FOIA Number: 2018-0755-F

# FOIA MARKER

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**Collection/Record Group:** Clinton Presidential Records

**Subgroup/Office of Origin:** National AIDS Policy Office

**Series/Staff Member:** Patsy Fleming

**Subseries:** National AIDS Strategy

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**OA/ID Number:** 9002

**FolderID:**

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**Folder Title:**
National Plan Process

| Stack: | Row: | Section: | Shelf: | Position: |
|---|---|---|---|---|
| S | 66 | 5 | 10 | 2 |

Packets done for

EEOC
Energy
OPM
Commerce
Treasury
DOD
Corp. for Natl. Service
Justice
Education
State
USAID
Peace Corp
Social Security
LABOR
USIA
ONDCP
HUD VA

HHS

OPA ✓
IHS ✓
ACF ✓
FDA ✓
AHCPR ✓
OIA ✓
SAMSHA ✓
HCFA ✓
CDC ✓
NIH ✓

OMB

*Interdepartmental Task force on HIV & AIDS -- Contact List Roster as of (2.26.96)*

| Office | Official Rep. | Title | Contact | Address, Room # | Phone | Fax |
|---|---|---|---|---|---|---|
| Department of Health and Human Services | Claudia Cooley | Executive Secretary for Health and Human Services | Ellsie O'Neal | 200 Independence Ave SW, Rm 603H 20201 | 202-690-5627 | 202-690-7203 |
| Department of Housing and Urban Development | ~~Jacquie Lawing~~ Fred Karnas | Deputy Assistant Secretary for Economic Development | David Vos | 451 7th ST SW Rm 7204 20410 | 202-708-~~2791~~ 0614 x4620 | 202-708-1744 |
| Department of Treasury | Alex Rodriguez | Deputy Assistant Secretary for Administration | Sylvia Mathews Secretary - ROZ | 15th Street Entrance 1500 Pennsylvania Ave, Rm 2425 | 202-622-~~0410~~ 1906 | 202-622-2337 ? |
| Department of State | Anne Keatley Solomon | Acting Deputy Assistant Secretary for Science Technology | Sharon Hrynkow | 2201 C Street NW Rm 7831 | 202-647-3004 | 202-736-7336 |
| Department of Education | William Modzlelski | Director, Safe and Drug Free Schools Program | John Roddy | Office of Elementary & Secondary Educ. 400 Maryland Ave SW Wash, DC 20202 | 202-260-2446 | 202-260-7617 |
| Department of Commerce | Rafael Borras | Deputy Assistant Secretary for Administration | Gloria Gutierrez | 14th and Constitution Rm 5830 20230 | 202-482-4951 | 202-482-3592 |
| Department of Labor | Frederick Drayton | Director, Office of Safety and Health | Frederick Drayton | 200 Constitution Ave Rm 1301 20210 | 202-219-6687 | 202-219-4379 |
| Department of Veterans Affairs | Susan Mather, MD Abid Rahman | Assistant Chief Medical Director for Public Health and Environmental Hazards | Bobbie Peterson | 810 Vermont Ave NW Rm 13 20420 | 202-565-7182 | 202-565-7572 |
| Department of Energy | Corlis Moody | Director, Office of Economic Impact and Diversity | Don Donaldson | 1000 Indiana Ave SW Rm 5B110 | 202-586-8383 | 202-586-3075 |
| Department of Justice | Eleanor D. Acheson | Assistant Attorney General, Office of Policy Development | Lisa Jacobs | 10th and Pennsylvania Rm 4234 | 202-514-3824 | 202-514-5715 |
| Office of Management and Budget | Richard Turman | Branch Chief, Health Program Services | Richard Turman | 725 17th Street Rm 7002 NEOB | 202-395-4920 | 202-395-3910 |
| Social Security Administration | Charlotte Brittian | Executive Assistant to the Commissioner | Charlotte Brittian | 1825 Connecticut Ave NW Suite 714 20254 | 202-690-6764 | 202-482-7105 |
| Corporation for National Service | AnnMaura Connolly | ???Director, Independent Sector Liaison | AnnMaura Connolly | 1201 New York Ave. NW Wash, DC 20525 | 202-606-5000, x429 | 202-565-2794 |
| Peace Corps | Charles Baquet | Acting Director | Shelly Smith | 1990 K Street NW Deputy Director 8th Floor 20526 | 202-606-3765 | 202-606-3298 |

| | | | | | | |
|---|---|---|---|---|---|---|
| Office Personnel Management | Michael Grant | Deputy Chief of Staff | John Rogers | 1900 E Street NW Rm 5305 20415 | 202-606-4992 | 202-606-2613 |
| Office of National Drug Control Policy | Fred Garcia | Deputy Director | Barbara Roberts | 750 17th St. 8th Flr. WDC 20503 | 202-395-6601 | 202-395-6744 |
| U.S. Information Agency | Joseph Duffey | Director | Jess Bailey | 301 4th Street SW Rm 800 20547 | 202-619-6655 | 202-619-5646 |
| Agency for International Development | Nils M. Daulaire, MD | Senior Policy Advisor on Population, Health & Human Development | Mike Feldstein | PPC/PHD Rm 3673 20523 | 202-647-8415 | 202-647-1770 |
| Equal Employment Opportunity Commission | Peggy R. Mastronianni | Assistant Legal Council ADA Policy Division | Peggy Mastroianni | 1801 L Street NW Rm 6301 | 202-663-4503 | 202-663-4639 |
| Department of Defense | William Perry | Secretary | Patricia Collins | 1000 Defense Pentagon Rm 3E880 20301-1000 | 703-695-5261 | 703-693-2548 |

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Jane
I'll call Kevin

Date: 27 February 1996

To: PF and JL

From: JS Jane

Subject: HHS comments for the National Strategy

I spoke to Glenn Harrelson at HHS and he said that they have yet to receive the NIH, CDC, OHAP, and ASPE comments. Apparently Kevin does not want release the other agency's comments individually, but review all the comments at a senior staff meeting first.

I'd like to push this along and get the comments as soon as possible. Could one of you talk to the powers that be at HHS re this?

Thanks.

*Interdepartmental Task force on HIV & AIDS -- Contact List Roster* (10.16.95)

| Office | Official Rep. | Title | Contact | Phone | Fax |
|---|---|---|---|---|---|
| Department of Health and Human Services | Philip Lee<br>William V. Corr<br>Eric Goosby | ?<br>Dep. Asst. Sec. for Health<br>? | Eric Goosby | 202-690-7694<br><br>202-690-5560 | 202-690-6960<br><br>202-690-7560 |
| Department of Housing and Urban Development | Jacquie Lawing | Deputy Assistant Secretary for Economic Development | David Vos | 202-708-2791 | 202-708-1744 |
| Department of Treasury | Alex Rodriguez | Deputy Assistant Secretary for Administration | Sylvia Mathews | 202-622-0410 | 202-622-2337 |
| Department of State | Anne Keatley Solomon | Acting Deputy Assistant Secretary for Science Technology | ~~Sharon Hrynkow~~ Jonathan Davis | 202-647-3004 | 202-647-4537<br>736-7336 |
| Department of Education | William Modzlelski | Director, Safe and Drug Free Schools Program | John Roddy | 202-260-2446 | 202-260-7617 |
| Department of Commerce | Gloria Guttierrez | Deputy Assistant Secretary for Administration | Gloria Gutierrez | 202-482-4951 | 202-482-3592 |
| Department of Labor | Frederick Drayton | Director, Office of Safety and Health | Frederick Drayton | 202-219-6687 | 202-219-4379 |
| Department of Veterans Affairs<br>273-5400 | Susan Mather, MD<br>Abid Rahman | Assistant Chief Medical Director for Public Health and Environmental Hazards | Bobbie Peterson | 202-565-7571<br>535-7182 | 565-4182 |
| Department of Energy | Corlis Moody | Director, Office of Economic Impact and Diversity | Don Donaldson | 202-586-8383 | 202-586-3075 |
| Department of Justice | Eleanor D. Acheson | Assistant Attorney General, Office of Policy Development | Lisa Jacobs | 202-514-3824 | 202-514-5715 |
| Office of Management and Budget | Richard Turman | Branch Chief, Health Program Services | Richard Turman | 202-395-4920 | 202-395-3910 |
| Social Security Administration | Charlotte Brittian | Executive Assistant to the Commissioner | Charlotte Brittian | ~~202 690-6764~~<br>~~202-482-6764~~ | 202-482-7105 |
| Corporation for National Service | Chuck J. Supple | Director, Independent Sector Liaison | ~~Chuck Supple~~ Calvo | 202-606-5000, x219 | 202-565-2794<br>202 565-2794 |
| Peace Corps | Charles Baquet | Acting Director | Shelly Smith | 202-606-3765 | 202-606-~~3824~~ 7298 |
| Office Personnel Management | Michael Grant | Deputy Chief of Staff | John Rogers | ~~HRD~~<br>202-606-4992 | 606-2613 (202) |
| Office of National Drug Control Policy | Fred Garcia | Deputy Director | Barbara Roberts | 202-395-6601 | 202-395-6744 |
| U.S. Information Agency | Joseph Duffey | Director | Jess Bailey | 202-619-6655 | 202-619-5925 |
| Agency for International Development | Nils M. Daulaire, MD | Senior Policy Advisor on Population, Health & Human Development | Mike Feldstein | 202-642-8616 | 202-647-1770 |
| Department of Defense | William Perry | Secretary | Patricia Collins | 703-695-7116 | 703-693-2548 |

202-647-~~4000~~ 1850

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Fred Karras 708-2681

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| Department of Justice | Eleanor D. Acheson | Assistant Attorney General, Office of Policy Development | Lisa Jacobs | 202-514-3824 | |
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| U.S. Information Agency | Joseph Duffey | Director | Jess Bailey | 202-619-6655 | 202-619-5925 |
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| Department of Defense | William Perry | Secretary | Patricia Collins | 703-695-7116 | 703-693-2548 |

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
WASHINGTON, D.C. 20410-7000

OFFICE OF THE ASSISTANT SECRETARY FOR
COMMUNITY PLANNING AND DEVELOPMENT

**DATE: October 27, 1995**

**MEMORANDUM TO: Patsy Fleming**

**FROM: Fred Karnas, Director**
**Office of HIV/AIDS Housing**

**RE: HIV/AIDS Summit and Interdepartmental Task Force**

We recently received a fax from your office with nomination forms for invitees to the White House Conference on HIV/AIDS on December 6. I am assuming the names our office submitted a couple of weeks ago, although not on the nomination forms, are sufficient. Please advise us if you need us to submit the names on the forms.

Please change your data base for the AIDS Interdepartmental Task Force to include my name in place of David Vos' name. Please retain Jacquie Lawing's name on the list.

Finally, what is the latest on Skip Ciotti's nomination to serve on the Presidential Advisory Council on HIV/AIDS?

Thanks.

MEMORANDUM FOR CAROL RASCO

DATE: February 9, 1996

FROM: Patsy Fleming

SUBJECT: National Strategy for HIV and AIDS

Attached is draft copy of the National Strategy for HIV and AIDS for your review and comment. In this draft the appendices are organized by department in order to more easily facilitate individual department reviews. In the final document, agency and department efforts will be organized by substantive area (i.e., prevention, research, care and services, translation of science into practice, international activities, and civil rights).

MEMORANDUM FOR JEREMY BEN-AMI

DATE: February 9, 1996

FROM: Patsy Fleming

SUBJECT: National Strategy for HIV and AIDS

Attached is draft copy of the National Strategy for HIV and AIDS for your review and comment. In this draft the appendices are organized by department in order to more easily facilitate individual department reviews. In the final document, agency and department efforts will be organized by substantive area (i.e., prevention, research, care and services, translation of science into practice, international activities, and civil rights).

Original with comments Attached

Date: February 8, 1996

To: Claudia Cooley

From: Patsy Fleming ~~and Jane Sanville~~

Re: National Strategy for HIV and AIDS

Attached is a draft copy of the National Strategy for HIV and AIDS, including the HHS agency and office appendices. I have included the following copies:

1. One draft copy with cover letter and all HHS appendices
2. One draft copy for each HHS agency along with the agency's individual appendix. (The CDC and SAMSHA also have an additional cover memo as special assistance is needed from these agencies. Extra copies are also attached to this memo.)

etc.) ~i put this in differently, so it hopefully reads better and we still have documentation of

For this review, agency appendices are organized by agency (e.g., National Institutes of Health, Centers for Disease Control and Prevention, ~~Health Care Financing~~ Administration, Health Resources and Services Administration, Substance Abuse and Mental Health Administration, Agency for Health Care Policy and Research, Food and Drug Administration, Indian Health Service, Office of International Health, Office of Population Affairs, and the Agency for ~~Children~~ and Families. In the final document, agency and department efforts will be organized by substantive area (i.e., prevention, research, care and services, translation of science into practice, international activities, and civil rights).

All department comments are due back to the Office of National AIDS Policy by no later than February 15, 1996. The timeline for completing the strategy is extremely tight and we will be moving ahead with revisions as quickly as possible.

If you have any questions do not hesitate to contact me.

Patsy - this order ~~requests~~ was meant to reflect the order in the document

Date: 30 January 1996

To: SAMSHA
From: ~~ONAP~~ Jane Sauville, ONAP

Re: SAMSHA Review of National Strategy for HIV and AIDS

There are several areas we need your help with, specifically:

Text:

- Information on the extent of AOD-related behaviors -- the text reads: There is substantial evidence that use of alcohol and other substances can adversely influence risk-taking behavior. It is estimated that xx of the population is affected by alcohol and other drugs in addition to injection drug use.

Appendix:

- In Redlined text there are specific questions.

Date: 30 January 1996

To: CDC
From: ~~ONAP~~ Jane Saneville, ONAP

Re: CDC Review of National Strategy for HIV and AIDS

There are several areas we need your help with, specifically:

Text:

- Confirmation of accuracy for all epidemiological and demographic data.

- Is the national prevention goal theoretically achievable (i.e., reducing infections each year until there are no new infections).

Appendix:

- In Redlined text there are specific questions.

- Is it possible to condense some of the description information under the goal of monitoring the epidemic?

January 24, 1996

From: JS
To: PF

Re: National Strategy and Vaccine Briefing

National Strategy

Jeff mentioned that you wanted to have a 'senior PHS staff meeting' about the plan and you might like to have me there. I will be here through Tuesday (1.30) and will be back on Tuesday (2.6). (I'm leaving for a memorial service for my uncle in England on Wednesday 1.31).

Vaccine Briefing

FYI -- Seth Berkley from the Rockefeller Foundation is in town this Friday and agreed to do an informal briefing about the state of vaccine development. We're scheduled for a brown-bag at 1:00 in our conference room. You have all three of their reports (red, yellow, and xerox copy I put in your box earlier this week.)

OK
PF

**DRAFT**
**January 30, 1996**

**MEMORANDUM FOR THE INTERDEPARTMENTAL TASK FORCE ON HIV AND AIDS**

FROM: **Patricia S. Fleming**
**Director, Office of National AIDS Policy**

SUBJECT: **Review of Draft of the National Strategy for HIV and AIDS**

As you remember, as a result of our meetings last year each member of the Interdepartmental Task Force on HIV/AIDS (IDTF) was asked to develop individual department and agency plans for HIV/AIDS, linking goals and objectives to budget levels and identifying areas of unmet need.

The individual plans you submitted were carefully studied. Your considerable knowledge and suggestions regarding promising areas for Federal effort were reviewed, as were the comments and counsel of others experienced with combatting this epidemic (i.e., the Presidential Advisory Council on HIV and AIDS, participants at the White Conference on HIV and AIDS, and many HIV positive persons and their families, friends, and caregivers.) The ideas and concerns raised pointed to a consensus on several issues. I believe this document builds on this consensus and articulates the goals and objectives of the entire Federal government.

Please review the attached draft and your appendix carefully. You should:

- Check the budget figures carefully and make any necessary changes. (These budget figures will be cross-checked with OMB figures.)

- Information that was missing or unclear has been 'redlined'. Please be certain to provide this information.

- Check for the accuracy of department and agency names, program titles, and acronyms.

- Maker sure that your comments are clear. Comments are due back to the Office of National AIDS Policy **BY NO LATER THAN FEBRUARY 6, 1996.** If you have any questions please call Jane Sanville or Jeff Levi at (202) 632-1090.

Call

Thank you for your assistance in developing this first-ever National Strategy for HIV and AIDS.

Draft

Timeline for completion of National Strategy for HIV and AIDS

| | |
|---|---|
| ○ ONAP review of plan | 1.12.96 |
| ○ Send out draft for agency and OMB review | 1.26.96 — Fe |
| ○ Receive back agency/OMB comments | 2. 6.96 |
| ○ Plan to printers | 2. 13.96 |
| ○ Press copies available | 3. 1.96 |
| ○ Printed copies avaiable | 3.12.96 |

(6)

1/2

$3000

PF → senior staff

Separate list of promises
*Potential* Action Steps
Press Conference preparations
Other Internal preparations
Number of copies of Exec Summary, Full Report
Early Copies to ..?
Timeline for agency review?
Other reviews?
What to do with Advisory Council?
Do we want a year #2 for the plan? Yes...

CHART CROSS-WALKING THE 6 PRIORITY AREAS AND THE PROMISES ....

JL: Agencies where we are asking them to do something that is not in their plans -- how to address

$ available for printing.
$ for an editor?

A promises cross-walk

- **Strengthening prevention activities**

■ The Nation's prevention priorities must be guided towards gaining knowledge that will improve our efforts to develop effective prevention programs. We need to improve our understanding of the major modes of transmission, close gaps in scientific knowledge, and work towards eliminating gaps in program areas.

*Modes of Transmission*

(Surveillance)
■ An important part of strengthening prevention activities is to have a clearer understanding of who is being infected and what behaviors are placing people at risk for infection.

■ These trends [reflecting the changing demographics of] the epidemic must be taken into consideration when prioritizing prevention research and service programs. (Also Priority Setting)

■ A crucial part of effective prevention strategies includes supporting adequate surveillance of HIV infection and related diseases in order to estimate the burden of HIV illness, gauge future directions of the epidemic, and assess the effectiveness of prevention interventions. (Also Evaluation.)

■ We need to collect "front end" data in tandem with an enhanced effort to link surveillance and epidemiological data to priority setting, the design, and evaluation of prevention programs. (Also Priority Setting.)

*Gaps in Scientific Knowledge*

(B*asic Behavioral Research*)
■ Since behavior change is the primary prevention intervention immediately available for halting the spread of HIV infection, basic behavioral research should be the foundation upon which prevention programs are based. (Also Diversified Research Approaches.)

■ Before we can begin approaching the formidable task of implementing successful HIV prevention programs that reach a diversity of Americans, more information on the determinants of HIV-associated sexual and drug-using behaviors is needed.

*(Intervention Research*)
■A second major funding priority area is research to improve prevention

interventions, i.e. research that concentrates on identifying and modifying behaviors, such as those related to drug use and sex.

■ There is more that we need to know if we are to develop effective prevention programs for a diversity of Americans.

■ High priority include research regarding strategies that facilitate sustained adoption and maintenance of HIV preventive behaviors, research on cultural barriers and strategies to reach populations resistant to behavior interventions, and research on the effectiveness of treatment for drug abuse, mental health, and alcoholism for reducing HIV risk behavior. (Also Diversified Research Approaches.)

■ Agencies supporting behavioral research must include scientists from a broad range of disciplines in their planning activities and improve their data-sharing and collaborative efforts with agencies responsible for implementing prevention programs.

(Social Marketing)
■ Agencies supporting social marketing activities need to strengthen efforts to understand barriers to the implementation and replication of promising prevention programs. Given the highly innovative nature of these endeavors, it is also crucial to strongly support the provision of technical assistance and training, and a community-based effort that would test these models in a real-world setting.

> [At present some of the replication research is being done by NIH, but not very much. Technical assistance for CBOs was one of the issues raised in the external review of the CDC -- it appears that the review was recommending assistance for all groups that request it while CDC was limiting assistance to funded groups. Regarding the community-based effort -- this will not be in the detailed listing. So, if we (ONAP) want to pursue this we will probably have to push it from here -- could say that CDC needs to examine this option.]

*Current Gaps in Program Areas*

(Prioritizing/Diversity)
■ Prevention planners [must] carefully prioritize their efforts so as to reach the groups that are now increasingly affected by the epidemic -- women and injecting drug users -- while maintaining efforts among youth and gay men.

(Community Planning)
■ The [community planning] process is early in its development and requires significant, ongoing leadership and technical assistance from the CDC if it is to

fulfill its potential for good priority setting and decision making.

(Substance Abuse)

- We need to improve the integration of HIV prevention and substance abuse programs.

- Another major avenue for controlling the spread of HIV among addicted persons is to get them into treatment programs. Substance abuse treatment is a form of HIV prevention. At present, there is a continuing need for increased treatment services for persons seeking to control their addictions.

- It must be part of the Federal response to increase the availability of treatments slots for a range of addictions.

(Harm Reduction)

- Adoption of [needle exchange ]approaches, because they are so controversial, should be a local decision. The Federal government should provide the scientific data upon which such decisions should be made.

(Integration into Primary Care)

- To reach our prevention goals, we must also improve the integration of prevention activities and messages into primary health care services. This includes incorporating a patient's sexual history when a medical history is taken, offering HIV-related counseling and voluntary testing, and working with HIV positive individuals so they do not infect others. It also means offering pregnant women information about and access to AZT during pregnancy so as to reduce perinatal transmission.

(Evaluation)

- The Nation will need to continue to invest in a range of endeavors including data collection, research, and prevention programs. It will also require careful examination of what programs should to be continued, what activities need to be initiated and a awareness that a reconfiguration of some program priorities may be required.

- It is important to assess the effectiveness of the prevention interventions that have or will be implemented.

- Supporting diversified research approaches

■ Since behavior change is the primary prevention intervention immediately available for halting the spread of HIV infection, basic behavioral research should be the foundation upon which prevention programs are based. (Also Prevention.)

■ High priority include research regarding strategies that facilitate sustained adoption and maintenance of HIV preventive behaviors, research on cultural barriers and strategies to reach populations resistant to behavior interventions, and research on the effectiveness of treatment for drug abuse, mental health, and alcoholism for reducing HIV risk behavior. (Also Prevention and Substance Abuse.)

- **Strengthening approaches to substance abuse**

■ **High priority include research regarding strategies that facilitate sustained adoption and maintenance of HIV preventive behaviors, research on cultural barriers and strategies to reach populations resistant to behavior interventions, and research on the effectiveness of treatment for drug abuse, mental health, and alcoholism for reducing HIV risk behavior. (Also Research and Substance Abuse.)**

- **Strengthening the safety net**

- **Improving translation of research results into medical practice**

- Improving evaluation and priority setting

■ These trends [reflecting the changing demographics of] the epidemic must be taken into consideration when prioritizing prevention research and service programs. (Also Prevention)

■ A crucial part of effective prevention strategies includes supporting adequate surveillance of HIV infection and related diseases in order to estimate the burden of HIV illness, gauge future directions of the epidemic, and assess the effectiveness of prevention interventions. (Also Prevention)

■ We need to collect "front end" data in tandem with an enhanced effort to link surveillance and epidemiological data to priority setting, the design, and evaluation of prevention programs. (Also Prevention)

Draft 1.11.96

Jeff - here you go - comments/suggestions please. JS

***Action steps for completing the national plan ---***

| **Action** | **Date** |
|---|---|
| ○ Prepare memo to guide ONAP review | 1.12.96 |
| Separate list of promises | |
| *Potential* Action Steps | |
| Press Conference preparations | |
| Other Internal preparations | |
| Number of copies of Exec Summary, Full Report | |
| Early Copies to ..? | |
| Timeline for agency review? | |
| Other reviews? | |
| What to do with Advisory Council? | |
| Do we want a year #2 for the plan? Yes... | |
| ○ Talk to print shop about timelines, format, etc | 1.12.96 |
| ○ ONAP review of 1.11.96 draft | 1.16.96 |
| Decisions to be made: content and process | |
| ○ Incorporate ONAP comments | 1.17.96 |
| ○ Prepare Executive Summary for long report | 1.17.96 |
| ○ Prepare separate Executive Summary | ~~1.17.96~~ |
| ○ Prepare Full Draft for Agency Review | 1.19.96 |

1-29

· Document Preparation
- Agency Sections
  - HHS: NIH
    - FDA
    - CDC
    - HRSA
    - AHCPR
    - SAMSHA
    - HCFA
    - IHS
    - OPA
    - OIH
    - ACF
  - HUD
  - TREASURY
  - EDUCATION
  - COMMERCE
  - LABOR
  - VA
  - DOD
  - ENERGY
  - JUSTICE
  - SOCIAL SECURITY ADMINISTRATION
  - CORPORATION FOR NATIONAL SERVICE
  - PEACE CORPS
  - OPM
  - ONDCP
  - USIA
  - USAID
  - STATE
- Budget Tables
- Acronym List

~~Intro~~
~~Prevention~~
~~Research~~ /
~~Care + Services~~ Lattonia's comments
~~International~~
Civil Rights
Inf. Dissemination
> Read through · Copy for Jane Silver
> Headings
> Redlining
> Promises Update
> Action plans - who will take action

- Glossary
- List of Members of the IDTF

- Prepare cover memos guiding agency review
- Prepare cover memo for OMB review
- Send out agency review packets
- Receive agency comments
- Incorporate agency comments
- Prepare Draft Version for Advisory Council Review
- Prepare final document for printer
- Receive 'galleys' from printer
- Go to press
- Press Conference
- Implement follow-up/tracking of promises

2/2 - 2/12 → 3/1 + printing

After agency review

- Round #2 -- a second year for the plan .. timelines for requests

~~Gordon Adams - DOD VA~~
~~Steve Redburn - Hous~~ OMB-4
Litany HUD, Treasury, Justice.
Min - Health/VA
Gordon Adams - DOD

*Action steps for completing the national plan* ---

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    - OIH
    - ACF
  - HUD
  - TREASURY
  - EDUCATION
  - COMMERCE
  - LABOR
  - VA
  - DOD
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  - ONDCP
  - USIA
  - USAID
  - STATE
- Budget Tables
- Acronym List

▶ Read council recommendations

- Glossary
- List of Members of the IDTF

- Prepare cover memos guiding agency review
- Prepare cover memo for OMB review
- Send out agency review packets
- Receive agency comments
- Incorporate agency comments
- Prepare Draft Version for Advisory Council Review — After agency review
- Prepare final document for printer
- Receive 'galleys' from printer
- Go to press
- Press Conference
- Implement follow-up/tracking of promises

- Round #2 -- a second year for the plan .. timelines for requests

**Potential problems:**

Prevention:

- Promising TA to groups
- CPCRA for prevention -- we would probably have to push it with CDC (there's not even a glimmer of it in their plan).

Research:

- Not included is the importance of health services research.
- NIH may not want to commit to clinical effectiveness research.
- Anything missing?

Care and Services:

- Pushing HRSA to help grantees shift resources from case managment to primary care.
- Anything missing?

Civil Rights:

- Nothing on guidelines regarding HIV+ health care workers (Ben Schatz issue).]
- Anything missing?

Interational:

- Anything missing?

Information Dissemination:

- Anything missing?

Action plans -- how to lay out who will be doing these things.

Reviwers Bopper (Research section, especially clinical effectiveness section)
Jane Silver

********** and more stuff .....

will information dissemniNation be a special section in the current activities section??

in PF's letter there is a listing of this ....

- Get new numbers from the CDC .....
- Number the charts
  - #1: rise of HIV as leading cause of death
  - #2: all four maps possible to get an updated map???? _CDC

- Check reference on the increase of the number of cases in the south.
- Check number on54% of the labor force being between the ages of 25-44 --- DOL.

- Work on levels -- formatting ....

- RS: Check original reference re 80,000 new orphans
  Two inserts

chart of promises and action items
chart of problem areas -- healh care worker guidelines ...

- Official name of the WHCA?

Followup

**SAMSHA --**
Another major avenue for controlling the spread of HIV among addicted persons is to get them into treatment programs. Substance abuse treatment is a form of HIV prevention. At present, there are not enough capacity in treatment programs for persons seeking to control their addictions. (confirm from samsha) p.17. Prevention/GAPS IN PROGRAM AREAS

It is estimated that x% (check #) of the population is affected by alcohol and other drugs (AOD) in addition to injection drug use. p.17. Prevention/GAPS IN PROGRAM AREAS

**CDC**

statistics

**AHCPR**

Does AHCPR have an inf.diss section

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■ If we are to provide high quality cost-effective care and services for HIV-infected persons, we must carefully evaluate our activities.

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