

Handout 1: Developing Measures for the 2027-2031 Plan

Performance Measures

- Help evaluate the efficiency and effectiveness of strategies or programs. Can help assess progress, identify areas for improvement, and track outcomes against predetermined goals and objectives.
- May need multiple performance measures for a specific objective or activity.
- How can we assess whether we're making progress?
 - How much did we do?
 - How well did we do it?
 - What difference did it make? What's the outcome?
- Note: There may be performance measures where it's difficult to collect the data. DPH can help us identify data challenges and solutions, depending on the measures we select.

Example of Performance Measures for the 2027-2031 Plan

Pillar: Prevent

Goal: Prevent new HIV transmissions

Objective 1: Increase the PrEP-to-Need Ratio (PnR) to 36 by 2031.

Key Activities/Strategies:

- Conduct trainings to increase provider capacity to offer PrEP navigation
- Conduct at least one coordinated statewide public awareness campaign on PrEP
- Support initiation of quality improvement projects that improve PrEP uptake for populations with lower PnRs, and share promising practices across providers

Responsible Parties: CT DPH, Training Partners, CHPC / PACE Committee

Key Partners: HIV providers, healthcare providers, pharmacies

Performance Measures:

- # PrEP trainings, # staff participating in PrEP trainings
- # "impressions" from public awareness campaign
- # people screened for PrEP, # screened by race/ethnicity and sex
- # PrEP users, # by race / ethnicity and sex
- PrEP-to-Need Ratio, PnR by race / ethnicity and sex

Progress towards national HIV goals: Increase PrEP access to prevent new HIV infections.

Handout 2: Current Plan Indicators to Consider

At our February meeting, QPM members voted on which indicators from our current Plan we should include as performance measures in the 2027-2031 Plan. The results were:

Measure	Percent Voting to Include in 2027-2031 Plan
Number of people newly diagnosed with HIV	72%
Disparities in viral load suppression rates	61%
Disparities in new diagnoses	50%
Number of newly diagnosed chronic Hepatitis C infections	39%
Percent of PWH (people with HIV) aware of their status	39%
Percent of late testers	28%
The percentage of newly diagnosed clients interviewed by DIS (Disease Intervention Specialists)	28%
Number of syphilis cases	22%
Number of overdose deaths	17%

We can consider these measures when brainstorming performance measures to include in the new Plan (se Handout 3 for examples).

Overarching Goal	Pillar Goal	Objectives
<p>End the HIV epidemic in Connecticut</p> <p>Eliminate HIV-related health disparities</p> <p>Expand use of syndemic strategies:</p> <p>HIV</p> <p>STD</p> <p>HCV</p> <p>SUD</p>	<p>PREVENT new HIV transmissions</p>	<p>P1. Increase the PrEP-to-Need Ratio (PNR) to 36 by 12/2031</p> <p>P2. Increase the number of individuals accessing Syringe Services Programs (SSP) to 11,000 by 12/2031</p> <p>P3. Increase condom distribution statewide by 10% by 12/2031</p>
	<p>DIAGNOSE all people with HIV as soon as possible</p>	<p>D1. Increase HIV/HCV testing in clinical settings by ##% by 12/2031</p> <p>D2. Increase HIV testing in non-clinical settings by ##% by 12/2031</p> <p>D3. Develop an approach to assess and analyze statewide HIV testing volume by 12/2031</p>
	<p>TREAT people with HIV rapidly and effectively to achieve viral suppression</p>	<p>T1. Newly diagnosed PWH who attend a routine care visit within 1 month of diagnosis increases to 95% by 12/2031</p> <p>T2. Newly diagnosed PWH who receive Antiretroviral Therapy (ART) within 30 days of diagnoses increases to 95% by 12/2031</p> <p>T3. Achieve viral load suppression for 95% of all PWH by 12/2031</p>
	<p>RESPOND to disease outbreaks and disparities</p>	<p>R1. Update syndemic outbreak and response plans annually</p> <p>R2. Analyze surveillance data monthly to identify syndemic and single disease condition transmission clusters and outbreaks (monthly, ongoing)</p> <p>R3. Provide resources and tools to ## communities with high area deprivation index (ADI) scores to detect and respond to syndemic outbreaks</p> <p>R4. Disease Intervention Specialists or Partner Services contact 85% of newly diagnosed HIV positive individuals to engage them in Partner Services</p>

PREVENT new HIV transmissions		Number of people newly diagnosed with HIV (indicator)
Objective P1. Increase the PrEP-to-Need Ratio (PNR) to 36 by 12/2031		
Sample Activities	Sample Measure	Other Measures to Consider?
Establish a PrEP and PEP Drug Assistance Program (PrEP DAP)	# individuals accessing PrEP/PEP DAP	
Coordinate and support pilot projects that focus on PrEP uptake	PNR for priority population reaches 36	Disparities in new diagnoses (indicator)
Deliver provider education and training on PrEP, PEP, DoxyPEP and co-infections and implications	# providers attending training	
Coordinate at least one statewide public awareness campaign to increase PrEP and PEP uptake	# impressions	
Objective P2. Increase the number of individuals accessing Syringe Services Programs (SSP) to 11,000 by 12/2031		
Sample Activities	Sample Measure	Other Measures to Consider?
Distribute 2.4 million syringes annually through SSPs to ensure adequate access	# syringes distributed	
Connect HIV prevention partners with opioid overdose prevention partners	Group or process to facilitate collaboration	
Coordinate at least one statewide public awareness campaign focused on syndemic connection	# residents reached	Number of newly diagnosed chronic Hepatitis C infections (indicator) Number of syphilis cases (indicator)
Objective P3. Increase condom distribution statewide by 10% by 12/2031		
Sample Activities	Sample Measure	Other Measures to Consider?
Provide sexual health education that includes the use of condoms	# events	
Distribute condoms locally to individuals and community partners	# condoms distributed annually	

DIAGNOSE all people with HIV as soon as possible		
Objective D1. Increase HIV/HCV testing in clinical settings by ##% by 12/2031		
Sample Activities	Sample Measure	Other Measures to Consider?
Coordinate a statewide campaign to increase awareness of routine HIV and HCV testing	Campaign completed	
Academic detailing program for providers to expand syndemic screening and routine testing	# providers / leaders detailed	
Implement a process to analyze late tester data and identify facilities for routine testing education	Plan completed	Percent of late testers (indicators)
Objective D2. Increase HIV testing in non-clinical settings by ###% by 12/2031		
Sample Activities	Sample Measure	Other Measures to Consider?
Increase HIV and HCV testing in outreach settings	# HIV and HCV tests in outreach settings	Percent of PWH (people with HIV) aware of their status (indicator)
Increase HIV and HCV testing in SSPs	# SSP clients receiving HIV and HCV test	
Expand at-home or self-testing	# kits distributed	
Objective D3. Develop an approach to assess and analyze statewide HIV testing volume by 12/2031		
Sample Activities	Sample Measure	Other Measures to Consider?
Develop and pilot methodology for analyzing HIV negative lab tests	Presentation / briefing memo	
Develop or revise statewide Plan indicators in response to new data sets	Establishment of baseline and goals	
Use data to inform / adjust Objectives D1, D2, and respond pillar	Integration of information into processes	

TREAT people with HIV rapidly and effectively to achieve viral suppression		
Objective T1. Newly diagnosed PWH who attend a routine care visit within 1 month of diagnosis increases to 95% by 12/2031		
Sample Activities	Sample Measure	Other Measures to Consider?
Link newly diagnosed individuals to care within 30 days	# days linked to care	
Refer all newly diagnosed PWH to Partner Services within 30 days	# Partner Services referrals	
Objective T2. Newly diagnosed PWH who receive Antiretroviral Therapy (ART) within 30 days of diagnoses increases to 95% by 12/2031		
Sample Activities	Sample Measure	Other Measures to Consider?
Increase number of newly diagnosed PWH receiving ART within 7 days	# newly diagnosed receiving ART within 7 days	
Develop and maintain a list of pharmacies trained in receiving newly diagnosed PWH to improve medication access and adherence	List created	
Objective T3. Achieve viral load suppression for 95% of all PWH by 12/2031		
Sample Activities	Sample Measure	Other Measures to Consider?
Develop mechanism for providers to work with CT DPH to re-engage out-of-care patients	# clients re-engaged in care	
Implement quality improvement projects that address viral suppression in youth and unstably housed	Viral suppression rates for youth, unstably housed	Disparities in viral load suppression rates (indicator)
Implement academic detailing regarding viral suppression for non-RW providers	# sessions	

Pillar 4. Respond to disease outbreaks and disparities		
Objective R1. Update syndemic outbreak and response plans annually		
Sample Activities	Sample Measure	Other Measures to Consider?
Engage stakeholders to review current outbreak response and communication plans (e.g., HIV, Hepatitis, STDs, Overdose) and provide input on any proposed adjustments	# meetings	
Disseminate information on Plan, response trigger thresholds, best practices and resources	Plan and digital resources available on web	
Objective R2. Analyze surveillance data monthly to identify syndemic and single disease condition transmission clusters and outbreaks (monthly, ongoing)		
Sample Activities	Sample Measure	Other Measures to Consider?
Use cross-matching registries, review outbreak thresholds, and develop recommendations for use of additional predictive modeling methodologies	Data sharing agreements	
Use molecular epidemiology integration (HIV/HCV sequence data) to identify rapid-transmission clusters	Protocols, consultations	
Develop pathway and protocols for community partners to identify pre-clusters or emerging outbreaks	# 1:1 consultations	
Objective R3. Provide resources and tools to ### communities with high area deprivation index (ADI) scores to detect and respond to syndemic outbreaks		
Sample Activities	Sample Measure	Other Measures to Consider?
Facilitate education sessions or community consultations on the use of ADI and other predictive modeling methodologies	# events, # participants	
Provide resources, tools, and activities to improve access to statewide and local syndemic referral networks – including use of mobile units	Regional networking events	
Objective R4. Disease Intervention Specialists or Partner Services contact 85% of newly diagnosed HIV positive individuals to engage them in Partner Services		
Sample Activities	Sample Measure	Other Measures to Consider?
Conduct monthly meetings with HIV Prevention and Surveillance to monitor surveillance and investigation activities	# meetings	
DIS contact newly diagnosed individuals to engage them and their partners in services including education, testing, and treatment	# of contacts made	The percentage of newly diagnosed clients interviewed by DIS (indicator)