

**Virginia Department of Health, Division of Disease Prevention  
Ryan White Treatment Extension Act Part B and HIV Prevention Services  
Public Hearing Minutes  
Fairfax, Virginia  
October 20, 2010**

The public hearing began at 12:45 pm and closed at 2:15 pm. There were 16 attendees and 5 representatives from the Virginia Department of Health (VDH). VDH staff included: Shelley Taylor-Donahue, HIV Services Planner; Pam Whitaker, HIV Care Coordinator; Jennifer Flannagan, ADAP Operations Specialist; Rachel Rees, ADAP Coordinator; Cat Hulburt, HIV Prevention/Community Planner.

Shelley Taylor-Donahue first thanked the group for inviting VDH to their meeting and introduced the VDH staff. She then gave an overview of HIV Care Services' current activities around the state and asked Cat Hulburt to give an overview of HIV Prevention Services activities. After that, the floor was opened up for public comment on HIV services issues.

Participants began by asking about the possibility of using "patient/system navigators (P/SN) and/or peer advocates (PA)" in the Early Identification of Individuals with HIV/AIDS (EIIHA). The group discussed the need for standardized training, and possible certification, for peers who would like to assist others in this capacity. Shelley Taylor-Donahue explained that there is a provider for training in Northern Virginia who could respond to this training need, and that she will bring this need to the attention of the VDH Contract Monitor for that program. Ms. Taylor-Donahue also described several programs around the state that are using both patient navigators and peers in clinical and community settings, as well as a peer training program that has been going on in another region of the state for many years. She also discussed the results of a recent focus group with HIV care providers, who agreed that a P/SN or PA component would be beneficial to link clients to care and bring them back into care if they miss appointments.

There was also a discussion about the lack of information and specialized services for older people living with HIV/AIDS (PLWHA). Two different groups were identified as needing different types of services: older individuals who are newly diagnosed and/or not tested, and PLWHA who are aging. The Chair of the Washington DC Planning Council stated that there are some studies going on to look at that population to collect some baseline data. Cat Hulburt also stated that the Virginia HIV Community Planning Group (CPG) would be a good forum to bring up this issue.

The most animated discussion revolved around the ADAP crisis in Virginia. Several participants had questions and concerns regarding changes in ADAP. These included:

- 1) concern that clients who are currently enrolled will be dis-enrolled
- 2) concern that changes to income eligibility will make currently enrolled clients ineligible

- 3) questions about discrimination against males due to prioritization of pregnant women and children
- 4) question of whether or not there is an ADAP waiting list

The VDH ADAP representatives were able to respond to all questions and concerns and gave participants the option of being included on the ADAP listserv as well as participating in quarterly ADAP calls (Rachel Rees will send information to Northern Virginia Regional Commission (NVRC) staff to share with the group). While no changes have occurred to-date, the recommendations of the ADAP Advisory Committee were shared with the group as well as the current status of changes. Participants were assured that all information regarding changes to ADAP will be communicated widely with community partners and consumers in addition to being posted on the ADAP section of the VDH website.

Some specific issues regarding individual services were addressed by Ms. Whitaker, who offered to speak with participants one-on-one outside this venue. Ms. Taylor-Donahue also described the Peer Review process with regard to monitoring quality of services. The Chair of the Washington DC Planning Council also stated that they are working on standards of care for medical case management and have standards for other services as well. The Chair of the Consumer Access Committee of the Washington DC Planning Council also encouraged consumers from Virginia to participate on his committee and provided the group with information on some of the activities his committee is involved in.

At the end of the meeting, VDH staff provided business cards to participants, and encouraged them to contact VDH with any additional questions or concerns they may have.