**Montgomery County**
**Department of Health & Human Services**
**Public Health Services**
**Ending the HIV Epidemic (EHE) Draft Plan**

Public Comment Version
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**Please note:** This is an abridged draft of Montgomery County's Ending the HIV Epidemic plan. It is intended to communicate our plan's core goals, strategies and activities to solicit feedback from the public before it is finalized. The final Ending the HIV Epidemic plan, which will be submitted on our behalf to CDC by the Maryland Department of Health on December 31st, 2020, will be accessible to you through the county's website. The plan is intended to be a "living document" that will change as Montgomery County's epidemic and the needs of our communities change. To receive a final copy of the plan and our bi-monthly EHE progress newsletter, please email Emily Brown at emily.brown@montgomerycountymd.gov.

To provide written feedback, please **CLICK HERE** to provide feedback or comments as you are reading the draft.

**About Ending the HIV Epidemic**

*Ending the HIV Epidemic: A Plan for America* (EHE) is a federal plan to end the HIV epidemic in the United States by lowering new HIV infections by 90% by 2030. The initiative provides resources to 57 priority jurisdictions across the United States where HIV transmissions happen most frequently, and tasks those jurisdictions to develop and implement plans tailored to their local needs. The plan focuses on 4 key "pillars" of activity that are aligned with scientific best practices for ending HIV: Diagnosis, Treatment, Prevention and Outbreak Response. Read more about the Ending the HIV Epidemic initiative

**About Montgomery County's draft EHE plan**

Montgomery County is one of the priority jurisdictions for EHE. Since March, the Department of Health & Human Services/Public Health Services has convened diverse stakeholder focus groups, held structured interviews, distributed surveys and assembled an EHE planning working group to draft its Ending the HIV Epidemic plan. A detailed timeline and description of community engagement will be available in the final plan.

## ENDING THE HIV EPIDEMIC IN MONTGOMERY COUNTY

### Our Vision for Montgomery County

Montgomery County will be a place where new HIV transmissions are rare and diagnosed early, and where all people living with HIV have barrier-free access to everything they need to thrive without stigma or judgment.

### Our Mission

Through a lens of health equity and in collaboration with diverse priority communities, healthcare and social services stakeholders, we will build a culturally-informed, judgment-free, person-centered HIV prevention, testing and care service landscape in Montgomery County.

***Transparency and Cooperation***

We will share important information and communicate regularly with our communities and partners. We will regularly ask for and incorporate community and multi-disciplinary partner feedback.

***Person-centered, Nonjudgmental Care***

We will build capacity for person-centered, non-judgmental, culturally humble individualized service and strive to ensure there is “no wrong door” to enter services.

***Working Against Inequity***

We acknowledge that systemic racism, stigma and bias based on gender, sexual orientation, culture, language and immigration status have shaped HIV prevention, testing and care outcomes, and we recognize the need to actively work against these issues to achieve our vision.

### HIV in Montgomery County

There are an estimated 4,111 people living with HIV in Montgomery County, and 3,544 of those have received a diagnosis. Over the past 5 years (2015-2019), 747 people in the county were diagnosed with HIV. Like elsewhere in the U.S., the epidemic shows significant disparities based on race, ethnicity, sexual orientation and gender identity: Black and Latino/a/x communities, especially Black and Latino/a/x LGBTQ communities are disproportionately impacted by HIV in Montgomery County. People who are foreign-born (especially from African and Central American countries) are also priority communities. To see a full profile of HIV in Montgomery County, visit Maryland Department of Health’s Montgomery County Annual Epidemiological Profile. For a quicker synopsis, see this fact sheet about HIV in Montgomery County in 2019.

**Ending the Epidemic in Montgomery County, Maryland- Our Plan by Pillar**

**HIV PREVENTION PILLAR**

Early diagnosis and viral suppression can help prevent the spread of HIV, because people with undetectable viral loads cannot transmit HIV to others. In addition, evidence based preventative measures to prevent new HIV infections include Pre-Exposure Prophylaxis (PrEP), sexual health and wellness education, and distribution of contraceptives. To prevent new cases of HIV in the county, priority communities must be centered and served.

## Overarching Goal: Reduce new HIV infections by 75%; by 2030, reduce new HIV infections by 90%+

**Strategy 1: Expand the availability of Pre-Exposure Prophylaxis (HIV prevention medication, often called PrEP) in healthcare facilities across the county.**

**Activities:**

1. Identify healthcare delivery sites in high-impact areas
2. Identify facilities in the county that are currently dispensing PrEP, and whether they offer it for free, low-cost, or only as covered by insurance
3. Determine PrEP "best practices" protocols and adaptations they would require for Montgomery County's specific needs.
4. Identify training/capacity building needs among the selected facilities based on those best practices.
5. Provide training to improve PrEP-related knowledge, skills and behaviors in selected facilities. These trainings should also include:
    - Sexual history-taking and talking about sexual health with patients
    - Intersectional cultural humility, including modules that address racism, anti-LGBTQ bias in healthcare
    - A refresher on the current science of HIV

**Strategy 2: Expand PrEP availability in non-traditional, non-healthcare, community-based settings where priority communities convene or receive culturally appropriate services.**

**Activities**:

1. Leveraging the Testing and Linkage Collaborative, incorporate PrEP referral protocols into all HIV counseling, testing, and referral (CTR) activities in the county.
2. Develop county-wide, low-barrier PrEP referral protocols to ensure unfettered access to communities with barriers (e.g. income, insurance, immigration status, language, gender identity, gender expression, SO)
3. Provide training to build PrEP knowledge, skills and behaviors in organizations that are trusted in the communities they serve.

**Strategy 3: Expand Post exposure prophylaxis (PEP) access across the county**

**Activities**:

1. Using best practices adapted to Montgomery County's specific needs, establish county-wide PEP guidelines
2. Identify partners in high-impact areas of the county to prescribe/administer PEP
3. Provide training as described above in PrEP strategy for those not already administering PEP

**Strategy 4: Expand access of internal and external condoms to priority communities**

**Activities:**

1. Identify condom distribution drop-off sites in high-impact neighborhoods
2. Provide condom skills education
3. Integrate condom distribution into at-home test distribution
4. Provide condoms by mail

**Strategy 5: Expand access to LGBTQ-friendly healthcare resources in the county**
**Activities**

1. Identify, support and connect providers in the county who are LGBTQ-affirming, especially trans-affirming in their healthcare practice
2. Provide training, education and technical assistance to clinicians in the county to build capacity for sexual history taking, risk assessment and referrals that are LGBTQ-inclusive
3. Integrate this information into clinician-facing HIV education

**Strategy 6: Expand access to HIV and sex education among youth in priority communities**

**Activities**

1. Explore existing Montgomery County sex education curriculum
2. Establish and/or support non-school-based sex educational resources for LGBTQ youth in Montgomery County
3. Support school board and county council with HIV/STI and other sexual health information to inform curriculum

**Strategy 7: Expand the availability of syringe services programs (SSP) in the county.**

**Activities:**

1. Partner with and support Montgomery County-based and other entities establishing SSPs and harm reduction outreach for people who use injection drugs
2. Provide harm reduction training and capacity building support to HIV and substance use/mental health service providers in the county.

**HIV DIAGNOSIS PILLAR**

The CDC estimates that nearly 40% of new HIV infections are transmitted by people who don't know they have the virus. For people with undiagnosed HIV, testing is the first critical step toward improving an individual's health status and preventing HIV transmission. Montgomery County's 2019 epidemiologic profile reveals a gap in people's knowledge of their status, with almost 14% of people living with HIV not knowing they are HIV positive. This means that of the 4,111 people living with HIV, about 567 people are unaware that they are HIV positive. The rate of newly diagnosed people in the county who have advanced disease at the time of diagnosis was 33% in 2019, compared to the state average of 23%.

## Overarching Goal: By 2025, 95% of people living with HIV in Montgomery County know their HIV status.

### Strategy 1: Increase uptake of routine, opt-out HIV screening among healthcare facilities in high-incidence areas of the county.

**Activities**:

1. Identify facilities in the county that are currently doing routine, opt-out screening
2. Identify facilities in high HIV incidence census tracts.
3. Offer guidelines, training and technical assistance to healthcare facilities in high HIV incidence census tracts to increase uptake of routine screening (as part of a comprehensive "toolkit" for HIV prevention, testing, care).
4. Target HIV testing awareness materials to healthcare facilities.

### Strategy 2: Scale up community-based, point-of-care rapid testing in priority communities and high incidence areas of the county.

**Activities**:

1. Create a "Testing and Linkage Collaborative," which is a coalition of entities conducting HIV testing and linkage-to-care in the county to increase coordination, build capacity and share data between Montgomery County Public Health Services (local health department), testing nonprofits and priority communities.
2. Integrate HIV testing into staff operations at agencies that already exist to support priority populations.
3. Build partnerships between HIV testing agencies and social service agencies serving priority populations to incorporate on-site and outreach/event testing.
4. Train peers & non-HIV social service workers to provide integrated HIV CTR alongside core services offered to priority populations.
5. Provide intersectional cultural sensitivity and HIV capacity building training and technical assistance to social services programs in high-impact areas of the county.
6. Expand community health worker model within the county.
7. Establish an at-home self-testing program for those who prefer not to be tested in the community or in healthcare facilities.
8. Integrate distribution of self-testing kits into other service hubs in the county.
9. Establish community-based mobile testing and outreach team-based testing (including health/other fairs and festivals).

10. Expand pharmacy-based testing in high-impact areas.

**Strategy 3: Build capacity for culturally-sensitive and person-centered partner notification.**

**Activities**:

1. Develop protocols for culturally sensitive and rapid partner notification services across the county.
2. Provide training and technical assistance to ensure adherence to protocols.

**Strategy 4: Increase awareness of HIV testing and treatment resources through a marketing campaign.**

**Activities**

1. Work with creative/design partners to create a research-informed, community-vetted, Montgomery County-specific sexual health and wellness campaign that intentionally includes information about HIV testing.
2. Launch the campaign and solicit continuous feedback throughout its duration to ensure quality improvement.

**HIV TREATMENT PILLAR**

Quickly connecting people newly diagnosed with HIV to care and treatment, and re-engaging with those who have fallen out of regular care are vital to reaching the goal of 95% viral suppression by 2030. In 2019, an estimated 1,027 residents have not remained in regular care and are not virally suppressed. Based on CDC estimates, these individuals accounted for an estimated 60% of new infections, underscoring the importance of improved engagement in care for preventing new cases of HIV in Montgomery County. This further highlights the importance of collaborating with community partners and building strong alliances between public health and the healthcare sectors. The expansion and implementation of behavioral and structural interventions will improve health outcomes particularly for engagement and re-engagement in care for people living with HIV.

**Overarching Goal: Treat people with HIV rapidly and effectively to reach and sustain viral suppression**

- 95% of people diagnosed will receive medical care within a month of diagnosis
- 95% of People Living with HIV retained in care will achieve viral suppression (<200 copies/mL)

**Strategy 1: Establish and disseminate county-wide guidelines about how to connect newly-diagnosed and out-of-care people living with HIV to appropriate medical care.**

**Activities:**

1. Work with the Testing & Linkage Collaborative to establish and disseminate linkage-to-care (LTC) guidelines/resources to all community-based HIV Counseling, Testing & Referral (CTR) providers.

2. Establish linkage protocols/guidelines for healthcare settings conducting HIV testing.
3. Build relationships with healthcare facilities to encourage implementation, offering support and resources where required.
4. Continuously monitor data to ensure integrity to protocol.

**Strategy 2: Use 'Data to Care," to identify and re-engage people who have fallen out of care.**

**Activities:**

1. Montgomery County will be funded (through EHE) to support a new staff epidemiologist position to conduct "data to care" surveillance activities to identify out-of-care people living with HIV across the county.
2. HIV/STI staff will work directly with healthcare stakeholders to support re-engagement efforts of all people living with HIV who are out of care and in need of support services.

**Strategy 3: Expand access to and use of wraparound/client-centered services to people living with HiV to support care retention and viral suppression**

**Activities**:

1. Montgomery County will be funded (through EHE) a full-time social worker to work with community providers and patients to support retention and viral suppression.
2. Leverage existing county's Ryan White services for out-of-care or high-risk patients of HIV healthcare facilities across the county.
3. Expand access to housing, food, substance use disorder, behavioral health and other services known to support medication adherence and care engagement.
4. Expand access to support groups and social support offerings for people living with HIV.
5. Expand access to peer support for people living with HIV.

**Strategy 4: Build capacity of clinicians and staff in Montgomery County to improve retention and viral suppression among priority populations.**

**Activities:**

1. Based on national care standards, create guidelines and protocols to disseminate to HIV clinicians in Montgomery County.
2. Identify areas of need among HIV clinicians (assess HIV treatment-related knowledge, skills, behaviors)
3. Create training objectives for HIV care in Montgomery County
4. Provide ongoing training and technical assistance to clinical and support staff on topics including HIV clinical guidelines/protocols, health equity, HIV stigma, and cultural sensitivity.

**HIV RESPONSE PILLAR**

The existing toolkit of HIV surveillance, prevention, and field service programs is used to respond to identified clusters. People living with HIV are identified and provided with assistance to support linkage to care, retention in care and viral suppression. Individuals and community members identified to be at risk for HIV are offered testing, prevention education, and PrEP. Identified communities are assessed for other needs, such as education, stigma reduction, and increased access to testing and other health services. HIV cluster detection and response allow us to target our resources to the individuals and communities most in need to help drive down new infections.

**Overarching Goal:** Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.

**Strategy 1: Improve partnerships, processes, data systems, and policies to facilitate robust, real-time cluster detection and response.**

**Activities:**

1. Participate in Maryland Department of Health (MDH) cluster response standing committee meetings at least quarterly.
2. With MDH and local jurisdictions, develop protocol, training materials and a standardized operation plan.
3. Coordinate with MDH for ongoing epidemiological analysis of recent infections to help identify hot-spot locations and subpopulations.

**Strategy 2: Investigate and intervene in networks with active transmission.**

**Activities:**

1. Establish an HIV Cluster Response Team to identify and respond to individuals in HIV clusters in real-time.
2. Develop Partner Services policy and procedure for rapid response within 7 days to a cluster network.

**Strategy 3:** Identify and address gaps in programs and services revealed by cluster detection and response.

1. Increase capacity to provide Partner Services to all newly diagnosed people in Montgomery County.
2. Ensure all persons identified in the cluster are successfully linked to HIV care.

**COMMUNITY ENGAGEMENT**

Our plan for continuing to engage our communities and stakeholders in Ending the HIV Epidemic in Montgomery County.

**Overarching Goals:** To meaningfully engage priority communities in plan development for feedback and assessment and engage priority communities in ongoing sexual health services planning in the county.

**Strategy 1: Introduce the Ending the HIV plan to various priority communities across the county.**

**Activities**:

1. Host a series of public-facing HIV and EHE webinars beginning on World AIDS Day (December 1st)
2. Partner with various priority communities to provide HIV and EHE updates to various stakeholder groups in their own convenings
3. Collect written feedback about the plan during and after these presentations.

**Strategy 2: Develop a community feedback/monitoring mechanism for activities outlined in the Ending the HIV Epidemic plan.**

**Activities**:

1. Develop a community advisory board at Dennis Avenue Health Center for continuous quality improvement of Ryan White-funded HIV healthcare and support services.
2. Continuously solicit feedback about the broader landscape of sexual health and wellness services in the county via surveys, structured interviews or focus groups in various priority populations.

**Strategy 3: Provide information about topics related to Montgomery County's HIV epidemic to the public on a regular basis.**

Activities:

1. Working with community stakeholders and subject matter experts, Montgomery County DHHS/Public Health Services' HIV/STI team will do monthly public-facing webinars about relevant topics on HIV in Montgomery County.
2. Montgomery County DHHS/Public Health Services will disseminate a bi-monthly newsletter to update communities, partners and other stakeholders on Ending the HIV Epidemic activities.
3. Montgomery County DHHS/Public Health Services will present an annual, public-facing overview of our Ending the HIV Epidemic goals and activities.

**THANK YOU** for taking the time to read Montgomery County's Ending the HIV Epidemic plan. To receive a final copy of the plan and our bi-monthly EHE progress newsletter, please email Emily Brown at emily.brown@montgomerycountymd.gov.

To provide written feedback in the meantime, please **CLICK HERE** or email EHE Program Manager Emily Brown to schedule a feedback interview: Emily.Brown@MontgomeryCountyMD.gov.