### **Bobby Goldsmith**

Foundation

# Strategic Orientations 2021 - 2025

#### Introduction

BGF is Australia's oldest community-based HIV organisation, providing practical, emotional and financial support to all people with HIV in NSW and SA. Founded in 1984, when a group of friends got together to give their mate, Bobby Goldsmith, the care he needed whilst he was succumbing to AIDS, BGF has gone on to provide that same individualised care and support to thousands of Australians.

HIV treatment has come a long way since those early days of the HIV/AIDS epidemic, and so has the Foundation. We're now a highly professional not-for-profit organisation, able to offer a range of tailored services, supports and programs to diverse people with HIV.

This Strategic Orientations document sets out how we will achieve our vision which is "to help people with HIV to thrive" over the coming years, with a particular focus on the needs of people living in NSW and South Australia and the possibility to expand more nationally where appropriate and possible.

#### Our vision

To help people with HIV to thrive.

#### Our mission

BGF provides high quality client services and health promotion programs, as well as advocating with and for people with HIV.

#### Our mission is:

- To provide the best client services we can
- To broaden our reach to new communities
- To provide evidence-based outcomes
- To be a voice that influences public policy
- To ensure a sustainable future for our organisation

Primarily funded by NSW Health, we are a key partner implementing the NSW HIV Strategy by supporting people with HIV to remain treatment adherent, retained in care, and by providing psychosocial support1. We also work to reduce the effects of stigma and discrimination on our clients, reduce their social isolation and help them to improve the quality of their lives.

<sup>&</sup>lt;sup>1</sup> https://www.health.nsw.gov.au/endinghiv/Publications/nsw-hiv-strategy-2016-2020.PDF

#### Our values

• Compassion: we genuinely care about the wellbeing of our clients

Solidarity: we stand alongside all people with HIV

• Empowerment: we support people to live the best life of their own choice

• Inclusivity: everyone with HIV is welcome

### The current needs of people with HIV

Each week we see more and more people from diverse backgrounds walk through our doors. Young. Old. Gay. Straight. Male. Female. Non-binary. Different races. Different religions. We support those from the first generation of people to age with HIV to a diverse new generation facing stigma within their communities.

The most recent data suggests that there are around 27,500 people with HIV in Australia. Of those, nearly 90% have been diagnosed, and the vast majority of those who have been diagnosed are on treatment. And the vast majority of those are treatment adherent. This indicates that Australia is well placed to meet the 90-90-90 target set by UNAIDS2.

Nationally, gay and bisexual men still make up the majority of those being diagnosed with HIV (nearly two-thirds in 2019), with heterosexual men and women making up a growing proportion (25%). There's also evidence of an increasing number of culturally diverse people with HIV being diagnosed, with Aboriginal and Torres Strait Islander people contracting HIV at higher rates than the general population, and an increase in diagnoses among international students and people from culturally and linguistically diverse backgrounds.

The majority of people with HIV living in Australia will experience near-normal life expectancy; and we know from research, and from our clients' stories, that most people with HIV are resilient and work hard to manage their health and their wellbeing.

We also know that people with HIV continue to face many challenges that others in the wider community do not. These include:

- Mental health, and social and emotional wellbeing. People with HIV exhibit higher rates
  of mental health challenges, can be at higher risk of social isolation, and are overrepresented among those experiencing suicidality.
- People with HIV experience the effects of ageing earlier in life, due to both the virus itself and the side effects of long-term treatment.
- One-third of people with HIV in Australia live in poverty, and struggle to meet daily living expenses.

#### <sup>2</sup> https://https://www.unaids.org/en/resources/909090

- Stigma and discrimination continue to be significant issues for people with HIV, in both their private and their public lives, as well as when accessing health and social services3.
- Within this, people with a long-term HIV diagnosis often have quite distinct experiences and needs compared to those more recently diagnosed.

There are also a number of key gaps in the current response to HIV, including:

- The need for aged care services that are safe, inclusive and knowledgeable about HIV
- The need for tailored responses at an individual and population level to the needs of women, heterosexual men, and international-born gay men and MSM (men who have sex with men)
- The need for more holistic models of care, including access to peer support among all people with HIV
- For all people with HIV to have access to up-to-date and reliable information about HIV, including the important U=U message (Undetectable = Untransmissible)
- The need for improving the quality of life of people with HIV to be elevated to a policy priority alongside diagnosis, uptake of treatment, and undetectable viral load (referred to as 'the 4th 90').

#### Our role

Our work is built on empowering people with HIV to thrive. This includes providing direct support to people in the community to access the (specialist and mainstream) services that they need.

Our current services include:

- Case Work (supporting our clients in practical, financial and emotional ways whilst linking them to the services they need)
- Case Management (providing those clients with complex needs with more holistic support and care coordination)
- Specialist support for people experiencing issues with drug and alcohol use (via an integrated care program lead by the Haymarket Foundation)
- Community Support Program (delivering regular in-home practical support and care)
- Health and Well-being Programs that develop practical life-skills, support selfexpression, reduce social isolation and build peer connectedness

• Financial Counselling (providing financial advocacy and educating clients on prudent management of their financial affairs)

In addition, we contribute to policy development and advocate – individually and systemically – for people with HIV.

We work in collaboration with the HIV body positive; and with other organisations, both HIV-specialist and mainstream organisations, as well as relevant peak bodies.

#### Our outcomes

To improve the overall quality of life of people with HIV with particular attention on their health and wellbeing, including addressing barriers to retention in care and adherence to treatment.

### Our goals

Goal 1:	Improve quality of life among people with HIV through quality services, supports and programs
Goal 2:	Contribute to the Federal and State policy agendas, and participate in
	the national HIV conversation
Goal 3:	Strengthen our evidence base, through research, data and evaluation,
	to underpin our service and advocacy goals
Goal 4:	For BGF to be a strong, effective and sustainable organisation

# Goal 1: Improve quality of life among people with HIV through quality services, supports and programs

We will achieve this goal by:

- 1.1 Continuing to offer **high quality individual client services** (case work, case management, community support and financial counselling)
- 1.2 Continuing to offer high quality health and well-being programs

<sup>&</sup>lt;sup>3</sup> https://napwha.org.au/stigma-and-discrimination/

- 1.3 Expanding access to services, supports and programs for diverse groups of people with HIV, through
  - 1.3.1 Establishing a presence in more demographically diverse regions (e.g. Greater Western Sydney)
  - 1.3.2 Developing a tailored response to support indigenous Australians with HIV
  - 1.3.3 Identifying strategies to improve our reach to women and heterosexual men with HIV
- 1.4 Adapting our programs and services to strengthen the focus on resilience and reducing self-stigma
- 1.5 Becoming a registered NDIS provider
- 1.6 Exploring opportunities to deliver tailored care and support to people with HIV residing in aged care facilities
- 1.7 Exploring service expansion opportunities within Medicare
- 1.8 Establishing a Client Reference Group to strengthen the client voice in decision making
- 1.9 Establishing an Evaluation Framework for programs and services
- 1.10 Ensuring that our **organisational capacity**, notably that of our Client Services team, best meets the needs of our diverse client groups and best practice operational activity.

We will do this in partnership with:

- Our clients
- Other HIV organisations, including Positive Life NSW, ACON, Thorne Harbour Health, SAMESH etc.
- HIV services in each Local Health District within NSW (and corresponding entities in SA)
- Other community organisations and services working with affected populations
- Universities and institutions of learning and development
- NSW Health and SA Health, and other funders and grantors

## Goal 2: Contribute to the Federal and State policy agendas and participate in the national HIV conversation

Australia has been fortunate to have a strong policy framework underpinning its HIV response from the inception of the epidemic. This continues today with effective HIV strategies in place at both state and national level.

BGF is committed to contributing to the policy agenda to ensure that policy continues to prioritise and resource the health and quality of life for people with HIV. With more than 500 individual clients being actively supported by our Client Services team each year, we have unique insights into our client's lived experiences, including their future needs.

This has been an area of growth and development for BGF over the past four years, and we have worked closely with partner organisations to bring our contributions to the table.

We will also identify opportunities to contribute to the national conversation around HIV. As long as stigma and discrimination continue to affect the lives of people with HIV, we need to find ways to shape and improve the community's understanding of HIV in contemporary Australian society.

We will achieve this goal through:

- 2.1 Developing policy submissions on key issues relevant to our clients
- 2.2 Identifying opportunities to share de-identified/population level client data to highlight trends and unmet need
- 2.3 Collaborating with other organisations to produce joint policy submissions/policy papers
- 2.4 Sharing the stories of our clients (their 'lived experiences'), through day-to-day communications (social media and other digital communication platforms) whilst exploring partnerships with mainstream media organisations
- 2.5 Expanding the range of stakeholders we communicate with regarding the current needs and experiences of people with HIV
- 2.6 Identifying opportunities to work with media organisations to further the advocacy for people with HIV and improve the perception of HIV in contemporary Australian society.

# Goal 3: Strengthen our evidence base through research, data and evaluation, to underpin our service and advocacy goals.

BGF's services and programs are informed by a wide range of data and research, including epidemiological data, social and clinical research and our own client data. We regularly review our activities to ensure that they meet our clients' needs and that all aspects of service delivery e.g. locations and BGF's Model of Care, are underpinned by extensive research, evidence and consultation.

Over the coming four years we will harness the rich vein of client data we have access to, using that data to inform both organisational and sector-wide planning through measurement and evaluation techniques. Our aim is to have timely access to information in order to be better informed, and more agile in responding to client need.

Over the coming period we will:

- 3.1 Build a Monitoring, Evaluation and Learning Framework
- 3.2 Fully utilise the data analytics capacity of our client relationship management (CRM) database
- 3.3 Conduct annual client satisfaction surveys
- 3.4 Utilise Client Reference Group feedback

- 3.5 Develop staffing capacity to support data management including data analysis, security and governance
- 3.6 Embed PozQol into Lumary (the CRM database) to ensure that quality of life data underpins all stages of assessment and service planning during the client's journey with BGF
- 3.7 Ensure that our marketing and fundraising strategy and communications are developed with data integrity, client privacy integrity and sensitivity to the concerns of people with HIV uppermost in mind

#### Goal 4: For BGF to be a strong, effective and sustainable organisation

We are immensely proud of the organisation that BGF has become, and over the coming four years we aim to build on our strengths and continue to adapt to remain relevant when meeting the needs of people with HIV.

We strive to be an organisation that is trusted, respected and relied upon by our clients, a leader in the health and wellbeing sector, visible in our communities, and a gold standard employer.

To achieve these aims, we will:

- 4.1 Undertake a scenario planning exercise to inform a high-level ten-year plan for the organisation
- 4.2 Continue to empower and enable all staff to provide person-centred care and support in line with BGF's strategic priorities
- 4.3 Continue to support the professional learning and development needs of all staff to meet and deliver upon their KPIs
- 4.4 Continue to strengthen our organisational culture through regular monitoring of staff engagement and acting on the results via co-designed initiatives
- 4.5 Strengthen our communication with our stakeholders, including clients, donors, funders and partner organisations
- 4.6 Explore developing a Reconciliation Action Plan and other strategies to strengthen BGF as a safe and accessible service for Aboriginal and Torres and Strait Islander people with HIV
- 4.7 Strengthen organisational infrastructure in relation to HR and IT whilst regularly reviewing existing frameworks that support our compliance and risk management
- 4.8 Continue to review and maximise our efficiency (as measured through client outcomes, staff productivity, revenue and cost metrics) whilst retaining our effectiveness
- 4.9 Conduct a scoping analysis of opportunities to diversify funding and explore diverse funding models
- 4.10 Develop and improve all donor stakeholder (institutional and private) relationships.
- 4.11 Continue to enhance governance to meet legal and financial obligations, including through the provision of training and support to Board members on all relevant areas
- 4.12 Continue to monitor and adapt the management of our invested funds

4.13 Ensure that our financial and employee information systems support the organisation's performance, and our capacity to be a leading and responsible employer.

### Monitoring and evaluation

We will use a range of strategies to monitor and evaluate progress against this plan through:

- Ongoing collection and review of activity data as required to provide quarterly and annual reporting to NSW Health against agreed upon KPIs
- Periodic surveys of clients to assess unmet need and client satisfaction via an annual Client Satisfaction Survey
- A rolling program of evaluation to assess the impact and outcome of our client services
   via a dashboard reflecting the scores from PozQol, an analytical tool used by BGF to transform the lives of people with HIV who are being retained in care
- Assessment of donor engagement and satisfaction via an annual Donor Satisfaction Survey
- Ongoing staff engagement surveys via an annual Employee Satisfaction and Engagement Survey
- Regular reports to funders against specific funded initiatives via relevant acquittals
- Bi-annual review of progress toward these goals by the Board