

## FORM D-3: WORK PLAN - CATEGORY II

### Health Education and Risk Reduction Activities (EBIs)

Providers funded for EBIs must describe *changes* to its plan for service delivery to the population in the proposed service area(s) and time lines for accomplishments. This includes changes to any EBI for which you receive funding. Include the information below *only if changed* along with your annually updated partner services procedures with your local health department and all applicable MOAs.

#### 1. Intervention Information

List details about the intervention including intervention name, core or essential elements, specific activities and content, priority population(s), and counties served.

#### 2. Service Delivery

- Describe any pre-implementation activities necessary before you can implement proposed interventions. This may include conducting of a rapid assessment of a population to see if an intervention requires adaptation.
- Describe recruitment and other strategies that will be used to promote the intervention to priority population(s) and to recruit clients.
- Describe specific venues or locations where recruitment will be conducted and the frequency of outreach. Provide evidence of support for access to such venues/locations, i.e. letters of support, memoranda of agreement.
- Describe venues/settings for the intervention and how often the intervention will occur.
- Describe how the intervention will be staffed; number of volunteers; number of paid FTEs, including staff qualifications, skills.
- Describe the respondent's plan for ensuring that services are culturally and linguistically appropriate
- Describe strategies that will be used to ensure client retention through the intervention. If respondent has past experience, describe applicant success in retaining clients across multiple sessions, where applicable.
- Describe how respondent will ensure client confidentiality.
- Describe how respondent will collaborate with other organizations to implement the intervention. Include applicable MOA. All respondents must include formal procedures with the local health authority in the jurisdiction for STD and partner services. These are required to be maintained and submitted yearly.
- Describe policies and procedures related to all intervention activities, including outreach and policies on youth if employing youth outreach workers. Describe how respondent agency will ensure compliance with DSHS policies including data collection and reporting requirements
- Describe the types of referrals that will be offered and how referrals are tracked and documented
- Describe how respondent agency will provide access to HIV and syphilis testing for at risk clients. Include specific venues, locations, hours, etc and include memoranda of agreement

#### 3. Management, Supervision, and Quality Assurance:

Describe the managerial, supervisory and quality assurance activities that will be used to ensure that the proposed intervention(s) are implemented as intended.

#### 4. Evaluation

- Describe respondent's methods and procedures for collection, entry, and management of program service data including:
  - Who collects the data, how, and how frequently
  - Confidentiality and security of client and other records;
  - How respondent will ensure timely submission of data
  - Procedures for ensuring accuracy of data
- Processing for assessing if services achieved desired outcomes
- Strategies that will be used to apply evaluation findings to program refinement and redirection

#### 5. Timeline:

Summarize the work plan in a month-by-month format for the first budget year of the project. At minimum, the timeline must include:

- a. Pre-implementation activities
- b. Recruitment of clients
- c. Training of participants (peers, clients, and other non-staff members)
- d. Locations of where activities will occur
- e. Services delivery dates including start date of pilot, start dates of full implementation
- f. Quality assurance activities
- g. Evaluation activities