provide HIV risk reduction counseling and interventions to HIV-positive individuals at intervals following the initial disclosure of test results.

Information on HIV prevention methods (or strategies) can include abstinence, monogamy, *i.e.*, being faithful to a single sexual partner, or using condoms consistently and correctly. These approaches can avoid risk (abstinence) or effectively reduce risk for HIV (monogamy, consistent and correct condom use).

(c) Work with primary care providers in the community that serve persons with or at risk for HIV to integrate HIV prevention services into care and treatment services.

(d) Collect and report data on prevention for HIV-positives, including core indicators, as will be specified in PEMS.

*In your application:*

(a) Describe your plan to provide prevention services for people living with HIV/AIDS. Describe how you will provide ongoing HIV risk reduction counseling and other interventions to HIV-positive persons.

(b) Describe how you will encourage primary care providers to integrate prevention and care services.

(4) Health Education and Risk Reduction Services (HE/RR)

This includes individual, group, community, and structural level interventions as well as outreach for high-risk seronegative and seropositive individuals.

*All recipients must:*

(a) Provide HE/RR services or fund providers that:

- Target those most at risk for transmitting or acquiring HIV infection.

- Implement interventions that are based on logic model, scientific theory, or have evidence of demonstrated or probable outcome effectiveness (see CDC's Compendium of HIV Prevention Interventions with Evidence of Effectiveness, 1999).

- Are carried out and directed by written procedures or protocols.

- Are acceptable to and understood by the target population, *i.e.*, they are culturally appropriate.

(b) Develop a plan for how you will work to establish or expand community capacity to provide, or assist the health