HIV/AIDS Community Advisory Group Meeting Minutes September 13, 2016; Three Stallions Inn; Randolph VT

<u>Attending</u>: Tom Aloisi, VT Agency of Education; Mike Bensel, VT Pride Center; Laura Byrne, H2RC; Dan Chase; Kate Dearth, UVM/CCC; Rick Dumas, APSV Board; Chris Fletcher; Kim Fountain, VT Pride Center; Pat Gocklin, DHMC; Grace Keller, Safe Recovery; Chuck Kletecka; Michelle O'Donnell, Consumer Advocate, VT PWAC; Zpora Perry, CCC; Karen Peterson, APSV; Donna Pratt, Twin States; Paul Redden III; Amy Tatko, VT PWAC

<u>VDH</u>: Erin LaRose, Roy Belcher CHL: Alexander B. Potter

The meeting opened at 11:03 a.m.

- I. COMPREHENSIVE STATEWIDE PLAN: Group review, feedback, and revisions.
 - **A.** Alex led this session given Daniel was called away to Washington DC.
 - **B. NOTE:** Peter Jacobsen was unable to attend the meeting, but contacted Alex in advance with his comments, and at that time issued his vote for Concurrence in writing.
 - **C.** Tom Aloisi commented that the Plan was very well written. Others concurred. Alex said "thank you!"
 - **D.** Alex reviewed the changes that had been made to the Plan prior to the meeting, but post distribution. The changes were largely corrections, non-substantive, so were able to be made without larger discussion.
 - **E. CORRECTIONS:** Further non-substantive changes are summarized first as they continued the corrections that did not require discussion or votes.
 - 1. Erin: Chittenden County does not have a syringe exchange.
 - 2. Grace: Inquired about testing and Howard Center testing in the plan ASO/CCC were the only references given to places of testing. Howard Center has done extensive testing, both at the exchange and in the corrections system. **RESULT:** Alex will make a change to reflect "ASO, <u>CBO</u>, and CCC."
 - 3. Mike: Correct name to "Pride Center of Vermont."
 - 4. Tom: The charts on page 6 and 7 referring to HIV statewide by geographic distribution could be clearer with rates listed as well as numbers, for each county. This was accepted as an excellent idea and not considered in need of further discussion.
 - 5. Laura: Faerie Camp is in Chester not Grafton.
 - 6. Zpora: Under Goal #1, SMART Objective #2, Strategy 2, the High Risk populations vary from Target Population to Target Population. (Page 4, Section II) Why is this? Don't want IDU as a high risk to drop off from that targeted population.

Agreement by Erin that all four risk categories – MSM, IDU, Heterosexual, PLWHA – will be added to all categories in the Target Population column (Strategies 1, 4, 5, 6), with the exception of the two that are specific to MSM and Mpowerment (Strategies 2, 3), which will remain MSM only.

F. DISCUSSION & RESULTING SUBSTANTIVE CHANGES:

- 1. Tom: The amount of information in the Plan under the Needs Assessment section struck him as too much/more than was needed. Considerations on cutting this down? Alex agreed that this was a question he had going into that section, and made the suggestion that this matter be noted to VDH, and let Erin and Daniel make the final call on removing parts of this section. This was acceptable to the group. RESULT: The CAG suggests that VDH consider the amount of information included on the Vermont Needs Assessment that was completed, and leaves to the discretion of the VDH how much is removed or kept from this section prior to submission.
- 2. Zpora: Does this plan affect funding going forward? Erin responded that this plan is the overview guide that gives the CDC/HRSA a sense of where VT is moving. Vermont is not penalized if specific numeric goals are not met and will not reduce funding based on the result of Plan goals.
- 3. Chuck: Do the CDC and HRSA grant monitors send feedback on the Plan? Erin and Alex both said they believed they do that feedback was sent on the previous plan in 2012.
- 4. Questions arose and discussion was held around the overall Goal #1, SMART Objective #1 "By 2021, reduce new HIV infections in Vermont by 10% from 17 per year to 15 per year."
 - a. **CONCERNS:** Tom and Chuck expressed concerns about this goal and its low target. What about the Getting to Zero concept? Aren't we hoping to participate in this campaign? The goal seems small to the extent of being inconsequential in the larger picture of the HIV epidemic. Shouldn't the Plan be an aspirational statement? Shouldn't we reach further? Vermont needs to try for something significant. It also reflects a five-year period, and it seems that Vermont should have a larger goal over 5 years either a higher percentage reduction, or keep the 10% reduction and change to 10% reduction *per year* over the 5 year Plan period. There is no penalization if we do not reach the goal. Paul agreed that we should strive, if it doesn't hurt us to set a better goal.
 - b. RESPONSES: Pat and Erin noted that this is extremely hard in a low incidence state. Given one or two infections could tilt our percentage and numbers so significantly it is very difficult to set a low target and have it be a meaningful number. Erin explained that from the CDC perspective, "0" does not need to be "0" in a small state. It could be 15 individuals. Setting the 10% reduction goal matches the aspirational goal of the country, and is an acceptable decrease. Just because our state numbers are small overall,

- this does not mean we are not doing 'the right thing' to aim for that acceptable, achievable decrease.
- c. **RESULT:** Tom made a motion to change this Goal's SMART Objective to read "By 2021, reduce new HIV infections in Vermont by <u>20%</u>, from 17 to <u>14</u>." Chuck seconded and suggested a friendly amendment: Rather than use the number of infections from 2014 (17) as the base number for setting a percentage reduction, instead use the average of of infections from the last five years. This number is 14.5, and would rounded to 15. The 20% reduction would therefore be <u>15</u> to <u>12</u>. Tom accepted the friendly amendment. The vote was 12 in favor, with no opposed and no abstentions. Motion passed unanimously. Alex will change goal to "By 2021, reduce new HIV infections in Vermont by <u>20% of Vermont's five-year average of infections from 2009–2014, from <u>15</u> to <u>12</u>."</u>
- 5. During the conversation about adding IDU in as a target population in Goal #1, SO #2, Strategy #2, Tom inquired if IDU ought to be broken out into its own SMART Objective, potentially with specific numeric goals? Roy said that specific numeric goals around programming would be part of the individual grant agreements with providers. There was general agreement that this covered this question and this was left as is.

G. EDITS TO LETTER OF CONCURRENCE:

- 1. Chuck made a motion that the CAG concur with the Plan with the noted changes to be made, and Pat seconded.
- 2. Discussion was held as Chuck asked if the letter was open to edits. Alex said yes.
 - It was clarified that we do have a current Project Manager at CDC <u>Rita</u>
 <u>Volipitta</u>. Her name will be added to the letter.
 - b. In paragraph 3, line 4, "services" was added, so the sentence now reads: "The Vermont CAG meets seven times per year and gives input into assessment and planning for HIV/AIDS <u>services</u> in Vermont."
 - c. Chuck spoke to potential confusion regarding the first sentence of paragraph 3, which described the CAG participation in the Needs Assessment process. He thought it should be clarified that the Needs Assessment was consumer driven, so that it would be clear that the feedback in the Needs Assessment was not only gathered from CAG members. There was agreement that this was an excellent change and agreed that no vote was needed to adjust the letter in this manner. The section of the sentence will be changed to read: "The CAG provided... and direct participation in the **consumer-driven** Need Assessment process..."

H. CONCURRENCE/CONCURRENCE WITH RESERVATIONS/NONCONCURRENCE:

1. Chuck's motion for a vote on concurrence with the Plan was then up for vote. The motion: "That the CAG *concur* with the Integrated HIV Prevention and Care Plan, with the afore noted corrections, edits and changes, and that the CAG sign off on the letter of concurrence."

- 2. The vote was 13 in favor 12 present and Peter Jacobsen's advance written favorable vote, with zero opposed and zero abstentions. The motion carried unanimously and the Concurrence was finalized.
- **II. VDH UPDATE:** The only item was the VMAP language change that had been circulated prior to the meeting that did not substantively change the VMAP program at all. There were no comments or questions.

III. CAG BUSINESS:

- **A.** Approval of July 26 minutes: No corrections. Pat moved the minutes as written. Karen seconded. The minutes were unanimously approved.
- **B.** Public Comment: None.

C. Announcements:

- 1. Alex noted that the next meeting, our last meeting of the 2016 cycle, will be **November 22**, back at the **Vermont Tech Enterprise Center** just down the road.
- 2. Chuck suggested Alex deserved a round of applause for the Plan work, and Alex was very complimented, and thanked the CAG for this show of support and appreciation for the Plan process!
- 3. Karen announced that APSV is holding a large benefit, with thanks to Susan MacNeil, the prior director of Monadnock AIDS Services in Keene NH, conducting all arrangements and spearheading the entire endeavor. Elegies for Angels, Punks, and Raging Queens will be performed at the Latchis Theatre, one night only, on October 15, 2016. There will also be a special performance by Jody Sperling of Time Lapse Dance. Contact Karen for tickets or go directly to the APSV or Latchis Theatre websites.
- 4. Mike announced that Kim Fountain's last day was the prior Sunday, the day of **Vermont Pride**. Pride Center of Vermont is holding Community Forums, one each for the top three candidates, and would like as many community members to weigh in as possible.
- 5. Amy announced that October 8 will be a House of Lemay Drag Show in Montpelier to benefit the VT PWA Coalition. November 17 20 will be the final WILLOW, and Amy will be sending applications to all and asking for help distributing to get a good turnout for this last implementation of this intervention. She also publically thanked all her colleagues for their great support during her first time writing the state grant. She wished all the best in the granting process.

Meeting adjourned: 1:00pm

Respectfully Submitted, Alexander B. Potter