## **Form D: ORGANIZATIONAL APPROACH**

This section is worth ten percent (10%) of the score of the Application.

This form provides information on the characteristics of the population in the service area and the characteristics and needs of the Priority Populations the Applicant proposes to serve. Multiple data sources and assessments exist for many communities, including census data; disease surveillance data; needs assessments conducted by the Applicant, planning councils and other community planning groups, and information gathered from community engagement activities. The Applicant is encouraged to use these resources when completing this section.

Please reference sources used to complete this section and limit the response to four (4) pages. Note that some of this data will not be available for the entire HSDA or service areas. If that is the case, it is permissible to include information from the county where most of the services will be delivered.

1. Please identify and describe the HSDA or counties where services are proposed to be delivered. Include the following:
2. The current availability of HIV testing, HIV prevention services (including PrEP/nPEP) and HIV treatment and supportive services, and
3. A summary of HIV morbidity, including information on health inequities and disparities for these conditions.
4. Describe any gaps in resources and the potential barriers to accessing needed services and improving health status. Describe how the proposed activities will fill these gaps.
5. Please describe the proposed Priority Population(s). Please include information for each:
6. The HIV prevention needs and challenges of this Priority Population,
7. Barriers to HIV prevention experienced by this Priority Population, and
8. Ability to reach this Priority Population,

Consider information from planning groups, advisory boards, and client feedback as well as community and needs assessments. Please identify the sources of information.

1. Provide an overview of the Applicant’s strategy to increase HIV/Syphilis testing in the proposed eligible Priority Population(s).

**Response:** Click here to enter text.