

SUMMIT AGENDA

GOAL

Goal – To support health department efforts to improve health outcomes, prevent new HIV infections, and advance health equity by:

1. Quickly identifying rapid HIV transmission and prioritizing public health action.
2. Effectively responding to rapid HIV transmission, in collaboration with community partners, with interventions to interrupt transmission and address system gaps.

OBJECTIVES

1. Facilitate sharing of CDR approaches, experiences, and best practices for effective CDR planning, policies, procedures, and implementation from across the country.
2. Increase health department capacity for robust implementation of CDR activities, with an emphasis on the following:
 - Supporting response activities that emphasize identifying and addressing network and system-level factors (e.g., service gaps) that may facilitate rapid transmission
 - Using approaches that meaningfully engage and collaborate with local partners, people with lived experience, and other community members on an ongoing basis and as partners in responding to small and larger clusters
 - Supporting the strengthening of CDR standard operating procedures and CDR plans to facilitate these efforts
 - Sharing information about CDR work, including molecular detection and responses to specific clusters, with cluster members and networks, local partners, and the public
 - Specific approaches to identify and address common individual, network, and systems-level factors that can facilitate HIV transmission
 - Specific approaches and special considerations about how to do CDR work in different local contexts

BY THE END OF THE IN-PERSON SUMMIT, PARTICIPANTS WILL BE ABLE TO:

1. Share and hear examples of best practices for effective CDR planning, policies, procedures, and implementation strategies
2. Expand their network of peers engaging in CDR implementation
3. Identify innovations in CDR implementation from health departments to strengthen their CDR planning and activities

Tuesday, June 13, 2023

3:00 PM – 5:00 PM Terrace Foyer (LL1)	Registration open
--	--------------------------

DAY 1

Wednesday, June 14, 2023

8:00 AM – 10:00 AM Terrace Foyer (LL1)	Registration open
8:00 AM – 9:00 AM Regency VII (LL1)	Breakfast Provided
9:00AM – 9:30AM Regency VII (LL1)	<p>Welcome</p> <p>NASTAD and federal partners will welcome participants to the Summit and share opening remarks.</p> <p>Moderators: <i>Erin Bascom (NASTAD); Karen Schlanger (CDC)</i></p> <p>Presenters: <i>Harold Phillips, Director of the White House Office of National AIDS Policy (ONAP); Robyn Neblett Fanfair, Acting Director, Division of HIV Prevention (CDC); Alexa Oster, Chief, Detection and Response Branch (DHP, CDC)</i></p>
9:30 AM – 10:30 AM Regency VII	<p>Plenary 1: Effective Strategies and Collaborations for Compiling and Reviewing Data to Prioritize and Plan Response Activities that Include Addressing Identified Service Gaps</p> <p>This plenary will highlight the importance of collaboratively conducting cluster detection and response activities within the health department and with community partners. Speakers will discuss strategies to successfully approach cluster responses at the individual, network, and systems levels and collaborate across health departments and with community partners to identify and address service gaps.</p> <p>Moderator: <i>Karen Schlanger (CDC)</i></p> <p>Presenters: <i>Jacob Watson and Loren Powell (Michigan Department of Health and Human Services); Kathleen Poortinga (Los Angeles County Department of Public Health)</i></p>
10:30AM – 10:45AM	Break

<p>10:45 AM – 12:00 PM Regency VII (LL1)</p>	<p>Plenary 2: Partnering with Community Providers When Responding to Clusters</p> <p>Community-based providers, both clinical and non-clinical, are critical partners in CDR implementation. In addition to providing direct healthcare services to individuals linked to clusters, community providers can also play an essential role in addressing gaps and unmet needs identified during cluster detection and response activities, including social determinants of health. This plenary will feature health departments with experience partnering with service providers within in their jurisdictions to address service gaps within different communities in response to HIV clusters.</p> <p>Moderator: Rob Bonacci (CDC) Presenters: Eric Rangel (Latino LinQ/ILC Community Implementation Partners Panel); Carlos Saldana (Fulton County Board of Health, GA); Brenda Hernandez (Massachusetts Department of Public Health); Emily Lewis and Loren Powell (Michigan Department of Health and Human Services)</p>
<p>12:00 PM – 1:15 PM Regency VII (LL1)</p>	<p>Networking Lunch (Provided)</p>
<p>1:15 PM – 2:30 PM Baker (LL3)</p>	<p>Breakout Session One</p> <p>Breakout A: Experiences Implementing Different Testing Strategies as Part of Routine and Escalated Responses</p> <p>This session will discuss how HIV testing strategies are being implemented and evaluated to address stigma and reach key populations in need of HIV testing and linkage services when identifying clusters of concern.</p> <p>Moderators: Rey Cordova (NASTAD); Katie Curran (CDC) Presenters: Liz DiNenno (CDC); Anna Thomas-Ferraioli (Philadelphia Department of Public Health); Nova Cabugao and Thomas Knoble (San Francisco Department of Public Health); Cody Shafer-Fritz (Iowa Health and Human Services)</p>
<p>Regency VII (LL1)</p>	<p>Breakout B: Policy Issues - Health Department Data Protections</p> <p>This session will review public health data protection principles and how these intersect with CDR implementation, and provide examples of approaches health departments can take to understand and strengthen the protection of their HIV data. DC Health will share about revisions to their HIV data release regulations based on community input, and NASTAD will offer a walkthrough of how to use its HIV Data Protection Landscape interactive map as a tool for your jurisdiction.</p> <p>Moderator: Erin Bascom (NASTAD) Presenters: Amy Killelea (NASTAD Consultant - virtual), Brittani Saafir-Callaway (DC Health HIV/AIDS, Hepatitis, STD and TB Administration)</p>

Dunwoody (LL3)	<p>Breakout C: Investigation Strategies Beyond Partner Services, Including Medical Chart Review and Rapid Ethnographic Assessment</p> <p>During this session, participants will learn about techniques they can employ when responding to clusters or outbreaks beyond partner services interviews. The two techniques the health department and CDC presenters will describe are medical chart review and rapid ethnographic assessment.</p> <p>Moderator: Eve Mokotoff (NASTAD) Presenters: Christine Agnew Brune and Rob Bonacci (CDC); Alana Hudson (West Virginia - virtual), Nathan Kirk (West Virginia DHHR, Bureau for Public Health); Betsey John (Massachusetts Department of Public Health)</p>
2:30 PM – 3:00 PM	<p>Break & Networking Time</p>
3:00 PM – 4:15 PM Baker (LL3)	<p>Breakout Session Two</p> <p>Breakout A: CDR Implementation in Lower Morbidity/Smaller Jurisdictions</p> <p>This breakout session will highlight and explore the unique needs and best practices of CDR activities in low-morbidity jurisdictions. Speakers from Alaska and South Dakota will provide an overview of their jurisdictional approach, experience, and lessons learned from recent HIV cluster responses. A facilitated discussion among panelists and attendees exploring CDR program capacity needs, community engagement, and the use of various tools for CDR will conclude the session.</p> <p>Moderators: Lindsay Jordan Pierce, M.Ed. (CSTE); Alexa Oster, MD (CDC) Presenters: Sarah Brewster (Alaska Department of Health); Sarah Zaiser (South Dakota Department of Health)</p>
Regency VII (LL1)	<p>Breakout B: CDR Implementation in Medium/High Morbidity Jurisdictions; CDR Collaboration Across Health Department Programs</p> <p>This breakout session will share models, challenges, and opportunities for working across health department programs to effectively plan and implement CDR efforts for routine priority clusters and clusters of high concern (including collaborating across HIV and syndemic diseases surveillance, prevention, testing, clinical and DIS services).</p> <p>Moderator: Craig Hayes (CDC) Presenters: Brittany Yarnell & Emily Fussell (Indiana - Marion County Public Health Department); Riley Gulbronson (Tennessee Department of Health)</p>
Dunwoody (LL3)	<p>Breakout C: Directly Funded Cities and Counties and Indirectly Funded EHE Counties</p>

This session will include brief presentations from both a CDC directly-funded city and an indirectly-funded county on their CDR work. Following the presentations, participants will engage in a facilitated discussion on collaboration, data integration, and ways peers have worked through CDR challenges in their communities.

Moderator: *Symone Richardson (CSTE)*

Presenters: *Anna Thomas-Ferraioli and Denise Mulbah (Philadelphia Department of Public Health); Alexia Williams and Stephanie Sherard (Mecklenburg County Department of Public Health, NC)*

4:15 PM – 5:00 PM
Baker & Dunwoody
(LL3)

DRB Epidemiologist Meet and Greet (Optional)

Participants will have an opportunity to meet with the Detection and Response Branch (DRB) epidemiologist assigned to their jurisdiction.

DAY 2

Thursday, June 15, 2023

<p>8:00 AM – 9:00 AM Regency VII (LL1)</p>	<p>Breakfast Provided</p>
<p>9:00 AM – 10:15 AM Regency VII (LL1)</p>	<p>Plenary 3: Communicating About Routine CDR Work and Specific Clusters to Partners, Providers, and the Public</p> <p>This session will present examples of how health departments communicate to partners, providers, and the public about routine CDR activities and how they have communicated in specific responses. Examples may include how to explain molecular detection and CDR activities to various audiences, including planning councils, community members, people with HIV, and the general public. Examples may include communicating how a specific cluster or outbreak was identified and how ongoing activities were communicated to key audiences.</p> <p>Moderators: <i>Nicole Elinoff (NASTAD); Meg Watson (CDC)</i> Presenters: <i>Roxanne Kerani (University of Washington); Claire Mocha (Washington State Department of Health); Brian Minalga (Fred Hutchinson Cancer Center/ILC Community Implementation Partners Panel); Christina Martone (Virginia Department of Health)</i></p>
<p>10:15 AM – 10:30 AM</p>	<p>Break</p>
<p>10:30 AM – 11:45 AM Regency VII (LL1)</p>	<p>Breakout Session Three</p> <p>Breakout A: Cluster Response Monitoring and Evaluation</p> <p>This session aims to make integrating monitoring and evaluation approachable by sharing real-life techniques/methods and be as jargon-free as possible. This session will provide health department experiences with monitoring their cluster response(s).</p> <p>Moderators: <i>Eve Mokotoff (NASTAD) and Laura Triplett (CDC)</i> Presenters: <i>Katie Curran (CDC); Beth Kingdon (Minnesota Department of Health – virtual); Manny Singh (Kentucky Department of Public Health); Samantha Mathieson (Tennessee Department of Health)</i></p>
<p>Baker (LL3)</p>	<p>Breakout B: Models of Collaborating with Local Health Departments in Responding to Clusters</p> <p>Response to HIV clusters and outbreaks happens at the local level, affecting local staff and their community. Historically, however, HIV programming for surveillance and prevention has primarily been the state’s responsibility. The challenge lies in effectively connecting and coordinating these two levels to achieve a successful response. This</p>

Dunwoody (LL3)	<p>session aims to showcase various programs that have successfully developed processes to facilitate collaboration between state and local entities. The session will also provide a platform for participants to engage in facilitated discussions, identifying strategies to overcome any challenges that may arise in this coordination process.</p> <p>Moderators: <i>Nicole Elinoff (NASTAD); Paul McClung (CDC)</i></p> <p>Presenters: <i>Dr. Jenna Gettings (Georgia Department of Public Health); Eva Pradhan (New York State Department of Health); Lea Bush (Oregon Health Authority)</i></p>
11:45 AM – 1:45 PM Regency VII (LL1)	<p>Breakout C: Experiences Addressing Stigma in Responding to Clusters</p> <p>This session will provide multiple perspectives on how to best address stigma when responding to outbreaks and clusters. Attendees will learn about the successes and struggles community members and jurisdictions have experienced regarding HIV stigma.</p> <p>Moderators: <i>Craig Hayes (CDC); David Folkes (ThriveSS)</i></p> <p>Presenters: <i>Tyler Huynh and Jose Demarco (ILC Community Implementation Partners Panel)</i></p>
1:45 PM – 2:00 PM Regency VII (LL1)	<p>Lunch Plenary: Partner Services CDR Messaging and Interview and Partner Elicitation Best Practices</p> <p>The session will focus on incorporating DIS and partner services into HIV cluster response and best practices for DIS. Topics will include CDR messaging to individuals in clusters, examples of staffing models and DIS prioritization during a response, and CDR interviews and partner elicitation best practices. Speakers will include health department representatives with experience overseeing DIS during a response and federal DIS, who have deployed for several responses.</p> <p>Moderators: <i>Rey Cordova (NASTAD); Emily Holman (CDC)</i></p> <p>Presenters: <i>Dawn Broussard (CDC); Nathan Kirk (West Virginia DHHR, Bureau for Public Health)</i></p>
2:30 PM – 4:00 PM Baker & Dunwoody (LL3)	<p>Closing Remarks</p> <p><i>Erin Bascom (NASTAD); Alexa Oster, Meg Watson, Karen Schlanger (CDC)</i></p> <p>Optional meeting time with DRB Epidemiologists or DHP staff</p> <p>Participants will have an opportunity to meet with the Detection and Response Branch (DRB) epidemiologist assigned to their jurisdiction, or other DHP staff.</p>

Funding for this conference was made possible by the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.