



HRSA/HAB
Special Projects of National Significance
(SPNS)

Cross-Cutting Evaluation Centers
for the Cooperative Agreement
Projects

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Overview

- HIV/AIDS Bureau, HRSA
- Special Projects of National Significance
- Why Evaluate?
- HIV/AIDS Bureau Evaluation Questions
- Past and Current SPNS Evaluation Centers
- The Role of Evaluation Centers with Grantees



HIV/AIDS Bureau, HRSA

- ❑ Administers the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act
- ❑ \$1.6 Billion (FY 2000) Public Health Program
- ❑ Mission: to Improve the Availability and Quality of HIV Care



Ryan White CARE Act Programs

- ❑ Division of Service Systems
Titles I, II, and the ADAP Programs
- ❑ Division of Community-Based Programs
Titles III, IV and the HIV/AIDS Dental Reimbursement Program
- ❑ Division of Training and Technical Assistance
AIDS Education & Training Center (AETC)
- ❑ Office of Science and Epidemiology
Evaluation, Epidemiology, Data, SPNS Program



Goals of Special Projects of National Significance (SPNS)

- ❑ Fund innovative models of care, and support the development of effective delivery systems of HIV care and services
- ❑ Advance knowledge and skills in the delivery of health and support services to underserved populations diagnosed with HIV infection
- ❑ Disseminate SPNS findings to improve CARE Act program development and implementation



Sustainability of Funding

- ❑ 99 percent of the SPNS-funded initiatives have received Federal, state and/or local dollars to *continue* the interventions initiated under the SPNS service demonstration grants.
- ❑ 62 percent of the SPNS projects have continued to receive funds *through the CARE Act* to continue interventions initiated under SPNS grants.



Why Evaluate?

- ① Refine and strengthen service delivery
- ② Answer questions about the most useful, appropriate, and efficient means of providing services
- ③ Increase awareness of the needs and experiences of client populations, and suggest practical solutions to meet the needs of these populations
- ④ Develop information to influence and support program policy and funding decisions



Draft HAB Evaluation Questions

Are programs:

- ① Assessing Unmet Need?
- ② Removing Barriers to Care?
- ③ Optimizing Local Service Delivery Systems?
- ④ Providing Quality Care?
- ⑤ Adapting to Change?



Assessing Unmet Need

- To what extent are CARE Act grantees and Title I and II providers identifying HIV-infected populations not in primary health care (not accessing available services)?
- To what extent are grantees identifying HIV-infected populations not remaining in primary health care and the reasons for this lack of continued service utilization?



Removing Barriers to Care

- Are grantees determining the specific reasons why individuals are not in care and removing barriers to their care?
- What are grantees and their providers doing to enroll and retain identified underserved populations in primary health care?



Optimizing Local Service Delivery Systems

- Have CARE Act grantees
 - identified the most effective combinations or models of integrated services
 - that improve the use of primary health care,
 - taking into account the characteristics of local health care delivery systems and affected populations?



Providing Quality Care

- To what extent are CARE Act grantees and their providers providing quality care to clients as defined by Public Health Service and other care standards?
 - Is this care having optimal effects on morbidity and mortality?
 - Is it improving health-related quality of life?



Adapting to Change

- To what extent are CARE Act grantees
 - adapting their service priorities and allocations
 - to a changing and sometimes chaotic health delivery and reimbursement environment?



Evaluation Center, 1994-99

- The Measurement Group; types of projects overseen:
 - Comprehensive Primary Care Service Delivery Issues
 - Capitated reimbursement systems for HIV
 - Coordinated care systems
 - Rural continuum of care
 - Service delivery models for women
 - Youth outreach
 - Reduction of Barriers to Care
 - Active substance abusers
 - Linguistic and cultural barriers facing ethnic groups
 - Underserved population groups
 - Provider Training and Education
 - Corrections, mental health, and rural providers



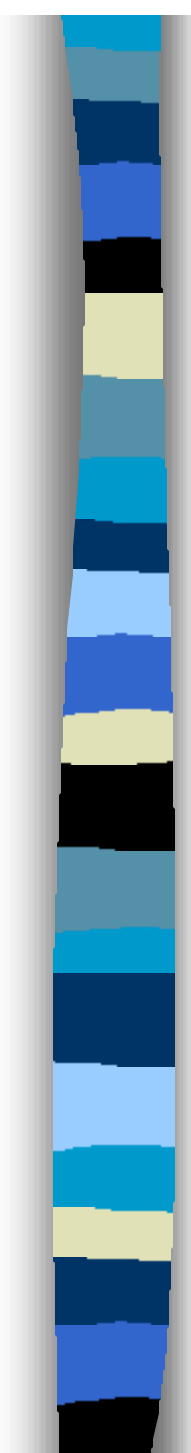
Current SPNS Evaluation Centers

- **Columbia University**
 - Integrated Services Delivery/Multiple Diagnoses
 - Palliative Care/End of Life Treatment
- **New York Academy of Medicine**
 - Adherence to Antiretroviral Therapies
- **Emory University**
 - Corrections/Incarcerated Populations
 - Prevention for HIV-Infected People
- **University of Oklahoma**
 - Advancement of HIV Service Innovation along the US-Mexico Border



The Centers Coordinate Evaluation Activities with Grantees

- seek to reach agreement on evaluation goals and questions
 - wherever possible, work with similar projects to incorporate standardized process and outcome measures into their site-specific evaluation plans
- standardize data collection instruments
 - identify common data elts. for multi-site evaluation
 - create common codes for data values
- develop protocols for submission of data to the evaluation center
- assure the quality of submitted data



The Centers Coordinate the Dissemination of Results

- With grantees and HRSA, coordinate
 - data confidentiality
 - data ownership and data sharing issues
 - sequence of release of dissemination products
 - protocols for the dissemination of findings
 - authorship issues
- Assess policy implications of study findings
 - produce report with policy recommendations

HRSA HIV/AIDS Services

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TOPICS OF NOTE...

[HAB State Profiles](#)

[Grantee MIS Resources](#)

[Congressional Black Caucus Initiative](#)

[Reauthorization](#)

[Satellite Broadcast February 24](#)



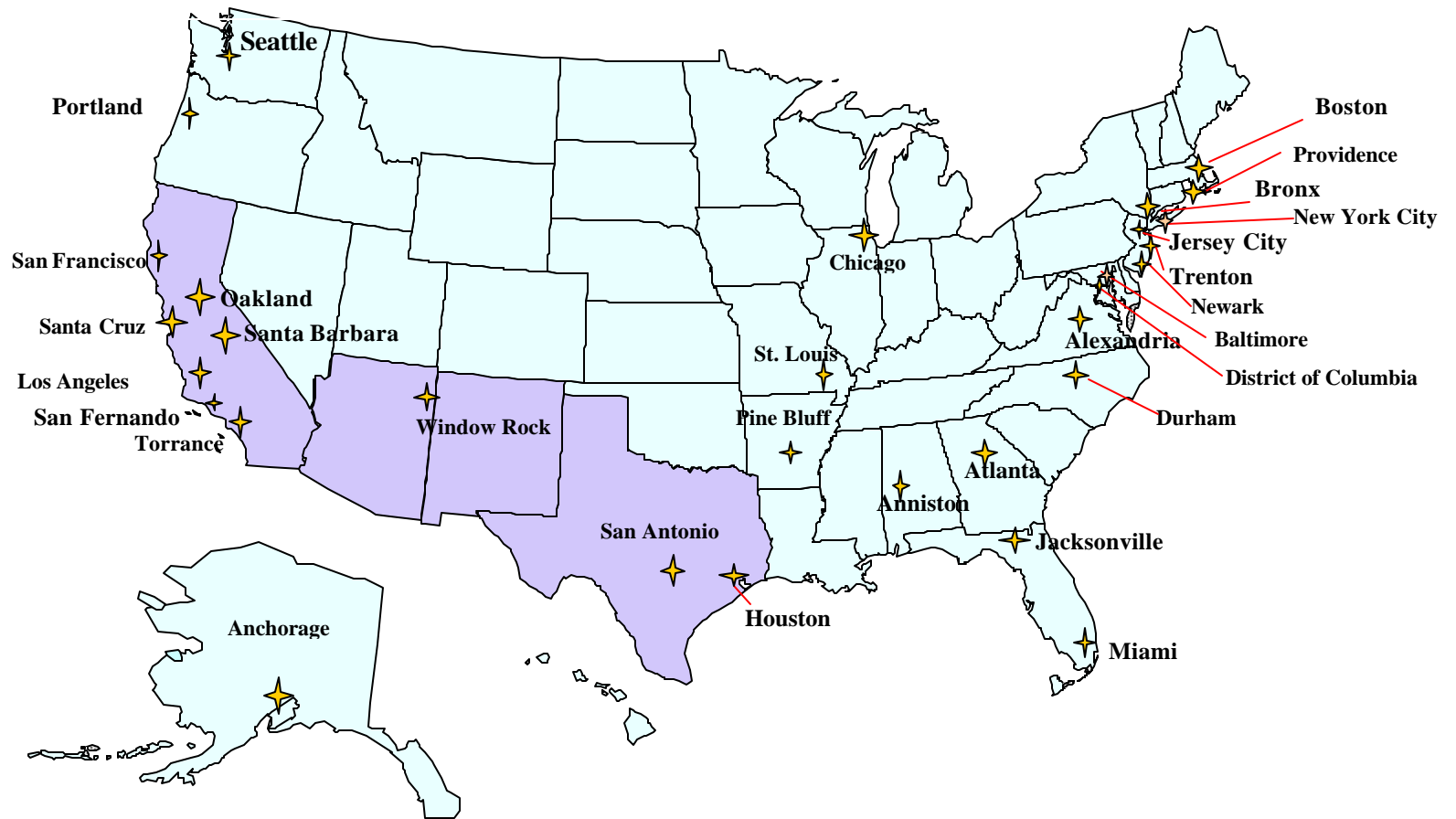
**Enter 1999 AAR
Data on the Web!**

<http://www.hrsa.gov/hab/evaluation2c.html>



Special Projects of National Significance Sites

FY 2000



There are currently 87 SPNS projects, however the number of points on this map is less than 87 since there is more than one SPNS activity in some cities.