

VI. Action Plan

The Steering Committee developed and approved an Action Plan to address identified priorities taking into consideration the special populations that were determined during the ranking process. Suggestions to address needs that the committee received from focus groups and surveys were considered in the development of this Action Plan as well as suggestions from the committee itself.

The Action Plan notes what activities the Network should undertake to address: priorities; the expected outcome for each priority; the responsible parties; and time frame for completion of activities. The Steering Committee will be responsible for reviewing progress towards objectives and revisions to the Action Plan will be determined by this committee as needed.

Key to Responsible Parties:

- CAB = Consumer Advisory Board
- CAC = Community Awareness Committee
- CMC = Case Management Committee
- LA = Lead Agency
- NC = Network Coordinator
- SC = Steering Committee

Priority One: Transportation

Transportation was noted by both persons living with HIV/AIDS and providers as a barrier to care and a barrier for socialization and outreach. Persons who receive Medicaid benefits are entitled to transportation to medical appointments via bus or cab service. Medicaid rarely pays for transportation to support groups. Medicaid requires calling for transportation for cab service the day before the service is needed. This can be difficult for some persons who may have difficulty planning ahead, lack a phone or if an episodic illness arises. Persons who are not Medicaid recipients must provide for their own transportation to medical and other appointments. Some public transportation is available via the counties' bus service, but routes are limited and may not accommodate appointments in late afternoon.

Transportation issues are not related to a person's HIV status nor are they or their issues unique to the Binghamton region. The Network provides a Transportation Guide to assist educating persons living with HIV/AIDS and others regarding transportation services available in the region. This resource is available both in hard copy as well as on the Network's website.

Activity	Expected Outcome	Responsible Parties	Time Frame
1) Meet with representatives of county transportation providers to discuss issues and explore potential means to expanding transportation services.	Transportation services are accessible & meet needs of clients	SC, NC, LA, CAB, CMC	June 2007- March 2008
2) Collaborate with other agencies that provide transportation services, such as area agencies on aging and volunteer organizations, to discuss means to collaborate to expanding transportation options	Expand transportation service options	SC, NC, LA, CAB, CMC	June 2007- March 2008
3) Educate legislators regarding need for transportation to medical and non-medical appointments and seek support for legislation and funding to expand transportation services	Legislators are aware of need for improved and expanded transportation services	SC, NC, LA, CAB	April - Dec. 2007
4) Collaborate with other HIV Care Networks, AIDS Institute, New York AIDS Coalition and state and federal legislators to discuss common transportation issues and seek solutions	Expand transportation service options	SC, NC, LA, CAB	June 2007 - March 2008

The above activities emphasize the need for Network members to work collaboratively with other community groups, such as transportation providers and other agencies seeking to address transportation issues. For example, due to an aging demographic in the region, local area agencies on aging are also wrestling with transportation services. Persons living with HIV/AIDS who meet the requirements of participation in services of other agencies can also avail themselves of their transportation services.

Priority Two: Opportunities for Socialization

Participation in social opportunities is a need frequently expressed by persons living with HIV/AIDS as well as noted by providers working with persons living with HIV/AIDS. Persons living with HIV/AIDS need social activities to decrease feelings of isolation, anxiety, depression and other emotional needs. By promoting participation in social activities, a person's emotional state can improve and thus positively impact their health status. The goal of the Network in promoting knowledge of opportunities for socialization is to enhance the health status of a person living with HIV/AIDS through positive emotional health activities.

Activity	Expected Outcome	Responsible Parties	Time Frame
1) Promote outreach efforts to persons living with HIV/AIDS, especially in rural areas, to inform of Network and other resource programs	Increase knowledge of Network and other resource providers	SC, NC, LA, CAB, CMC, CAC	On-going
2) Promote knowledge of social opportunities and support groups in the Network's newsletter and request Network members to assist in disseminating information, including information about both activities specifically for persons living with HIV/AIDS and activities not specifically limited to persons living with HIV/AIDS	Participation in social events decreases emotional and mental health stressors	SC, NC, LA	On-going
3) Decrease barriers to participation in social events, such as lack of transportation	Consumers to report increase in social activity participation	SC, NC, LA, CAB, CMC	On-going
4) Explore with providers the possibility of offering support groups to provide persons living with HIV/AIDS an outlet to discuss common concerns and potential solutions, to inform about available resources and to decrease feelings of isolation. Support groups to be accessible to both urban and rural residents.	Support groups will be available to persons living with HIV/AIDS	SC, NC, LA, CAB, CMC	On-going

The above activities note the Network's commitment to the needs of persons living with HIV/AIDS by collaborating to promote awareness of positive social activities and to increase the availability of support groups. Support groups provide a means for persons to discuss common feelings and needs, and to assist each other to work towards a positive resolution of needs. Since health care resources are limited, support groups can be very cost-effective.

Priority Three: Provider Education including need for HIV Specialty Care & Increasing Communication among Providers

Providers noted a need for on-going education, especially regarding new developments and research as well as information to facilitate linkages to care. The region also has noted a need for HIV specialty care and a need for providers to maintain or improve communication.

Activity	Expected Outcome	Responsible Parties	Time Frame
<p>1) Inform and update providers about educational opportunities including:</p> <ul style="list-style-type: none"> a. Regional opportunities, including Regional Training Center program offerings b. Continuing Education Initiative (CEI) services and programs c. Other conferences and programs that may be of interest d. Network to send information regarding latest research, etc via newsletter and email e. Discuss with CEI if a provider newsletter is available or could be developed that would include information on latest developments, educational offerings, and billing tips (such as currently is offered by Medicaid) 	Providers will be better informed about the needs of persons living with HIV/AIDS, including social and emotional health needs	SC, NC, LA, CAB, CMC, CAC	On-going
2) Provide resource information to providers, including local HIV resources information and HIV specialty care.	Increased knowledge by providers of resources	SC, NC, LA	On-going
3) Encourage and promote the importance of talking to clients regarding risk behaviors and provide resources as needed to assist providers when talking with clients about risk factors.	Providers to be more aware of need to discuss risk behaviors and to be more comfortable discussing risk behaviors	SC, NC, LA, CAB, CMC	On-going
4) Collaborate with AIDS Institute, county health departments and medical training institutions to inform medical students and physicians about the need for HIV specialists	Increase number of HIV specialists	SC, NC, LA	Dec 2007
<p>5) Increase communication among providers by:</p> <ul style="list-style-type: none"> a) providing information regarding Article 27-F to facilitate release and sharing of information among providers b) Promote awareness of case management providers and 	Facilitate effective, quality client care	SC, NC, LA, CMC	On-going

resources c) Encourage participation of providers to the Network’s Case Management Committee d) Encourage case management providers to participate in case conferencing e) Discuss issues and needs of special populations at risk for HIV infection or, if infected, persons who may have unique health care needs, such as young people, women, mentally ill and/or substance abusers, members of the L, G, B, T community, and formerly incarcerated persons			
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The Network is committed to promoting awareness of educational opportunities for all providers. This includes not only to inform providers of opportunities, but to work with those offering training programs to ensure that providers’ needs are met. Due to resource limitations, Network members will continue to collaborate to inform providers of issues to maximize resources. Providers are also encouraged to participate in case management meetings to discuss issues and to participate in case conferencing.

**Priority Four: Health Education including Harm Reduction Information
(to Persons living with HIV/AIDS & the general community)**

Despite previous activities to educate the public and persons living with HIV/AIDS, new cases of HIV infection continue to occur. Network members are committed to reduce and eliminate new cases of HIV infection through education of community members and persons living with HIV/AIDS. By promoting information regarding health promotion and HIV transmission to persons living with HIV/AIDS, people living with HIV/AIDS can maximize their health, reduce or eliminate high risk behaviors and prevent the spread of HIV.

Activity	Expected Outcome	Responsible Parties	Time Frame
1) Collaborate with human service providers to offer educational programs to increase knowledge of HIV/AIDS and means to prevent infection. Include reaching out to populations at risk, such as: young people; women; members of the L, G, B, T community; and mentally	Reduce new cases of HIV infection and promote optimal care for persons infected with HIV	SC, NC, LA, CAB, CMC, CAC	On-going

<p>ill and/or substance abusers. Utilize multiple approaches to educate, such as:</p> <ul style="list-style-type: none"> a) encourage public health personnel and other educators to discuss HIV/AIDS issues with providers at meetings and during other opportunities b) provide information via newsletter and other mailings c) Network members to visit primary care offices to provide information, ask regarding barriers to care and emerging needs d) Seek assistance from Project WAVE to maximize media promotion of awareness of events and education information 			
<p>2) Support efforts of Southern Tier AIDS Program and other providers to reach out to persons living with HIV/AIDS to:</p> <ul style="list-style-type: none"> a) provide harm reduction information; b) promote optimal health, including medication adherence and compliance with health care appointments; c) inform regarding services available 	<p>Reduce new cases of infection</p>	<p>SC, NC, LA</p>	<p>On-going</p>
<p>3) Collaborate with human service providers to offer educational information to health educators and school nurses/educators to:</p> <ul style="list-style-type: none"> a) ensure educators have latest available information b) provide information about effective training techniques and interventions to maximize their educational efforts 	<p>Promote education as a means of reducing new cases of infection</p>	<p>SC, NC, LA, CAB, CMC</p>	<p>On-going</p>

Efforts to educate the public and persons living with HIV/AIDS will assist in reaching the goal of eliminating new HIV cases. Education will also encourage efforts to reduce stigma and discrimination.

Priority Five: Mental Health and Substance Abuse Services

In the Binghamton region, United Health Services receives Ryan White funding for its HIV Outpatient Mental Health Program. Other providers of mental health and substance abuse services exist, but are not solely limited to persons living with HIV/AIDS. Barriers to effective services include prolonged waiting time for some providers, transportation, and lack of adherence to treatment plans. It is the goal of the Network to facilitate care that is timely and meets the needs of persons living with HIV/AIDS.

Activity	Expected Outcome	Responsible Parties	Time Frame
1) Advocate for timely access to mental health services for all persons living with HIV/AIDS and their significant others.	Timely access to mental health services	SC, NC, LA, CAB, CMC, CAC	On-going
2) Advocate for timely access to substance abuse treatment services for all persons living with HIV/AIDS and their significant others	Timely access to substance abuse and treatment services	SC, NC, LA, CMC	On-going

The Network is committed to timely and appropriate care by persons living with HIV/AIDS who have mental health and/or substance abuse problems. Improving transportation services in Priority One will assist persons to access services, including mental health and substance abuse services. Educating persons to reduce risk behaviors and to work towards obtaining optimal health as noted in Priority Four will assist persons living with HIV/AIDS to achieve a higher quality of life and decrease the possibility of transmitting the HIV virus.

Priority Six: Dental Services

As with transportation, the need for expanded dental service providers is a community need and not solely a need for persons living with HIV/AIDS.

Activity	Expected Outcome	Responsible Parties	Time Frame
1) Educate persons living with HIV/AIDS regarding: a) need for routine dental care to promote optimal health and prevent health problems related to poor dental health b) need to maintain a collaborative relationship with dental provider, including need to keep dental appointments	Persons living with HIV/AIDS to find and maintain a primary dental care provider	SC, NC, LA, CAB, CMC,	On-going

2) Collaborate with county health departments, county departments of social services and other agencies working towards increasing the supply of dental providers and decreasing barriers to dental care	Increase access to dental care	SC, NC, LA	On-going
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Continued collaboration with other community health planners and dental providers to increase the supply of both primary care providers and dental specialists will continue. Barriers to care, including transportation and a high rate of missed appointments, will be addressed also. Education to persons living with HIV/AIDS regarding the need to make and keep dental appointments will continue. The Network will continue to work with both providers and persons living with HIV/AIDS to identify barriers and to work towards effective solutions.