

Franklin EHE Advisory Committee 11.12.20

Attendance

Ronald Murray	Audrey Regan	Dwayne Steward
Kennyetta White	Taneisha Fair	Samyell Terry
Jacob Shrimplin	Emily Campbell	Tara Britton
Matthew Wilmot	Jenn Sims	Jarrod Coffey
Sean Hubert	Brandon Chapman	

Agenda

- I. **Review Strategy Prioritization (see slides)**
 - a. Strategies feel abstract still, and cannot necessarily be implemented right away in the short-term
 - b. The higher the priority the sooner the focus on implementation will be on the appropriate strategy within the next 1-5 years
 - c. Some strategies have been repeated across pillars; will need to combine them in order to decrease the number of strategies (i.e. mental health)
 - i. Can have a survey monkey to help decide which ones to combine, then review again to make decision on which ones to keep, etc.

- II. **Prevent**
 - a. Same day initiation of PrEP (move from med to high)
 - i. Move this and others in Medium that have less of a variation in those who believe it should be low to High
 - b. Promote injectable PrEP (LOW)
 - c. Actively work to increase African American providers...
 - i. Use more inclusive language of other groups (LatinX, Trans, etc.), and be more specific with what groups we are referring to (not universal/broad wording)
 - d. Implement sex positive... (keep at medium)
 - i. This is a strategy to garner legislative support
 - ii. Longer term goal in terms of feasibility and where we are right now
 - e. A retention plan for HIV positive people should be part of the plan (i.e. stressing the importance of remaining linked into care and virally suppressed)

- III. **Diagnose**
 - a. Modernize archaic legislation...
 - i. Was placed under this pillar because many avoid testing due to criminalization of HIV
 - ii. Possibly elevate this as its own theme outside of the pillars, because it affects all of them
 - b. Increase provider capacity so that PCPs, FHQCs...offer more affordable assessments
 - i. Low hanging fruit to start with FHQC's then move on

- c. Institute a buddy system...
 - i. Keep this on the plan

IV. **Treat**

- a. Offer incentive to get people into care and virally suppressed
 - i. Retention in care needs to be included for PLWHA in addition to those newly diagnosed
 - ii. May need to make retention/engagement as its own overarching theme/category especially for those PLWHA

V. **Next Steps**

- a. Survey Monkey created to help condense Treat strategies
 - i. **Action Item:** Brandon and Sterling willing to help with condensing Treat strategies by next Thursday
- b. **Action Item:** Stacy will look over overarching strategies to help give feedback on condensing
- c. **Action Item:** Ron, Kenyetta and Matthew W. can help with offering comments to Audrey as she forms the language of the plan
- d. Set a limit of 5 goals for each pillar and cross-cutting themes, and look over each strategy to see which ones may actually be activities that can fall under each
- e. Add retention in care as an overarching theme