



Location: Zoom virtual meeting

Date:17 May 2023Recorder:Mark NickelStart Time:9:00 a.m.End Time:10:48 a.m.

Presiding Chairs: Xavier Day, Nilda Fernandez, and Marianne Buchelli

Attendance: See end pages for roster of CHPC members and public participants

#### **MEETING AT A GLANCE**

• The CHPC Members approved the main meeting summary for April using a virtual vote.

- Dr. Anthony Santella provided a summary of discussion themes and participant feedback from the HIV and Housing Summit.
- The CHPC received a presentation from the Connecticut Department of Public Health (CT DPH) Sexually Transmitted Disease Prevention and Control Program, a syndemic area of focus for the Statewide HIV Plan.
- Several individuals shared announcements about events or important changes that may affect access to medication and treatment services.

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#### CALL TO ORDER and MOMENT OF SILENCE

Mr. Xavier Day introduced himself as a CHPC Community Co-Chair and called to order the Connecticut HIV Planning Consortium (CHPC) at 9:00 a.m. He introduced CHPC Co-Chairs Nilda Fernandez and Marianne Buchelli (CT DPH). Ms. Fernandez reviewed meeting behaviors identified by CHPC participants to create a welcoming, inclusive, and respective meeting environment.

Mr. Day asked that participants hold a moment of silence to honor, recognize, and celebrate the lives of individuals affected by HIV, social injustices, natural disasters, and war. He reviewed the CHPC Mission, values, and goals.

### **CHPC BUSINESS UPDATES**

#### Voting Results: Prior CHPC Meeting

Ms. Fernandez reported that the CHPC Members voted virtually to approve the April 2023 meeting summary. The summary will be posted on the CHPC website.

## <u>Upcoming CHPC Presentation Schedule</u>

CHPC Members were reminded of the presentations schedule to occur at upcoming CHPC main meetings:

June Connecticut Statewide HIV Prevention Survey results

July No CHPC meeting
August To be determined
September To be determined

October Statewide Quality Management Summit





The Quality and Performance Measures (QPM) Committee will coordinate a statewide Quality Summit in October.

## CT DPH Business Updates

Marianne Buchelli shared the following updates:

- In the HIV Care and Prevention Program: Hiring processes continue with Health Program Supervisors postings closing recently and the Department waiting recruitment summaries from the Human Resources Department. Also, the interview process for the Health Program Associate position in HCSS (Ryan White Program) will begin soon. Also, recommendations for funding of the Request for Proposal process for HIV Prevention Services have been submitted to the CT DPH Commissioner for final approval. Lead recipients within each region and statewide recipients will be notified soon.
- In the STD Prevention and Control Program: CT DPH welcomes new Public Health Services Manager Arleen Lewis and Nurse Consultant Anna Hollister.

Mitchell Namias explained that the contract for the CHPC support staff will end on December 31, 2023. CT DPH is developing a Request for Proposal that will be released soon. This contract will start 1/1/2024, include current best practices as well as several new ideas.

#### Resources and Connections

The CHPC Co-Chairs shared information about upcoming events and other participants shared information about events in the chat box. These included:

- The Connecticut Sexual Health Coalition will meet in person on May 25<sup>th</sup> in Hartford to continue the development of a statewide strategic plan. The Coalition includes many individuals who also attend the CHPC or are CHPC Members. This ensures connection as the strategic plan will include a syndemic focus.
- The CT DPH and the City of Hartford Health Department are hosting "One Big Statewide HCV Testing Event" in recognition of Hepatitis Testing Day on May 19<sup>th</sup>.

### AIDS Education and Training Center (AETC)

Dante Gennaro, AETC Program Director, shared information about the Northeast Regional Syndemic Panel Discussion occurring on June 1<sup>st</sup> and June 2<sup>nd</sup>. Panel discussions include topics such as Intersectional Stigma Among the LGBTQ Community, Trans-Affirming Care Presentation, Foundations of Harm Reduction in the LBGTQ+ Community, and Anal Dysplasia in the LGBTQ+ Community. The event will be in-person and hybrid.

### **CHPC COMMITTEE UPDATES**

Ms. Fernandez described the committee charges and introduced the chairs of committees who shared updates.

#### Positive Prevention CT (PPCT)

Mr. Marcelin Joseph explained that the PPCT creates health communication campaigns and strategies for populations at the highest risk of getting HIV in Connecticut. Committee highlights included:

 The PPCT continues to do filming and production-related tasks for the Prevention Pack Campaign.





• TEST CT campaign messages continue to be disseminated across the state with some adjustments made based on viewership data.

## Needs Assessment Projects (NAP)

Dr. Anthony Santella explained that the NAP helps the CHPC conduct needs assessment projects and other planning and data-related tasks relevant to advance the Statewide HIV Plan. Dr. Santella used his time to review the HIV and Housing Panel. Highlights included:

- Over 95 participants attended the virtual event.
- Housing stability contributes to HIV health outcomes and remains a challenge in Connecticut.
   The topic of housing is complex and requires coordination and communication between multiple partners.
- Persons with HIV (PWH) and case managers remain uncertain about what housing resources are available for PWH and how to access these opportunities.
- Panelists encouraged PWH and the PWH support system to help prepare PWH for home ownership opportunities and to meet with landlords. A great resource exists at <a href="https://www.NACA.com">www.NACA.com</a> for homeownership resources.
- 95% of participants completing the event feedback form agreed or strongly agreed that the event was well organized and valuable.
- Suggestions for future housing-related topics included: addressing evictions, helping special
  populations housed at shelters, and discussing the process to access services and navigate the
  system.

Nilda Fernandez stated that she contacted one of the panelists after the event and as a result of this interaction, a patient and family members moved from an emergency shelter to transitional housing. Multiple comments in the chat box by individuals who attended the event confirmed their satisfaction and appreciation for the HIV and Housing Panel and thanked Dr. Santella and the NAP for coordinating the event. Several people encouraged a continuation of the housing discussion.

Dr. Santella stated that the NAP group will soon shift its focus to the statewide prevention needs assessment results and developing recommendations for how the CHPC can better understand and address stigma and discrimination.

## **Ending the Syndemic (ETS)**

Ms. Roberta Stewart stated that the ETS Committee existed to promote the integration and coordination of prevention and care services across the four areas of syndemic focus: HIV, STDs, Hepatitis, and Substance Use Disorder. Committee highlights included:

- The ETS continues to focus on developing and reviewing content for the routine HIV testing toolkit for providers.
- A second area of focus involves developing a short list of syndemic screener questions that can be recommended for use by providers.

#### Membership and Awareness Committee (MAC)

Mr. Dante Gennaro shared that the MAC supports community engagement, communications, and CHPC Member recruitment. Committee highlights included:

• A second CHCP Member (only) social event will be planned for June 28 in Hartford.





- The AETC will host a red carpet Gala event at the end of September or the beginning of October. This event will serve as the CHPC "voice of the people" event. It will include photographers and a meal. It will be held at a hotel venue. More details will be forthcoming.
- The MAC will continue to find opportunities to better engage the community.
- The MAC will be updating the CHPC membership application and begin soliciting applications for 2024.

#### Quality and Performance Measures (QPM)

Sue Major explained that the QPM focuses on matters related to the CHPC (statewide) data indicators and quality improvement projects. Committee highlights included:

- QPM continues its planning and coordination for the statewide Quality Management Summit (October 2023). This will be a virtual event.
- QPM will be discussing Sexually Transmitted Infection indicators (as a follow-up to the CHPC featured presentation).
- QPM will discuss an approach to pilot information collection from partners that relates to improving monitoring the Statewide HIV Plan.

### CHPC FEATURED DISCUSSION: SEXUALLY TRANSMITTED DISEASES - SURVEILLANCE UPDATE

CT DPH Epidemiologist Ava Nepaul shared updates and data about surveillance in Sexually Transmitted Diseases (STDs). STDs are a syndemic area of focus for the Statewide HIV Plan. Highlights of the presentation included:

- A review of funding sources and personnel staffing the STD surveillance activity including the State of Connecticut, the American Rescue Plan Act of 2021, and the Centers for Disease Prevention and Control.
- The STD Prevention and Control Program conducts STD surveillance, responds to outbreaks of STDs, delivers Partn Services and linkage to care for persons with STDs and/or HIV, promotes CDC recommendations for STD screening, diagnosis, and treatment, disseminates local data and information, monitors and develop policies, partners to support STD prevention and control, supports and collaborates with HIV prevention programs, and analyzes and uses data to improve and evaluate programs.
- Ms. Nepaul reviewed the core functions: administration, surveillance, intervention, and education and partnerships. This included describing the organizational and staffing structure. The CT DPH operates a very lean staffing structure. Open positions exist. The lean staffing structure limits the capacity and speed at which CT DPH can accomplish its core responsibilities.
- The STD Prevention and Control Program has a new leader (Arleen Lewis) and continues to build capacity with the hiring of a Nurse Consultant (Anna Hollister).
- Special emphasis was placed on explaining the Intervention Units for Region 1 (centered in Greater Hartford) and Region 2 (centered in Greater New Haven) and the ongoing build out of the Disease Intervention Specialists.
- The STD Prevention and Control Program has been responding to Mpox epidemic and providing training and informational seminars. Another important highlight was that congenital syphilis was added as a Category 1 reportable condition.





- Ms. Nepaul discussed the difference between the terms STI (a pathogen causing infection) and STD (a recognizable disease state developed from an infection).
- Ms. Nepaul explained the data collection and recording process from entering laboratory results and STD-23s into the Connecticut Electronic Disease Surveillance System (CTEDSS) to identifying cases, to the Syphilis Reactor Desk, to DIS investigator involvement, to recording searches, and working with CT DPH Informatics on electronic case reporting. She noted one full-time equivalent has been responsible for processing 20,000 reports/events per year, especially given the complexity of the process and missing information.
- She explained the data comes from clinical laboratories (PHC Sections 19a-36-A2, 19a-36-A3; reportable laboratory findings, Form OL-15C); health care providers (PHC Section 19a-36–A3), reportable diseases, emergency illnesses and health conditions, Form STD-23; and other jurisdictions such as Interstate Communication Control Records.
- Ms. Nepaul shared that STD rates continue to increase at the national level. For example, primary and secondary syphilis has increased 781% since 2011. Congenital syphilis has increased 464% since 2011. Racial disparities persist with 1 in 3 Black / African American people accounting for 1/3 of all reported STIs.
- Ms. Nepaul shared other updates on Connecticut STD rates. For example:
  - o Chlamydia: Highest prevalence in persons aged 15-24 years old, More cases are reported in females than in males, Non-Hispanic Whites are disproportionately affected
  - o Gonorrhea: Highest prevalence in persons aged 15-24 years old; Since 2013, more cases reported in males than females; Non-Hispanic Black/African Americans are disproportionately affected; and Increasing antimicrobial resistance
  - o Syphilis: Increasing among women of reproductive age
  - o Congenital syphilis: Highest incidence in the states in the West and South; On the rise in Connecticut; Preventable; and Now a Category 1 reportable condition

Ms. Nepaul answered numerous questions throughout the presentation. In response to questions, she clarified the following points:

- CT DPH reports the events and does not include the number of individuals re-infected. The DIS workers can see the history and apply it to their investigations as indicated.
- The data is not "real time", and a lag exists which is typical for public health data sets as it requires time to validate data across multiple sources and data systems including interstate data systems. Also, the number of available personnel (FTEs) affects the pace of the work. It is imperative for the CT DPH to publish accurate data.
  - o Ms. Linda Ferraro clarified that 2021 data sets will be posted soon. CT DPH remains at a lower than ideal personnel capacity and has been placing a priority on the DIS work. Please be patient as CT DPH continues to build capacity.
- Demographic information for STDs remains incomplete and CT DPH can only report what it receives and in some instances cannot report on incomplete data sets.
  - o A suggestion was made for provider training or a video on using EDX or expedited mail services to help with data collection. It was recognized that with limited personnel





capacity this is difficult to accomplish. It was acknowledged that many providers do not understand the reporting requirements.

- CT DPH does not have the most current data sets available on its website and will be trying to improve this process in the context of its available personnel capacity.
  - o A suggestion was made to use visualization software that would allow CT DPH to post data sets and allow users to download and visualize data.
- It was acknowledged that DIS activities focus more on Syphilis and HIV as well as any congenital syphilis cases. DIS will follow-up with chlamydia cases as indicated to connect them to treatment.
- Persons from other countries (e.g., immigrants, undocumented) can access testing and treatment services even if they do not have identification. For example, public clinics exist in Norwalk and Planned Parenthood.

Participants appreciated the presentation as evidenced by numerous comments (e.g., great job Ava, appreciate you, this is complex work and important to get it right, great information ... but disturbing) and emojis in the chat box.

Sue Major stated that the QPM will be holding a follow-up discussion based on the STD presentation. She encouraged individuals who are interested to attend the QPM meeting at 11:00 a.m.

#### **OTHER BUSINESS**

# Future Agenda Items and General Announcements

Mr. Day asked meeting participants to use the chat box and share any future CHPC meeting agenda items or general information announcements.

#### Meeting Feedback

Mr. Day encouraged all participants to complete a 1-minute survey to share feedback on how to improve virtual CHPC meetings.

# **ADJOURNMENT**

Mr. Day reminded participants of the CHPC Committee meeting schedule and access information. He adjourned the meeting at 10:48 a.m.





# CHPC ATTENDANCE RECORDS (1 = present; 0 = absent - attend less than 75% of meeting)

First Name	Last Name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct
Victor	Acevedo	1	1	1	1	1					
Thomas	Butcher	1	1	1	1	1					
Santos	Cancel	1	1	1	1	1					
Gigi	Chaux	1	1	0	1	1					
Angel	Cotto	1	1	0	1	0					
Xavier	Day	1	1	1	1	1					
Martina	De La Cruz	0	1	1	1	1					
Jennifer	Dragaca	1	1	1	1	1					
Natalie	DuMont	1	1	1	1	0					
Evette	Ellis	1	1	1	1	1					
Blaise	Gilchrist	1	0	1	1	1					
Stephen	Feathers	1	1	1	1	1					
Nilda	Fernandez	1	1	1	1	1					
Carl	Ferris	1	1	1	1	1					
Jessica	Figueroa	1	1	1	1	1					
Dante	Gennaro	1	1	1	1	1					
Cynthia	Hall	0	0	1	_1	1					
Charles	Hardy	0	1	1	1	1					
Tawana	Hart	1	1	1	1	1					
Marcelin	Joseph	1	1	_1	1	1					
Reggie	Knox	1	1	1	1	0					
Norma	Little	1	1	1	1	0					
Mitchell	Namias	1	1	1	1	1					
Peta-Gaye	Nembhard	1	1	1	1	0					
Joao "Jack"	Neto	0	1	0	1	1					
Rebecca	O'Brien	0	0	1	0	0					
Ludger	Pierre-Louis, Sr.	1	1	0	1	0					
Marie	Raynor	1	1	1	1	0					
Angel	Ruiz	1	1	1	0	1					
Anthony	Santella	1	1	1	1	1					
Roberta	Stewart	0	1	1	1	1					
Mary	Tanner	1	0	1	1	1					
Attendance		26	28	28	30	24					
Total Count Membership Roster		32	32	32	32	31					
PERCENTAGE		81%	88%	88%	94%	77%					

Public Participants who signed into the meeting: A. Croasdale-Mills, A. Hollister, A. Buccino, A. Nepaul, C. Romaguera, C. Jean-Baptiste, C. Del Vecchio, C. Munoz, D. Hylton, G. D'Angelo, D. Warren-Dias, D. Dones-Mendez, D. Jannssen, D Pawlow, E. Mott, J. Brown, J. Vargas, J. Cruz, J Trochez, K. Taylor, K Moore, K. Medley, I. Ferraro, L. Rioux, L. Vazquez, L. Diaz, L. Magana, M. Buchelli, M. Bond, M. Tastensen, M. Vazquez-Yopp, M. Sgambato, M. Virata, M. Daud, M. Gonzalez, M. Diaz, M. Jacobsen, N. Hanrahan, N. Agosto, P. Cahill, R. Rodriguez-Santana, w. Richardson, C. Romanik, R. Wimbish, R. Manthey, S. Hendon, S. Lindsey, S. Major, T. Riley, T. Edelman, T. Nolan, V. Heron, D. Reyes, K. Plourd, S. Gooding, D. Bechtel, M. Nickel, + 4 others who were identified only by telephone + several others who attended by way of a multi-person approach to participating in the meeting.