## **Notice of Funding Opportunity (NOFO)**

PS22-2203: Comprehensive High-Impact HIV Prevention Programs for Young Men of Color Who Have Sex with Men and Young Transgender Persons of Color

Attachment E: Linkage to HIV Medical Care and PrEP Provider Plan

Please complete and submit this document. Provide a detailed description of your organization's procedures for linking persons diagnosed with HIV (newly and previously diagnosed) into HIV medical care within 30 days of diagnosis and linking persons at increased risk for acquiring HIV to PrEP services within 30 days of clinical evaluation.

**Organization Information** 

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Organization Name					
Hours of Operation					
List the hours of operation of					
your organization.					
Organization Primary Point					
of Contact					
HIV Prevention & Care Staff					
List the name and position title of all staff that will be engaged in any part of linking and/or re-engaging					
, · · · ·		HIV medical care. Please, also include the			
name and position of all staff that v					
acquiring HIV to PrEP services. If	staff have not been hired, enter	N/A in the staff name column, however			
position title must be provided.					
Staff Name	Position Title	Role in Linkage to HIV Medical Care			

	Linkage to HIV Medical Care and PrEP Services Information
1.	Linkage to HIV Medical Care Process Type: (Select all that apply)
	☐ Escort client to first medical appointment immediately after confirmation of positive test results
	☐ Escort clients to first medical appointment after scheduled appointment is made with HIV medical provider
	☐ Schedule appointment on behalf of the client, but in consultation with the client
	$\Box$ Provide client with a list of HIV medical care providers and follow up with the client to ensure the client attended the first appointment
	□ Other
2.	Linkage to HIV Medical Care Incentives:
	☐ No incentive provided
	☐ Yes – Describe the type of incentive provided and frequency of incentive provided/distributed
3.	Linkage to Medical Care CDC approved strategy to be utilized (Optional)
	☐ Anti-Retroviral Treatment and Access to Services (ARTAS)
	☐ HIV Navigation Services – STEPS to Care
	☐ Stay Connected (For clinics only)
	Linkage to PrEP Services Information
1,	Linkage to PrEP Services Process Type: (Select all that apply)
1.	
1.	Linkage to PrEP Services Process Type: (Select all that apply)
1.	Linkage to PrEP Services Process Type: (Select all that apply)  ☐ Escort client to first medical appointment immediately after confirmation of negative test results and risk assessment
1.	Linkage to PrEP Services Process Type: (Select all that apply)  ☐ Escort client to first medical appointment immediately after confirmation of negative test results and risk assessment  ☐ Escort clients to first medical appointment after scheduled appointment is made with PrEP provider
1.	Linkage to PrEP Services Process Type: (Select all that apply)  ☐ Escort client to first medical appointment immediately after confirmation of negative test results and risk assessment  ☐ Escort clients to first medical appointment after scheduled appointment is made with PrEP provider  ☐ Schedule appointment on behalf of the client, but in consultation with the client  ☐ Provide the client with a list of PrEP providers and follow up with the client to ensure the client
1.	Linkage to PrEP Services Process Type: (Select all that apply)  □ Escort client to first medical appointment immediately after confirmation of negative test results and risk assessment  □ Escort clients to first medical appointment after scheduled appointment is made with PrEP provider  □ Schedule appointment on behalf of the client, but in consultation with the client  □ Provide the client with a list of PrEP providers and follow up with the client to ensure the client attended the first appointment
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	Linkage to PrEP Services Process Type: (Select all that apply)  □ Escort client to first medical appointment immediately after confirmation of negative test results and risk assessment  □ Escort clients to first medical appointment after scheduled appointment is made with PrEP provider  □ Schedule appointment on behalf of the client, but in consultation with the client  □ Provide the client with a list of PrEP providers and follow up with the client to ensure the client attended the first appointment  □ Other  Linkage to PrEP Services Incentives:  □ No incentive provided
2.	Linkage to PrEP Services Process Type: (Select all that apply)  □ Escort client to first medical appointment immediately after confirmation of negative test results and risk assessment  □ Escort clients to first medical appointment after scheduled appointment is made with PrEP provider  □ Schedule appointment on behalf of the client, but in consultation with the client  □ Provide the client with a list of PrEP providers and follow up with the client to ensure the client attended the first appointment  □ Other  Linkage to PrEP Services Incentives:  □ No incentive provided
2.	Linkage to PrEP Services Process Type: (Select all that apply)    Escort client to first medical appointment immediately after confirmation of negative test results and risk assessment   Escort clients to first medical appointment after scheduled appointment is made with PrEP provider   Schedule appointment on behalf of the client, but in consultation with the client   Provide the client with a list of PrEP providers and follow up with the client to ensure the client attended the first appointment   Other   Linkage to PrEP Services Incentives:   No incentive provided   Yes – Describe the type of incentive provided and frequency of incentive provided/distributed

Linkage to HIV Medical Care and PrEP Services Information
HIV Medical Care Provider Information
Describe the relationship your organization has with the HIV medical care provider(s) to which you refer persons diagnosed with HIV (newly and previously diagnosed) for HIV medical care services – specifically for their first medical care visit. State the specific role of the provider and the type of services they provide. A <b>minimum of one</b> HIV medical care provider must be provided.
HIV Medical Care Provider/Organization:
Brief description of the services provided:
HIV Medical Care Provider/Organization:
Brief description of the services provided:
HIV Medical Care Provider/Organization:
Brief description of the services provided:
PrEP Provider Information
Describe the relationship your organization has with the PrEP services provider(s) to which you refer persons at

Linkage to HIV Medical Care and PrEP Services Information
increased risk for acquiring HIV to PrEP services. State the specific role of the provider and the type of services they provide. A <b>minimum of one</b> PrEP provider must be provided.
PrEP Provider/Organization:
Brief description of the services provided:
PrEP Provider/Organization:
Brief description of the services provided:
PrEP Provider/Organization:
Brief description of the services provided:

## Client Flow Process/Protocol

Please provide step-by-step procedures for linkage or re-engagement to HIV medical care and linkage to PrEP services. For linkage to HIV medical care, please start from the date the client receives a HIV confirmatory test result; list the specific actions to be taken, include all staff responsible for the linkage/re-engagement, and include timelines for each step. For linkage to PrEP services, please start from the date that PrEP services are initiated for the client after clinical evaluation. For both, HIV medical care and PrEP services, please provide a diagram or flow chart with an explanation of the steps. The following information should be included in the protocol description:

- Staff responsible for the linkage/re-engagement to HIV medical care and linkage to PrEP services process
- How and when confirmation is made that the client attended their first appointment (HIV medical care and PrEP appointments)
- Organization policy on the length of time for linkage to HIV medical care and PrEP services (within 30 days per NOFO requirement)
- Process for follow-up with clients if first medical appointment is missed (include description of follow-up methods via email, phone, or face to face) for both HIV medical care and PrEP services
- Procedures to ensure client confidentiality
- If applicable, indicate documentation needed from the client to apply for and/or refer to prevention and essential support services at your organization

HIV Medical Care Client Flow Process/Protocol				

PrEP Services Client Flow Process/Protocol	

Describe the organization's Linkage to HIV Medical Care and PrEP Services Program Promotion Activities (e.g., describe marketing materials used to promote the linkage to HIV medical care and PrEP services program to
community partners and clients).
HIV Medical Care Program Promotion
PrEP Services Program Promotion
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**Linkage to HIV Medical Care and PrEP Services Program Promotion** 

Describe the organization's process to ensure staff are fully aware of established protocols and procedures for the HIV Medical Linkage to Care and PrEP services program. The following information should be included in the description:
<ul> <li>Training of staff on the organization's policies and procedures</li> </ul>
Guidelines for caseloads for staff facilitating linkage to care
HIV Medical Care Staffing
PrEP Services Staffing

Staffing

HIV	Me	dical	Care and	l PrFP	Provider	<b>Directories</b>
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Describe the process to recruit and engage HIV medical care providers and PrEP providers from the community in which the organization refers clients. If an existing directory will be used, please indicate that here. The following information should be included in the description:

- Frequency of engagement with providers to ensure the organization has consistent and effective processes/protocols
- Frequency of acquiring new and/or updating Service Agreements with HIV Medical Care providers and PrEP providers

HIV Medical Care Provider Directories					

PrEP Provider Directories				