



SOUTH DAKOTA DEPARTMENT OF HEALTH

HIV Prevention Planning Group (PPG) Orientation Manual

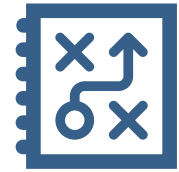
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Introduction to the PPG

WHAT IS HIV PREVENTION PLANNING?

HIV prevention planning is a collaborative and inclusive process that brings together individuals from diverse backgrounds, experiences, and communities impacted by HIV. These individuals work alongside public health officials to shape a comprehensive plan that guides HIV prevention efforts across the state.



This process was first mandated by the **Centers for Disease Control and Prevention (CDC)** in 1993 to ensure that HIV prevention efforts reflect the needs and priorities of affected communities. South Dakota established its own planning group in 1994. Today, this work is part of a larger, federally required **Integrated HIV Prevention and Care Plan**, which aligns HIV prevention with care and treatment services and is a condition of federal funding from both the CDC and the Health Resources and Services Administration (HRSA).

The **Prevention Planning Group (PPG)** is the official HIV prevention planning body for South Dakota. The PPG collaborates with the South Dakota Department of Health to develop a statewide HIV Prevention Plan rooted in scientific evidence, community input, and epidemiologic data. This planning process emphasizes **equity, transparency, and meaningful participation**—particularly from people with HIV and those from communities disproportionately affected by HIV.

KEY GOALS OF HIV PREVENTION PLANNING:

According to CDC guidance, community planning groups aim to:

1. **Strengthen the scientific foundation** of HIV prevention strategies,
2. **Ensure community relevance** by meaningfully engaging diverse populations, and
3. **Target interventions** to populations and geographic areas at highest risk for HIV transmission and acquisition.



Community members also play a critical role in:

- Contributing to **needs assessments**,
- Shaping goals and objectives of the prevention plan,
- Participating in **cluster detection and response (CDR)** strategies, and
- Advancing **health equity** by advocating for culturally appropriate services and addressing structural barriers to care and prevention.

The CDC further requires integrated planning groups to provide formal feedback on state HIV prevention and care plans, ensuring their voices are not only heard but reflected in the final product.

Mission and Strategic Goals

OUR MISSION IN SOUTH DAKOTA

The mission of the South Dakota Prevention Planning Group is to **develop and support the implementation of an HIV Prevention Plan that reduces new HIV infections, promotes health equity, and improves the lives of people affected by HIV throughout the state.** This work is guided by data, science, and—most importantly—the voices and values of South Dakotans.

The PPG contributes to the creation and monitoring of the State's Integrated HIV Prevention and Care Plan and the annual HIV Prevention Work Plan. This work aligns with:

- The National HIV/AIDS Strategy (NHAS)
- Ending the HIV Epidemic (EHE)
- CDC's High-Impact Prevention Approach

Meeting Schedule

The PPG meets quarterly:

- **May** (3rd Saturday) – In-person
- **July** (3rd Friday) – Virtual
- **September** (3rd Saturday) – In-person
- **December** (3rd Friday) – Virtual Meeting locations and login details are shared at least two weeks prior. Members are expected to attend at least three of the four meetings annually.



PPG Structure

The group includes up to 24 members:

- A Chair and Co-Chair
- Five Pillar Focus Groups (Diagnose, Treat, Prevent, Respond & Surveillance, Community Engagement)
- RFP and Ad Hoc Committees as needed
- DOH staff support



Member Responsibilities

- Participate in at least one Pillar Focus Group (See section 6)
- Attend at least 3 of 4 annual meetings
- Review and advise on state HIV plans. See SD DOH Integrated HIV Prevention and Care Plan/ Statewide Coordinated Statement of Need.
- <https://doh.sd.gov/media/nhhppgmw/integrated-hiv-prevention-and-care-plan-2022-2026.pdf>

- Share relevant information with their communities
- Complete annual Conflict of Interest disclosure

Committee Descriptions

PILLAR FOCUS GROUPS:

- Diagnose
- Treat
- Prevent
- Respond & Surveillance
- Community Engagement



Diagnose

- **EHE Goal:** Ensure timely identification of individuals living with HIV.
- **Activities:** Expand access to routine and targeted HIV testing, including mobile and community-based settings; support HIV self-testing; improve linkage to care after diagnosis.
- **PPG Role:** Evaluate testing coverage gaps, recommend testing strategies statewide, and promote youth, rural, and underserved testing initiatives.



Treat

- **EHE Goal:** Link individuals diagnosed with HIV rapidly to treatment and sustain viral suppression (target: ~95% viral suppression by 2030).
- **Activities:** Advocate for rapid start ART programs, support retention and re-engagement efforts, and promote U=U awareness.
- **PPG Role:** Review and recommend treatment access strategies, identify provider training and support needs, track care continuum progress.



Prevent

- **EHE Goal:** Reduce HIV incidence using proven interventions like PrEP and syringe services.
- **Activities:** Support expanded PrEP provision, harm reduction services, condom distribution, and culturally-tailored education.
- **PPG Role:** Assess prevention needs among priority populations, advise on outreach and education strategies, and monitor uptake of biomedical prevention.



Respond & Surveillance

- **EHE Goal:** Quickly detect and respond to HIV clusters and potential outbreaks.
- **Activities:** Use surveillance data to monitor emerging clusters, coordinate rapid public health response, and adjust outreach in outbreak areas.

- **PPG Role:** Review and update South Dakota’s Cluster Detection and Response Manual annually. Provide recommendations for response strategies, develop ways local community organizations can assist during outbreak response, and ensure timely communication.

Community Engagement & Health Equity

- **EHE Principle:** Heighten partnerships and equity across prevention and care efforts.
- **Activities:** Engage priority populations (e.g., people with HIV, LGBTQ2+, rural, BIPOC) meaningfully in prevention planning and decision-making; ensure interventions are culturally responsive.
- **PPG Role:** Lead community feedback processes, help recruit diverse membership, and evaluate the inclusivity of communication and outreach.

OTHER COMMITTEES:

- **RFP Review Committee:** Evaluates grant and proposal submissions.
- **Ad Hoc Committees:** Formed for short-term tasks.

Each Pillar Focus Group must have at least three members.

Conflict of Interest Policy

Members must disclose any financial, professional, or personal relationships that may impact impartial decision-making. Members with a conflict must recuse themselves from related discussions or votes. Disclosures are collected annually.

Bylaws Summary

- Quarterly meetings (2 in-person, 2 virtual)
- Quorum: Simple majority
- Proxy voting permitted with written notice
- Members vote on leadership and key plan components
- Bylaws updated July 2024. <https://doh.sd.gov/media/s10j2ggz/ppg-bylaws-update-july-2024.pdf>



Glossary

- **EHE:** Ending the HIV Epidemic
- **NHAS:** National HIV/AIDS Strategy
- **Pillar Focus Group:** Replaces old-standing committees; strategic workgroups
- **Integrated HIV Plan:** South Dakota's roadmap for prevention and care
- **RFP Committee:** Reviews proposals

Orientation Checklist (Appendix)

South Dakota HIV Prevention Planning Group (PPG) New Member Orientation Checklist

- ☐ Attended or scheduled a PPG orientation session with DOH staff
 - ☐ Reviewed the full PPG Orientation Manual (2025 Update)
 - ☐ Read and signed the current PPG Bylaws (updated July 2024)
 - ☐ Submitted a completed Conflict of Interest disclosure form
 - ☐ Selected and joined at least one Pillar Focus Group:
 - Diagnose
 - Treat
 - Prevent
 - Respond & Surveillance
 - Community Engagement
 - ☐ Reviewed the current Integrated HIV Prevention and Care Plan
 - ☐ Added all quarterly PPG meetings to personal calendar:
 - May (3rd Saturday)
 - July (3rd Friday)
 - September (3rd Saturday)
 - December (3rd Friday)
 - ☐ Reviewed expectations for participation and attendance
 - ☐ Confirmed understanding of voting procedures, quorum, and proxy policies
 - ☐ Connected with a mentor (if applicable) or experienced PPG member
-

Date Completed: _____

Signature: _____

Printed Name: _____

References

Centers for Disease Control and Prevention. (2012). *HIV planning guidance*. U.S. Department of Health and Human Services. <https://www.cdc.gov/hiv/pdf/policies/cdc-hiv-planning-guidance.pdf>

Centers for Disease Control and Prevention. (2022). *Community engagement toolkit for HIV cluster detection and response*. <https://www.cdc.gov/hiv/cluster-outbreak/cdr-community-engagement.html>

Centers for Disease Control and Prevention & Health Resources and Services Administration. (2023). *Integrated HIV prevention and care plan guidance, including the Statewide Coordinated Statement of Need, CY 2027–2031*. <https://ryanwhite.hrsa.gov/program-resources/2027-2031-integrated-hiv-prevention-care-plan>