



AGENDA

October 21, 2019

Meriden Health Department

*Presiding Chair, Gina D'Angelo

Meeting Objectives

1. Approve September 2019 meeting summary (consensus).
2. Refresh awareness of statewide G2Z recommendations.
3. Get current knowledge about City of New Haven G2Z capacity building grant.
4. Identify committee priorities and develop 2020 work plan and deliverables.

A. Welcome & Call to Order 10:35 a.m.

- Introductions
- Context and charge of committee
- Meeting objectives
- Meeting etiquette + process

B. Review September 2019 Meeting Summary (handout) 10:45 a.m.

- Approve by consensus

C. Review of Statewide G2Z Recommendations (page 2) 10:50 a.m.

D. City of New Haven G2Z Capacity Building Grant Update 11:00 a.m.

E. 2020 Work Plan Development..... 11:15 a.m.

- Priorities or areas of emphasis (e.g., identify/expand partners; identify content/core messages; identify best practices and share statewide; special events or training)
- Deliverables / results and time frame

F. Next steps / Meeting Feedback..... 11:50 a.m.

G. Adjourn 11:55 a.m.

Executive Summary of Strategic Proposals and Recommendations

Although the number of new cases of HIV is on the decline in some populations, in Connecticut among MSM of color, Black women, and transgender women, the rate of HIV is increasing, particularly in Hartford, Waterbury, New Haven, Bridgeport and Stamford. These increases led to the formation of the G2Z Commission which conducted eighteen listening sessions with nearly 200 participants, representing the populations most impacted. The key themes discussed in the listening sessions were representative of the data that indicated where barriers might exist with HIV testing, prevention, care and stigma. The feedback from the listening sessions informed this report and the recommendations from the Commission on how to address the prevalence of HIV within these populations relative to testing, prevention, care, and stigma. A summary of the G2Z Commission recommendations is outlined here:

Recommendation 1: State-wide Getting to Zero (G2Z) Implementation	Form a CT G2Z Working Group to develop an overall model for implementing recommendations of the 2018 CT G2Z Commission at the state level and to drive and monitor G2Z activities statewide. Engage leaders in the five highest HIV incidence cities (Hartford, New Haven, Bridgeport, Waterbury, and Stamford) to monitor G2Z activities at the city level.
Recommendation 2: G2Z Implementation in the Five Cities	Form a G2Z Working Group in each of the five highest HIV incidence cities (Hartford, New Haven, Bridgeport, Waterbury, Stamford) to implement G2Z recommendations in each city. Engage all stakeholders, including providers addressing HIV care and prevention, and community members most impacted by HIV, in the city G2Z Working Group and in implementation efforts.
Recommendation 3: PrEP and PEP Education and Implementation	Develop and launch a visible statewide PrEP and PEP education and implementation program. Engage the state-level and city-level G2Z Working Groups, primary care providers, and other healthcare providers, particularly those caring for people with substance use disorders, mental health needs, and sexually transmitted infections, in planning and implementation. PrEP and PEP promotional materials should be inclusive of all groups at high risk for HIV infection.
Recommendation 4: State-wide Multilevel HIV Educational Campaign and Provider Capacity Building Training	Under the direction of the CT G2Z Working Group, develop and implement multi-level, and population specific HIV education and training campaigns at the state and city levels to educate or reeducate providers and community members about HIV prevention, care, and stigma. Include training in current HIV medications and protocols and LGBT sensitivity/awareness for providers; include U=U (undetectable = untransmittable) and peer education programming in the community.
Recommendation 5: Implementation of Routine HIV Testing	Engage stakeholders to develop HIV testing legislation in accordance with CDC recommendations for routine HIV testing for all persons ages 15-64. Enforce routine HIV testing legislation in all healthcare facilities statewide, with emphasis on primary care providers and substance abuse facilities. Develop marketing for routine testing for the general population.
Recommendation 6: Implementation of Standardized Medical Care for People Living with HIV (PLWH)	Close gaps in HIV treatment by implementing and enforcing best practice medical care for PLWH. Incentivize, track and enforce providers' adherence to the most up-to-date medications and medical care protocols.

Operationalizing Each Recommendation of the G2Z Commission [*Includes updates from 9/9/2019 meeting; will be updated more prior to meeting in October.]

G2Z Commission Recommendations <i>(Red italics denotes points of emphasis / progress)</i>	Area of Work Emphasis to Inform Coordination and/or Address Gaps								
	Policy / Legislative	Communications / Marketing / Awareness	Outreach / Engagement / Education	Direct Service Delivery	Prof Dev / Training	Capacity Building / Coordination	System Change (IT, Service Integration)	Monitoring / Evaluation	Other (list)
1. Statewide G2Z Implementation. Form a CT G2Z Working Group to develop an overall model for implementing recommendations of the 2018 CT G2Z Commission at the state level...	Cell 1A	Cell 1B	Cell 1C	Cell 1D	Cell 1E	Cell 1F	Cell 1G	Cell 1H	Cell 1I
	CHPC; CHPC G2Z Committee; DPH Office of Health Equity; CT Office of Healthcare Access	G2Z website; Positive Prevention CT website; Positive Prevention CT meetings; Agency level social media SMEs	Infrastructure used to support DPH EIS and DIS and any contractors	Federal and state funded partners (*must move beyond HIV)	DPH and health system training partners	CHPC G2Z Committee	DPH data system enhancements and improvement (TBD)	CHPC G2Z indicators; other state data sources (health equity)	Change funding to support the work
2. G2Z Implementation in the Five Cities. Form a G2Z Working Group in each of the five highest HIV incidence cities...	Cell 2A	Cell 2B	Cell 2C	Cell 2D	Cell 2E	Cell 2F	Cell 2G	Cell 2H	Cell 2I
	Local G2Z Teams & plan priorities	TBD	TBD	TBD	TBD	New Haven G2Z Grant supports Local Team Formation	TBD	Align with cell 1H	Secure more funding to support the work
3. PrEP and PEP Education and Implementation. Develop and launch a visible statewide PrEP and PEP education and implementation program.	Cell 3A	Cell 3B	Cell 3C	Cell 3D	Cell 3E	Cell 3F	Cell 3G	Cell 3H	Cell 3I
				PrEP DAP design	PrEP Navigator training			CHPC Prep to Need Ratio Indicator	

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4. Statewide Multilevel HIV Educational Campaign and Provide Capacity Building Training (population specific) that focuses on HIV prevention, care, and stigma.	Cell 4A	Cell 4B	Cell 4C	Cell 4D	Cell 4E	Cell 4F	Cell 4G	Cell 4H	Cell 4I
		CT signed on for U=U campaign Positive Prevention CT; develop network of local social media hubs							
5. Implementation of Routine HIV Testing. Engage stakeholders to develop legislation in accordance with CDC recommendations.	Cell 5A	Cell 5B	Cell 5C	Cell 5D	Cell 5E	Cell 5F	Cell 5G	Cell 5H	Cell 5I
	On DPH Legislative Agenda	Develop tools that can support local communication campaigns for routine HIV testing			AETC clinical training efforts				
6. Implementation of Standardized Medical Care for People Living with HIV (PLWH). Close gaps in HIV treatment by implementing and enforcing best practice medical care for PLWH.	Cell 6A	Cell 6B	Cell 6C	Cell 6D	Cell 6E	Cell 6F	Cell 6G	Cell 6H	Cell 6I
				CADAP formulary changed Data 2 Care	Quality Improvement Summit (2019)		DPH data system improvements		