**Attachment 3 – Work Plan**

***SUMMARY***

**RFA #20547**

PROJECT NAME: **Ending the Hepatitis C Epidemic Utilizing Community Mobilization**

**(Resolicitation of RFA #20309, Component A)**

CONTRACT PERIOD: From: February 1, 2026

 To: June 30, 2029

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| PROJECT SUMMARY:The Ending the Hepatitis C Epidemic Utilizing Community Mobilization - Reissue initiative seeks to develop a statewide network of HCV elimination coalitions in each of region of the state, including New York City This initiative aims to move New York State towards a state where hepatitis C is no longer a public health problem and the inequities faced by those living with hepatitis C are eliminated.This will be accomplished by engaging stakeholders, including persons impacted by hepatitis C and supporting community mobilization efforts that will:1. increase community education and awareness of hepatitis C prevention, testing, and linkage to hepatitis C care and treatment;
2. raise public support to advance hepatitis C elimination;
3. establish regional hepatitis C elimination coalitions;
4. coordinate regional community action planning to advance the New York State hepatitis C elimination plan; and
5. educate government policy makers.
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Instructions: For the SFS **Work Plan Project Summary**, applicants are instructed to insert the Project Summary as it is listed above. Any additional Project Summary entered in this area will not be considered or scored by reviewers of your application.

Funded applicants will be held to the Objective, Tasks and Performance Measures as listed in Attachment 3: Work Plan. Applicants are not required to enter any Objectives, Tasks or Performance Measures into the SFS Work Plan.

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| OBJECTIVE | TASKS | PERFORMANCE MEASURES |
| 1:Increase community-level hepatitis C awareness and knowledge. | * 1. Disseminate hepatitis C information, education and materials addressing hepatitis C, prevention, testing, treatment, risk and harm reduction, reinfection and health promotion.
 | * + 1. Hepatitis C educational materials are readily available.
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| * 1. Promote local hepatitis C prevention, testing and treatment services.
 | * + 1. A mechanism for disseminating information is in place (i.e. List-serve, newsletter, social media, etc.).
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| 2:Mobilize community support for hepatitis C elimination. | * 1. Engage regional constituents, including people with lived experience of hepatitis C, community stakeholders and organizations to garner support for hepatitis C elimination efforts.
 | * + 1. N/A
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| * 1. Plan and host one-community wide hepatitis C event each year to promote HCV prevention, testing, linkage to care and treatment.
 | * + 1. At least one community-wide hepatitis C event is held annually.
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| OBJECTIVE  | TASKS | PERFORMANCE MEASURES  |
| 3: Establish and maintain a regional hepatitis C elimination coalition. | 1. Establish relationships with and recruit hepatitis C service organizations and community members impacted by hepatitis C.
 | 1. A regional hepatitis C coalition is established by end of year 1 and maintained throughout the contract.
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| 1. Define coalition structure and group process including:

- Mission;- Vision;- Membership and member expectations;- Meeting location, frequency and structure; and- Communication structure and methods. | 1. A 1-page summary description of the coalition is reviewed annually.
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| 1. Coordinate regular coalition meetings (at least quarterly)
 | * + 1. Meeting minutes and attendance are maintained.
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| 1. Work with other existing local/regional coordinating and community planning bodies such as Ending the Epidemic (ETE) regional committees, NY Links, and opioid task forces.
 | * + 1. N/A
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| 1. Evaluate effectiveness of coalition.
 | 1. Develop method for evaluate coalition efforts and activities.
2. Prepare annual summary of coalition successes and challenges.
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| OBJECTIVE | TASKS | PERFORMANCE MEASURES |
| 4: Identify and address regional gaps, needs and inequities. | 4.1 Share local and/or regional hepatitis C epidemiology data. | 4.1.1 Hepatitis C epi data is reviewed and discussed annually at a coalition meeting. |
| 4.2 Conduct, analyze and summarize regional gaps analysis. | 4.2.1 Gaps analysis conducted by end of year 1.4.2.2 Gaps analysis results summarized by end of year 2. |
| 4.3 Identify strategies to respond to gaps, needs and inequities identified. | 4.3.1 N/A |
| 4.4 Coordinate activities to address gaps, needs and inequities identified. | 4.4.1 Activities are reported in the monthly program narrative report. |

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| OBJECTIVE | TASKS | PERFORMANCE MEASURES |
| 5: Educate government policy makers. | 5.1 Ensure effective communication with government policy makers on public health and policy actions to address hepatitis C. | 5.1.1 A process is established for developing and communicating on key hepatitis C issues to local and state level government policy makers.  |
| 5.2 Coordinate and participate in annual New York State hepatitis C legislative awareness event.  | 5.2.1 Summary of legislative education encounters is reported in the monthly program narrative. |
| 5.3 Provide training and technical assistance for coalition members on educating policy makers. | 5.3.1 Summary of training and technical assistance provided to coalition members on educating policy makers is reported in the monthly program narrative. |

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| OBJECTIVE | TASKS | PERFORMANCE MEASURES |
| 6: Flexibility in programming for directing resources effectively | 6.1 Flexibility in programming is necessary to ensure that resources are effectively directed to the populations and communities most in need. | 6.1.1 N/A |
| 6.2 Contract activities and deliverables may be modified at any point in this contract upon direction of the AIDS Institute to address emerging needs or disparities, emerging HIV/sexually transmitted infections /hepatitis C epidemiologic patterns, or to accommodate advances in best practice. | 6.2.1 Aid with non-workplan public health issues if/when they arise. |
| 6.3 Assist with other priority public health issues if/when they arise (e.g., local sexually transmitted infections case increases, outbreaks, emergency situations, etc.). The AIDS Institute Contract Manager must approve non-Work Plan work. | 6.3.1 Aid with non-workplan public health issues if/when they arise. |