

GRANT ANALYSIS FORM

OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: Health

Contact Person & Phone No: Steve Gradus, #3526/ Paul Biedrzycki #5787

Category of Request

New Grant

Grant Continuation

Change in Previously Approved Grant

Previous Council File No. 020264

Previous Council File No.

Project/Program Title: AIDS/HIV Counseling and Testing Grant

Grantor Agency: State of Wisconsin Division of Health and Family Services

Grant Application Date: N/A – Continuing

Anticipated Award Date: August 1, 2003

Please provide the following information:

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

These funds support HIV Counseling and Testing performed jointly by the City of Milwaukee Health Department's Sexually Transmitted Diseases Clinic and Main Laboratory. From July 1, 2003 through June 30, 2004 over 5,000 HIV tests were performed. The target population is uninsured or underinsured residents of Milwaukee who would not seek HIV testing elsewhere, and are at high risk of HIV infection.

This year the Sexually Transmitted Disease Clinic will be piloting an initiative to provide HIV Rapid Testing, which accounts for the decrease in the contract amount from last year.

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

By promoting knowledge of HIV serostatus and early intervention, these tests assist in the outcome measure of decreasing the incidence of HIV in the City of Milwaukee.

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

Without this grant, the Department would not be funded to perform these laboratory diagnostic tests. City funding would be needed to purchase supplies needed for testing and counseling.

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

This grant would assist in the goal to decrease the morbidity and mortality of Milwaukee residents to HIV.

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

The grant period is July 1, 2003 through June 30, 2004.

6. Provide a List of Subgrantees:

N/A

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