

2010-2011 Needs Assessments		Done	No Info	More Info	Long Term	Short Term
These are key issues the 2010 Focused Needs Assessment should address (goals, methodology, etc.)						
1. Follow Up on the 2009 recently released incarcerated and aging issues raised. For the comprehensive NA, a thorough review of the adjudicated literature will outline the recent research on aging and HIV/AIDS						
	a. Are there any differences/changes?			X	X	X
	b. Are there unmet needs in the HIV/AIDS aging population (e.g. newly diagnosed, sense of community, etc.)?			X	X	
2. What does it mean to the participants to have a Chronic Disease? How can the system support health?				X	X	X
3. Begin looking at Early Intervention Services (EIS).						
	a. What should we count now?			X	X	X
	b. What do we want to track? What do we want to know when?			X	X	X
4. Take a look at New Diagnoses & New Participants. How many are from Colorado and how many have traveled here?				X	X	
5. Methodology should look at several issues, including the following						
	a. Include longitudinal data, not just a snapshot in time. Perhaps begin with new participants in 2009 and track them yearly on certain key issues? How would you account for attrition?			X	X	

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	b. What does “out of care” mean and how does it relate to prioritization of DTGA resources? What do we do with the notion that many take “holidays” from medical care and/or meds?			X	X	X
	c. Define on-going data usage, including reliability of data			X	X	X
	d. Examine ways to access surveys (online, 1:1, mail, focus groups, telephone, etc.)				X	
<b>What key issues should the 2010 Focused Needs Assessment address (goals, methodology, etc.)?</b>						
1. Begin immediately to create a Multi-year Process; expand the timeline for each assessment and include examination of key issues. <b>Included in this should be a strategic plan for gathering, use, and publication of data/information</b>						
	a. Include longitudinal data, not just a snapshot in time. Perhaps begin with new participants in 2009 and track them yearly on certain key issues? How would you account for attrition?			X	X	X
	b. What does “out of care” mean and how does it relate to prioritization of DTGA resources? What do we do with the notion that many take “holidays” from medical care and/or meds?			X	X	X
	c. Define on-going data usage, including reliability of data			X	X	
	d. Examine ways to access surveys (online, 1:1, mail, focus groups, telephone, etc.)				X	
2. Examine the EIS impact (perhaps using the cohort from 2009 assessment)						
				X	X	X
3. Gain a better understanding of Utilization, including who is using what service(s)? What aspects of the services are beneficial?						
				X	X	X

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4. Collaborate with Agencies and find out who is counting what. The Council may be able to work from there and get more data without creating more work for direct care providers.			X	X	
5. Health Literacy appears often. Define what that means, as well as expectations for providers. Examine the impact of providers and peers on disseminating health information.			X	X	