



# Ending the Syndemic (ETS) Committee Meeting Summary 15 March 2023



<b>Date:</b>	15 March 2023	<b>Start Time:</b>	12:30 p.m.	<b>End Time:</b>	1:45 p.m.
<b>Chair:</b>	Roberta Stewart	<b>DPH Liaison:</b>	Gina D'Angelo	<b>Location:</b>	Zoom
<b>Attendees:</b>	Refer to page 7	<b>Recorder:</b>	Mark Nickel		

## RESULTS

1. The committee members approved by consensus the February committee meeting summary.
2. The committee chair did a progress check on planned v. actual performance as it relates to the committee's 2023 Work Plan.
3. Representatives of the Connecticut Department of Public Health (CT DPH) Syndemic Partners Group shared updates on current and future areas of focus related to the committee.
4. The group discussed results of an interactive polls from the CHPC main meeting about routine testing and screening and offered suggestions on how to improve the questions for future use.
5. The group reviewed frequently asked questions and answers for providers and for patients.

## ACTION ITEMS

- Mark Nickel will draft a meeting summary. Participants will review the draft meeting summary and provide any additions or corrections.
- Gina D'Angelo will share any additional content with the CT DPH marketing contractor that is developing the documents. This includes any provider best practice stories collected by Anne Kohler from interviews.
- Committee participants will share any specific examples of tools or practices use to facilitate routine HIV testing such as consent to treat forms, approaches to automate electronic health records, and special procedures for testing individuals who may infrequently engage with the healthcare system.
- The committee will assemble in April.

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## CALL TO ORDER, WELCOME & INTRODUCTIONS

Committee chair Roberta Stewart called to order the meeting at 12:30 p.m. She introduced Gina D'Angelo as the committees CT DPH resource liaison and subject matter expert who provides technical assistance to the committee. Ms. Stewart briefly described the charge of the committee to support the development, adoption, and scaling of prevention and care strategies relevant to ending the HIV epidemic and other related epidemics of Sexually Transmitted Diseases (STDs), Hepatitis (Hep), and substance use disorders (SUDs).

## CONSENSUS APPROVAL OF PRIOR MEETING SUMMARY

The committee members approved by consensus the February meeting summary with some edits and a correction in the attendance record.

## UPDATES FROM THE COMMITTEE CHAIR AND PROGRESS CHECK OF 2023 WORK PLAN

Ms. Stewart stated that she did not have any committee chair updates. The committee members reviewed a screen share of the 2023 Work Plan and recognized that the committee remains on schedule in all areas of focus.



## COORDINATING ENDING THE HIV EPIDEMIC ACTIVITIES

### CT DPH Update

Ms. D'Angelo reported that:

- Marcelin Joseph, a CHPC Member and an MPH student who is completing a capstone project, will assess what type of activities are occurring in the original five (5) Getting to Zero cities and possibly conduct a more in-depth analysis in New Haven.
- The Syndemic Partners Group last met in January and provided input on the Frequently Asked Questions (FAQs) and responses.
- The CT DPH marketing vendor responsible for developing the graphic design for the tool kit needs all content by March 31. This vendor manages the TEST CT campaign and other related public awareness efforts for CT DPH and for the Connecticut Department of Mental Health and Addiction Services (CT DMHAS) which will increase alignment of messages across efforts.
  - Venesha Heron requested that the ETS Committee see a prototype of the graphic design and provide any final input. Gina D'Angelo agreed the committee would see the prototypes.
- The CT DPH Commissioner will write two (2) letters related to the routine HIV testing toolkit. One will be sent to all of the providers reminding them about the legislation and introducing them to the toolkit. The second will be a letter that appears in the toolkit.
- CT DPH positive prevention and ending the syndemic website pages need re-alignment. Gina D'Angelo and Luis Diaz will lead this effort.
- CT DPH is monitoring the progress of several legislative bills some of which advance routine HIV testing efforts and some that may affect or conflict with routine HIV testing.
  - SB 1068 PrEP/PEP Drug Assistance Program
  - HB 6733 is the CT DPH Various Revisions Bill that contains Universal HIV Testing
  - HB 6301 Establishment of an overdose prevention center and naloxone in vending machines
  - HB5941 Requirement of naloxone training
  - HB 5900 Requires parental consent for any medical or mental health treatment provided to a minor. Language in this bill is in direct conflict to 19a-216 which allows STD treatment and PrEP for minors without parental consent.
  - SB 23 Act concerning opioids to create pilot program of 3 sites aimed at decreasing overdose and increasing education, naloxone, and fentanyl test strips.

Gina D'Angelo stated that the multiple HIV-related health champions and individuals with lived experience testified on behalf of these bills. Barry Walters continues to be a leading advocate on policy matters (statewide). Ms. D'Angelo encouraged people to have their testimony ready because the process moves quickly and sometimes unpredictably.

- Danielle Warren-Dias stated that SB 1068 is an example of the process. Connecticut Children's received notice two days before the deadline and needed to organize a response quickly. This occurred at an institution that operates with much more legislative capacity than other smaller nonprofits.
- Gina D'Angelo suggested that Barry Walters could play a part in adjusting the communication process (statewide).



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## Sexually Transmitted Diseases

Ms. Linda Ferraro reported that:

- The CT DPH convened its initial meeting of the statewide STD Coalition on February 9, 2023. Nearly 60 people attended the half-day meeting including the CT DPH Commissioner and two Deputy Commissioners. Participants received a call to action to help develop a statewide STD Strategic Plan (reduce and prevent STDs), learned about 2021 STD surveillance data, and participated in small group discussions to better understand participant's perspectives about the strengths, weaknesses, opportunities, and threats (SWOT) related to the STD landscape in Connecticut. The small groups included youth and adolescents, adults, and individuals who can become pregnant. The group will meet virtually at on 30 March 2023. The participants will provide input on the development of goals. The group will meet in person in Hartford on May 26. Send an e-mail to [linda.ferraro@ct.gov](mailto:linda.ferraro@ct.gov) to join the coalition.
- April 9 to 15 is national STD awareness week. The CT DPH has been working to develop awareness campaign content including for use on social media, radio, and television. mPOX content will be included in this messaging.
- Five (5) Disease Interventionist Specialist (DIS) positions remain open and encouraged individuals to assist in sharing/recruiting qualified personnel for these important positions. These positions are listed as "epidemiologists" and can be viewed on the Department of Administrative Services website: <https://www.jobapscloud.com/CT/sup/bulpreview.asp?b=&R1=230222&R2=0285HC&R3=001>

## Hepatitis

Ms. Venesha Heron reported that:

- The Viral Hepatitis Elimination Technical Advisory Consortium (VHETAC) Clinical Committee will assemble on March 30, 2023, and continue in building a statewide plan to eliminate viral hepatitis.
- May 19<sup>th</sup> hepatitis testing day activities (2<sup>nd</sup> annual coordinated statewide event). The effort will involve mobile units, incorporate the delivery of Hep A and Hep B vaccines, and include diverse partners including the CT Harm Reduction Coalition.
- Other trainings and workshops will be offered including two trainings by CHPC Member Anthony Santella about hepatitis and HIV (April 2 and April 9) and the ABCs of hepatitis (May 9).

## Substance Use Disorders and Mental Health

Ms. Natalie DuMont reported that:

- The third webinar of their addiction stigma reduction series, Addressing Addiction Stigma in Connecticut. The webinar helps individuals learn how to support those navigating SUDs by recognizing the signs and risk factors, knowing when and how to intervene, and understanding what resources are available. [https://shatterproof.zoom.us/webinar/register/WN\\_sDGHMWTATVuTmKtnASMETw](https://shatterproof.zoom.us/webinar/register/WN_sDGHMWTATVuTmKtnASMETw)
- Discussions continue with Opioid Treatment Programs as sites for possible pilot work relating to using the syndemic approach.

## Center for Interdisciplinary Research on AIDS

No report.

## **2023 COMMITTEE WORK PLAN**

The committee members viewed a screen share of the 2023 Work Plan which highlighted tasks for March. (Refer to the work plan at the end of this document.) Ms. Stewart reported that the committee remains on right on schedule.



## ROUTINE HIV TESTING CONTENT DEVELOPMENT

Ms. D'Angelo shared the following update. A significant amount of content has been shared with the CT DPH marketing contractor responsible for designing the toolkit. The deadline for submitting materials to the marketing contractor is March 31.

Ms. D'Angelo stated that the provider interviews (Anne Kohler) remain in process. Two interviews have been scheduled and/or completed with at least one more to occur.

Ms. D'Angelo stated that the content for provider FAQs has been assembled in areas such as history of HIV testing, rationale for routine HIV testing, consent laws, how to report HIV testing to CT DPH, types of HIV testing, and billing codes. The landing pages for PPCT and ending the epidemic contains significant content. The landing page for the TEST CT redirects individuals to content on these pages. The

Ms. D'Angelo asked the group to share any examples of best practices that could be included in the toolkit and relate to any content that will be available in the toolkit. This might include:

- ✓ A checklist of steps that providers use for quality assurance across the routine HIV testing process (e.g., information available to patients, staff trained on laws and protocols, reporting to CT DPH, awareness of HIV treatment and partner services resources)
  - ✓ Consent to treat documents that address routine HIV testing
  - ✓ Workflow documents that show the inclusion of routine HIV testing
  - ✓ Decision-making algorithms that show steps in the process (i.e., "if positive test then ...)
  - ✓ Screenshots of how an EMR organizes data capture or is now programmed automatically to order an HIV test (unless the healthcare provider de-selects the option)
  - ✓ Posters that may be shared in the provider waiting rooms or in the exam rooms that discuss routine HIV testing
  - ✓ Prompts or desk aids for provider staff members to help them refer patients
  - ✓ Prompts or desk aids for providers related to reporting information to CT DPH
- Several participants suggested adding a FAQ that helped providers understand what information they could share (e.g., name of partners) and how they should request this type of information from the patient.
  - Danielle Warren-Dias expressed concern about how individuals find content on the internet and then get "triggered" or re-traumatized and partner services information could be one of these triggers.
  - Linda Ferraro and Sue Major suggested that the DIS workers may have content that they use to engage providers related to Partner Services and case finding. This content should be included in the toolkit and could even be modified (e.g., videos) for providers and for patients.
  - Several participants expressed concern about the existence of provider bias against DIS workers. These providers may explain DIS in a way that may not fully enlighten the patient about the benefits and value of DIS. Including patient/consumer information about DIS and partners services is important.
  - Natalie DuMont agreed that a simple flow chart would be useful and reference a flow chart from the main CHPC meeting presentation by Ryan White Part A Planning Council (Greater Hartford).
  - Danielle Warren-Dias suggested including a best practice related to answering the question, "How can we get assistance providing reactive test results?"



Ms. D'Angelo reviewed examples of content shared with the marketing contractor related to FAQs for consumers/patients:

1. Why are you offering me an HIV test?
  2. Can I opt out of HIV testing?
  3. What happens if I test positive for HIV?
  4. What happens if I test negative for HIV?
  5. How often should I get tested for HIV?
  6. Why test me if I have no risk factors or symptoms?
  7. How does the test work?
  8. When and how will I get my results?
  9. How much will this cost?
  10. Will my insurance cover the costs of the test?
  11. What can I do to protect myself and others from HIV?
  12. Who should I share my results with?
- Sue Major suggested adding a question, "Who are you (healthcare provider) going to share my results with?"
  - Angel Ruiz suggested adding a question important to youth, "Will my parents be informed of this test and the results?"
  - Danielle Warren-Diaz suggested adding a question that may relate to living with HIV, "If I am HIV positive, what are other circumstances when should I disclose my HIV status such as if I am in an accident and bleeding?" Gina D'Angelo stated that emergency responders should be using universal precautions. However, this is a good question for other circumstances such as an injury on the job site that does not require emergency responders.

Ms. Stewart thanked everyone for sharing their insights. Ms. D'Angelo stated that she would take the information from the discussion and adjust and enhance the content.

### **SYNDEMIC SCREENING<sup>1</sup>**

The group discussed the results of interactive poll questions from the CHPC main meeting that occurred as part of the ETS Committee report. Specifically:

1. At your last visit to your doctor, did the doctor talk to you about (check all that apply): STDs (50%), Hep (12%), substance use (33%), mental health concerns (73%), HIV (31%), PrEP or PEP (13%).
2. In the last 12 months, have you been tested for HIV (single choice)? Yes (38%), No (44%), Not Applicable (17%).

In general, the group agreed that the numbers represent a significant opportunity for improvement and reinforced the importance of routine syndemic screening. The group acknowledged that the question requires improvement because the wording may leave too much room for interpretation.

- Natalie DuMont stated that the general term substance use may need "unpacking" to differentiate between alcohol, tobacco/nicotine, cannabis, and other drugs such as heroine and cocaine.
- Sue Major suggested clarifying whether this was an annual (wellness) visit or any recent doctor visit.
- Linda Ferraro stated that the last visit to the doctor for some individuals may be for a specialty appointment

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<sup>1</sup> This discussion occurred earlier in the meeting (not in the order of the agenda).



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and routine HIV testing does not occur or is not typically discussed. She suggested rephrasing the question to something like, "in the last 12 months has your doctor talked to you about the following..."

- Angel Ruiz stated that many providers are now asking about social determinants of health and perhaps the information is getting captured in multiple places (and providers may not know).
- Some individuals stated that patient questionnaires include questions about these topics and risk factors. Healthcare personnel who have a limited amount of time do not discuss areas where patients check "no" or "does not apply". Patients who feel uncomfortable with these discussions and need help do not get asked the questions. In this case, the question should be worded "have you been asked by your doctor - in person or in some type of questionnaire..."
- Danielle Warren-Dias stated that asking these simple types of question will help get a better sense of how routine HIV testing is (or is not) occurring and how many practices are using a status neutral approach.
- Gina D'Angelo agreed that these interactive poll questions during the CHPC meeting were a good way to test survey questions or in the future test syndemic screening questions before moving into an official pilot or demonstration project.
- Linda suggested asking this type of question to participants of other coalitions similar to the CHPC such as the Hep or the STD groups.

Roberta Stewart and Gina D'Angelo thanked everyone for their high level of engagement on this topic and indicated that the question would be improved and perhaps repeated at a future CHPC meeting.

### **OTHER BUSINESS**

No participants introduced new or other business.

### **NEXT STEPS / MEETING FEEDBACK**

Participants stated that they were energized and exhausted by the CHPC meeting and the committee meeting.

### **ADJOURN**

Ms. Stewart adjourned the meeting at 1:45 p.m.



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## ETS COMMITTEE ATTENDANCE

<b>CHPC Members</b>	<b>1/18</b>	<b>2/15</b>	<b>3/15</b>						
Gigi Chaux	x	x							
Natalie DuMont	x	x	x						
Stephen Feathers			x						
Nilda Fernandez	x								
Dante Gennaro	x								
Blaise Gilchrist	x								
Marcelin Joseph	x	x	x						
Reggie Knox	x	x	x						
Norma Little	x								
Roberta Stewart	x	x	x						
Rebecca O'Brien	x	x	x						
Marie Raynor	x	x	x						
Angel Ruiz	x		x						
Mary Tanner	x	x	x						
CHPC Member #	<b>13</b>	<b>8</b>	<b>9</b>						
<b>Public Participants</b>	<b>1/18</b>	<b>2/15</b>							
Daniel Davidson	x	x							
Gina D'Angelo	x	x	x						
Sam Bowens		x	x						
Jean Brown			x						
Michael Daud		x							
AC Demidont	x								
Linda Ferraro	x		x						
Alex Garbera	x								
Ruth Garcia	x	x	x						
Shavon Gordon	x								
Venesha Heron	x	x	x						
Neena A Jacob	x								
Doug Janssen	x	x							
Michael Judd	x	x							
Dr. Anne Kohler	x								
Norman Lebron		x							
Maria Lorez	x								
Susan Major			x						
Mieykeya McClendon	x								
Pedro Mendez	x								
Kelley Moore	x	x							
Nathanial Parril	x								
Josh Rozovsky		x							
Jenn Vargas	x	x	x						
Melinda Vazquez-Yopp	x	x							
Lisbeth Vasquez	x	x							
Danielle Warren Diaz	x		x						
Public Participant #	<b>21</b>	<b>14</b>	<b>9</b>						
<b>Total Attendance</b>	<b>34</b>	<b>22</b>	<b>18</b>						

Work Plan Activity and Milestones Over Time	Month 2023											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
<b>General Committee Management</b>												
Approve meeting summary	x	x	x	x	x	x	x	x	x	x		
Updates from partners or collaborators	x	x	x	x	x	x	x	x	x	x		
<b>1. Develop content enhancements for routine HIV testing materials used in the provider tool kit</b>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Receive update on current tool kit resources	x											
Generate FAQs and response (customer journey map)	x	x										
Identify provider interview list	x											
Conduct interviews with providers and draft scenarios		x	x									
Finalize FAQ and provider scenarios			x									
Share content with CTDPH marketing contractor for packaging				x								
<b>2. Develop "how to" videos to support routine HIV testing and implementation of status neutral model by practitioners</b>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Develop / confirm list of priority topics / titles	x											
Identify best practices, content, or individuals who can provide subject matter expertise		x										
Discuss core messaging for use in scripts		x	x									
Finalize scripts				x								
Transfer scripts to partner for video production				x	x							
Review videos and provide any feedback for editing					x							
<b>3. Develop brief screening tool that addresses all syndemic areas of focus</b>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
CTDPH alerts and engages Syndemic Partner Group and coordinates involvement	x											
ETS participants requested to submit "best screening questions" by e-mail		x										
ETS reviews list of best questions and identifies top questions			x									
Develop and review draft screener				x								
Pilot draft screener at up to three CTDPH funded prevention sites					x	x						
Review feedback from pilot process and adjust screener							x					
Develop recommendations to scale use of screener									x			
<b>4. Develop PrEP-specific content enhancements to provider tool kit to support prevention and status neutral model</b>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Receive update on current tool kit resources							x					
Generate FAQs and response							x					
Identify provider interview list							x					
Conduct interviews with providers and draft scenarios								x	x			
Finalize FAQ and provider scenarios										x		
Identify priority topics for "how to videos"							x					
Develop core messaging for use in scripts (includes ETS discussions, interviews with experts)									x	x		
Finalize scripts										x		
Transfer scripts to partner for video production											x	
Share content with CTDPH for inclusion in tool kits												x