



HIV | HCV
Health and Housing
Collaborative

Improving HIV/HCV Health Outcomes Among People Experiencing Homelessness

www.healthhiv.org

INTRODUCTION

The health care needs of people experiencing homelessness are both significant and compounding. While HIV can be effectively managed and HCV can be successfully treated and cured, comprehensive and integrated HIV and HCV prevention and care services for people experiencing homelessness are impacted by barriers at the system, provider, and individual levels. People experiencing homelessness may not be able to access needed health care services, or may not want to access the services: the latter because of previous adverse or traumatic past experiences.

HIV and HCV treatment and support-services providers who wish to develop effective services for people experiencing homelessness need practical strategies and real-world models with proven success. Moreover, the strategies and models must be grounded within a humanistic framework of trauma-informed care and harm reduction.

HealthHIV's **HIV/HCV Health and Housing's 2023 Resource Guide** was developed throughout a year-long technical assistance project with eight organizations working to increase their HIV/HCV screening and care capacity for their clients experiencing homelessness. These sites, situated around the country, ranged from large multi-site hospitals and health centers to small community-based organizations and substance use treatment facilities. Because of this diversity, the resources in this document provide insight into HIV/HCV care for people experiencing homelessness in a variety of settings and with a variety of populations.

All links and information included in this resource were accessible as of February 2024.



1630 Connecticut Ave, NW, Suite 500
Washington D.C. 20009
202.232.6749

www.healthhiv.org

TABLE OF CONTENTS

INTRODUCTION	2
Section 1: HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE	4
On-demand, self-paced learning opportunities in HCV prevention and treatment	4
On-demand, self-paced learning opportunities related to HIV/HCV linkage to care in PEH	6
Identification of community partners and development of a comprehensive referral network	8
Trainings/Resources on providing HIV/HCV services to transgender community	8
Trainings and resources on providing HIV/HCV services to rural communities	9
Best and Model practices for effective patient follow-up for PEH	10
Resources on best practices for HIV/HCV testing in the field (non-sterile)	11
Resources to access combination HIV/HCV testing kits	11
SECTION 2: PATIENT EDUCATION	13
Multilingual HIV/HCV/Sexual health educational pamphlets for providers	13
Best practices strategies on advertising PrEP services	13
Resources for youth programs and peer support	14
Resources on models for peer program development	15
SECTION 3: MOBILE, COMMUNITY OUTREACH AND STREET MEDICINE	16
Best practices for HIV/HCV community outreach among PEH	16
Best practices on providing HIV/HCV services through mobile health	17
Successful models of community-based, mobile medication storage for unsheltered populations	18
Community outreach training for staff	18
SECTION 4: IMPLICIT BIAS AND CULTURAL COMPETENCY	19
On-demand (CME/CE-preferred) stigma and discrimination/cultural competency/implicit bias training for providers. Implicit bias/discrimination training focused on racial/ethnic minorities, persons experiencing homelessness, and PWID populations	19
On-demand (CME/CE-preferred) stigma and discrimination/cultural competency/implicit bias training specific to Spanish speaking patients for providers	22
Harm reduction training for providers	22
Harm reduction resource guide for the health center to share with patients	23
Key steps and status for implementing a syringe exchange program	23
On-demand, self-paced learning opportunities on motivational interviewing	24
SECTION 5: GRANT WRITING	25
On-demand and live trainings/resources to improve grant writing skills	25
Public funding opportunities for providing HIV/HCV prevention and treatment services to PEH. Potential sources of funding for mobile health clinic	25
Potential sources of funding for transportation	27
Cell phone resources for PEH	27
Funding resources for HIV/HCV clinical research	27
SECTION 6: DATA COLLECTION / EMR	29
Model practices and/or data collection templates	29
Best practices on supporting clients to maintain documentation, enrollment status, etc.	29

HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE

RESOURCE	KEY TOPICS COVERED
<i>1.1 On-demand, self-paced learning opportunities in HCV prevention and treatment</i>	
<p><u>Screening and Diagnosis of Hepatitis C Infection Overview</u></p>	<p>For any clinician who may encounter persons with hepatitis C virus infection and would like to establish core competence in testing for hepatitis C, counseling patients on preventing hepatitis C transmission, and diagnosing acute hepatitis C infection. Offers 1.0 CME/CNE for completion. ONLINE TRAINING MODULE</p>
<p><u>Evaluation, Staging, and Monitoring of Chronic Hepatitis C Overview</u></p>	<p>Intended for clinicians involved in long-term management of persons with chronic hepatitis C infection. Content includes initial evaluation, natural history, preventing liver damage, staging of liver fibrosis, evaluation of cirrhosis, surveillance for hepatocellular carcinoma, and recognition of extrahepatic manifestations. Offers 1.0 CME/CNE for completion. ONLINE TRAINING MODULE</p>
<p><u>Evaluation and Preparation for Hepatitis C Treatment Overview</u></p>	<p>For clinicians evaluating persons with chronic HCV infection for hepatitis C treatment, including clinicians who will independently assess treatment candidacy and clinicians who will provide treatment candidacy with assistance from a hepatitis C expert. Offers 1.0 CME/CNE for completion. ONLINE TRAINING MODULE</p>
<p><u>Treatment of Chronic Hepatitis C Infection Overview</u></p>	<p>For clinicians treating chronic hepatitis C infection. Material covered includes recommendations for treatment-naïve and treatment-experienced persons with chronic HCV infection genotypes 1-6, based on the Association for the Study of Liver Diseases and Infectious Diseases Society of America (AASLD-IDSA) HCV Guidance. Offers 1.0 CME/CNE for completion. ONLINE TRAINING MODULE</p>
<p><u>HCV 20x20 Virtual Cohort: Cost-Effectiveness and Rationale on Universal Screening for HCV</u></p>	<p>This session is facilitated by Dr. Sarah Schillie, co-author on the new CDC Recommendations for Hepatitis C Testing/Screening Among Adults in the United States. Conversations detail the cost effectiveness and rationale on universal screening for HCV. ONLINE TRAINING MODULE</p>
<p><u>Optimizing Nurse Care Coordinators in Hepatitis C (HCV) Treatment</u></p>	<p>Discussion of real-world examples of successful HCV treatment programs where the Nurse Care Coordinator role was key to developing best practice and positive patient outcomes. ARCHIVED TRAINING MODULE</p>
<p><u>Optimizing HIV & HCV Treatment Among People Experiencing Homelessness</u></p>	<p>Dr. Stacey Trooskin and Dr. Arsalan Shah discuss screening for HIV and HCV and optimal strategies to link PEH to care, including how to incorporate community and outreach services and external partners. Clinic models for colocation services to simplify screening and linkage to care will be discussed. ARCHIVED TRAINING MODULE</p>

HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE

RESOURCE

KEY TOPICS COVERED

1.1 On-demand, self-paced learning opportunities in HCV prevention and treatment

A qualitative investigation of organizational challenges and facilitators to screening individuals experiencing homelessness for hepatitis C virus (HCV) in Houston, Texas

This study investigated the organizational challenges and facilitators to HCV screening of individuals experiencing homelessness as reported by homeless services providers. [PEER-REVIEWED ARTICLE](#)

HCV Micro Elimination in San Francisco

Define the scope of HIV/HCV co-infection in San Francisco and the process of micro-elimination plan development. [TRAINING POWERPOINT PRESENTATION](#)

Outreach and Clinical Models Designed to Identify and Address Barriers to Hepatitis C Treatment

This presentation addresses HCV treatment barriers in an FQHC and strategies to increase access to available and compassionate care. [TRAINING POWERPOINT PRESENTATION](#)

Medical Case Management for PWID Hepatitis Education Project (HEP)

For the past 25 years, HEP has been supporting individuals disproportionately impacted by viral hepatitis through education and awareness, advocacy, low-barrier prevention, and testing and linkage to care services. This resource provides strategies for providing whole person HCV care for people who use drugs. [TRAINING POWERPOINT PRESENTATION](#)

Hepatitis C Treatment Access For People Who Use Drugs

An overview of strategies for improving HCV treatment access among PWID including: Outreach; Engagement; Mobile Phlebotomy; Wraparound Services; and Partnership between CBOs and clinics. [TRAINING POWERPOINT PRESENTATION](#)

Recommendations for Implementing Hepatitis C Virus Care in Homeless Shelters: The Stakeholder Perspective

This study sought the perspectives of key stakeholders toward establishing a universal HCV screening, testing, and treatment protocol for individuals accessing homeless shelters. [PEER-REVIEWED ARTICLE](#)

Hepatitis C treatment outcomes among homeless-experienced individuals at a community health center in Boston

This study examined HCV treatment engagement and outcomes in a cohort of homeless-experienced adults treated through an innovative community-based primary care program in Boston, Massachusetts. [PEER-REVIEWED ARTICLE](#)

HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE

RESOURCE

KEY TOPICS COVERED

1.1 On-demand, self-paced learning opportunities in HCV prevention and treatment

Engaging the Community in Designing a Hepatitis C Virus Treatment Program for Adults Experiencing Homelessness

The objective of this study was to employ community-based participatory research methods to understand perceptions of HCV-positive PEH, and providers, on the design and delivery of a culturally sensitive, nurse-led community health worker (RN/CHW) HCV initiation and completion program. *PEER-REVIEWED ARTICLE*

1.2 On-demand, self-paced learning opportunities related to HIV/HCV linkage to care in PEH

Systems Models Providing Care and Treatment to People with HIV Experiencing Homelessness and Under/Unemployment

This workshop will describe three site models, including protocols, resources, and tools for engaging and retaining people in care, achieving viral suppression, attaining stable housing, and gaining employment. Presenters will also share systems developed and implemented for internal and external partnerships with housing, employment, and other service providers. *ARCHIVED CONFERENCE SESSION*

Improving HIV Health Outcomes through the Coordination of Supportive Employment and Housing Services

This workshop describes specific barriers to care and treatment, as well as unmet medical and psychosocial needs faced by clients. Presenters shared strategies such as developing staff and stakeholder skills to address the needs of people with HIV who experience homelessness, unstable housing, unemployment, or underemployment. *ARCHIVED CONFERENCE SESSION*

Integrative Impacts: Multi-faceted Approaches to Serving Individuals Experiencing Homelessness

This presentation addresses HCV treatment barriers in an FQHC and strategies to increase access to available and compassionate care. *ARCHIVED CONFERENCE SESSION*

AIDS Seminar-HIV Surveillance and Linkage to Care in NH: A Public Health Perspective

For the past 25 years, HEP has been supporting individuals disproportionately impacted by viral hepatitis through education and awareness, advocacy, low-barrier prevention, and testing and linkage to care services. This resource provides strategies for providing whole person HCV care for people who use drugs. *ARCHIVED TRAINING MODULE*

Introducing Data to Care Approaches for People Co-infected with HIV and HCV: Evaluation Findings

An overview of strategies for improving HCV treatment access among PWID including: Outreach; Engagement; Mobile Phlebotomy; Wraparound Services; and Partnership between CBOs and clinics. *ARCHIVED CONFERENCE SESSION*

HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE

RESOURCE	KEY TOPICS COVERED
<i>1.2 On-demand, self-paced learning opportunities related to HIV/HCV linkage to care in PEH</i>	
<u>Optimizing HIV & HCV Treatment Among People Experiencing Homelessness</u>	Dr. Stacey Trooskin and Dr. Arsalan Shah discuss screening for HIV and HCV and optimal strategies to link PEH to care, including how to incorporate community and outreach services and external partners. Clinic models for colocation services to simplify screening and linkage to care will be discussed. ARCHIVED TRAINING MODULE
<u>HCV 20x20 Resource Guide for Increasing HCV Screening and Linkage to Care</u>	This resource guide developed throughout a year-long technical assistance project with ten organizations working to increase their HCV screening and care capacity. These sites, situated around the country, ranged from large multi-site hospitals and health centers to small community based organizations and substance use treatment facilities. ONLINE RESOURCE
<u>Evidence-Informed Interventions: Initial Lessons Learned from a Multi-Site Intervention</u>	<ul style="list-style-type: none"> • Integrating buprenorphine treatment in HIV primary care • Peer linkage and re-engagement for women of color • Enhanced peer navigation for women of color • Jail transitional care coordination ARCHIVED TRAINING MODULE
<u>Improving Linkage to Care for Persons with HIV and HCV Using Digital Media</u>	Three multimedia projects to improve linkage to care between SUD and SSP clinics and outside providers. ARCHIVED CONFERENCE SESSION
<u>Screening and Diagnosis Overview</u>	This module is for any health care provider who would like to establish core competence in testing for HIV, recognizing acute HIV infection, and linking persons diagnosed with HIV to medical care. Offers 2.5 AMA PRA Category 1 Credit. ONLINE TRAINING MODULE
<u>Micro Learning: Black Cisgender and Trans Women, HIV Treatment, & PrEP</u>	In this segment, learn how we can improve messaging about HIV prevention and care to improve acceptance of services among all Black women. ARCHIVED TRAINING MODULE
<u>Adherence to the Continuum of Care</u>	This section provides guidance on linking patients to care, assessing and improving retention in care, and assessing and improving adherence to ART. ONLINE GUIDELINES

HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE

RESOURCE	KEY TOPICS COVERED
1.3 Identification of community partners and development of a comprehensive referral network	
<u>Enhancing Collective Partnerships: Great Lake Partnerships</u>	This discussion session will provide an overview of the importance of enhancing collective partnerships among community partners to provide a comprehensive system of HIV primary medical care and essential support services to people with HIV. <i>ARCHIVED TRAINING MODULE</i>
<u>HIV Outbreak in West Virginia: The Importance of Collaboration and Partnerships</u>	Discussion of diverse partnerships developed to successfully treat a homeless population with addiction and newly diagnosed HIV as well as the service delivery challenges faced by an out-of-state Part C clinic. <i>ARCHIVED TRAINING MODULE</i>
<u>Leveraging Partnerships to Increase Housing and Employment for People with HIV Experiencing Homelessness and Under/Unemployment</u>	Sites will share strategies and lessons learned to build a system of care and obtain housing and employment for people with HIV who are homeless or unstably housed, unemployed or underemployed, and out of care. <i>ARCHIVED TRAINING MODULE</i>
1.4 Trainings/resources on providing HIV/HCV services to transgender community	
<u>Transgender Care for HIV Clinicians</u>	<ul style="list-style-type: none"> • List key barriers to care among the transgender people seeking health services, including HIV/STI prevention and treatment • Describe gender-affirming medical and surgical interventions for transgender individuals • Review HHS Adult ART guidelines for transgender people with HIV • Describe key components of culturally competent care for transgender patients <i>ARCHIVED TRAINING SESSION</i>
<u>Strategies to Support Positive Experiences for Transgender and Gender Non-Conforming Individuals</u>	<ul style="list-style-type: none"> • Define and identify key terms to understand Transgender and Gender Non-Conforming (TGNC) clients • Identify and examine the impact that social determinants of health (SDOH) has on TGNC individuals' health outcomes • Identify prevention, care, and support needs of TGNC individuals who are survival workers, engage in drug use, and are returning home from incarceration as a tool to EHE • Identify needs of TGNC members incarcerated and returning home • Identify tools to ending barriers to care for TGNC individuals <i>ARCHIVED CONFERENCE SESSION</i>

HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE

RESOURCE

KEY TOPICS COVERED

1.4 Trainings/resources on providing HIV/HCV services to transgender community

Effective Strategies for Affirming and Engaging Transgender Clients

The purpose of this toolkit is to use an approach to health care delivery in which organizations, programs, and providers recognize, validate, and support the identity stated or expressed by the individuals served. [ONLINE TOOLKIT RESOURCE](#)

Toolkit for Providing HIV Prevention Services to Transgender Women of Color

The intended audience for this toolkit is staff at CBOs, health departments, clinics, and other organizations that currently provide, or are planning to provide, HIV prevention services for transgender WOC. The toolkit may be of use for staff at all levels of an organization, including those at the executive level, program managers, and frontline staff such as those working in HIV testing, linkage, outreach, and programs. It is also intended for clinical providers and staff that provide the range of social support services needed by transgender WOC. [ONLINE TOOLKIT RESOURCE](#)

Providing Inclusive Care for LGBTQ Patients

This resource toolkit is designed to assist healthcare agencies in meeting the needs of their lesbian, gay, bisexual, transgender and queer (LGBTQ) patients. [ONLINE TOOLKIT RESOURCE](#)

1.5 Trainings/resources on providing HIV/HCV services to rural communities

Hepatitis C Elimination at the Intersection of People Who Inject Drugs in Rural Settings

Speakers will discuss collaborative research on hepatitis C networks among persons who inject drugs, using peers and technology to increase uptake of HCV screening & treatment, and Hepatitis C elimination among people who inject drugs in Mexico during the COVID-19 pandemic. [ARCHIVED TRAINING MODULE](#)

Youth in Rural Communities: Unique Needs and Approaches to Engagement, Adherence, and Service Deliver

Overview of data on youth with HIV, their needs and programs in rural communities, and implementing initiatives to reach youth and retain them in care. [ARCHIVED TRAINING MODULE](#)

Utilizing Social Media to Increase Community Engagement in Rural Areas

Social media strategies for community engagement in rural areas in the planning, development, and implementation of HIV care and treatment services and a description of how social media has improved community engagement in rural areas and identify available resources to develop and implement social media strategies. [ARCHIVED TRAINING MODULE](#)

Implementing a Community Engagement Program to Enhance Viral Suppression in Rural Populations

In this workshop, participants will gain resources and strategies for implementing community engagement programs, including training community health workers to be part of a health care team to enhance viral suppression and management of HIV in rural populations. [ARCHIVED TRAINING MODULE](#)

HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE

RESOURCE

KEY TOPICS COVERED

1.5 Trainings/resources on providing HIV/HCV services to rural communities

Addressing the HIV Workforce Challenges in Rural Communities

This resource focuses on rural workforce challenges and corresponding data, highlights recipient innovative approaches to ameliorate the challenges, and reviews a vast array of free resources and training offered by HRSA Federal Office of Rural Health Policy and HRSA Bureau of Health Workforce. [ARCHIVED POWERPOINT PRESENTATION](#)

HCV elimination among PWID in rural settings: insights from epidemic modeling and observational data in Mexico

Presentation on modeling HCV elimination in the U.S. and implications for rural settings [ARCHIVED POWERPOINT PRESENTATION](#)

1.6 Best/Model practices for effective patient follow-up for PEH

Home Health Care for Patients Without Shelter

This article describes Chicago Street Medicine, an organization that implements HHC to improve health outcomes and care continuity for patients experiencing homelessness. [PEER-REVIEWED ARTICLE](#)

Systems Models Providing Care and Treatment to People with HIV Experiencing Homelessness and Under/Unemployment

This workshop will describe three site models, including protocols, resources, and tools for engaging and retaining people in care, achieving viral suppression, attaining stable housing, and gaining employment. Presenters will also share systems developed and implemented for internal and external partnerships with housing, employment, and other service providers. [ARCHIVED TRAINING MODULE](#)

Using peer care navigators to connect individuals who are experiencing homelessness and living with HIV with a medical home in the San Gabriel Valley

- Provide peer support and advocacy for multiply diagnosed PLWHA who are experiencing homelessness and diagnosed with mental health and/or substance use disorders
- Increase clients' adherence to treatment to improve medical status
- Implement "mobile" care-coordinated services, i.e., meeting the clients where they are, be it on the streets or in a shelter, to ensure linkage to care
- Improve the stability or status of clients' housing.

[TRAINING POWERPOINT PRESENTATION](#)

North Carolina Rurally Engaging and Assisting Clients Who Are HIV Positive and Homeless (NC REACH) Project

Build and maintain sustainable linkages to mental health, substance abuse treatment, and HIV/AIDS primary care services that meet the complex service needs and ensure adherence to treatment of HIV positive homeless or unstably housed individuals. [TRAINING POWERPOINT PRESENTATION](#)

HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE

RESOURCE

KEY TOPICS COVERED

1.7 Resources on best practices for HIV/HCV testing in the field (non-sterile)

Implementing HIV Testing in Nonclinical Settings: A Guide For HIV Testing Providers (2016)

Provides practical considerations for human immunodeficiency virus (HIV) testing in nonclinical testing sites. [ONLINE RESOURCE](#)

1.8 Resources to access combination HIV/HCV testing kits

Ohio Department of Health HIV Prevention Program
Phone: (614) 995-5599
Email: HIVPrevent@odh.ohio.gov

Contact Ohio State Health Dept and ask what they are willing to pay for. Agencies potentially could voucher for combo kits. (Separate test kits are cheaper and states are more likely to pay for individual kits).

Abbott Laboratories

Contact about incentive programs.

Molecular Diagnostics

- For US inquiries please call (800) 553-7042. For global inquiries, please reference our [Worldwide Locations](#) for contact information.

Point of Care Diagnostics

- Abbott Point of Care Diagnostics
400 College Rd E
Princeton, NJ 08540
Phone: (800) 366-8020

Rapid Diagnostics

- Abbott Rapid Diagnostics
150 S. Saunders Road
Lake Forest, IL 60045
Phone: (877) 441-7440

Siemens Healthineers USA

Contact about incentive programs.

Customer Care Center: (800) 888-7436 (SIEM)

Avioq

Contact about incentive programs.

Phone: 1 (919) 314-5535
 Product Inquiries: infor@avioq.com

HIV/HCV PREVENTION, TREATMENT AND LINKAGE TO CARE

RESOURCE

KEY TOPICS COVERED

1.8 Resources to access combination HIV/HCV testing kits

Roche	<p>Contact about incentive programs.</p> <p>How to make a request Local or domestic requests (pertains to a project within one country) Requests for support of a project that operates within one country should be directed to local management. Roche affiliate offices manage local donation and sponsorship activities within a common framework and Roche's global policy. Affiliate giving is thereby restricted to supporting local organizations and programmes that are based in and operate their programmes in the same country as the affiliate. Please consult our Group directory for the nearest Roche affiliate.</p>
Hologic Diagnostics	Contact about incentive programs.

PATIENT EDUCATION

RESOURCE

KEY TOPICS COVERED

*2.1 Multilingual HIV/HCV/Sexual health educational pamphlets for providers***American Liver Foundation Educational Materials for Hepatitis C and HIV/HCV Co-infection**

HCV and HIV/HCV Co-infection educational materials (English/Spanish). [ONLINE RESOURCE](#)

CDC Patient Education Resources

HCV Patient Education Resources (English/Spanish).

ETR HIV Resources

HIV education materials address both prevention and treatment issues for a range of audiences and ages served by public health programs, schools, colleges, private medical providers, community-based organizations, and the military. (Chinese Simplified, English, Haitian Creole, Spanish, Tagalog, Vietnamese). [ONLINE RESOURCE](#)

CDC HIV Prevention Resources

HIV Prevention Material (English/Spanish). [ONLINE RESOURCE](#)

Additional CDC HIV Resources

HIV Prevention Material (English/Spanish). [ONLINE RESOURCE](#)

ETR Safer Sex Patient Education

Complete line of STD-prevention and safer sex patient education. (Chinese Simplified, English, Spanish, Tagalog, Vietnamese). [ONLINE RESOURCE](#)

San Francisco AIDS Foundation Sexual Health Brochures

A collection of gender-inclusive STI brochures—available to download, for free. (English/Spanish). [ONLINE RESOURCE](#)

*2.2 Best practice strategies on advertising PrEP services***Marketing Strategies for Sustainable Client Recruitment and HIV Services**

Experts in HIV service delivery, health promotion, and infrastructure development shared lessons learned, outreach strategies, and ways to improve recruitment and retention of clients. [ONLINE RESOURCE](#)

Best Practices for Marketing HIV Services

Marketing Resource. [ONLINE RESOURCE](#)

Recruitment Best Practices

Marketing Resource. [ONLINE RESOURCE](#)

PATIENT EDUCATION

RESOURCE

KEY TOPICS COVERED

*2.2 Best practice strategies on advertising PrEP services***Nonprofit Marketing and Branding 101**

This is a toolkit detailing how nonprofit organizations can utilize marketing tactics to promote the message of their organization, as well as raise awareness for its cause. [ONLINE RESOURCE](#)

Digital Technology, HIV Prevention and Care Post COVID-19; Part II: What is Digital Outreach Marketing?

- Identify strategic use of social media tools
- Improve data collection by using social media and digital marketing
- Strengthen connection with target population using virtual/digital tools

[ARCHIVED TRAINING MODULE](#)

Marketing & Branding to Increase Linkage to Care

This webinar will provide a high-level overview of the concepts of marketing and branding. Branding is who you are and marketing is how you build awareness. A strategic combination of branding and the marketing tools will engage your target audience, build their trust, and open them to follow your advice.

[ARCHIVED TRAINING MODULE](#)

PrEP Communications Accelerator

The PrEP Communications Accelerator is a free interactive, digital resource that supports national governments, program implementers, and health practitioners to develop marketing and communications that drive demand for PrEP in sub-Saharan Africa. [ONLINE RESOURCE](#)

PrEP Demand Generation Toolkit

The aim of this toolkit is to support community organizations to increase awareness of and generate demand for PrEP for HIV prevention. [ONLINE RESOURCE](#)

*2.3 Resources for youth programs and peer support***Peer Engagement to Improve Linkage to Care and Retention in Care for Women and Youth**

University Health (UH) uses peers and patient navigators to provide support, reduce barriers, and improve linkage and retention to care for women and youth with HIV. Two peers with lived experience were hired as Outreach Specialists to spearhead the program, which is named FAM210. Their duties include planning and facilitating support groups, connecting clients to patient navigators, and developing innovative ways to engage youth and women. [ONLINE RESOURCE](#)

Positive Peers

A mobile app for youth and young adults with HIV aged 13–34. The app offers information, social networking, and self-management tools to support holistic HIV care. [ONLINE RESOURCE](#)

PATIENT EDUCATION

RESOURCE

KEY TOPICS COVERED

*2.3 Resources for youth programs and peer support***Intervention Guide — Project STYLE (Strength Through Youth Livin' Empowered)**

Review of an evidence-informed innovative model of care, focusing on youth and the linkage to care step of the HIV care continuum, covering:

- Intervention steps at-a-glance to provide an overview of featured activities
- Resource checklists outlining necessary capacity for replication
- Staffing table with personnel overviews
- Narrative sections to walk readers through process for replication

ONLINE RESOURCE

Strength Through Youth Livin' Empowered 2.0 (STYLE 2.0)

Implemented by Duke University's Center for Health Policy and Inequalities Research (CHPIR).

Implementation Guide
Implementation Toolkit
Conceptualizing/Implementing Mental/Behavioral Health in the SPNS Black MSM Initiative 28:20-40:25

ONLINE RESOURCE

Building Futures: Supporting Youth Living with HIV Technical Assistance Toolkit

This toolkit contains 10 topic areas, ranging from YLWH support groups to data-driven programming. Each section includes strategies to address the specific topic, and resources are provided to support the implementation. The 10 topic areas in the toolkit are arranged under four themes – Clinical Service Models, Infrastructure Development, Informing Program Development, and Wraparound Services. *ONLINE RESOURCE*

*2.4 Resources on models for peer program development***BUILDING BLOCKS TO PEER SUCCESS A toolkit for training HIV-positive peers**

Training compendium for agencies seeking to develop programs that utilize peers to help engage and retain other people with HIV in care. *ONLINE RESOURCE*

Integrating Peers Into HIV Care and Treatment Teams: Lessons Learned

Lessons Learned from the Peer Education and Training Sites/ Resource and Evaluation Center (PETS/REC) Initiative 2005-2010. *ONLINE RESOURCE*

Health Information Exchange and Peer Navigation: A Model to Engage Vulnerable Populations

Presenters describe a New York City collaborative pilot project utilizing Regional Health Information Organizations (RHIOs) to locate lost-to-care people with HIV. Lost-to-care encounter alerts provide community-based organizations with actionable, real-time data to supplement their 'classic' care engagement efforts. The model offers a potentially scalable, cost-effective strategy for patient re-engagement efforts on a population level. *ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION*

MOBILE, COMMUNITY OUTREACH AND STREET MEDICINE

RESOURCE

KEY TOPICS COVERED

*3.1 Best practices for HIV/HCV community outreach among PEH***MORE: Mobile Outreach Retention and Engagement-The Whitman-Walker Health (WWH) Mobile Outreach**

Retention and Engagement (MORE) intervention increased retention and viral suppression among people with HIV through a tailored service delivery model, which includes increasing access to supportive services and providing HIV care services in community settings. This project is part of CIE's Equity in Evaluation Project, which aims to provide organizations that developed innovative service delivery models with evaluation support so that they can collect data to demonstrate effectiveness. [ONLINE RESOURCE](#)

HIV Treatment Outcomes in POP-UP: Drop-in HIV Primary Care Model for People Experiencing

An integrated drop-in (nonappointment-based) HIV clinic with wrap-around services for persons with housing instability and viral nonsuppression in San Francisco. [PEER-REVIEWED ARTICLE](#)

HIV Speaks Español: Best Practices for Developing Latinx Outreach Programs

HIV infections continue to rise among members of the Latinx community, especially youth. To reverse this increasing trend, it is important to recognize the social, economic, linguistic, and cultural barriers that hinder the prevention and treatment efforts for HIV when developing an outreach strategy. [ARCHIVED TRAINING MODULE](#)

Clients' perceptions of barriers and facilitators to implementing hepatitis C virus care in homeless shelters

Studied the experiences of homeless individuals related to accessing HCV care to inform the design of a shelter-based HCV prevention and treatment program. [PEER-REVIEWED ARTICLE](#)

A pilot outreach HIV testing project among homeless adults

Community-engaged research approaches were employed via a partnership between the local health department, a federally qualified faith-based health center, and an academic university. An interviewer-administered survey to measure potential factors associated with HIV testing history and voluntary HIV testing services were offered to adults living in transitional housing establishments. The goal was to determine the association between predisposing, enabling, and need variables with HIV testing history in the past 12 months. [PEER-REVIEWED ARTICLE](#)

MOBILE, COMMUNITY OUTREACH AND STREET MEDICINE

RESOURCE

KEY TOPICS COVERED

*3.2 Best practices on providing HIV/HCV services through mobile health***HHOME: Homeless Health Outreach Mobile Engagement**

Homeless Health Outreach Mobile Engagement (HHOME) is a robust, mobile care and systems intervention that helps link, engage, and deliver rapid HIV treatment to some of San Francisco's most vulnerable and homeless communities. During the RWAP SPNS initiative, the intervention was able to stably house and retain in care (at 12-month chart review) 83.6 percent of intervention clients. [ARCHIVED TRAINING MODULE](#)

Co-Located HIV and SUD Care on a Mobile Unit for Homeless People with HIV and SUD

A community health center uses a mobile health unit to provide integrated substance use disorder (SUD) and HIV care and treatment for those suffering from housing instability. This low-barrier, mobile, integrated care model, supported by intensive case management and outreach, has made a significant impact on engagement, antiretroviral treatment (ART) initiation, and viral suppression. [ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION](#)

Tips for Implementing a Mobile Health App for People Living with HIV

A mobile health application, or app, is intended to improve patient care and advance health equity by addressing barriers to care. This web page offers six tips to successfully implement a mobile health app at an organization. [ONLINE RESOURCE](#)

Implementing a Community Engagement Program to Enhance Viral Suppression in Rural Populations

In this workshop, participants will gain resources and strategies for implementing community engagement programs, including training community health workers to be part of a health care team to enhance viral suppression and management of HIV in rural populations. [ARCHIVED TRAINING MODULE](#)

HIV Testing in Non-Clinical Settings

This webpage provides key references and information for persons conducting HIV testing in nonclinical settings. [ONLINE RESOURCE](#)

Utilizing the Community to Reach the Community: Ending the Epidemic with Community Health Workers

DC Health piloted three innovative care models to strategically ensure the community's voice is permanently embedded in HIV services. [ARCHIVED TRAINING MODULE](#)

Early Intervention Services and Outreach (EISO)

This guide details components of the EISO intervention and outlines the capacity required by organizations/clinics to replicate this work and support others in their implementation efforts. [ONLINE RESOURCE](#)

MOBILE, COMMUNITY OUTREACH AND STREET MEDICINE

RESOURCE	KEY TOPICS COVERED
3.3 Successful models of community-based/mobile medication storage for unsheltered populations	
<u>Medication Support and Medical Respite Care</u>	Medical respite care programs can utilize this document to determine the most appropriate type of medication support they can provide within their program, and identify steps and strategies to provide this support in a safe and effective way. ONLINE RESOURCE
<u>Lehigh Valley Health Network Street Medicine Policy and Procedure Outline</u>	Medication Storage begins on page 8. ONLINE RESOURCE
<u>Medication Storage & Adherence Study</u>	Sunrise partnered with the University of Texas School of Pharmacy to research and study best practices and the liability of storing client's medications for them to be able to access. ONLINE RESOURCE
<u>Idea Exchange</u>	Operating within the University of Miami, the IDEA Exchange is the only syringe exchange in the state of Florida. Besides its primary function of providing new syringes in exchange for used ones, the IDEA Exchange hosts many auxiliary harm reduction services to reduce the spread of HIV, Hepatitis C, and other blood-borne diseases. ARTICLE
3.4 Community outreach training for staff	
<u>Promoting Safety in Street Outreach</u>	Training the new street outreach workforce (within the confines of one hour) in core competencies for promoting safety. ONLINE RESOURCE
<u>Keck School of Medicine of University of Southern California Street Medicine</u>	Street medicine policies and procedures. ONLINE RESOURCE
<u>USC Street Medicine</u>	Workforce Development and Education. ONLINE RESOURCE
<u>Street Medicine Redding: Health Care to Rural Homeless Camps by Invisible People</u>	Training the new street outreach workforce (within the confines of one hour) in core competencies for promoting safety. ARTICLE
<u>San Francisco Street Medicine</u>	Training the new street outreach workforce (within the confines of one hour) in core competencies for promoting safety. ONLINE RESOURCE

IMPLICIT BIAS / CULTURAL COMPETENCY

RESOURCE	KEY TOPICS COVERED
<p><i>4.1 On-demand (CME/CE-preferred) stigma and discrimination/ cultural competency/ implicit bias training for providers. Implicit bias/discrimination training focused on racial/ethnic minorities, persons experiencing homelessness, and PWID populations</i></p>	
<p><u>Achieving Health Equity: Countering Racism & Implicit Bias in Healthcare</u></p>	<p>It is important for health care leaders to understand the impact of racism, implicit bias and health inequities on access to and quality of HIV care and treatment for Black Women. As supported by data, increased morbidity and mortality among Black Women will remain constant if these healthcare realities are not successfully addressed. Dr. Dazon Diallo and Ethlyn McQueen-Gibson explore how providers and clients can maximize health promotion and wellness, resilience, and self care education, leading to necessary positive and sustainable change. ARCHIVED TRAINING MODULE</p>
<p><u>Roots of Racism in Healthcare: Creating a Climate for Culturally-Responsive Care</u></p>	<p>This webinar explores the concept of race and health inequities: outlines the history of scientific racism: and reveals its influence on the modern medical establishment's values, beliefs, and practices towards BIPOC communities. ARCHIVED TRAINING MODULE</p>
<p><u>Enhancing Cultural Humility and Understanding Barriers to Care</u></p>	<p>Module 5 of HIVPCP certification course: This module focuses on the role that stigma, discrimination, trauma and social determinants of health play in HIV prevention and care and ways to mitigate their impact through cultural humility and trauma-informed care. Offers 1.0 CME/CNE per module for completion. ONLINE TRAINING MODULE</p>
<p><u>Housing People Who Use Drugs (PWUDs) Series: Cultural Competence for Housing PWUDs</u></p>	<p>This webinar focused on cultural humility and awareness when serving PWUD experiencing homelessness and housing instability, particularly on clientele who are Black, Indigenous, and other people of color. ARCHIVED TRAINING MODULE</p>
<p><u>Cultural Humility Series, Part I: Understanding SUD Disparities Among LGBTQIA People</u></p>	<p>This presentation will provide an overview of how minority stress theory plays a role in high SUD rates, as well as trace the historical sociological roots that impact substance use in LGBTQIA people. ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION</p>
<p><u>Cultural Humility Series, Part II: Social Class Bias and the Negative Impact on Client Treatment Outcomes</u></p>	<p>This presentation examines the role a counselor's implicit socio-economic status ("SES") bias may play in treatment disparities and whether training can effectively reduce clinician biases. This presentation is designed to educate supervisors and clinicians in the adverse effect class bias can have on the therapeutic relationship. ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION</p>

IMPLICIT BIAS / CULTURAL COMPETENCY

RESOURCE	KEY TOPICS COVERED
<p><i>4.1 On-demand (CME/CE-preferred) stigma and discrimination/ cultural competency/ implicit bias training for providers. Implicit bias/discrimination training focused on racial/ethnic minorities, persons experiencing homelessness, and PWID populations</i></p>	
<p><u>Cultural Humility Series, Part III: Do You Know Who You Are and For Whom You Provide Services?</u></p>	<p>Using case studies, the presenter will delve into “identity” as it is defined and understood for the participants in a therapeutic relationship. Webinar participants will learn about the development of a strategy to sort out the levels and layers of identity that occur in every therapeutic relationship. <i>ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION</i></p>
<p><u>Cultural Humility Series, Part IV: Critical Issues in LGBTQIA Patient Care</u></p>	<p>This discussion provides information on gender and sexual minorities and issues they encounter in treatment, legal requirements of these facilities, and ethical policies that can be put in place to provide a safe, learning opportunity for these individuals to process and grow. This presentation will also provide instructions on critical factors to consider when creating safe, effective healing environments and relationships with LGBTQIA patients. <i>ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION</i></p>
<p><u>Cultural Humility Series, Part V: Substance Use Disorder Treatment for Latinx Communities</u></p>	<p>In this webinar, the presenter will discuss aspects of the current behavioral health status of Latinx communities in the United States including U.S. born, documented, and undocumented immigrants. Ethical problems that may arise when providers fail to take into consideration race, ethnicity, health equity and their impact on health disparities. This presentation will also include how implicit associations in the subconscious affect Latinx communities. <i>ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION</i></p>
<p><u>Cultural Humility Series, Part VII: Four Directions of Diversity - Honoring Differences</u></p>	<p>Honoring Differences is a different approach to diversity. The approach is not to look for blame, but to explore the interconnectedness between people. If the system is out of harmony, it will cause problems among people. It also provides leaders with a means to more effectively work with different kinds of people. <i>ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION</i></p>
<p><u>Cultural Humility Series, Part VIII: Social Responsibility in the Addiction Profession</u></p>	<p>This presentation will start with an exploration of cultural identity and the use of self in the therapeutic environment; examine triggering terms; look at the impact of systemic racism on SUD treatment; and provide concrete action steps for the addiction workforce. <i>ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION</i></p>
<p><u>Foundations of LGBTQIA+ Health Care and Homelessness: Terminology, Concepts, and Best Practices</u></p>	<p>This 90-minute webinar will provide participants with an introduction to foundational terminology and concepts related to LGBTQIA+ identity and experience of homelessness with a focus on LGBTQIA+ health care. Health center staff will learn about healthcare disparities and applicable clinical practices that participants can integrate into their own contexts. <i>ARCHIVED TRAINING MODULE</i></p>

IMPLICIT BIAS / CULTURAL COMPETENCY

RESOURCE

KEY TOPICS COVERED

4.1 On-demand (CME/CE-preferred) stigma and discrimination/ cultural competency/ implicit bias training for providers. Implicit bias/discrimination training focused on racial/ethnic minorities, persons experiencing homelessness, and PWID populations

Your Words Matter – Language Showing Compassion and Care for Women, Infants, Families, and Communities Impacted by Substance Use Disorder: A CME/CE Activity

This CME/CE activity highlights your role in helping destigmatize addiction and substance use disorder and reduce negative bias among pregnant women and mothers. The activity has background information and tips for providers on language to use or avoid. Offers 1.0 CME/CNE for completion. Expiration date: September 15, 2024. [ONLINE TRAINING MODULE](#)

Cultural Competency in Medical Education and Clinical Practice

A discussion on the importance of improving cultural competency in the care of vulnerable populations. Honoring diversity and promoting effective interactions is critical to meeting the needs of patients across cultures. [ARCHIVED TRAINING MODULE](#)

Ending the HIV Epidemic by Being the Change You Seek

This webinar provides participants with an overview of HIV criminalization laws and data, along with strategies for combating HIV stigma and advocating for decriminalization. [ARCHIVED TRAINING MODULE](#)

Understanding Implicit Bias in Healthcare

At the conclusion of this session, you will be able to:

- Explain the difference between implicit/unconscious and explicit bias.
- Identify at least five types of bias present in healthcare.
- Describe the effects of unconscious bias on everyday interactions with patients, students, colleagues, and team members.
- Describe how personal unconscious biases impact perceptions of gender, race/ethnicity, and/or cultural attributes in healthcare.
- Provide strategies to correct or eliminate personal unconscious biases in daily interactions

[ARCHIVED TRAINING MODULE](#)

Replicating Innovative HIV Care Strategies to Priority Populations

The webinar featured the developers of two interventions designed to improve linkage to care and improve health outcomes for people with HIV who belong to priority populations. Intervention developers shared lessons learned and recommendations for supporting clients from priority populations including transgender women and Latinos of Mexican origin. The featured interventions focus on tailoring interventions to better support people with HIV. [ARCHIVED TRAINING MODULE](#)

IMPLICIT BIAS / CULTURAL COMPETENCY

RESOURCE	KEY TOPICS COVERED
<p><i>4.2 On-demand (CME/CE-preferred) stigma and discrimination/ cultural competency/ implicit bias training specific to Spanish speaking patients for providers</i></p>	
<p><u>HIV and the Latino/a/x Community</u></p>	<p>This webinar will equip providers with a comprehensive understanding of Latino/a/x culture, the barriers to testing and access to care that Latino/a/x people encounter, and best practices for engaging this community in HIV services. <i>ARCHIVED TRAINING MODULE</i></p>
<p><u>Cultural Humility and Counseling Hispanic and Latino Populations</u></p>	<p>This webinar will discuss a guide for service providers, which includes aspects such as how culture change affects Hispanics and Latinos. Also discussed will be substance use, treatment related barriers encountered by the population, cultural factors in treatment, co-occurring disorders and approaches to integrating culture into therapy. <i>ARCHIVED TRAINING MODULE AND POWERPOINT PRESENTATION</i></p>
<p><u>Culturally Competent Care for Latino Patients</u></p>	<p>The material in this section is part of a larger project by the Markkula Center for Applied Ethics on culturally competent care; that is, health care that is sensitive to the differing values and needs of cultural subgroups within our pluralistic society. These materials focus on the challenges that can confront Hispanics in American health care settings. <i>PEER-REVIEWED ARTICLE</i></p>
<p><i>4.3 Harm reduction training for providers</i></p>	
<p><u>Patient-centered care: Implementing harm reduction & motivational interviewing</u></p>	<ul style="list-style-type: none"> • Define harm/risk Reduction as it applies to HIV prevention • Explain client/patient-centered harm/risk reduction practices • Discuss what Motivational Interviewing is • Practice Motivational Interviewing for the purposes of harm reduction <p><i>ARCHIVED TRAINING MODULE</i></p>
<p><u>Do No Harm: Incorporating Harm Reduction Strategies into Patient-Centered Care</u></p>	<ul style="list-style-type: none"> • Examine how personal beliefs about people who use drugs affect service delivery • Define the components of harm reduction • Discuss the components of patient-centered care • Describe what a needle/syringe exchange program is and how it relates to harm reduction • Identify 5 harm reduction ‘tips and tricks’ to use with clients <p><i>ARCHIVED POWERPOINT PRESENTATION</i></p>

IMPLICIT BIAS / CULTURAL COMPETENCY

RESOURCE

KEY TOPICS COVERED

4.3 Harm reduction training for providers

Sexual Health Resources for Clients who Engage in Sex Work

- Understand the importance of knowing their status and be empowered to make healthy decisions
- Utilize harm reduction in both sexual engagement and substance usage
- Give an overview of the state of STDs, STIs and HIV in DC, along with susceptibility
- Identify the importance of PrEP and PEP usage for those who are sexually active
- Break down stigma in relation to both sex and sex work
- Describe strategies for maintaining physical, mental, and sexual health in spite of legal barriers

ARCHIVED TRAINING MODULE

4.4 Harm reduction resource guide for the health center to share with patients

West Virginia Harm Reduction Resources

- Education Information:
- Hepatitis C and Injection Drug Use
 - HIV and Injecting Drugs 101
 - Drug Use and HIV
 - How to Clean Syringes
 - Safe Disposal of Syringes: SafeNeedleDisposal.org | FDA.gov
 - Syringe Exchange Program Info Sheet
 - Pamphlet Template: MS Publisher | PDF

ARCHIVED POWERPOINT PRESENTATION

4.5 Key steps and status for implementing a syringe exchange program

Syringe Services Programs A Technical Package of Effective Strategies and Approaches for Planning, Design, and Implementation

This technical package provides evidence of the effectiveness of strategies and approaches for supporting successful planning, design, implementation, and sustainability of syringe services programs (SSPs). *ONLINE RESEARCH*

A Guide to Establishing Syringe Services Programs in Rural, At-Risk Areas

Key points:

- Increasing rates of injection drug use have led to increased rates of infectious disease in rural areas.
- Rural areas have fewer syringe services programs than urban areas.
- Syringe services programs reduce blood borne disease, do not increase drug use, are cost effective, are typically the only location where lay people can easily obtain naloxone, and provide clients with access to services such as health care, treatment, and other essential supports and services.

ONLINE RESOURCE

IMPLICIT BIAS / CULTURAL COMPETENCY

RESOURCE	KEY TOPICS COVERED
<p><i>4.5 Key steps and status for implementing a syringe exchange program</i></p>	
<p><u>GUIDE TO STARTING AND MANAGING NEEDLE AND SYRINGE PROGRAMMES</u></p>	<p>This guide is designed to assist in expanding the response to HIV among injecting drug users globally. ONLINE RESOURCE</p>
<p><i>4.6 On-demand, self-paced learning opportunities on motivational interviewing</i></p>	
<p><u>Patient-centered care: Implementing harm reduction & motivational interviewing</u></p>	<ul style="list-style-type: none"> • Define harm/risk Reduction as it applies to HIV prevention • Explain client/patient-centered harm/risk reduction practices • Discuss what Motivational Interviewing is • Practice Motivational Interviewing for the purposes of harm reduction <p>ARCHIVED TRAINING MODULE</p>
<p><u>Motivational Interviewing to Improve Health Outcomes</u></p>	<ul style="list-style-type: none"> • Explain the importance of engaging in HIV care • Describe tangible forms of support they could provide to a friend or family member living with HIV • Describe intangible forms of support they could provide to a friend or family member living with HIV <p>Offers 1.0 CME/CNE for completion. ONLINE TRAINING MODULE</p>
<p><u>Motivational Interviewing: New Tools for HIV Prevention and Care</u></p>	<ul style="list-style-type: none"> • Name at least three (3) factors that impact behavior change; • List at least four (4) qualities of effective helping relationships; and • Identify at least three (3) core communication skills to enhance readiness to change. <p>ARCHIVED TRAINING PRESENTATION</p>
<p><u>Integrated HIV and Opioid Addiction Treatment with Buprenorphine</u></p>	<p>The Integrated HIV and Opioid Addiction Treatment with Buprenorphine intervention consists of on-site buprenorphine treatment guided by an experienced HIV physician who is trained to incorporate motivational interviewing techniques into routine medical visits to provide substance use behavior counseling. ARCHIVED POWERPOINT PRESENTATION</p>
<p><u>Empowering the Care Team to Collaboratively Address Treatment Resistance with Their Care Team</u></p>	<p>This webinar is primarily for people living with HIV (PLWH) , and will provide guidance on improving communications between patients and their care team to address HIV treatment resistance and adherence challenges. We will focus on the importance of building relationships and encouraging healthy communication within the care team and empowering patients to address adherence concerns with motivational interviewing techniques. Participants will hear presentations from community-advocates, a peer navigator, and a professional health educator. ARCHIVED TRAINING MODULE</p>

GRANT WRITING AND FUNDING SOURCES

RESOURCE

KEY TOPICS COVERED

5.1 On-demand and live trainings/resources to improve grant writing skills

**The Grant Writing Process:
Writing a work plan that
works**

- Define a work plan
- Describe the purpose of a work plan
- Identify the components of a SMART objective

*ARCHIVED TRAINING MODULE***Tools and techniques for
successful grant writing**

- List the steps involved in the grant writing process
- Identify components of a grant proposal
- Draft objectives for a potential grant proposal
- Recognize common pitfalls in the grant writing process

*ARCHIVED TRAINING MODULE***Grant Writing Series for
Maryland Providers**

This training provides insightful guidance on the elements of grant writing for local, state, federal, private, and not-for-profit funding opportunities. This training will help to ensure that your proposal stands out from competitors by addressing questions about key components of an application. *ARCHIVED*

*TRAINING MODULE***Sharing your success through
narrative reporting**

Narrative reporting is an essential component of the grant writing experience. Project officers often require this report quarterly and annually. Reporting honestly allows transparency throughout the duration of the grant. This presentation will review each component of narrative reporting and help participants to hone their respective skills in practice. *ARCHIVED TRAINING*

MODULE

5.2 Public funding opportunities for providing HIV/HCV prevention and treatment services to PEH. Potential sources of funding for mobile health clinic.

Fondation de France

Documentation Needed Includes:

- Proof of charitable or not-for-profit status
- Information about your fundraising in the United States

*FUNDING RESOURCE***Gilead Sciences, Inc**

Gilead welcomes funding requests for innovative, high impact projects that relate to at least one of our core therapeutic areas: HIV, HCV. *FUNDING*

*RESOURCE***Until There's A Cure
Foundation**

Until There's A Cure is not currently issuing a general Call for Grant Proposals. Please contact us at 650-332-3200 or grants@utac.org for information about partnering with Until There's A Cure." *FUNDING RESOURCE*

GRANT WRITING AND FUNDING SOURCES

RESOURCE	KEY TOPICS COVERED
<i>5.2 Public funding opportunities for providing HIV/HCV prevention and treatment services to PEH. Potential sources of funding for mobile health clinic.</i>	
<u>Campbell Foundation</u>	We offer two unsolicited grant cycles per year. The budget for each of our cycles is \$50,000. Individual grants will vary in size, but will be no greater than \$25,000. <i>FUNDING RESOURCE</i>
<u>ViiV Healthcare-”Positive Action Community Grant</u>	Organizations applying to Positive Action Community Grants may request funding in the following three categories: <ul style="list-style-type: none"> • General operating support for core support and mission-driven community-based work. • Special events sponsorships for conferences and events that foster networks, create awareness, and amplify the voices of people living with HIV and AIDS. • Project support for organizations implementing innovative projects within ViiV Healthcare’s three focus areas: Linkage and Engagement, Networks for PLWHA or Vulnerable to HIV and for Organizations, and Advocacy. <i>FUNDING RESOURCE</i>
<u>The Morris and Gwendolyn Cafritz Foundation</u>	The Mobilize Power Fund (MPF) is a rapid response fund that resources gender justice organizations met with unanticipated, time-sensitive threats or opportunities in their movement building and organizing. Grants are available for up to \$10,000 (or up to \$20,000 for partnerships or coalitions of two or more groups) on a monthly basis. The MPF prioritizes youth-led and intergenerational groups, nonprofits, coalitions, and efforts in the U.S., regardless of 501(c)3 status or fiscal sponsorship. <i>FUNDING RESOURCE</i>
<u>Comer Family Foundation</u>	We support comprehensive harm reduction programs that improve the health and wellness of people who use drugs. These programs provide free sterile syringes, education, and community wraparound services to reduce opioid overdose and the transmission of HIV and viral hepatitis. <i>FUNDING RESOURCE</i>
<u>Apply to be a test site</u>	\$2,000 Test site requirements: <ul style="list-style-type: none"> • Have knowledge and use of the workflow for testing for HCV infection and either delivering or making referrals for treatment, as well as clinical /EHR documentation of this workflow. • Have prior experience reporting to MIPS or other quality reporting programs. • Have collected data on HCV testing and treatments and/or referrals as part of their clinical workflow and store these data in their EHR, patient charts, or practice management systems. <i>FUNDING RESOURCE</i>

GRANT WRITING AND FUNDING SOURCES

RESOURCE	KEY TOPICS COVERED
5.3 Potential sources of funding for transportation	
<u>Lyft Up</u>	Transportation access programs. TRANSPORTATION FUNDING RESOURCE
<u>AIDS Funding Collaborative</u>	All AFC grants are limited to not-for-profit, tax exempt 501(c)(3) entities that serve Cleveland and Cuyahoga County, Ohio, USA. Organizations and individuals without 501(c)(3) status may apply for funds with the support of another 501(c)(3)-designated entity agreeing to serve as fiscal sponsor. TRANSPORTATION FUNDING RESOURCE
<u>Transportation Assistance Program</u>	Through a network of partners across Maryland, TAP provides reliable used vehicles that will serve eligible low-income families for two years or 24,000 miles TRANSPORTATION FUNDING RESOURCE
<u>Transportation Disadvantaged (TD) Program</u>	The Miami-Dade Transit (MDT) Transportation Disadvantaged (TD) Program is a state-funded program that provides free transportation passes to qualifying Non-Profit Agencies/Programs for use by their Miami-Dade County resident clients who qualify as “Transportation Disadvantaged”. TRANSPORTATION FUNDING RESOURCE
5.4 Cell phone resources for PEH	
<u>Lifeline Program for Low-Income Consumers</u>	The Lifeline program has provided a discount on phone service for qualifying low-income consumers to ensure that all Americans have the opportunities and security that phone service brings, including being able to connect to jobs, family and emergency services. ONLINE RESOURCE
<u>Life Wireless</u>	Offers government assisted wireless services to low income families and individuals in Utah. Qualified customers receive Free cell phone service. ONLINE RESOURCE
<u>EnTouch Wireless</u>	Service Provider for Free Government Phone Service. ONLINE RESOURCE
5.5 Funding resources for HIV/HCV clinical research	
<u>High Priority HIV and Substance Use Research (R01 Clinical Trial Optional)</u>	The goal of this Funding Opportunity Announcement (FOA) is to stimulate high priority research relevant to drug misuse and HIV/AIDS. FUNDING RESOURCE

GRANT WRITING AND FUNDING SOURCES

RESOURCE

KEY TOPICS COVERED

*5.5 Funding resources for HIV/HCV clinical research***Avenir Award Program for Research on Substance Use Disorders and HIV (DP2 Clinical Trial Optional)**

This FOA aims to support a broad spectrum of approaches spanning both basic and clinical research that have the potential to benefit substances using populations with or at risk for HIV. *FUNDING RESOURCE*

AIDS-Science Track Award for Research Transition (R03 Clinical Trial Optional)

This funding opportunity announcement (FOA) seeks to facilitate the entry of both newly independent and early career investigators to the area of drug use and use disorder research and HIV/AIDS. *FUNDING RESOURCE*

**RFA-DA-23-061
NIDA REI: Reaching Equity at the Intersection of HIV and Substance Use: Novel Approaches to Address HIV Related Health Disparities in Underserved Racial and/or Ethnic Populations (R01 Clinical Trial Optional)
(Funding resource)**

This Funding Opportunity Announcement (FOA) is a part of NIDAs Racial Equity Initiative (REI), a multi-year, multi-pronged effort to eliminate racial inequities in NIDAs workplace, scientific workforce, and research portfolio. The purpose of this initiative is to stimulate new observational and intervention research on structural factors, organizational practices, policies, and other social, cultural, and contextual influences that lead to inequities at the intersection of HIV and substance use among underserved racial/ethnic populations affected by persistent HIV disparities. *FUNDING RESOURCE*

DATA COLLECTION / EMR

RESOURCE

KEY TOPICS COVERED

6.1 Model practices and/or data collection templates

EMR Data Collection and Infrastructure Improvement

Positive Health Clinic successfully completed a quality improvement project related to our EMR, EPIC. The focus of this project was streamlining data collection, data utilization, and reporting processes in the EMR. [ONLINE RESOURCE](#)

Leveraging Electronic Health Records to Collect and Integrate Outcomes-Based Data in Care

This workshop will describe how changes to an electronic health record (EHR) can capture programmatic outcomes data to evaluate program effectiveness, the benefits of developing custom tools within EHRs, how these EHR tools were developed, and how they have been integrated into program and evaluation work processes. [ONLINE RESOURCE](#)

6.2 Best practices on supporting clients to maintain documentation, enrollment status, etc.

Develop a comprehensive plan to engage and enroll clients in health coverage and help them stay enrolled.

Organizations should establish and maintain comprehensive policies and procedures that clearly describe their plan for engaging and enrolling clients in health coverage and helping them use their coverage and stay enrolled.

Account Tune-Ups: Getting Ready for Marketplace Open Enrollment

[ONLINE RESOURCE](#)

Train staff with direct client contact to determine eligibility, enroll clients, and help clients maintain coverage.

All staff with direct client contact should be prepared to provide basic information about health coverage options and connect clients to staff or external partners who can provide direct enrollment assistance. HIV programs should provide tailored training to staff on how to determine client eligibility, enroll red to explain Marketplace financial assistance options (e.g., premium tax credits and cost sharing reductions) to clients, as well as information about the potential state-specific tax penalties for not enrolling. Staff should also communicate to clients how the RWHAP may be able to help with insurance and medication costs.

Health Coverage Eligibility Decision Tree
The Basics of Medicare for Ryan White HIV/AIDS Program Clients
Making the Most of Your Coverage

[ONLINE RESOURCE](#)

DATA COLLECTION / EMR

RESOURCE

KEY TOPICS COVERED

6.2 Best practices on supporting clients to maintain documentation, enrollment status, etc.

Assess your work flow to routinely screen clients for eligibility and plan renewals

Clients are most likely to successfully enroll in new coverage when the transition between engagement activities and enrollment support is seamless. Structure clinic workflow to screen clients for changes in eligibility both during routine clinic visits throughout the year and during Marketplace Open Enrollment. This will help ensure clients who are newly eligible for Marketplace coverage or eligible to re-enroll get enrolled promptly, and receive appropriate enrollment assistance. Staff should also routinely screen for RWHAP Part B/ ADAP eligibility.

[E-learning Course: Preparing for Marketplace Open Enrollment \(Nov 1 - Jan 15\)](#)

ONLINE RESOURCE

Develop procedures for eligible clients that do not enroll.

RWHAP recipients must demonstrate vigorous pursuit of enrolling clients in health coverage. Organizations should document their efforts. Clients that are eligible but choose not to enroll should be asked to sign an affidavit saying that they have declined to enroll in coverage. Your local RWHAP Part A or Part B program may have additional or different guidance on how to document “vigorous pursuit.”

[Tracking your Efforts to Engage Clients who Experience Barriers to Enrollment](#)

ONLINE RESOURCE

Tailor messaging and communication appropriately for your client population.

RWHAP clients may have concerns about enrolling in health coverage for many reasons, including fear of sharing their personal information, concerns about stigma and discrimination, and previous negative experiences with the health care system. Given these challenges, trusted RWHAP staff should provide clients with comprehensive information about coverage options using clear, plain language and allow time to listen to and discuss people’s specific concerns.

[Health Coverage Resources for Consumers](#)

[The ABCDs of Medicare Coverage](#)

[Talking with Clients about Health Coverage Common Questions and Suggested Responses](#)

ONLINE RESOURCE

DATA COLLECTION / EMR

RESOURCE

KEY TOPICS COVERED

6.2 Best practices on supporting clients to maintain documentation, enrollment status, etc.

Train staff on health insurance literacy to communicate with clients about how to enroll in health coverage, use their health coverage, and stay covered.

Clients may not understand everything about how health insurance works. Staff with strong health insurance literacy skills who are knowledgeable about key health insurance terms, forms, processes, and instructions will be able to work with clients more effectively and help them to enroll in health coverage, use their health coverage, and stay covered. Staff will also be more prepared to help clients address health insurance-related challenges as they arise, minimize gaps in coverage, and manage potential health and financial challenges.

Health Insurance Literacy Training Module

ONLINE RESOURCE