

# GRANT ANALYSIS FORM

## OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: Health

Contact Person & Phone No: Ericka Sinclair, x5787

### Category of Request

- New Grant
- Grant Continuation
- Change in Previously Approved Grant

Previous Council File No. 070209

Previous Council File No.

Project/Program Title: Weinhardt Computerized HIV Intervention Grant

Grantor Agency: Medical College of Wisconsin

Grant Application Date: N/A - Continuing

Anticipated Award Date: May, 2008

Please provide the following information:

### 1. Description of Grant Project/Program (Include Target Locations and Populations):

This project assesses the effectiveness of HIV risk reduction counseling delivered by a computer as opposed to a counselor. Clients accessing services for sexually transmitted diseases (STDs) at the Milwaukee Health Department's Keenan Central Health Clinic will be offered the opportunity to participate in this research study by Medical College of Wisconsin staff. Clients choosing to participate will be compensated. Effectiveness of various risk reduction counseling methods will be evaluated for potential future use in the clinic.

### 2. Relationship to City-wide Strategic Goals and Departmental Objectives:

This project is directly related to the citywide goals of improving health in the community and to specific Health Department objectives related to decreasing rates of STDs and HIV. Milwaukee citizens, like persons everywhere, contract STDs and HIV as a result of their risk behaviors. Risk reduction counseling that is shown to be effective in this very high-risk population will, when implemented on a broader scale, contribute substantially towards the achievement of these departmental objectives and citywide strategic goals.

### 3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

These grant funds are needed to support a nurse practitioner position as well as program supplies. There is no anticipated adverse impact on other departmental operations, but depending on the results of the data analysis there may be multiple positive effects on other prevention activities within the Department.

### 4. Results Measurement/Progress Report (Applies only to Programs):

Please refer to Question 1 above.

### 5. Grant Period, Timetable and Program Phase-out Plan:

The grant period is 04/01/08 through 03/31/2009

### 6. Provide a List of Subgrantees:

N/A

### 7. If Possible, Complete Grant Budget Form and Attach to Back.