**Introduction**

This tool is intended to assess readiness to implement various activities that support a whole-person approach to care and service delivery, and help identify gaps and areas of improvement. The activities are aligned with and organized by the six domains of [JSI’s Person-Centered Care (PCC)](https://snapetap.jsi.com/resources/person-centered-care) framework:

1. Service design and delivery
2. Policy and financing
3. Monitoring, learning, and accountability
4. Workforce environment and development
5. Point of care access and experience (client level)
6. Leadership and governance

**Instructions**

1. Organizations should have staff review this tool individually, and then complete it as part of a team discussion.
2. For each domain, review each activity and determine the implementation status for that activity:

The implementing organization (provider/clinic or subrecipient agency):

* Has not started implementing the activity
* Is in the process of implementation and is still refining policies, protocols, and systems
* Has fully operationalized the activity and has policies, protocols, and systems in place to support continuous implementation

And if none of those selections are relevant:

* The activity is not applicable as it is not a goal or intended activity for the jurisdiction
1. Mark your response in the corresponding box with an ✖️. Select only one response per row.
2. Upon completion of each domain, document themes, strengths, barriers, and facilitators for that section.
3. Upon completion of the entire document, an organization will have the necessary information to complete Section 4 of the Baseline Needs Assessment Landscape Analysis.

**SESSION INFORMATION**

|  |  |
| --- | --- |
| **Date** |  |
| **HRSA-funded jurisdiction**  |  |
| **Provider/subrecipient** |  |
| **Participants** | Name(s): | Role(s): |

| **Activity**  | **Have not started**  | **In progress**  | **Fully operationalized/ Implemented[[1]](#footnote-1)** | **N/A[[2]](#footnote-2)** | **Comments** |
| --- | --- | --- | --- | --- | --- |
| **DOMAIN A: SERVICE DESIGN AND DELIVERY**   |
| A1. Engaged community members and other stakeholders to inform the proposed whole-person approach  |  |  |  |  |  |
| A2. Mapped whole-person care and services to funded programs  |  |  |  |  |  |
| A3. Mapped whole-person care and services to existing services and partners  |  |  |  |  |  |
| A4. Documented (either graphically or in writing) a whole-person approach/framework  |  |  |  |  |  |
| A5. Have established systems to obtain ongoing feedback from community members and other stakeholders related to whole-person service implementation  |  |  |  |  |  |
| A6. Established partnership agreements to promote and expand the delivery of whole-person care and services  |  |  |  |  |  |
| A7. Implemented whole-person marketing, outreach, or awareness campaigns/events that support rebranding and destigmatization of HIV prevention services  |  |  |  |  |  |
| **DOMAIN A: SERVICE DESIGN AND DELIVERY**  **COMMENTS**  | *Comments:* |
| **DOMAIN B: POLICY AND FINANCING**  |
| B1. Contract language incorporates whole-person language  |  |  |  |  |  |
| B2. Funding opportunities incorporate whole-person language  |  |  |  |  |  |
| B3. Workflows and standard operating procedures support implementation of whole-person care and services |  |  |  |  |  |
| B4. Identified funding sources to support whole-person care and services  |  |  |  |  |  |
| **DOMAIN B: POLICY AND FINANCING** **COMMENTS**  | *Comments:* |
| **DOMAIN C: MONITORING, LEARNING, AND ACCOUNTABILITY**  |
| C1. Established data sharing agreements with partners to document client receipt of whole-person care and services *Not limited to RWHAP clients, also clients with negative HIV test* |  |  |  |  |  |
| C2. Existing staff have participated in education and skills building opportunities specific to whole-person care and service delivery |  |  |  |  |  |
| C3. Established systems/processes to assess client satisfaction with whole-person care and service delivery  |  |  |  |  |  |
| C4. Evaluate whole-person care and service delivery to demonstrate effectiveness  |  |  |  |  |  |
| C5. Systems/processes are in place to document that clients have accessed sexual health services[[3]](#footnote-3) delivered internally |  |  |  |  |  |
| C6. Systems/processes are in place to document that clients have accessed sexual health services delivered through referrals  |  |  |  |  |  |
| C7. Systems/processes are in place to document that clients have accessed support services[[4]](#footnote-4) delivered internally |  |  |  |  |  |
| C8. Systems/processes are in place to document that clients have accessed support services delivered through referrals  |  |  |  |  |  |
| **DOMAIN C: MONITORING, LEARNING, AND ACCOUNTABILITY** **COMMENTS**  | *Comments:* |
| **DOMAIN D: WORKFORCE ENVIRONMENT AND DEVELOPMENT**  |
| D1. Positions developed/repurposed to provide services through a whole-person approach |  |  |  |  |  |
| D2. Established job descriptions for navigator/non-medical case manager (NMCM)/community health worker (CHW) roles  |  |  |  |  |  |
| D3. Hired navigators/NMCMs/CHWs with lived experience  |  |  |  |  |  |
| D4. Navigators/NMCMs/CHWs onboarded and trained  |  |  |  |  |  |
| D5. Navigators/NMCMs/CHWs receive supervision and mentoring  |  |  |  |  |  |
| **DOMAIN D: WORKFORCE ENVIRONMENT AND DEVELOPMENT** **COMMENTS**  | *Comments:* |
| **DOMAIN E: POINT OF CARE ACCESS AND EXPERIENCE**  |
| E1. Intake process established to collect demographics and health history for all clients  |  |  |  |  |  |
| E2. Aligned with a whole-person approach, staff conduct an assessment to identify client sexual health and social service needs |  |  |  |  |  |
| E3. Aligned with a whole-person approach, staff establish care plans for clients with a negative HIV test result  |  |  |  |  |  |
| ***\*See Appendix A to complete E4 and E5.*** |
| E4. Aligned with a whole-person approach, sexual health services for clients with a negative HIV test result are delivered onsite/internally OR clients are referred to external partners to receive services  |  |  |  |  |  |
| E5. Aligned with a whole-person approach, support services for clients with a negative HIV test result are delivered onsite/internally - or clients are referred to external partners  |  |  |  |  |  |
| E6. Processes for linkage to sexual health services following an assessment are followed  |  |  |  |  |  |
| E7. Processes for linkage to PrEP following an assessment are followed  |  |  |  |  |  |
| E8. Processes for linkage to nPEP following an assessment are followed |  |  |  |  |  |
| E9. Clients are linked to care within [time frame[[5]](#footnote-5)] following a positive HIV test result  |  |  |  |  |  |
| E10. Processes for linkage to support health services following an assessment are followed |  |  |  |  |  |
| E11. Services (describe) are integrated under the whole-person approach  |  |  |  |  |  |
| E12. Rebranded and/or marketed service sites to reflect availability of culturally responsive sexual health, behavioral health, harm reduction, and/or support services  |  |  |  |  |  |
| **DOMAIN E: POINT OF CARE ACCESS AND EXPERIENCE** **COMMENTS**  | *Comments:* |
| **DOMAIN F: LEADERSHIP AND GOVERNANCE**  |
| F1. Established leadership engagement and buy-in for whole-person approach |  |  |  |  |  |
| F2. Able to navigate institutional systems to support implementation of whole-person care and services |  |  |  |  |  |
| F3. Able to navigate local government systems to support implementation of whole-person services |  |  |  |  |  |
| **DOMAIN F: LEADERSHIP AND GOVERNANCE** **COMMENTS**  | *Comments:* |

**APPENDIX A**

**READINESS TOOL WORKSHEET - SEXUAL HEALTH AND SUPPORT SERVICE PROVISION**

**Introduction**

This worksheet accompanies and supplements the SNAP ETAP Readiness Tool to allow organizations to document details about the delivery of sexual health and support services see E4 and E5 , and help identify gaps and areas of improvement.

**Instructions**

1. For each service, indicate with a check mark in the corresponding box:
	1. Whether the service is delivered onsite/internally[[6]](#footnote-6), or if clients are referred to external partners
	2. Only select one cell per row unless services are delivered both internally AND via partner referral
2. Mark your response in the corresponding box with an ✖️.

**READINESS TOOL WORKSHEET - SEXUAL HEALTH AND SUPPORT SERVICE PROVISION**

|  |  |
| --- | --- |
| **Date** |  |
| **HRSA-funded jurisdiction**  |  |
| **Provider/subrecipient** |  |
| **Participants** | Name(s): | Role(s): |

|  |
| --- |
| **DOMAIN E: POINT OF CARE ACCESS AND EXPERIENCE**  |
| E4. Aligned with a whole-person approach, the **sexual health services for clients with a negative HIV test result** listed below are delivered onsite/internally OR clients are referred to external partners to receive services  |
| **Service**  | **Have not started providing the service** | **Deliver the service ONSITE/INTERNALLY** | **Refer to EXTERNAL PARTNERS for service provision** | **N/A[[7]](#footnote-7)** |
| In progress - provide services internally and still refining policies, protocols, and systems | Service is fully implementedand policies, protocols, and systems are in place to sustain service delivery | In progress - have initiated partnership and still refining policies, protocols, and systems | Partnership is fully establishedand policies, protocols, and systems are in place to sustain partnership and service delivery |
| 1. HIV testing
 |  |  |  |  |  |  |
| 1. PrEP
 |  |  |  |  |  |  |
| 1. nPEP
 |  |  |  |  |  |  |
| 1. STI testing
* Chlamydia
* Gonorrhea
* Syphilis
 |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Service**  | **Have not started providing the service** | **Deliver the service ONSITE/INTERNALLY** | **Refer to EXTERNAL PARTNERS for service provision** | **N/A[[8]](#footnote-8)** |
| In progress - provide services internally and still refining policies, protocols, and systems | Service is fully implementedand policies, protocols, and systems are in place to sustain service delivery | In progress - have initiated partnership and still refining policies, protocols, and systems | Partnership is fully establishedand policies, protocols, and systems are in place to sustain partnership and service delivery |
| 1. STI treatment
* Chlamydia
* Gonorrhea
* Syphilis
 |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| 1. Expedited partner therapy
* Chlamydia
* Gonorrhea
 |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| 1. DoxyPEP
 |  |  |  |  |  |  |
| 1. Viral hepatitis testing
* Hepatitis B (HBV)
* Hepatitis C (HCV)
 |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| 1. Viral hepatitis vaccination
* Hepatitis A (HAV)
* HBV
* HCV
 |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| 1. Mpox testing
 |  |  |  |  |  |  |
| **Service**  | **Have not started providing the service** | **Deliver the service ONSITE/INTERNALLY** | **Refer to EXTERNAL PARTNERS for service provision** | **N/A[[9]](#footnote-9)** |
| In progress - provide services internally and still refining policies, protocols, and systems | Service is fully implementedand policies, protocols, and systems are in place to sustain service delivery | In progress - have initiated partnership and still refining policies, protocols, and systems | Partnership is fully establishedand policies, protocols, and systems are in place to sustain partnership and service delivery |
| 1. Mpox vaccination
 |  |  |  |  |  |  |
| 1. Sexual health education
 |  |  |  |  |  |  |
| 1. Risk reduction interventions
 |  |  |  |  |  |  |
| **Comments and/or provision of other sexual health services for people with a negative HIV test result:**  |
| E5. Aligned with a whole-person approach, the **support services for clients with a negative HIV test result** listed below are delivered onsite/internally - or clients are referred to external partners  |
| **Service**  | **Have not started providing the service** | **Deliver the service ONSITE/INTERNALLY** | **Refer to EXTERNAL PARTNERS for service provision** | **N/A[[10]](#footnote-10)** |
| In progress - provide services internally and still refining policies, protocols, and systems | Service is fully implementedand policies, protocols, and systems are in place to sustain service delivery | In progress - have initiated partnership and still refining policies, protocols, and systems | Partnership is fully establishedand policies, protocols, and systems are in place to sustain partnership and service delivery |
| 1. Reproductive health services
 |  |  |  |  |  |  |
| 1. Housing services
 |  |  |  |  |  |  |
| 1. Mental health services
 |  |  |  |  |  |  |
| 1. Substance use services
 |  |  |  |  |  |  |
| 1. Harm reduction services (e.g., overdose prevention, harm reduction supplies, wound care supplies) Describe:
 |  |  |  |  |  |  |
| **Service**  | **Have not started providing the service** | **Deliver the service ONSITE/INTERNALLY** | **Refer to EXTERNAL PARTNERS for service provision** | **N/A[[11]](#footnote-11)** |
| In progress - provide services internally and still refining policies, protocols, and systems | Service is fully implementedand policies, protocols, and systems are in place to sustain service delivery | In progress - have initiated partnership and still refining policies, protocols, and systems | Partnership is fully establishedand policies, protocols, and systems are in place to sustain partnership and service delivery |
| 1. Syringe services programs
 |  |  |  |  |  |  |
| 1. Transportation services
 |  |  |  |  |  |  |
| 1. Food assistance
 |  |  |  |  |  |  |
| 1. Insurance navigation
 |  |  |  |  |  |  |
| 1. Gender affirming services
 |  |  |  |  |  |  |
| 1. Intimate partner violence prevention
 |  |  |  |  |  |  |
| 1. Oral health services
 |  |  |  |  |  |  |
| 1. Legal aid
 |  |  |  |  |  |  |
| 1. Translation/

linguistic services |  |  |  |  |  |  |
| **Service**  | **Have not started providing the service** | **Deliver the service ONSITE/INTERNALLY** | **Refer to EXTERNAL PARTNERS for service provision** | **N/A[[12]](#footnote-12)** |
| In progress - provide services internally and still refining policies, protocols, and systems | Service is fully implementedand policies, protocols, and systems are in place to sustain service delivery | In progress - have initiated partnership and still refining policies, protocols, and systems | Partnership is fully establishedand policies, protocols, and systems are in place to sustain partnership and service delivery |
| 1. Emergency financial assistance
 |  |  |  |  |  |  |
| 1. Employment services
 |  |  |  |  |  |  |
| 1. Education services
 |  |  |  |  |  |  |
| **Comments and/or provision of other support services services for people with a negative HIV test result:**  | *Comments:* |

|  |  |
| --- | --- |
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1. Policies, protocols, and systems are in place to support continuous implementation [↑](#footnote-ref-1)
2. Not a goal or intended activity for the jurisdiction [↑](#footnote-ref-2)
3. See E4 and supplemental worksheet (Appendix A) for list of sexual health services; for this activity, there may be multiple responses depending on the services - add any notes as needed. [↑](#footnote-ref-3)
4. See E5 and supplemental worksheet (Appendix A) for list of support services; for this activity, there may be multiple responses depending on the services - add any notes as needed. [↑](#footnote-ref-4)
5. Confirm Rapid Start time frame or 30 days, whichever is shorter [↑](#footnote-ref-5)
6. Onsite/internally is within the HRSA-funded recipient or subrecipient agency; external partners are outside of the recipient/subrecipient

organizations/systems [↑](#footnote-ref-6)
7. Not a goal or intended activity for the jurisdiction [↑](#footnote-ref-7)
8. Not a goal or intended activity for the jurisdiction [↑](#footnote-ref-8)
9. Not a goal or intended activity for the jurisdiction [↑](#footnote-ref-9)
10. Not a goal or intended activity for the jurisdiction [↑](#footnote-ref-10)
11. Not a goal or intended activity for the jurisdiction [↑](#footnote-ref-11)
12. Not a goal or intended activity for the jurisdiction [↑](#footnote-ref-12)