

## Virginia HIV Community Planning Group Meeting Summary

**Members Present:** Rev. Tim Agar, Justine Annis, Odile Attiglah, Melissa Baker, Shimeles Bekele, Roy Berkowitz, Rhonda Callaham, Susan Clinton, Hugo Delgado, Pierre Diaz, Gregory Fordham, Marilyn Freeman, Janet Hall, Richard Hall, Robert Hewitt, Cheryl Hoffman, Mike King, Martha Lees, Elaine Martin, Nicholas Mattsson, Shawn McNulty, Ruth Royster, Thomas Salyer, Dorothy Shellman, Edward Strickler, Bruce Taylor, Stanley Taylor, Adam Thompson, Thomas Womack, Shannon Young, Dr. Rick Zimmerman

**Members Absent:** Diane Oehl; Rachel Rees (represented); Silvia Villacampa; Donald Walker (represented)

**Other Attendees:** Kathleen Carter, Jennifer Flannagan (representing Rachel Rees), Cat Hulburt, and Shelley Taylor-Donahue of the Virginia Department of Health; Johanna McKee of the Pennsylvania/Mid-Atlantic AIDS Education Training Center; Russell Jones (representing Donald Walker); Ruby Jones, guest; James and Walter Lundy of the Church of God In Christ, guests

### Welcome and Introductions

Elaine Martin called the meeting to order at 9:00 AM.

### Membership

New Member Orientation was held at VDH on May 19<sup>th</sup>. New members attending today's meeting : Rev. Tim Agar, Justine Annis, Roy Berkowitz, Susan Clinton, Marilyn Freeman, Dorothy Shellman, Stanley Taylor, Thomas Womack, and Dr. Rick Zimmerman. Diane Oehl was unable to attend.

### Old Business

- ❖ *Responses to Washington Post article* – Elaine Martin reported that VDH will be reporting every three months on how it is building cooperative relationships and collaboration in Northern Virginia for HIV prevention. She stated that Ashley Carter and Shelley Taylor-Donahue have done recent presentations there and have been proactively working with the Northern Consortium. Elaine has been contacted by NOVAM about putting together a northern Virginia community planning committee and she indicated that Cat Hulburt will serve as a representative.
- ❖ *Letter to CDC re: Virginia's community-based organizations (CBOs) not getting funded -*

Elaine reported that Kathryn Hafford attended a recent NASTAD meeting in DC and she indicated that CDC's decision not to fund Virginia's CBOs was a big topic of conversation there. Discussion followed about possible reasons why applications were not accepted. Elaine prepared talking points for a letter from Dr. Remley to CDC. Stan Philip contacted Elaine by phone to discuss the issue.

### **New Business**

- ❖ *New funding for Family Health Services* – Kathryn Hafford and Elaine met with Family Health Services staff and will collaborate with them on future projects.
- ❖ *Letters of support* - Elaine asked the CPG for a letter of support for the Expanded HIV Testing grant program which previously focused on African Americans and will now expand to Latinos and IDUs. A motion was made and seconded. All were in favor and Elaine will draft on Monday. The other letter of support is for Program Collaboration and Services Integration (PCSI) which will improve VDH collaboration of services with STD clinics, TB services at CBOs and ASOs. A motion was made and seconded, all were in favor.

### **HIV Prevention Update – Cat Hulburt**

- ❖ *Transgender Resource & Referral list* - Has been updated and is available on the VDH web site. Cat will send out web links to members.
- ❖ IRis will be up and running on National HIV Testing Day on June 27; however, it is not available as yet on the VDH web site.
- ❖ *Upcoming HRSA meeting* - Elaine and Diana Jordan will be attending on July 7-9, 2010 in Rockville, Maryland, concerning joint HIV care and prevention projects.
- ❖ *Upcoming PUSH (Partners Unlocking Syphilis and HIV) Event* - Will be held at 40 testing sites in Richmond and Petersburg and is scheduled for 10/10/10 from 10 am to 10 pm. Shawn McNulty's goal is to recruit at least 80 HIV testing counselors and to partner with African-American churches. He has already canvassed 174 churches in the Central Region.

### **HIV Care Updates – Shelley Taylor-Donahue and Jennifer Flannagan**

- *Ryan White All Grantee meeting on May 4<sup>th</sup>* – Funded through HRSA grant with a focus on Quality Management. The purpose was to get all Ryan White "parts" together to network under one roof. Shelley reported this meeting was very different from the previous two meetings and she asked for feedback from members who attended. Pierre Diaz reported that dental professionals attended; Ruby Jones (guest) reported that the meeting seemed to be more consumer-friendly than the first two meetings; and Gregg Fordham thought the meeting was still too provider-heavy. Rick Hall gave a special shout-out to Adam Thompson for his data presentation. Discussion followed concerning the role of the consumer at the all grantee meetings and this issue will be addressed at a future CPG meeting.

- *SPAP waiting list* - ADAP is starting to feel pressure due to the SPAP waiting list and people transferring back to ADAP; there also might be some people coming in from surrounding states that also have wait lists.
- *Minority AIDS Initiative* - Proposals in several different cycles, partly because of all the changes going on in Central region. A separate RFP will be released for Central (contract year will start September 1), another in Northern and Eastern. Eastern's contract doesn't end until March 31, 2011 so it will be released at a later date.
- *Central Region* - Shelley read a statement about current status and on-going transition of HIV care services at the VCU Office of Sponsored Programs. She reported that a criminal investigation is underway but that VDH funds were not released so no VDH/HRSA funding was involved.
- *Centralized Eligibility* - Jennifer Flannagan informed the group that ADAP centralized eligibility will be launched at the Norfolk Department of Public Health (NPHD) in June. NPHD is the eighth district to migrate to the centralized system.
- *Residency restriction* - Question from member: Do surrounding states have a residency restriction (proof of residency) for ADAP similar to Virginia's pending one? Shelley informed the group that Rachel Rees is working on the residency policy and Shelley will ask her to report on this at the July meeting. (Since Rachel will not be at the July meeting, Shelley researched neighboring ADAP eligibility guidelines and found that Maryland, North Carolina and Tennessee all have residency requirements stating that patients must prove residency in that state for their programs.)

### **Community Based Organization Monitoring - Elaine Martin**

Elaine's presentation, *Assessing Contractor Performance*, began with a couple of questions: *Are contractors providing services that they said they were going to in their work plans, and are they reaching their goals?* and *What happens to non-compliant contractors?* Monitoring tools used by VDH are quarterly reports, site visits, and monitoring and matching of PEMS and CTR data with the narrative reports and work plans. In answer to the second question, the first thing VDH does is to ask contractors to identify their weaknesses and find out if technical assistance is needed. If things worsen, VDH might withhold payments or reduce payments. If things still don't improve, VDH will send a warning letter and ask for a corrective action plan. The ultimate consequence is to withdraw funding. Common problems are late reporting, staff turnover or illness, inadequate training, staff unfamiliar with the work plan, and lack of access to target populations (some target populations are very hard to find and reach). Faulty bookkeeping and data collection are common because front-line staff don't have sufficient experience or training. More serious problems found are double dipping of salaries, complete failure to access the target population, double counting of attainment, lack of documentation of expenditures, and theft and fraud. VDH wants agencies to be successful while safeguarding taxpayer

money and ensuring quality services for clients (even more so with diminishing prevention dollars). Technical assistance and capacity building assistance helps. Sometimes agencies don't want to admit to falling behind and problems are reported by front-line staff. Adam Thompson suggested interviewing front-line staff during site visits in a private session where they might be more willing to convey information. Shawn McNulty suggested using summary report cards at the end of a fiscal year showing an agency's progress in meeting its goals.

### **Strengthening Community Involvement in Partner Services (PS) - Elaine Martin**

Eight other cities and states have contacted Elaine after her presentation at CDC. The goal of PS is to improve PS outcomes and to market the process. The PS campaign was piloted in three health districts to promote PS as a service *for* clients rather than something *done to* clients. There was a 72% approval rating for materials as effective tools. The PS road show targeted HIV care providers, CBOs and health department staff, and the purpose was to dispel myths, explain benefits and gain cooperation. A positive reaction was reported around the state. PS started in 2006, but really got rolling in 2008. Legally, CBOs cannot go out to locate partners. Challenges identified were that refresher training is needed, health departments were initially mistrustful, and there were paperwork issues. CBOs have been successful because there is established trust and rapport with community members already in place. Presently PS is being done at only four CBOs (Fan Free Clinic, The AIDS Fund, ACCESS AIDS Care and Council of Community Services) but VDH would like to gradually add more sites. Looking ahead, VDH would like to use PS for syphilis and other priority STDs, more collaborative activities between health department and CBOs, and include more sites (e.g., AIDS Services Group).

### **YAAMSM Study Recommendations - Cat Hulburt**

Cat asked for CPG input for possible collaborations as we move forward. It was proposed that sexual orientation be included on the youth risk survey; Cat thought this would be difficult but will think strategically. It was also suggested to pursue funding for internet outreach of sites frequented by young MSM. NASTAD has agreed to assist us with learning how to use the internet for outreach, especially in rural areas to reach people who don't have internet access. New prevention funding is a short-term goal (12 months) to direct HIV funding to target young MSM. Cat is working with Beth Marschak to identify foundations, corporations, and churches that might have financial assistance available and will purchase software to assist with this.

Concerning reaching out to youth organizations, Cat will ask members to brainstorm agencies they're familiar with, such as ROSMY in Richmond, and wants to produce a resource directory of safe spaces for young AA MSM. Many of the long-term objectives are not only for the CPG but also for educators, CBOs, black churches, and communities in general.

**Priority Population Identification - Elaine Martin, Cat Hulburt**

Discussion centered on behaviors, labels and prevalence of the HIV virus in black populations and the reasons why. Also identifying a priority population, e.g. Latinos exhibiting high-risk behaviors in northern Virginia, and identifying actual behaviors in various populations, and the CPG addressing the issues straight-forward and not "sugar coating" the problems. Other issues discussed were stigma and taboo of homosexuality in black communities, the role of black females in sexual relations with their partners, ensuring that interventions adequately address behaviors, and putting demographics under behaviors (a CDC directive).

**Needs Assessment Group Work – Cat Hulburt, Shelley Taylor-Donahue**

The group broke into four groups to list the "Five Types of Needs" (Knowledge, Persuasion, Skills, Access and Supportive Norms) for the populations of Homeless, Transgender, Rural and Women. After a short break, the groups reconvened to list the needs for another set of populations: Incarcerated, Youth, Blacks and Hispanics.

**Review of April Meeting Summary**

Motion was made to accept the minutes as written.

**Planning for July Meeting**

- Jeff Stover will present on data uses in HIV prevention and care
- Rachel Rees will report on ADAP residency requirements and waiting list
- Snapshot of Southwest
- Identify needs for more populations

**Adjournment**

The meeting was adjourned at 4:00 PM.

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Elaine Martin, Health Department Co-Chair

Date

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Kathleen Carter, Recording Secretary

Date