Connecticut HIV Planning Consortium

Needs Assessment Projects Team Meeting Summary

May 20, 2026

Date:	Wednesday, May 20, 2026	**Type:**	In-person: Chrysalis Center, Hartford
Start Time:	1:15 p.m.	**End Time:**	2:35 p.m.
Leaders	Xavier Day (Co-chair), Martina De La Cruz (Co-chair), Mitchell Namias (CT DPH Resource Liaison),		
Participants:	11	**Next Meeting:**	June 17, 2026

WELCOME AND INTRODUCTIONS

Martina De La Cruz welcomed participants and reviewed the meeting objectives, which included reviewing the 2026 work plan, discussing dissemination strategies for the HIV workforce one-pagers, reviewing the Prevention Needs Assessment (PNA) survey instrument, and discussing a possible committee name change. Members then introduced themselves, their organizations, and current work related to HIV prevention, care, workforce development, and syndemic coordination. Participants represented organizations including DPH, Ryan White Planning Councils, ACT, StayWell, and several community-based organizations engaged in outreach, training, and linkage-to-care efforts.

ADMINISTRATIVE UPDATES AND 2026 WORK PLAN REVIEW

Ken provided a brief update on the committee's 2026 work plan activities and noted that one area still requiring attention is identifying future guest presenters for the committee's ongoing forum and discussion series. Members discussed outreach efforts to potential presenters and acknowledged the need to continue identifying organizations and subject matter experts who could contribute to future meetings.

Key Discussion Points

- APNH was identified as a potential future presenter, though outreach efforts are still pending.
- Members discussed reconnecting with researchers (CIRA) and external partners who have previously supported CHPC discussions.
- Participants emphasized the importance of maintaining momentum on educational and forum-based activities.

COMMITTEE NAME CHANGE DISCUSSION

A substantial portion of the meeting focused on discussion regarding a possible committee name change. Leadership explained that the conversation emerged from prior discussions about attendance trends, committee engagement, and whether the current name accurately reflects the committee's evolving role. Ken presented a list of potential names generated through brainstorming and AI-assisted suggestions, and members were invited to rank their preferred options and propose additional ideas.

The conversation evolved into a broader reflection on the committee's identity and purpose. Several members emphasized that the group's work extends beyond needs assessments alone and increasingly focuses on translating data into practical recommendations, planning guidance, and implementation strategies. Others

questioned whether a name change itself would significantly impact participation but agreed that the committee's work should be better communicated to broader audiences.

Key Discussion Points

- "Insight Team" emerged as an early front-runner during informal polling.
- Members repeatedly emphasized the importance of moving from "data to action."
- Participants discussed the need for the committee's name to better reflect strategy, implementation, and systems improvement work.

COMMITTEE PARTICIPATION AND COMMUNICATION STRATEGIES

Members discussed ways to improve committee participation, communication, and responsiveness between meetings. Participants reflected on challenges associated with broad or generalized communications and suggested that more direct, committee-specific engagement strategies may improve member participation and follow-up.

The committee explored the possibility of re-establishing a dedicated committee email listserv and discussed encouraging members to commit more consistently to one committee in order to strengthen continuity and engagement.

Key Discussion Points

- Members supported re-establishing a committee-specific listserv.
- Participants discussed improving onboarding and communication consistency.
- Several members noted that personalized communications may improve participation and response rates.

HIV WORKFORCE ONE-PAGERS AND DISSEMINATION PLANNING

The committee then shifted to discussion of the HIV workforce one-pagers and dissemination planning efforts. Clifford joined the meeting on behalf of the PACE Committee to discuss opportunities for incorporating NAP materials into CHPC newsletters and broader communications efforts. Clifford explained that PACE is developing recurring newsletters designed to highlight committee work, community initiatives, lived experience perspectives, and statewide HIV-related activities.

Members discussed how the workforce one-pagers could be used not only for information sharing, but also for recruitment, provider engagement, and workforce development efforts. Participants stressed that dissemination efforts should focus on connecting audiences to action, training opportunities, and practical implementation strategies rather than simply distributing documents.

Key Discussion Points

- Proposed dissemination methods included newsletters, QR codes, social media, website features, videos, and printed materials.
- Members emphasized tailoring messaging to different audiences and levels of health literacy.
- Participants discussed the importance of ensuring materials lead to action and training engagement.

RECRUITMENT, STORYTELLING, AND CONSUMER ENGAGEMENT

The discussion expanded into recruitment and consumer engagement strategies, particularly the importance of incorporating lived experience and storytelling into outreach efforts. Members noted that many individuals may

not fully understand the role of CHPC committees or how participation contributes to statewide HIV planning efforts.
Participants explored ideas for making committee work more visible and relatable through personal stories, videos, spotlight articles, and community-facing communications that explain the practical impact of committee activities.

Key Discussion Points

- Members suggested featuring co-chairs and consumers in newsletters and promotional materials.
- Participants discussed creating short videos introducing CHPC committees and their work.
- The group emphasized the importance of consumer voice and lived experience in recruitment efforts.

WORKFORCE TRAINING GAPS AND PROVIDER EDUCATION

The committee reviewed updates made to the workforce one-pagers and discussed how identified workforce gaps could directly inform future training priorities. Discussion focused on sexual health screening, PrEP and PEP education, youth access to services, HIV testing practices, and workforce competency gaps. Members emphasized the importance of making the materials practical, accessible, and connected to training opportunities.

Participants also discussed the need for glossary sections, hyperlinks, contact information, and clear calls-to-action to support providers and organizations seeking additional training or technical assistance.

Key Discussion Points

- Members discussed adding direct training contacts and resource information to materials.
- Participants emphasized connecting workforce findings directly to educational opportunities.
- The group discussed the importance of making materials understandable for audiences with varying levels of familiarity with HIV terminology.

PREVENTION NEEDS ASSESSMENT (PNA) SURVEY REVIEW

Luis Diaz provided an overview of the “Opportunities for Improvement” sections developed from the 2022 Prevention Needs Assessment findings. Members discussed considerations for the next survey iteration, including balancing the need for consistent trend data with opportunities to improve wording, clarity, and usefulness of survey questions.

The committee also discussed emerging prevention topics, including DoxyPEP, HIV testing barriers, provider assumptions, and the need for more actionable survey findings that can directly support planning and implementation efforts.

Key Discussion Points

- Members discussed maintaining consistent survey questions to support trend analysis.
- Participants explored opportunities to improve clarity and reduce unnecessary complexity.
- The group discussed adding or strengthening questions related to HIV testing access and DoxyPEP awareness.

HIV TESTING BARRIERS AND PROVIDER PRACTICES

A significant portion of the discussion focused on HIV testing barriers identified through prior survey findings. Members reflected on concerns that some individuals requesting HIV tests may still encounter providers who decline testing or make assumptions about risk based on stereotypes, relationship status, or demographics. Participants emphasized that these barriers often occur outside traditional HIV specialty settings.

The committee discussed how provider discomfort, assumptions, and lack of HIV prevention knowledge may contribute to ongoing gaps in testing access and prevention engagement.

Key Discussion Points

- Members discussed barriers within primary care and urgent care settings.
- Participants emphasized the importance of provider education around HIV testing laws and prevention practices.
- The group discussed the role of patient-provider dynamics and stigma in limiting testing access.

PROVIDER OUTREACH AND PHARMACEUTICAL PARTNERSHIPS

The committee explored strategies for engaging providers outside traditional HIV care systems, particularly primary care and urgent care providers. Members discussed barriers related to provider discomfort with HIV prevention topics and the misconception that HIV prevention falls solely within infectious disease specialties.

Participants discussed opportunities to collaborate with pharmaceutical companies, training organizations, and healthcare systems to expand provider education efforts related to HIV testing, PrEP, PEP, and DoxyPEP.

Key Discussion Points

- Members discussed lunch-and-learn models and academic detailing opportunities.
- Participants emphasized the need to engage providers outside Ryan White-funded systems.

ATTENDANCE

Attendance records are kept on file with the CHPC support staff.

ADJOURN

The committee meeting ended at 2:35 p.m.