

END HIV KENTUCKY



Kentucky Public Health
Prevent. Promote. Protect.

Integrated Prevention and Care Plan 2022-2026

Integrated Plan Summary

Background Information

The United States (US) government has put forth a bold vision for the US to be *“a place where new HIV infections are prevented, every person knows their status, and every person with HIV has high-quality care and treatment, lives free from stigma and discrimination, and can achieve their full potential for health and well-being across the lifespan. This vision includes all people, regardless of age, sex, gender identity, sexual orientation, race, ethnicity, religion, disability, geographic location, or socioeconomic circumstance”*.¹ To reach the national goals of reducing new HIV infections by 75 percent by 2025 and 90 percent by 2030, systems of HIV prevention and care must work together in unprecedented ways to address health inequities that remain. This includes providing equal access to all available tools so that no population or geographic area is left behind and efforts to end the HIV epidemic are accelerated. The Kentucky Department for Public Health (KDPH) aims to align prevention and services in Kentucky towards achieving this vision across the commonwealth.

Integrated Planning Guidance

In June 2021, the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA) released official guidance indicating support for integrated HIV prevention and care planning to further progress the goals of the National HIV/AIDS Strategy (NHAS) and the federal Ending the HIV Epidemic (EHE) initiative. KDPH has followed this guidance to bring together stakeholders across the commonwealth in the development of an integrated plan to advance both HIV prevention and care services. Integrated planning reduces burden and duplicative planning efforts and promotes collaboration and coordination around data analysis. The *End HIV Kentucky Integrated Prevention and Care Plan* (“Integrated Plan”) establishes the framework for HIV prevention and care during 2022-2026. The Integrated Plan is a culmination of over three years of work with entities across the state of Kentucky to develop a shared vision for integrative HIV prevention and care. The Integrated Plan builds off Kentucky’s 2020 EHE planning process and is aligned with the updated NHAS.

NHAS

In January 2021, the US Department of Health and Human Services (HHS) released the *HIV National Strategic Plan: A Roadmap to End the Epidemic 2022-2025* which creates a collective vision for HIV service delivery across the nation. This national plan addresses the following four goals:

1. Prevent new HIV infections
2. Improve HIV-related health outcomes for people with HIV
3. Reduce HIV-related disparities and health inequities
4. Achieve integrated, coordinated efforts that address the HIV Epidemic among all partners and stakeholders

These goals helped to guide the development of the Integrated Plan, which seeks to advance Kentucky's efforts in these four areas. In August 2022, HHS released the accompanying *NHAS Federal Implementation Plan 2022-2025*, which lays out a plan to track progress on activities and actions steps to achieve each goal. The formatting of these two documents inspired the format of Kentucky's Integrated Plan. The same design was used to best align efforts in Kentucky with national expertise. However, the content of Kentucky's goals and objectives more closely follow the four pillars of the EHE initiative.

EHE Initiative

The Integrated Plan is organized using the same overarching goals put forward in the EHE initiative through a comprehensive approach centered on four science-based strategies or "pillars", including:



The Diagnose pillar focuses on utilizing the latest systems and technology to make HIV testing simple, accessible, and routine in all settings, including sexually transmitted infection (STI) clinics, which serve a high volume of racial, ethnic, sexual, and gender minority groups. The Treat pillar ensures that people who receive a positive HIV test result are quickly linked to care, receive treatment as soon as possible after diagnosis, and to help expand local programs that identify and follow up with people who have stopped receiving HIV care and treatment. The Prevent pillar focuses on scaling up proven interventions, such as pre-exposure prophylaxis (PrEP) and comprehensive syringe services programs (SSP), designed to address communities' unique needs. The Respond pillar focuses on ensuring that when an HIV cluster or outbreak is identified, public health agencies can engage with various interested parties, including health care providers, persons with HIV (PWH), HIV advocates and organizations, and other community leaders. These groups can collaborate to identify existing prevention and care services gaps and design tailored interventions that address their community's specific needs.

HIV Continuum of Care Model and Status Neutral Approach

The Integrated Plan utilizes the HIV care continuum model and the Status Neutral Approach. The HIV care continuum, illustrated in Figure 1, depicts the stages a PWH engages in from initial diagnosis through their successful treatment with HIV medication to reach viral suppression. Supporting PWH to reach viral suppression not only increases their own quality of life and lifespan, but also prevents transmission to an HIV-negative partner, thus providing an additional strategy to prevent new HIV infections.

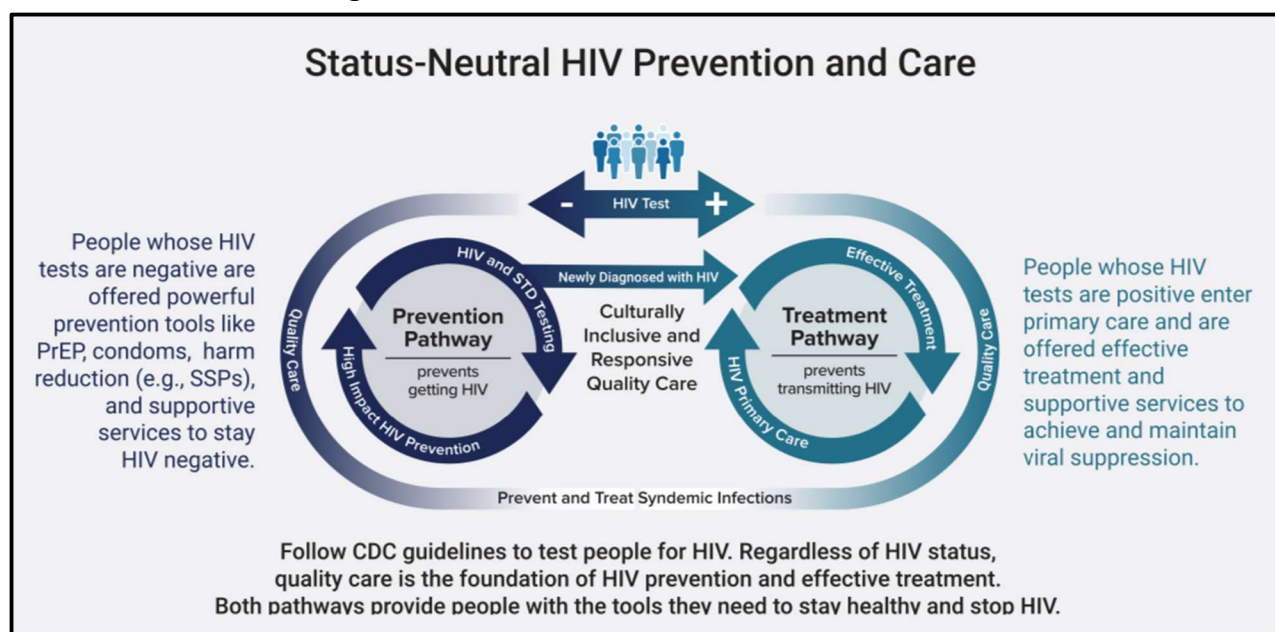
Figure 1. HIV Care Continuum



Source: Minority HIV/AIDS Fund. The HIV Care Continuum. Accessed June 2022, <https://www.hiv.gov/federal-response/policies-issues/hiv-aids-care-continuum>

A Status Neutral Approach, illustrated in Figure 2, means that all people, regardless of HIV status are treated the same way.³ Under this approach, persons with positive test results are linked to HIV care, treatment, and other social support services. Conversely persons testing negative are linked, as needed, to biomedical HIV prevention services, such as PrEP and other social support services.

Figure 2. Status-Neutral HIV Prevention and Care



Source: CDC. Status-Neutral Approach HIV Prevention and Care. Accessed June 2022, <https://www.cdc.gov/hiv/effective-interventions/prevent/status-neutral-hiv-prevention-and-care/>

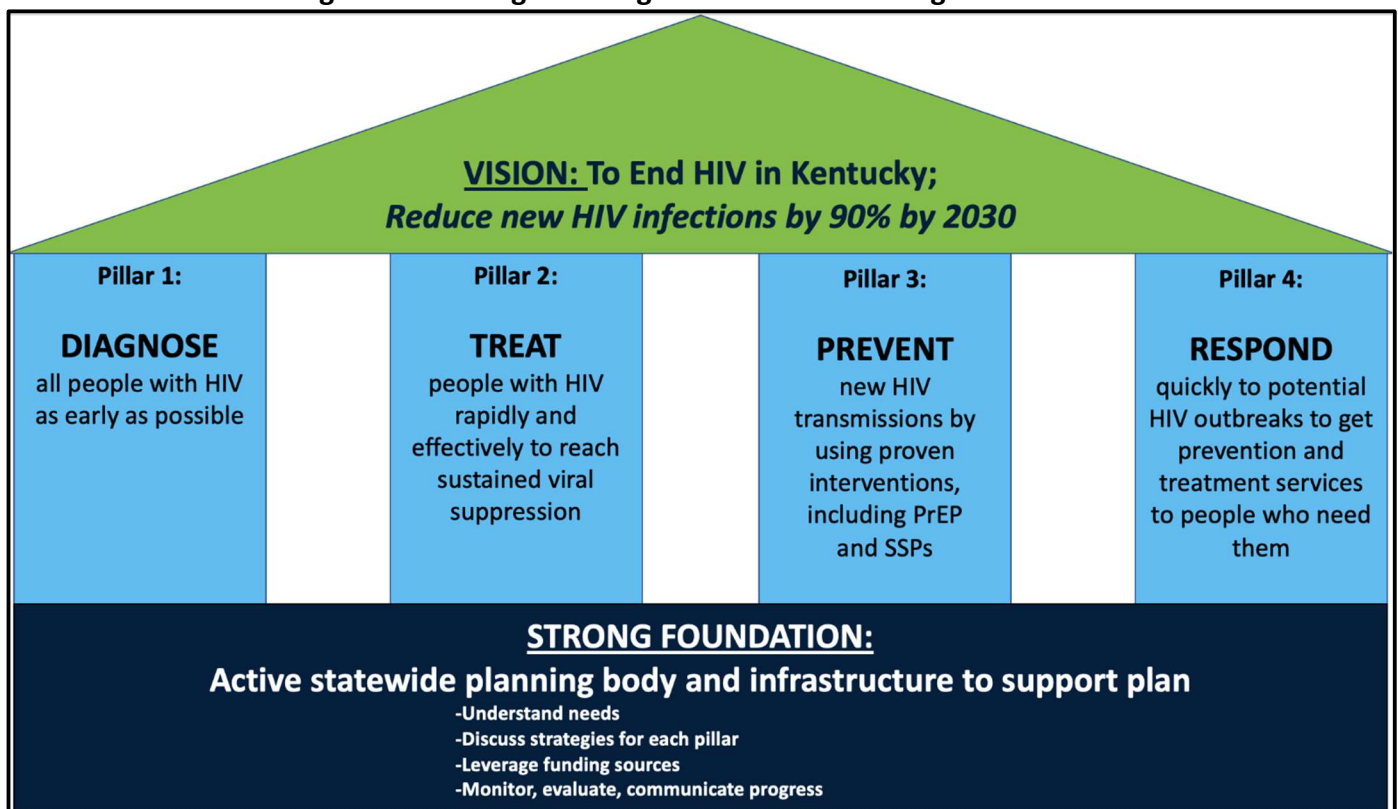
Jurisdictional Planning Process

The Integrated Plan was developed in partnership with stakeholders across Kentucky, including the Kentucky HIV Planning and Advisory Council (KHPAC), community-based organizations (CBO), university partners, community members, and others across the state. Stakeholders were also engaged through a needs assessment process utilizing quantitative and qualitative methods to determine Kentucky residents' barriers and challenges. Through this needs assessment and ongoing collaboration with the stakeholders mentioned above, shared goals and objectives were established for the state of Kentucky.

Following legislative and programmatic requirements, Kentucky's community engagement and planning process reflected local demographics and involved a wide variety of community members and local partners. Throughout the planning process a priority was to strengthen collaborations among systems of prevention and care relevant to HIV, including harm reduction programs and housing services.

A focus has been made to create a strong foundation with which to support the Integrated Plan development and implementation. This foundation includes an active statewide planning body and the infrastructure to support the plan. This will allow for long-term success and sustainability of efforts. Figure 3 depicts Kentucky's Integrated Planning Model, which was used throughout the 2022 planning process to clearly communicate the process to all stakeholders. Throughout the planning process, intentional efforts were made to build collaborations among systems of prevention and care relevant to HIV. This included inviting all entities to be part of the statewide planning group and/or to participate in planning activities.

Figure 3. Building the Integrated Plan on a Strong Foundation



Source: Kentucky's Integrated Planning Model, 2022

INTEGRATED PLAN GOALS, OBJECTIVES & STRATEGIES



Overarching Goal

To reduce new HIV infections by 75% by 2025, by 90% by 2030, from an estimated baseline of 453.

Goals, Objectives and Strategies

The *End HIV Kentucky Integrated Prevention and Care Plan* (“Integrated Plan”) has four overarching, ambitious, and quantifiable goals which directly correspond to the national EHE pillars. Each goal has three to four objectives and corresponding key strategies, designed **to be met by December 31, 2026**, in order to achieve the associated goal. Several key activities/action steps encompass each strategy, which are described in the implementation plan found in the full Integrated Plan document available online at the DPH HIV/AIDS Section homepage.

Format

The format of Kentucky’s goals and objectives is based on definitions from the *National HIV/AIDS Strategy 2022-2026*.

Table 1. Definition of NHAS Elements

National HIV/AIDS Strategy	Federal Implementation Plan
<p>Goals: Broad aspirations that enable a plan’s vision to be realized</p> <p>Objectives: Changes, outcomes, and impact a plan is trying to achieve</p> <p>Strategies: Choices about how best to accomplish objectives</p>	<p>Action Steps: Specific activities that will be performed to implement the strategies and achieve the goals of the plan</p> <p>Progress Reports: Reports on progress, successes, and challenges</p>

^a Adapted from the HHS Office of the Assistant Secretary for Planning and Evaluation.

Source: NHAS, 2022-2025.

Monitoring and Evaluation

Progress across the Integrated Plan will be monitored over the implementation years of 2023-2026. A yearly evaluation report will be prepared and shared with stakeholder groups. The evaluation plan will utilize data collected across five core indicators. These have been chosen to align Kentucky’s Integrated Plan evaluation strategy with national NHAS and EHE indicators. While showing impact across the commonwealth, these indicators will also provide a comparison between other states and national data.

PILLAR #1: DIAGNOSE

GOAL 1: TO DIAGNOSE ALL PWH AS SOON AS POSSIBLE

- **Objective 1.1: Advance HIV-related communications to improve uptake of HIV testing (including knowledge of the status-neutral approach and strategies to reduce stigma and discrimination)**
 - Strategy 1.1.1: Ensure that health care professionals and front-line staff are educated and trained on stigma, discrimination, and unrecognized bias toward priority populations
 - Strategy 1.1.2: Increase public awareness for HIV across the commonwealth to reach all Kentuckians, including specifically targeted populations

- **Objective 1.2: Increase HIV testing within clinical settings**
 - Strategy 1.2.1: Initiate routine opt-out testing in acute care settings (i.e., emergency departments [ED], urgent care)
 - Strategy 1.2.2: Increase HIV screening tests in routine medical encounters, including primary care, dental care visits, prenatal care, elective admissions, mental health visits, substance use disorder clinics, medication-assisted treatment (MAT) clinics, university health services, Federally Qualified Health Centers (FQHC), and local health departments (LHD)

- **Objective 1.3: Improve targeted HIV testing efforts within CBOs**
 - Strategy 1.3.1: Train and certify community-based HIV testers
 - Strategy 1.3.2: Host quarterly prevention meetings to highlight best practices
 - Strategy 1.3.3: Advocate for legislative changes to allow for home HIV testing (*accomplished in 2023*)

- **Objective 1.4: Increase targeted outreach testing efforts in populations at higher risk for HIV**
 - Strategy 1.4.1: Promote and increase testing in the criminal justice system
 - Strategy 1.4.2: Promote and increase testing in SSPs
 - Strategy 1.4.3: Promote and increase outreach testing efforts in rural areas and hard-to-reach populations
 - Strategy 1.4.4: Promote and increase outreach testing efforts with Ryan White discordant partners
 - Strategy 1.4.5: Establish a Prevention Screening Services Program

PILLAR #2: TREAT

GOAL 2: TO TREAT PWH RAPIDLY AND EFFECTIVELY TO REACH SUSTAINED VIRAL SUPPRESSION

- **Objective 2.1: Increase the percentage of newly diagnosed PWH linked to care within 1 week of diagnosis**

- Strategy 2.1.1: Increase capacity to provide linkage to care for newly diagnosed PWH
- **Objective 2.2: Re-engage PWH who are out of care**
 - Strategy 2.2.1: Increase linkage to care activities for targeted populations
 - Strategy 2.2.2: Increase public awareness focused on getting PWH living in Kentucky into care
- **Objective 2.3: Reduce barriers to retain PWH in care**
 - Strategy 2.3.1: Reduce transportation barriers
 - Strategy 2.3.2: Reduce housing barriers
 - Strategy 2.3.3: Reduce stigma barriers
- **Objective 2.4: Increase the capacity of the public health and health care workforce to effectively provide holistic care and treatment for PWH**
 - Strategy 2.4.1: Increase provider education on the treatment and quality of care for HIV, and of hepatitis C virus (HCV) and hepatitis B virus (HBV) co-infection(s)

PILLAR #3: PREVENT

GOAL 3: TO PREVENT NEW HIV TRANSMISSIONS BY USING PROVEN INTERVENTIONS, INCLUDING PREP AND SSPs

- **Objective 3.1: Promote full access to, and the expansion of, PrEP**
 - Strategy 3.1.1: Expand PrEP resources at the state level, including systems to navigate PrEP access
 - Strategy 3.1.2: Build a cohesive statewide network of PrEP coordinators to coordinate PrEP initiatives
 - Strategy 3.1.3: Increase the number of providers who are aware of, and trained to prescribe, PrEP
 - Strategy 3.1.4: Increase awareness of, and participation in, PrEP services among priority populations
- **Objective 3.2: Promote full access to, and the expansion of, substance use-related harm reduction**
 - Strategy 3.2.1: Partner with the recently established DPH Harm Reduction Program, under the Preparedness Branch in the Division of Public Health Protection and Safety, to support local communities in approval of and implementation of SSPs and expand available HIV prevention services at SSPs
 - Strategy 3.2.2: Provide data on SSPs
- **Objective 3.3: Increase prevention strategies in priority populations**
 - Strategy 3.3.1: Increase awareness of treatment as prevention (Undetectable = Untransmittable [U=U])

- Strategy 3.3.2: Increase participation in support groups for those at risk for HIV, such as persons who inject drugs (PWID)
- Strategy 3.3.3: Increase youth awareness of HIV prevention
- Strategy 3.3.4: Increase the availability of safe sex kits, including condoms

PILLAR #4: RESPOND

GOAL 4: TO RESPOND QUICKLY TO POTENTIAL HIV OUTBREAKS AND TREATMENT SERVICES TO PEOPLE WHO NEED THEM

- **Objective 4.1: Improve surveillance capacity for rapid detection of active HIV transmission clusters**
 - Strategy 4.1.1: Improve HIV surveillance lab collection system to decrease delay in importing labs into eHARS, thereby boosting cluster detection and response activities with more timely data

- **Objective 4.2: Increase workforce capacity to respond to outbreaks in the field**
 - Strategy 4.2.1: Hiring and maintaining positions in the KDPH HIV Section to provide appropriate services to address cluster demands

- **Objective 4.3: Increase community engagement and input in cluster detection and response**
 - Strategy 4.3.1: Creating and maintaining surveillance products
 - Strategy 4.3.2: Increase partnership activities to engage and maintain stakeholders in HIV cluster detection and response

Call to action

In order to achieve the goal of ***reducing new HIV infections by 75% by 2025, by 90% by 2030***, the network of all HIV prevention and care partners in Kentucky must work together. This network includes all HIV organizations, members of the community, and PWH.

If you wish to be a part of the KHPAC and/or receive information about how you or your organization can be a part of this effort to end HIV in Kentucky, please contact the HIV/AIDS Section within the Division of Epidemiology and Health Planning at KDPH. This document has been prepared as a summary of the full-length Integrated Plan so that the core components of the plan can be easily accessed and understood. A copy of the full plan is available online at the DPH HIV/AIDS Section homepage.

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<https://chfs.ky.gov/agencies/dph/dehp/hab/Pages/default.aspx>