

New Jersey HIV Planning Group Integrated Plan Committee Meeting Agenda

Wednesday, April 3rd, 2024

George Lowe
Co-Chair

Allison Delcalzo-Berens
Co-Chair

The Integrated Plan Committee supports the development and maintenance of a comprehensive, integrated plan, in partnership with the other grantees that reviews HIV care and prevention services across the State on a 3-year cycle per guidance from CDC & HRSA.

***Please note all times are approximate**

10:00am	Welcome & Moment of Silence Establishment of Agenda Review and Approval of Meeting Minutes	Allison Delcalzo-Berens
10:10am	Introductions • <i>Name, Organization, & Strength</i>	George Lowe
10:20am	Evaluation Review • NJHPG Committees Purpose & Objectives • Educational Barriers	HCPST
10:35am	Old Business • Review Data & Research Request	Allison Delcalzo-Berens
10:50am	New Business • Draft Program Activity 1.1 ○ Review Breakout Room Notes	Allison Delcalzo-Berens & George Lowe
11:35am	Committee Announcements & Public Comments	George Lowe
11:45am	Integrated Plan Committee Agenda Next Meeting: May 1st, 2024 General Assembly- <i>April 18th, 2024, from 1-4pm</i>	Allison Delcalzo-Berens
11:55pm	Evaluation	HCPST
12:00pm	Adjournment	George Lowe

Members of Committee (Quorum: 5): Allison Delcalzo-Berens, Carla-Ann Alexander, Jill York, Karen Walker, Kathy Ahearn-O'Brien, Tameka Allen, Chad Balodis, George Lowe



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Cycle 2

Program Activity 1.1: Create and promote public leadership opportunities for people with or who experience risk for HIV. (NHAS 3.3.1)

JANUARY - JUNE 2024 Workplan

TASKS	Goals 1 & 2; 7 Activities					
	January	February	March	April	May	June
Integrated Plan Committee						
Integrated Plan Review						
Program Activity 1.1						
Assign Cycle 3 Activities						
Priority Setting Committee						
System Activity 1.1						
Program Activity 2.1						
Program Activity 2.2						
Community Engagement Committee						
Stigma Activity 1.1						
Program Activity 1.2						
Program Activity 1.3						



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New Jersey HIV Planning Group Integrated Planning Committee Meeting Minutes

Wednesday, April 3rd, 2024
Electronic Meeting via ZOOM Video Conference

ATTENDANCE			
NJHPG Members			
Abraham Corsino	P	George Lowe	P
Allison Delcalzo-Berens	P	Jaivon Lewis	P
Amir Gatlin-Colon	P	Johanne Rateau	P
Anjettica Boatwright	P	Monique Springer	P
Chad Balodis	P	Michelle Harvey	P
Denise Brown	P		
Committee Member			
Carla-Ann Alexander	P	Kathy Ahearn-O'Brien	P
Jill York	P	Tameka Allen	P
Karen Walker	P		
Non-Voting Member			
Alex Flores, Bryan Kutner, Carol Vincent, Clifford Barnett, Lara Dykstra, Luce Morgan, Rekha Damaraju, Renee Cirillo, Swetha Kamath, Tri Nguyen, Yvonne Hou			
HIV Community Planning Support Team			
Dottie Rains-Dowdell	P	Taylor Lightner	P
Selena Aponte	P		

P- Present; A- Absent; LoA – Leave of absence



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AGENDA	
Item	Discussion
Welcome and Moment of Silence	Allison Delcalzo-Berens began the meeting at 10:01 am and welcomed all members & guests. She then followed with a moment of silence to honor those lost to HIV and those still fighting the virus.
Approval of the Agenda	Allison Delcalzo-Berens reviewed the agenda with the Committee. Anjettica Boatwright motioned to approve the agenda, seconded by Tameka Allen. HCPST conducted a virtual vote, motion passed.
Approval of Meeting Minutes	Allison Delcalzo-Berens reviewed the past Meeting Minutes with the Committee. Anjettica Boatwright motioned to approve the minutes, seconded by Jill York. HCPST conducted a virtual vote, motion passed.
Introductions	George Lowe started introductions by asking attendees to unmute and introduce themselves.
Evaluation Review	<p>The HCPST presented the past Evaluation. There were 13 responses; 5 NJHPG Member, 5 Committee Members, & 3 Guests.</p> <p>1) What questions do you have for the DOH?</p> <ul style="list-style-type: none"> • N/A (x2) • None at this time (x3) • None (x4) • At the next meeting, could you explain the roles of each committee in more detail? <p>2) What questions do you have for the HIV Community Planning Support Team?</p> <ul style="list-style-type: none"> • N/A (x4) • None at this time (x3) • None (x4) <p>3) What additional topics would like discussed or featured at future Integrated Plan meetings?</p> <ul style="list-style-type: none"> • N/A (x2)



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	<ul style="list-style-type: none"> • None at this time (x3) • None (2x) • Treatment Adherence/ Housing • Education Barriers <p>4) Final Comments, Questions, Concerns.</p> <ul style="list-style-type: none"> • N/A (x2) • None(x2) • Nothing to Report, • None at this time (x3) • Great meeting, breakout session was great • Keeping in mind that lived experience does not only mean an HIV diagnosis. Remembering the 5 populations: IDU, MSM, etc... • Meeting was great loved breakout rooms
<p>Unfinished Business</p>	<p>The Support Team then shared a PPT Presentation with the past meetings breakout room notes and the data and research request. The committee asked for information on positions, individuals, or best practices in NJ for Public Leadership Opportunities for individuals with lived experiences, organizations that have lived experience programs, and where their funding comes from.</p> <p><u>Community Leadership Opportunities that Exist Already</u></p> <ul style="list-style-type: none"> • Storytelling <ul style="list-style-type: none"> a. NJ- Dear Rosa Project/My Voice Our Story (MVOS) - https://www.hartegrants.com/dear-rosa-project b. Nationwide Speakers Bureaus- https://valleywisehealth.org/hiv-ete-speakers-bureau/ & https://www.apbspeakers.com/topics/health-wellness/hiv-aids-awareness/ c. Community Ambassadors- https://www.cdc.gov/stophivtogether/partnerships/community-ambassadors.html • Training <ul style="list-style-type: none"> a. CDC Online learning system for HIV leadership opportunities. (train.org/cdctrain/) b. Minority AIDS Initiative Training



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	<ul style="list-style-type: none"> c. PROCEED- Services PROCEED, Inc. Providing Social, Educational, and Capacity Building Services (proceedinc.com) d. Community PROMISE- Community PROMISE Packages Replicating Effective Programs Intervention Research Research HIV/AIDS CDC <ul style="list-style-type: none"> • Leadership Opportunities <ul style="list-style-type: none"> a. (NMAC GLOW)- www.nmac.org b. Leadership Hyacinth <p><u>Funding Opportunities for Public Leadership Roles</u></p> <ul style="list-style-type: none"> • <u>Positive Action for Latinx Men with HIV ViiV Healthcare US</u>- Positive Action Grant- Funds the Instituto DILES (Instituto Latinx de Desarrollo Integral de Lideres Empoderados contra el SIDA; English: Latinx Comprehensive Development of Empowered Leaders Against AIDS Institute). This is a 12-month program that builds leadership skills among fellows in order to drive meaningful change in their communities toward ending the HIV epidemic for Latinx men. • <u>Supporting People with HIV as Leaders in HIV Systems of Care HRSA</u>- The goal of the Supporting People with HIV as Leaders in HIV Systems of Care program is to support leadership development and enhance meaningful engagement for people with HIV in health care planning and programs inclusive of RWHAP-funded organizations. <p><u>Best Practices for Public Leadership Opportunities</u></p> <ul style="list-style-type: none"> • Braided Funding- using funding from multiple sources • Expand Marketing for Available Community Positions • Expand funding for Community Training & Career Development • Utilize Private Funding or Funding from Universities • <u>Strategic Plan Investment Areas HIV/AIDS CDC</u> <ul style="list-style-type: none"> ○ Explore alternative models such as microgrants and organizational development grants to provide funding and support to smaller grassroots organizations, minority-led organizations, and organizations led by persons
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	<p>with HIV</p> <ul style="list-style-type: none"> ○ Encourage non-traditional organizations connected and provide services to priority populations ○ Utilize innovation funds- designed to test innovative programs and strategies to improve efficiency, effectiveness, and the impact of HIV programs in racial and ethnic minority communities.
<p>New Business</p>	<p>George Lowe & Allison Delcalzo-Berens then transitioned the committee to drafting the recommendation for Program Activity 1.1: Create and promote public leadership opportunities for people with or who experience risk for HIV. (NHAS 3.3.1) Allison Delcalzo-Berens began by stating that a great way to start these recommendations is to imagine what the committees desired outcome or vision would be then work backwards. She also highlighted at the last meeting the committee identified what this may look like at the agency, systems, and institutional levels as well as some barriers and best practices for public leadership opportunities.</p> <p>Kathy O’Brien suggested that efforts be focused on planning councils to bring in individuals with lived experience sharing their voice and story rather than bringing in individuals for training.</p> <p>Allison Delcalzo-Berens stated the agencies doing the trainings may need to have some additional program development on their recruitment and marketing strategies as well as their mentor programs. George Lowe stated that job descriptions could include language that would draw in people with lived experience. Luce Morgan commented saying that you cannot ask someone to disclose any information that would be covered under HIPPA however there are ways to ask whether people have lived experience.</p> <p>Kathy O’Brien said lived experience can mean many different things. However, any individual who is new to the workforce will always receive training through their supervisor. There should be a standard supervision model</p>



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that supports the ideology of having people with lived experience in leadership positions. Dottie Rains-Dowdell asked whether individuals with lived experience are interested in this work, if so what times of work. Jaivon Lewis suggested collecting data by meeting the community where they are at testing sites or on national testing days. Karen Walker identified lived experience is too broad, she compared the thought to those affected by HIV versus effected.

The committee decided to start a brainstorming list and created the following action steps.

Brainstorming Session;

- Collect barriers from agencies/organizations in recruiting/hiring individuals with lived experience
- Train agencies on lived experience recruitment
- Expand programs that educate/train community leaders (reducing stagnant career development)
- Identify funding sources/ways of compensation that's realistic
- How to replicate functional community leadership opportunities
- Create a supervision model that supports the ideology of having people with lived experience in leadership positions.

1. **Action Step** Collect information of what positions individuals with lived experience may be interested in. Lived Experience can include- those who are affected by HIV, people living with or at risk of HIV, individuals related to or are caretakers of people with HIV, people who have experience using RW, people who utilize prevention and treatment services, harm reduction, and or certified peer reduction advisors.

a. *Stakeholders Involved/Needed*

D&R Committee?, People who are providing programs for people with lived experience, people who have previously completed lived experience trainings/education, people with lived experience



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	<p>already working in the field, long term survivors/people getting treatment/testing,</p> <p>b. Is this task measurable? Yes</p> <p><i>Deliverables;</i></p> <p>i.Utilize events and outreach to collect information/interests from individuals</p> <p>ii.D&R will provide a set of questions to identify where individuals would want to work within this field.</p> <p>2. Action StepCreate a supervision model that supports the ideology of having people with lived experience in leadership positions <input type="checkbox"/></p> <p>a. <i>Stakeholders Involved/Needed</i></p> <p>b. Is this task measurable? <input type="checkbox"/> Yes</p> <p><i>Deliverables;</i></p> <p>1. Train agencies on how to recruit individuals with lived experience.</p> <p>2. Incorporate Mentorship Programs & training/education for career development</p> <p>c. <i>Due by;</i></p> <p>3. Action StepExpand programs that educate/train community leaders. <input type="checkbox"/></p> <p>Allison Delcalzo-Berens closed up new business by suggesting at the next committee meeting they finalize the other action steps around training agencies on recruitment and supervision.</p>
Community Announcement and Public Comments	<p>George Lowe opened the floor to any announcements. Bryan Kutner shared an upcoming project funded by NIH to learn status neutral strategies to engage clients while reinvigorating the passion and mission of HIV service staff. They are looking for a facility to conduct this project and data collection.</p>
Agenda for next meeting May 1 st , 2024	<p>Next meeting on May 1st from 10am to 12pm, the committee will finalize the recommendation for Program Activity 1.1.</p> <p>The next General Assembly is on April 18th from 1-4pm.</p>
Evaluation	<p>HCPST shared evaluation link for feedback on today’s meeting. Results will be presented at the</p>



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	next meeting.
Adjournment	George Lowe asked for a motion to adjourn the meeting. Anjettica Boatwright motioned, seconded by Karen Walker. The meeting adjourned at 11:56 am.

Meeting Documents

- Draft Integrated Plan Committee Agenda_3.6.24
- DRAFT NJHPG Integrated Planning Committee Meeting Minutes_3.6.24
- DRAFT SMARTIE Recommendation for Program Activity 1.1
- NJHPG Committees Goals & Objectives- 1 Pager
- Program 1.1 Data & Research Request PPT
- Breakout Room Notes- Program 1.1



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