

Ending the Epidemic/Integrated HIV Prevention and Care Planning Body
Ryan White Office of Support
1310 Prairie Street, Suite 800, Houston, Texas 77002
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RESPOND COMMITTEE

AGENDA

2 p.m., Wednesday, February 28, 2024—This first meeting is virtual only

Join Zoom Meeting: <https://us02web.zoom.us/j/8899837982>

Meeting ID: 889 983 7982

Or, join by telephone at: 346 248-7799

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|------|--|---|
| I. | Welcome | Tana Pradia and
Paul Richards, Co-Chairs |
| | A. State who will facilitate today's meeting | |
| | B. Introductions | |
| II. | Brief Description of the EHE/Integrated Plan | Tori Williams, Director
Ryan White Office of Support |
| III. | Set Date for Next Meeting | |
| IV. | Roles, Responsibilities & Overall Process | Tori Williams |
| | A. Co-Chairs, Staff & Leadership Team | |
| | B. Members of Data and Evaluation Committees | |
| | C. Process for 2024: | |
| | ➤ Review the goals | |
| | ➤ Add members? | |
| | ➤ Use former Task Force membership lists? | |
| | ➤ Create inventory of resources related to the goals,
especially mainstream resources | |
| | ➤ Justify editing or giving goals away | |
| | ➤ Educate, educate, educate (data, speakers & more) | |
| | ➤ After much education, take action | |
| | D. Document progress for Leadership Team (see next page) | |
| V. | Review Goals | Tana Pradia and
Paul Richards, Co-Chairs |
| VI. | Assign Tasks | Tana Pradia and
Paul Richards, Co-Chairs |
| VII. | Adjourn | |

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Agenda/Documentation of Progress for Respond Committee—Page 2
2 p.m., Wednesday, February 28, 2024

NEXT MEETING DATE: _____

SUMMARY OF MEETING (over if more space is needed):

DECISIONS MADE & TASK ASSIGNMENTS:

Submitted by: _____
Staff Member

Date: _____

Respond Committee

Goal 4A: Increase capacity to identify, investigate active HIV transmission clusters and respond to HIV outbreaks in 1 year.

Goal 4A.1: Actively involve members of local communities in naming, planning, implementation, and evaluation by leveraging social networks, planning bodies, and community stakeholders in developing partnerships, processes, and data systems that facilitate response activities.

As of October 18, 2022, the Presidential Advisory Council on HIV/AIDS (PACHA) has asked the CDC to direct jurisdictions funded for Cluster Detection Response (CDR) activities to adapt their implementation of CDR to account for local conditions, including health data privacy protections and laws criminalizing people living with HIV.

Key Activities:

- Invest in technological solutions that further our partnerships, processes, and mass communication dissemination.
- Host regularly scheduled community forums, presentations, and webinars with a variety of audiences such as residents, business owners, churches, bars, schools, and politicians. Increase transparency and buy-in by providing accurate information on important topics (e.g., privacy, protection, anonymity, gaps, recommended changes, and best practices).
- Expand the response Community Advisory Board (CAB) by incorporating interested participants from various taskforces, internal (e.g., Tuberculosis and HCV) and external stakeholders.
- Conduct a feasibility study on outsourcing response activities to community partners.
- Provide engaging non-stigmatizing safe spaces that promote information sharing on what is going on in neighborhoods and tailor recommendations. Normalize inclusive discussions and team building activities among residents and community leaders by broadly advertising meetings in multiple locations (e.g., Southwest, Montrose, Third Ward, Fifth Ward) to reduce stigma. Utilize these platforms to spotlight the great work communities are accomplishing to constantly reenergize buy-in.
- Conduct public health detailing to inform and educate providers about required disease reporting and how to effectively inform their patients.

Goal 4B: Build a community-tailored program to investigate and intervene in active networks and ensure resources are delivered where need is the greatest.

Key Activities:

- Build contingency/surge capacity such as venue-based screenings cluster response efforts with existing contracted CBOs (when needed).

- Utilize case data and case studies to train both community partners and the HHD staff on better approaches to effectively respond to clusters, including the role partner services can play.
- Integrate both CDR and time-space analysis to identify clusters.
- Conduct rapid response, ART linkage, and same-day PrEP in cluster investigations through close collaboration with contractors, care providers and other stakeholders.

Goal 4C: Empower effective advocacy and policy changes at the local, state, and federal levels.

Key Activities:

- Reestablish the CPG mandate to ensure community engagement and voice is consistently being heard.
- Explore requirements necessary to change laws in the state by assessing current laws and implement annual assessment.
- Examine the effects of HIV criminalization cases in the state to address policy barriers.
- Reevaluate and revise the partner index requirement within the State of Texas.
- Annually assess and report on data protection policies and procedures that ensure safeguards and firewalls protecting public health research and surveillance data from access by law enforcement, immigration, and protective services systems.
- Quarterly update the CDR plan in partnership with the community CAB.