Vermont HIV/AIDS Community Advisory Group Meeting Minutes May 27, 2014

Wilder Center, Wilder Vermont

Attending: Roy Belcher, PWA Coalition; Vanessa Berman, Howard Center; Laura Byrne, H2RC; John Chagnon, RU12; Dan Chase; Pat Gocklin, DHMC; John Harris; Jonathan Heins; Chuck Kletecka; Deborah Kutzko, Comprehensive Care Clinic; Jose Negron; Karen Peterson, APSV; Jo Schneiderman, Twin States; Peggy Villars, DHMC

Vermont Department of Health: Daniel Daltry, Erin LaRose

Center for Health & Learning: Alexander B. Potter

The meeting was called to order at 11:11 am.

I. **DISCUSSION:** Needs Assessment

- A. Alex presented a slide show and information on the Vermont State Needs Assessment for HIV Care & Prevention, covering process, timeline, expectations, currently scheduled events. <u>A COPY OF ALEX'S SLIDESHOW IS AVAILABLE FOR</u> <u>ANYONE INTERESTED</u>.
- B. Individuals interested in doing "spot interviews" with people they know, and providing feedback to Alex, were asked to please communicate with Alex and he would discuss this further with them. This idea was a welcome addition to the Needs Assessment process.
- C. CAG members are also asked to please solicit AS MUCH PARTICIPATION as possible for the surveys and interviews, both in person and phone. The Needs Assessment will only be as good as the number of people participating.
- D. Following slide show, CAG members expressed concerns that people would not have enough time to respond and that they would like to see more time allocated for response so that as much participation could occur as possible in the assessment. Alex, Daniel and Erin will discuss and report back.
- E. Alex distributed the raw questionnaires for the surveys, to get feedback either during the meeting or to send away with people and have people send feedback via email, etc. Group decided to do feedback at meeting, and provided excellent guidance on what they would see as the most successful methods/questions/topics. CAG members took survey drafts with them and were asked to have feedback in by Friday, June 30, with the understanding that some people would not be able to take a look at the material until the following week but would communicate that with Alex.
- F. A first run one page survey will be complete for the Women's Retreat on Saturday, May 31, where Alex will be doing a Focus Group. Focus Group attendees would be asked to fill out the survey as a "test run" and offer feedback on the questions, readability, structure, etc.

II. CAG HOUSE KEEPING

A. **MINUTES:** It was noted that on page 14, the name of the organization should read AIDS Project of Los Angeles (APSA). Chuck moved the minutes, Deb seconded, and the minutes were approved unanimously.

B. PUBLIC COMMENT:

a. Roy: Taking applications for annual retreat, which will go out in their newsletter. They have a great roster of workshops. Don't hesitate to contact him for applications. The retreat will be July 10-13. Unfortunately this does coincide with Family Camp Weekend, so some people need to decide between the two options.

C. VDH ANNOUNCEMENTS:

- a. VDH had an STD site visit from a consultant and the state's CDC project officer on STDs. She raised the topic of Disease Investigation Services as offered by non-DIS providers, and that the CDC has a series of training on the topic, and on the provision of partner services by community-based workers. The goal would to help non-DIS providers be able to deliver some of the services, but not all. There was an assessment of the range of services. The consultant provided great ideas for surveillance and looking at other data sets. As we get into the Care Continuum, seeing people in care and viral load suppression numbers, match that with previous STD history. Cross match with viral hepatitis C, both chronic and acute. It was also encouraged to look at hepatitis B, and see if there were any matches happening there.
- b. HIV surveillance site visit will happen in August, which will be the first site visit in quite a long time.
- c. Daniel and Erin continue to work on the housing shortage needs that have been raised. Not sure yet what will result, but some movement has occurred. VDH will stay focused on the housing issue and talking with the housing folks about meeting the needs of HIV positive individuals.
- d. The VDH is currently under the audit process. Two audits are completed, and there is one more to go. Everything is going great.
- e. On the topic of syringe exchanges, there was considerable leg work done to get increased funding and it was clear that the advocacy was heard, that great work is being done, and there was movement with individuals. But when funding bill was released it wasn't there the numbers were the same as before. There is much need being expressed on the ground for more syringe exchanges, including Brattleboro, St. Albans, Middlebury, and Vergennes. There is huge need, but we will still be dealing with the same funding pool.
- f. The Department of Corrections is working on transition planning, to have a better system in place so when folks are released from incarceration, both social services and medical service are in place. The

CCC does a great job and the goal is to make sure it is coordinated across the board. One goal is to ensure that no inmate leaves incarceration without at least 25 days worth of medication. CAG could benefit from knowing the needs of inmates at various facilities across the state. A testing contract with the Department of Corrections is underway, and for the first time there is an OPT OUT for HIV testing instead of an OPT IN.

g. The CDC Grand Rounds on PrEP was very interesting. July meeting — which is now August 5 — will be on PrEP. Deb Kutzko and Jonathan Radigan will be presenting, and potentially a service provider as well. It was asked if we might be able to find a consumer who is negative who is currently using it for the meeting. This is uncertain at this time.

D. COMMUNITY CONCERNS/CHEERS & FEARS

- a. A question was raised on if there are any regulations about local Health Department offices around the state having a drop box or collection box for used needles. Daniel clarified that there is no rule or regulation about that, as such. However, there are complications with the concept of having a needle drop box without the constellation of services that are offered at an actual syringe exchange.
- b. Jonathan mentioned that he was not aware of any movement on his previous concern that there needs to be dedicated slots for HIV positive individuals at treatment centers, but said he did hear of a positive experience at Maple Leaf. Not sure if this was an anomaly or a response to the concerns! Vanessa says this does exist in Chittenden County, at the Chittenden Methadone Clinic. Jonathan clarified that his concern is more for residential needs, for detoxing in a controlled atmosphere. Deb commented that in her experience they can usually get people into services pretty quickly.

Respectfully submitted,

Alexander B. Potter Center for Health and Learning