

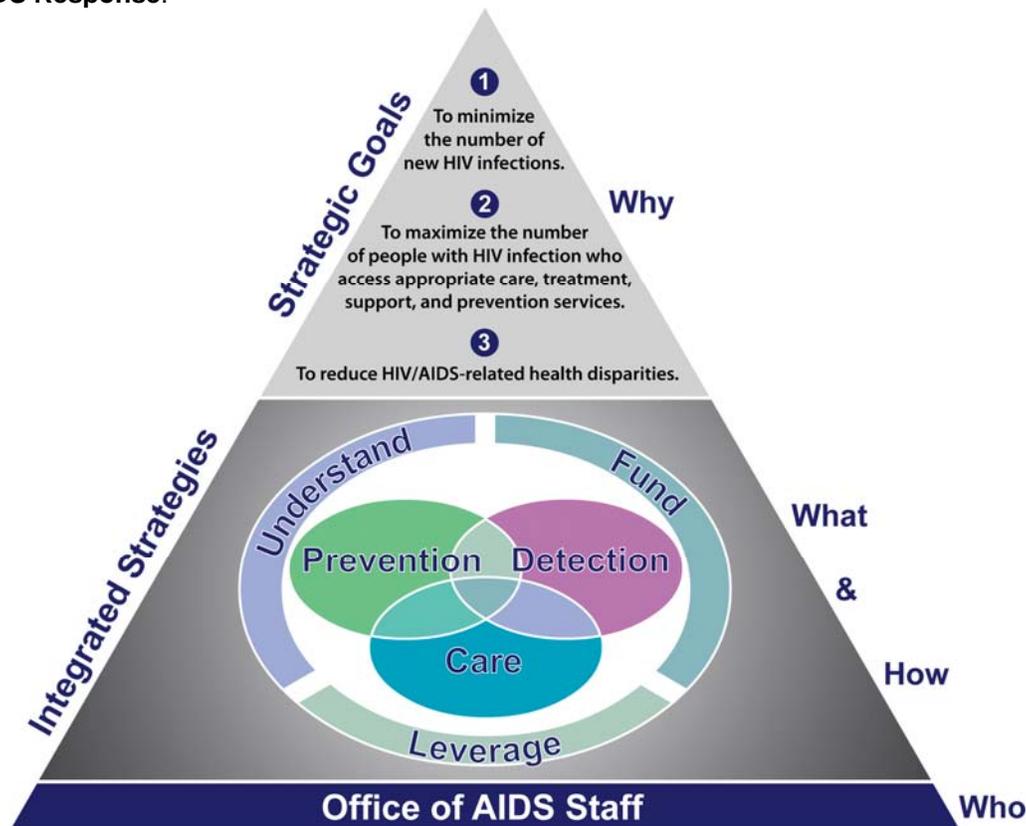
**Office of AIDS
Goals and Strategies Framework, June 2010**

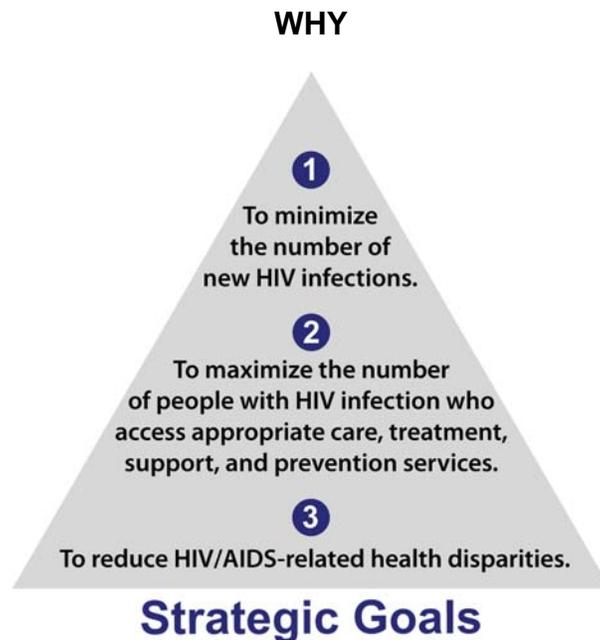
Purpose of this document: The Office of AIDS (OA) Goals and Strategies Framework is meant to identify our most important goals and the key strategies we want to continue, increase or initiate in the coming months and years in order to accomplish these goals. Following staff input into and finalization of the working version of the Framework, OA will continue the process we have initiated to evaluate our current activities to identify potential changes in OA priorities, policies and/or practice. Detailed work plans that account for all personnel and financial resources required to implement potential changes will be carefully considered and prioritized. Clear and feasible timelines will take into account current activities and available resources. We will also develop measurable outcomes in order to evaluate the impact of each strategy on our primary goals.

Users of this document: The Framework is primarily a tool to guide OA planning and response to evolving challenges and opportunities. Secondly, we hope it is useful in describing our Goals and Strategies to our many constituents in California. Finally, this Framework may be helpful in other jurisdictions, in the development of the National AIDS Strategy, and in guiding legislative and policy direction at both the state and national levels.

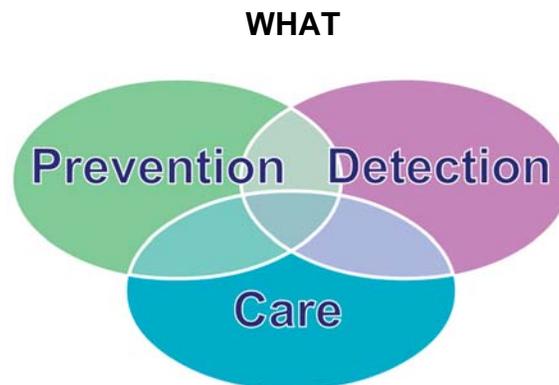
The Challenges: While there have been many successes in the prevention and treatment of HIV in the last two decades, over 20 percent of people with HIV don't know their status. Successes in holding new infections at a relatively stable rate are balanced with the reality that incidence is not decreasing, and in some populations may be increasing. Effective treatments delivered by accessible care and support programs have resulted in ever-increasing numbers of people living with HIV. Populations affected by HIV increasingly face numerous societal and individual challenges and disturbing health disparities. Estimates of the proportion of people diagnosed with HIV who are not receiving regular medical care exceed 40 percent. Financial resources to respond to these prevention and care challenges are constrained at all levels. It is challenging to take full advantage of important scientific and technological advances while maintaining the function and quality of existing programs.

Office of AIDS Response:





OA is responsible at both the individual and population levels to enact policies and programs that achieve our primary goals.



➤ **Office of AIDS supports communities to provide comprehensive biomedical, behavioral and structural HIV *prevention* intervention options for HIV negative, unknown status, and positive individuals by:**

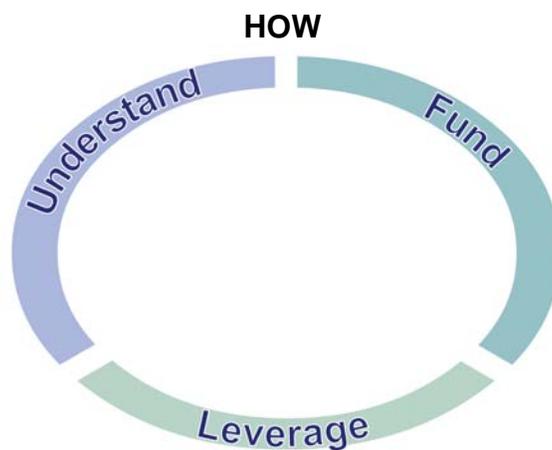
- Helping prevention providers in all relevant settings select appropriate prevention interventions and providing targeted training and enhanced technical assistance as needed.
- Considering the potential scale up of one or more selected prevention interventions at the local health jurisdiction (LHJ) and/or community-based organization (CBO) level, building upon the interventions considered at the 2008 initial “Prevention Think Tank” and subsequent stakeholder discussions.

➤ **Office of AIDS supports increased reach and effectiveness of HIV *detection* and screening by:**

- Increasing routine screening in medical settings.
- Continuous assessment and refinement of community-based counseling and testing systems and associated training requirements.
- Continuous monitoring and assessment of HIV testing technologies.

➤ **Office of AIDS contributes to quality *care*, treatment, support and prevention services for all people living with HIV in California by:**

- Funding care, treatment, support and prevention services for individuals with HIV infection while enhancing benefits counseling resources so OA funds can be used equitably as the payer of last resort.
- Targeting funding and policies to increase our understanding of, and minimizing, barriers to entering and staying in HIV clinical care and prevention services.
- Supporting the provision of effective treatments delivered or coordinated by accessible and knowledgeable care and support programs.
- Providing coordination to enhance collaboration among medical care and prevention providers, medical provider professional organizations, clinical and prevention trainers, local health jurisdictions and community based organizations to leverage all resources.
- Disseminating HIV care, treatment, support and prevention information to public and private providers, consumers, and state and local public health partners.
- Enhancing the availability of integrated HIV, STD, TB, and viral hepatitis prevention, screening, and treatment services at the client level.



➤ **OA strives to constantly improve its *understanding* of findings from our surveillance, research and program evaluation activities, as well as current guidelines, recommendations, and scientific literature, to ensure that programmatic and policy decisions are informed by the best available information by:**

- Collecting, analyzing, considering the implications of, and disseminating HIV/AIDS surveillance and program evaluation data, while maintaining security and confidentiality of all personally identifying information.
- Considering emerging and innovative approaches that may inform decision-making and/or the development of new programmatic strategies.
- Considering priority research questions and facilitating collaboration with appropriate research partners to address these questions.
- Maximizing the efficiency and impact of community involvement in planning and advising functions.
- Actively participating in integrated and iterative joint prevention, care and treatment planning activities.
- Facilitating communication and collaboration among LHJs, CBOs, researchers, consumers, advocates and other experts to enhance information sharing and influence programmatic and policy decision-making.

➤ **LHJs and CBOs are our customers and our partners. Thus, we strive to maximize the reach and effectiveness of *services funded by OA* by maintaining high standards and accountability while increasing flexibility and creativity, by:**

- Reducing the administrative burdens on, and enhancing the capacity of, LHJs and CBOs by integrating contracts, coordinating site monitoring and identifying point(s) of contact for contractors to communicate with OA about administrative and/or programmatic issues.
- Facilitate OA program expertise to support needs identified by the contractor, monitors or other OA staff, trainers and/or technical assistance providers.
- Identify additional technical assistance providers as needed to respond to identified needs.
- Assist in identifying alternative fund sources as needed to respond to identified needs.

➤ **OA proactively *leverages* multiple resources and influences federal, state and local policy and decision-making to have the largest possible impact on our primary goals by:**

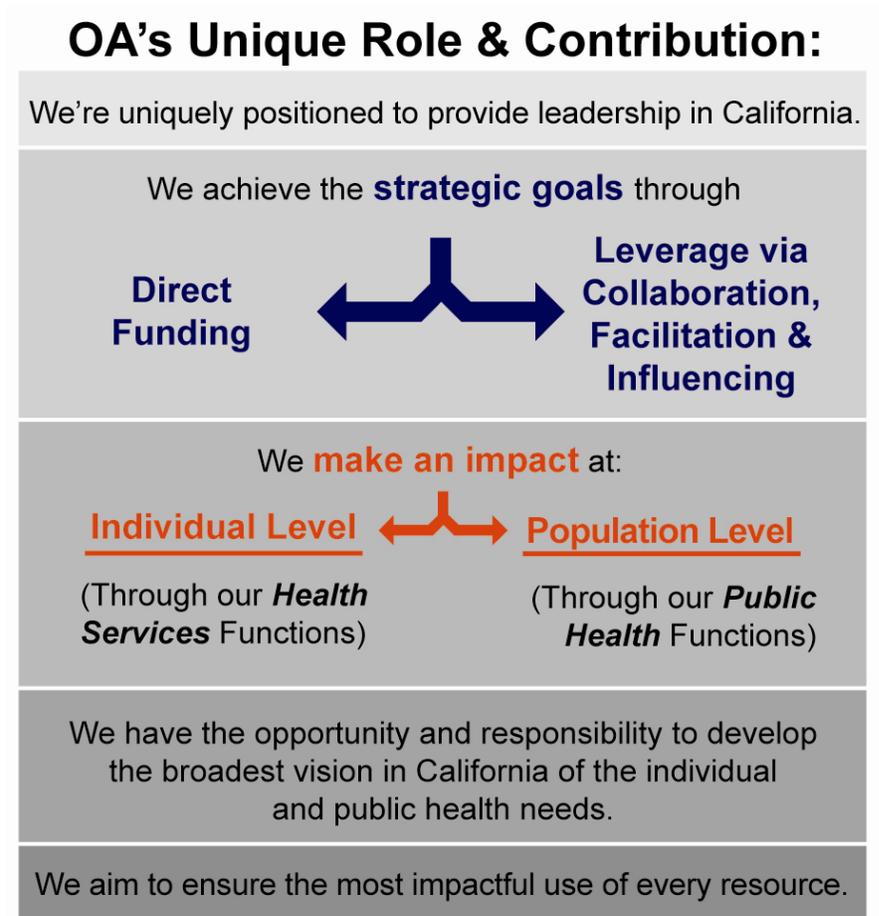
- Enhancing knowledge about and access to non-OA resources, including but not limited to grants and training and professional development resources, for LHJs and CBOs funded by OA.
- Selectively offering OA's technical expertise, and/or information about services available outside of OA, to organizations working with people with and at risk for HIV infection who are not served by an OA-funded provider, and to individuals.
- Advocating for non-OA policies that are consistent with and support OA's primary goals by monitoring, evaluating and providing input on federal, state and local legislative, regulatory and policy issues.

WHO

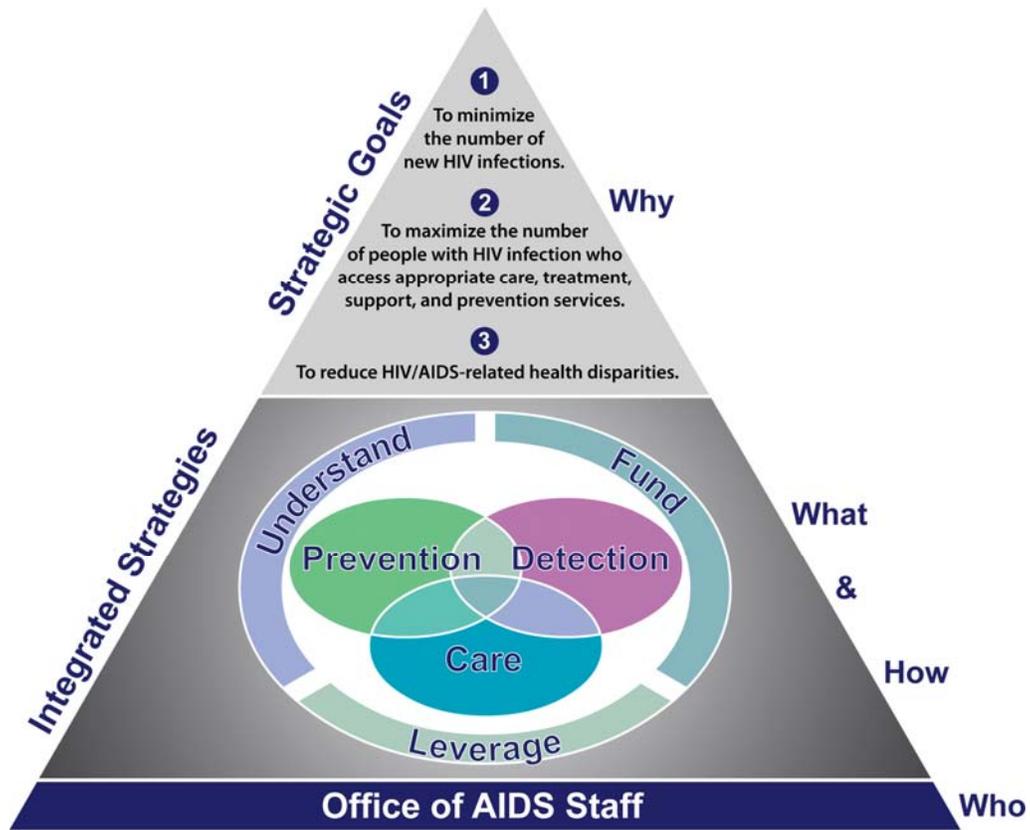
Office of AIDS Staff

➤ **OA's goals and strategies require management and staff to continue to actively partner in order for both to be successful and fulfilled by current and future work activities. OA is committed to supporting and investing in staff development by:**

- Nurturing a climate of communication, respect and engagement.
- Ensuring that job duties and expectations are clearly delineated and staff strengths and job responsibilities are as consistent as possible.
- Building upon individual strengths, both in work assignments and as a supervision approach, and creating opportunities for creativity, professional growth and promotion.
- Dedicating energy and resources to developing and retaining staff through individual development plans, skills assessments, training and mentoring.
- Demonstrating serious commitment to implementing this staff development process with well developed implementation plans.
- Engaging staff participation and soliciting staff expertise in forming internal and external policy and procedure.



OA's Unique Role: We are uniquely positioned to provide leadership in California through direct funding, leveraging resources, and influencing policy. OA's responsibilities and our opportunities for impact lie at both the *individual level*, through our health services functions, and at the *population level*, through our public health functions. Given our unique position, OA has the opportunity and the responsibility to develop the broadest vision in California of the individual and public health needs associated with HIV prevention, care and support, and of the resources directly and indirectly available to us. By doing this, OA aims to ensure the most impactful use of every resource, honoring our core values of excellence and stewardship. As designated by California Health and Safety Code Section 131019, OA has lead responsibility for coordinating state programs, services, and activities relating to HIV/AIDS.



Context, Implications and Summary

OA’s Role in Responding to the Challenges and Opportunities in California and the Nation: The California Department of Public Health (CDPH) Strategic Plan calls for a reduction in AIDS-associated deaths to the Healthy People 2010 target of 0.7/100,000; OA’s Goals and Strategies are acutely focused on approaching this target even in the face of diminishing fiscal and human resources. Development of a comprehensive National AIDS Strategy has been initiated in the United States for the first time in 2009. OA intends to maintain and develop our leadership position nationwide through our strategic focus on minimizing the impact of HIV for all.

This Framework is a living document, and reflects OA’s current priorities