PART III
Florida’s Ending the HIV Epidemic Plan

October 29, 2020
## Florida’s Ending the HIV Epidemic (EHE) Plan

### SESSION III AGENDA

**Day 4 — Thursday, October 29, 2020**

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<td>3. Session 7. Community Engagement Update and Finalized Work Plan</td>
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**BREAK**
Florida’s Ending the HIV Epidemic (EHE) Plan

TODAY’S SESSION WILL HELP YOU TO:

• Learn about the community engagement actions completed in PALM BEACH COUNTY & PINELLAS COUNTY to-date.

• Gain understanding of the locally approved activities and strategies that align with Florida EHE Plan for a ‘Unified Approach’ in accordance with the EHE pillars.
At-A-Glance

Total Population: **1,446,277**

- Population Living in Poverty: **12.8%**
  - 21.3% of the Black population were living below poverty level compared to 10.6% of the White population
  - 18.4% of the Hispanic population were living below poverty level compared to 11.3% of the non-Hispanic population

- Uninsured Population: **13.9%**
  - 18.5% of the Black population were uninsured compared to 11.9% of the White population
  - 25.2% of the Hispanic population were uninsured compared to 10.6% of the non-Hispanic population

Source: U.S Census Bureau, 2014-2018 American Community Survey 5-Year Estimates, 2018
At-A-Glance

• Foreign-Born Population: 25%
  • 78.3% of foreign-born population was born in Latin America

• Homeless Population: 1,510 people
  • 713 White
  • 710 Black
  • 175 Hispanic

Source: U.S Census Bureau, 2014-2018 American Community Survey 5-Year Estimates, 2018; Palm Beach County Community Services Department, 2020
HIV Prevalence and Diagnoses

- Number of People with HIV (PWH) **8,259**
- Rate of PWH per 100,000 population **566.2***
- Linkage to HIV Medical Care **81.7%**
- Number of New HIV Diagnoses **248**

Source: Florida Department of Health, HIV/AIDS Section, 2019; America’s HIV Epidemic Analysis Dashboard, 2018

*Statistically significant different than the state
Community Engagement Efforts

• PBC developed data collection instruments based on the 4 pillars of EHE
• PBC utilized diverse approaches to engage providers, stakeholders and residents in local EHE planning, including:
  • Resident Key Informant Interviews (by telephone)
  • Virtual Focus Groups (for PWH)
  • Provider Key Informant Interviews (representing 33 entities across multiple sectors)
  • EHE Grantee Interviews and Discussions (4 entities)
  • Public EHE Listening Session
• PBC made efforts engage a diverse and representative sample
Community Engagement Efforts

- HCSEF reached 247 residents through key informant interviews and virtual focus groups
  - Participants represented 39 ZIP Codes across PBC
  - Interviews were conducted in English, Haitian-Creole and Spanish
  - Two focus groups were conducted for PWH
  - Approximately 10% of participants identified as LGBTQ+
  - Approximately 39% of participants identified as Black/African American
  - Approximately 21% of participants identified as Hispanic/Latino
Palm Beach County’s
Ending the HIV Epidemic Plan
Objective: Increase the percentage of PWH who have received an HIV diagnosis from 87.7% to 91.4% by 2025.

Strategy:

Enhance and expand community-based HIV testing, particularly for disproportionately impacted and under-served communities.
Pillar 1: DIAGNOSE

Proposed Activities

ACTIVITY: Conduct a comprehensive assessment to identify specific geographic areas (by zip code) and communities (disaggregated by race and ethnicity) with limited access to HIV testing

ACTIVITY: Deploy mobile HIV testing units throughout the county, with a specific focus on identified priority areas
Proposed Activities

**ACTIVITY:** Expand the availability and utilization of home-based HIV self-testing kits

**ACTIVITY:** Identify and engage potential partners, particularly non-conventional venues, to build system capacity for HIV testing where it is most needed
LOCAL PERSPECTIVE

Pillar 1: DIAGNOSE

Proposed Activities

ACTIVITY: Strategically expand community-based HIV testing in geographic areas with highest HIV incidence

ACTIVITY: Establish drive-thru and walk-up rapid HIV testing sites and convenient and accessible locations.
Pillar 1: DIAGNOSE

Strategy:
Expand universal and routine opt-out HIV screening in health care settings
LOCAL PERSPECTIVE

Pillar 1: DIAGNOSE

Proposed Activities

ACTIVITY: Establish a united and coordinated effort to engage hospitals and health care systems to implement universal HIV testing in emergency departments.

ACTIVITY: Support health care providers in developing protocols for integrating routine opt-out testing into practice.
LOCAL PERSPECTIVE

Pillar 1: DIAGNOSE

Strategy:

Address and reduce HIV-related stigma
Proposed Activities

**ACTIVITY:** Expand opportunities for peer mentors, community health workers, promotores de salud and others who share relevant lived experience with communities to be served

**ACTIVITY:** Provide enhanced training for HIV service providers on HIV-related stigma and cultural humility
Pillar 1: DIAGNOSE

Strategy:

Implement a coordinated multi-pronged marketing campaign to promote EHE and normalize HIV testing
Pillar 1: DIAGNOSE

Proposed Activities

ACTIVITY: Collaborate with community residents, PWH, leaders and stakeholders, particularly among disproportionately impacted populations, to develop culturally-appropriate and non-stigmatizing messaging to encourage HIV testing.

ACTIVITY: Enhance and expand, “What will you do to end the epidemic?” messaging and marketing efforts.
Pillar 1: DIAGNOSE

Proposed Activities

**ACTIVITY:** Establish and maintain a dedicated EHE website to track PBC’s progress towards ending the epidemic, including integration of CDC’s AHEAD dashboard

**ACTIVITY:** Develop and disseminate EHE messaging via mass media (including television, radio commercials, and newspapers)
Proposed Activities

**ACTIVITY:** Develop EHE messaging specific to particular key demographics (ex. youth)

**ACTIVITY:** Develop and disseminate creative, engaging and interactive EHE messaging via a wide range of social media platforms
LOCAL PERSPECTIVE

Pillar 1: DIAGNOSE

Proposed Activities

**ACTIVITY:** Invest resources in professional strategic marketing to lead and coordinate EHE marketing strategies across the county

**ACTIVITY:** Enhance and expand the U=U marketing campaign
Pillar 2: TREAT

Objective: Increase the percentage of PWH in a given year who have received medical care for their HIV infection within one month of diagnosis from 76.1% to 85.6% by 2025.

Strategy:

Enhance and expand the availability and utilization of a broad range of tele-health services to support HIV treatment.
Pillar 2: TREAT

Proposed Activities

ACTIVITY: Utilize Tele-health Adherence Counselors (TAC) to support PWH who are in care but not virally suppressed.

ACTIVITY: Support the expansion of tele-health services across the continuum of HIV care, through funding, training, technical assistance and capacity building.
Pillar 2: TREAT

Strategy:

Establish Rapid Entry to Care (REC) sites across the county
Pillar 2: TREAT

**Proposed Activities**

**ACTIVITY:** Deploy Community Outreach, Response and Engagement (CORE) teams, using a data to care model, to quickly link PWH to care

**ACTIVITY:** Develop and implement REC protocols and procedures to ensure PWH are seen within 72 hours
Pillar 2: TREAT

Proposed Activities

ACTIVITY: Expand the number of providers with reserved capacity for appointments or walk-ins for newly-diagnosed PWH

ACTIVITY: Create a shared calendar of appointments available for newly-diagnosed PWH at REC sites across the county

ACTIVITY: Enhance REC services to include mental health assessments and services for newly-diagnosed PWH
Pillar 2: TREAT

Strategy:

Advance health equity and address HIV-related health disparities, particularly among racial/ethnic minority and LGBTQ+ communities
Proposed Activities

ACTIVITY: Support the expansion of peer and community health worker-based initiatives

ACTIVITY: Expand provider training on race and health equity, health literacy, cultural humility, provider-bias, intersectionality and issues of homophobia and transphobia

ACTIVITY: Support hiring of key personnel who reflect the full diversity of PBC
Pillar 2: TREAT

Proposed Activities

ACTIVITY: Create a comprehensive database of organizations that offer training on race and health equity, health literacy, cultural humility, provider bias, intersectionality and issues of homophobia and transphobia.

ACTIVITY: Identify and enroll medical providers who are willing to participate in these training opportunities.
Pillar 2: TREAT

Strategy:

Support a holistic approach to HIV care, addressing social determinants of health, to improve retention and adherence to care.
Pillar 2: TREAT

Proposed Activities

**ACTIVITY:** Expand and enhance partnerships with entities which provide housing services, vocational training, employment support, etc.

**ACTIVITY:** Convene a housing workgroup/action team

**ACTIVITY:** Expand and enhance partnerships with behavioral health providers (mental health, substance abuse)
Objective: Increase the percentage of individuals prescribed PrEP among those who need it from 4.4% to 27.2% by 2025.

Strategy:

Expand the PreP/nPEP provider network, particularly in communities experiencing the highest HIV incidence.
Pillar 3: PREVENT

Proposed Activities

ACTIVITY: Conduct a comprehensive analysis to identify communities with limited access to PreP/nPEP prescribers

ACTIVITY: Provide academic detailing to educate providers on the effectiveness of PreP/nPEP and prescribing guidelines
Pillar 3: PREVENT

**Proposed Activities**

**ACTIVITY:** Collaborate with urgent care centers, clinics and medical providers to expand the number of PrEP and nPEP providers in communities with limited access
Pillar 3: PREVENT

Strategy:

Expand and enhance tele-health services for HIV prevention, including tele-PreP
Proposed Activities

**ACTIVITY:** Identify and engage prescribers willing to provide tele-health appointments for PrEP/nPEP services

**ACTIVITY:** Collaborate with providers to develop and communicate standardized protocols and best practices for tele-PrEP services

**ACTIVITY:** Provide training and technical assistance on Tele-PrEP
Pillar 3: PREVENT

Strategy:

Increase access to PrEP, nPEP and comprehensive clinical prevention services in underserved communities
Proposed Activities

**ACTIVITY:** Deploy mobile units to provide clinical prevention services, including PrEP/nPEP, in underserved or geographically-isolated communities

**ACTIVITY:** Expand the availability of comprehensive prevention services at non-traditional community-based venues
Pillar 3: PREVENT

**Strategy:**

Increase awareness and acceptance of PrEP/nPEP
LOCAL PERSPECTIVE

Pillar 3: PREVENT

Proposed Activities

ACTIVITY: Collaborate with community residents, leaders and stakeholders, particularly among populations with lowest utilization of PrEP/nPEP, to develop culturally-appropriate and non-stigmatizing messaging.

ACTIVITY: Integrate nationally-recognized “Ready, Set, PrEP” messaging into overall EHE marketing efforts.
Pillar 3: PREVENT

Proposed Activities

ACTIVITY: Collaborate with the local colleges, universities, vocational schools and the school district to increase opportunities to educate youth on PrEP/nPEP

ACTIVITY: Develop and disseminate HIV prevention resource guides (written and electronic) which include PrEP and nPEP prescribers and payment assistance programs
Pillar 3: PREVENT

Proposed Activities

ACTIVITY: Develop and disseminate culturally-appropriate educational materials to health care and community-based settings, regarding effective prevention options (PrEP, nPEP and condoms)

ACTIVITY: Integrate enhanced PrEP and nPEP messaging into overall EHE marketing campaign
Objective: Decrease the number of people diagnosed with HIV infection in a given year, regardless of when infection occurred, from 289 to 72 by 2025.

Strategy:
Develop and enhance infrastructure to implement a local community level response
LOCAL PERSPECTIVE

Pillar 4: RESPOND

Proposed Activities

**ACTIVITY:** Provide ongoing training/technical assistance to persons/entities implementing response efforts

**ACTIVITY:** Establish local protocols and procedures for local response efforts

**ACTIVITY:** Establish partnerships with local providers, community-based agencies, academic institutions and other entities to implement a coordinated response strategy
Pillar 4: RESPOND

**Strategy:**

Improve understanding of cluster response, among system partners and providers, to provide clarity about their role in this effort.
Pillar 4: RESPOND

Proposed Activities

ACTIVITY: Provide tailored training on the cluster response framework as well as protocols and procedures which are most relevant to that particular system partner or provider

ACTIVITY: Widely distribute response marketing materials to system partners and providers
Pillar 4: RESPOND

Strategy:

Improve understanding of cluster response, among communities, to address fear and privacy concerns and dispel misconceptions and myths.
Pillar 4: RESPOND

Proposed Activities

**ACTIVITY:** Engage local PWH and key stakeholders to develop appropriate messaging around cluster response

**ACTIVITY:** Integrate cluster response messaging into overall EHE marketing efforts

**ACTIVITY:** Deploy peer mentors and community health workers to engage communities around cluster response, addressing stigma and privacy concerns
Pillar 4: RESPOND

Proposed Activities

ACTIVITY: Integrate cluster response messaging into overall STD education and outreach

ACTIVITY: Engage local and state legislatures in cluster response efforts
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Florida’s EHE Plan Meeting

SESSION BREAK

Session will reconvene at 1:00 PM

THANK YOU FOR YOUR PARTICIPATION!
PART III
Florida’s Ending the HIV Epidemic Plan

October 29, 2020
At-A-Glance

Total Population: 987,230

Social Determinants of Health

- Economic Stability
- Education
- Food
- Community and Social Context
HIV Prevalence and Diagnoses

- Number of People with HIV (PWH), **4,853**
- Rate of PWH per 100,000 population, **495.4 per 100,000**
- Linkage to HIV Medical Care **92.9%**
- Number of New HIV Diagnoses **196**
Community Engagement Efforts

- Focus Groups/Listening Sessions
- Type of individuals included in the various sessions
- New partners/stakeholders
- Old or current partners re-engaged
- How your approach differs from traditional approaches
- Acknowledge population(s) reached vs. not reached
- How do you intend to engage the unreached population
Pinellas County’s
Ending the HIV Epidemic Plan
Pillar 1: DIAGNOSE

Objective: Implement routine testing during key healthcare encounters and increase access to and options for HIV testing

Strategy:

- Trainings for Community Providers
  - Activity: Lunch & Learn training topics that include culturally appropriate service delivery, comprehensive care of PWH and those at-risk, understanding the community served, normalizing sexual health conversations in the Provider’s offices.

- Initiate Community-Coordinated night clinics hosted at non-CHD locations
Objective: Implement routine testing during key healthcare encounters and increase access to and options for HIV testing

Strategy:

- Community Events to highlight HIV/AIDS awareness and testing
  - Activity: Participation in community events such as local art shows, sports tournaments, parades, concerts etc.
Pillar 2: TREAT

Objective: Improve the ability to rapidly implement activities that meet the HIV care and treatment needs of Pinellas County.

Strategy:

- Address current housing process and funding availability for PWH
  - Identify gaps and barriers
  - Discuss new strategies for improving existing process, identify additional funding opportunities
- Activity: Pinellas County Housing Summit
Objective: Educate the community and normalize discussions surrounding sexual health, testing, and prevention

Strategy:

- Community Ambassador Program
  - Activity: Street Team/Foot Team that will distribute outreach materials in high-risk communities (e.g. putting door hangers of local stats or upcoming events).
- Community Events that highlight HIV/AIDS awareness and testing
- Trainings for Community Providers
Objective: Educate the community and normalize discussions surrounding sexual health, testing, and prevention

Strategy:

- Address HIV/AIDS Stigma among Faith-Based Community
  - Activity: Host a series of “Dinner Discussions” with the Health Ministries of churches located in the high-risk areas around the county.
Pillar 4: RESPOND

Objective: Respond to potential outbreaks to get needed prevention and treatment services to people who need them.

Strategy:

- County wide media/marketing campaigns that focus on Prevention
- Youth Education and Training Services
- Stigma Reduction
- Night Clinics
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Florida’s Ending the HIV Epidemic Plan

END OF DAY 4

THANK YOU FOR YOUR PARTICIPATION!!