MEETING SUMMARY

Date:	June 17, 2020	**Location:**	Virtual Meeting
Start Time:	11:10 a.m.	**End Time:**	12:00 p.m.
Participants:	Page 3 shows attendance		
Chair:	Laura Aponte	**Recorder:**	Lisa Mason

Meeting Accomplishments

- Participants approved by consensus the May 20, 2020 NAP Team meeting summary.

- Participants completed review of the logic model, **Emerging Recommendations to Strengthen the HIV Prevention and Care Workforce in Connecticut**, column 5, outcomes.

- Participants created an initial list HIV workforce competencies that new HIV care workers should develop by the end of the first 90 days and one year of employment.

Welcome & Introductions

Laura Aponte, NAP Team chair, welcomed participants to the meeting and reviewed ground rules for our second virtual meeting. She encouraged everyone to follow the safety guidelines and stay healthy.

Approval of May 2020 NAP meeting summary

The NAP Team approved by consensus the May 20, 2020 meeting summary.

Review of HIV Workplace Survey Summary of Emerging Themes

The NAP Team completed review of the fifth and final column, Outcomes, of the logic model, **Emerging Recommendations to Strengthen the HIV Prevention and Care Workforce in Connecticut**, and had no additions or changes. (Columns 1-4 were discussed at the May 20, 2020 meeting.)

Identification of HIV Workforce Competencies

The NAP Team spent the remainder of meeting identifying HIV workforce competencies that HIV workers should have to be effective. The attached HIV Workforce Competencies chart was reviewed as a framework for moving forward in the creation of a HIV workforce development plan. NAP Team member generated the following list of competencies should have by the end of 90 days and one year:

- General knowledge of HIV
- Commitment to stay updated in field
- Customer service skills
- Time management
- Stress management
- De-escalation skills
- Client assessment and identification of client needs and challenges
- Motivational interviewing
- Passion and commitment to work
- Use of non-stigmatizing language

- Use of inclusive words
- Communication skills including awareness and use of appropriate body language
- Cultural competency/humility
- Team player
- Medical case management and knowledge of best practices
- Community relationships and knowledge of community resources for referral
- Minimum knowledge of mental health issues and substance misuse disorders

- Case manager-client boundaries
- Trauma informed knowledge and practices
- Knowledge of agency policies and procedures for working with clients
- Confidentiality policy and practices

- Ability and willingness to recognize when client may be uncomfortable, check in with them, and refer if necessary

NAP Team members contributed the following suggestions for building HIV workforce competencies:

- Create standardized training to ensure consistent services across regions and organizations. This is especially important for clients who move to another region.
- Provide hands-on or experiential learning
- Check existing training resources (Healthy HIV)
- Encourage supervisors to use a coaching/team approach to support HIV care workers
- Supervisors serve as models and coaches, especially when facing client challenges or HIV care worker is not comfortable with assessment topics or case management services (e.g. sexual activity)
- Review agency policies and procedures at standardized times (i.e. review policies every two weeks during training period)

Additional discussion points included:

- Encourage diversity when hiring so HIV care workers reflect the population served.
- It can take 6 months to 1 year for an HIV care worker to get grounded and be successful.
- In the Black community, contacting a religious official may be preferable than a referral to a mental health counselor.
- Consider surveying experienced HIV care workers' skills sets to assess expertise and identify trainers in development of a training system

Next Steps

The NAP Team will complete the HIV Workforce Competencies table including

- Review of identified workforce competencies
- Classification of competencies to be developed within 90 days and one year of employment
- How to assess these competencies
- How to identify and qualify training content

Adjournment

Ms. Aponte adjourned the meeting at 12:00 p.m.

Meeting Attendance

Laura Aponte; Jean Brown, Marianne Buchelli, Brian Datcher, Xavier Day, Martina De La Cruz, Lynette Gibson, Cynthia Hall, Nicole Morgan, and Erika Mott

HIV Workforce Competencies

HIV Workforce Competencies	Within first 90 days of employment	By end of first year of employment	How to access competency achievement?	How to identify and qualify content?	Other comments
General knowledge of HIV and commitment to stay updated					
Customer service skills					
Time management					
Stress management					
De-escalation skills					
Client assessment and identification of client needs and challenges					
Motivational interviewing					
Passion and commitment to work					
Use of non-stigmatizing language					
Use of inclusive words					
Communication skills including appropriate body language					
Team player					
Cultural competency/humility					
Medical case management and knowledge of best practices					
Community relationships and knowledge of community resources for referral					
Knowledge of mental health issues and substance misuse disorders					
Professional boundaries					
Trauma informed knowledge					
Knowledge of agency policies and procedures					
Confidentiality policy and practices					
Ability and willingness to recognize when client may be uncomfortable and needing referral to another helper					