

May 2012

HIV test consent law change

In February, the Oregon Legislature passed Senate Bill 1507. This bill removes previous informed consent requirements for HIV testing and brings Oregon's law more closely in alignment with CDC's 2006 recommendations for opt-out HIV testing. The new law requires providers conducting HIV testing to notify patients of the HIV test and provide an opportunity to decline testing.

In the coming months, OHA staff members will

propose revisions to relevant administrative rules, which provide the detailed information needed to implement the law. OHA will seek input from stakeholders on the proposed revisions, and the final revisions will be presented at a hearing.

We expect that the revised administrative rules will be approved by fall 2012. At that time, OHA will develop and share new guidance relating to the consent process.

Condom distribution update



To meet local requests for condom distribution materials, OHA has placed an order for a variety of condoms and lubricant. We expect to receive the order this month.

OHA has formed an ad hoc workgroup to help develop a system for distributing materials to community partners across the state, as well as recommending materials to be included in future orders. The workgroup includes representation from OHA, local health departments and community-based organizations. If you would like to request condom distribution materials, please talk with your county's program contact.

Linkage to care

Linkage to care is a critical part of CDC's new emphasis on comprehensive prevention with positives. But what does it mean, and how does it differ from a referral? A referral is the process of connecting someone with appropriate services. Linkage to HIV medical care is the outcome of a successful referral.

Referral activities that local staff members may conduct to facilitate a linkage include providing information about services, helping clients make appointments, reminding clients of appointments, providing transportation assistance, and contacting clients to assess whether services were accessed or whether further assistance is needed. Following up with



clients may also allow staff members to track linkages to care.

Per CDC's new funding structure and reporting requirements, it is the responsibility of providers receiving CDC HIV prevention grant funds to track and report on linkages to HIV care, as well as efforts to promote medication adherence and retention and re-engagement in care.

Upcoming events

Viral Hepatitis Awareness Month

May

Learn more at <http://1.usa.gov/HepAwareM>.

Corvallis AIDS Walk

May 6 at 11 a.m.

SW 2nd Street & SW Western Street

For more information, contact

VicePresident@valleyAIDSInfo.org.

Oregon Queer Youth Summit

May 12

PSU Smith Memorial Student Union

Learn more at www.CHATpdx.org/OQYS.

International Day Against Homophobia

May 17

Learn more at www.homophobiaday.org.

HIV Vaccine Awareness Day

May 18

Learn more at <http://1.usa.gov/HVAD12>.

National Asian and Pacific Islander HIV/AIDS Awareness Day

May 19

Learn more at <http://1.usa.gov/NAPIHAAD12>.

World No Tobacco Day

May 31

Learn more at <http://bit.ly/WNTD12>.

31 years of AIDS

June 5 (first case reported in 1981)

National Caribbean American HIV/AIDS Awareness Day

June 8

Visit www.caribbeanhealthaidsday.com.

3v3 Barefoot Soccer Tournament

June 10

Concordia University, Portland

Benefits youth HIV prevention efforts in Africa

Learn more or register a team at

www.portlandbarefootsoccer.com.

National HIV Testing Day

June 27

Learn more at <http://bit.ly/NHTD12>.

CAREAssist Advisory Group

June 27 in Portland

Learn more at <http://1.usa.gov/CAG627>.

Integrating prevention and care messages



Best practices for delivering messages related to medication adherence and risk reduction were a major focus of the Continuum of Care Conference

in April. The conference was organized by the OHA HIV Community Services Program for providers in the Ryan White Part B service area.

At the conference, OHA HIV prevention staff members and clinical providers offered key

strategies for discussing adherence and risk reduction with clients living with HIV. Participants then prioritized messages to help standardize discussions around these topics and inform future trainings, programs and materials. OHA staff members were thrilled to see participants' enthusiasm for further integrating risk screening and risk reduction in care settings.

The OHA HIV Prevention, HIV Community Services and CAREAssist programs are reviewing participants' recommendations and determining next steps. These programs will continue collaborative work to improve comprehensive prevention and care services for persons living with HIV.

Why are HIV cases reported to OHA?

Laboratories and doctors report HIV cases and other reportable diseases to OHA through the Oregon Public Health Epidemiology User System (Orpheus). HIV case reports include the patient name, as well as demographic, risk and medical information. OHA also receives this information by contacting patients directly.



Why do OHA and other state health departments collect this identifying information? There are many ways these data are used to benefit public health. These data allow OHA to:

- Accurately count the number of new HIV cases and people living with HIV (accounting for deaths).
- Conduct HIV Partner Services interviews and obtain names of persons potentially exposed.
- Estimate community viral load.
- Monitor HIV drug resistance levels.
- Conduct disease investigation. For example, OHA recently conducted interviews with Hispanics diagnosed with HIV and with persons diagnosed late in the course of infection to help assess and improve access to services.

OHA adheres to a strict data security protocol to protect client data. Multiple security measures are in place to limit staff access to office areas, computers and the Orpheus database where HIV data are stored. Furthermore, Orpheus users are audited to ensure appropriate use of the database. OHA recognizes that protecting public health and protecting client data are inseparable activities.

Camp Starlight



Cascade AIDS Project (CAP) is thrilled to offer Camp Starlight, a week-long summer camp for

children infected with or affected by HIV. Camp Starlight is an opportunity for kids to spend a fun week in a caring and safe environment near the Oregon coast. Camp will be held Aug. 26-31.

Camp Starlight is just one of the programs offered by Kids' Connection, CAP's year-round program for HIV-affected families.

For more information about Camp Starlight or Kids' Connection, call CAP at (503) 278-3823 or visit <http://bit.ly/Cstar12>.

Program contacts

County	Contact
Benton, Douglas, Josephine, Lane, Linn, Marion, Tillamook	Larry Hill
Clatsop, Deschutes, Hood River	Cessa Karson-Whitethorn
Klamath, Lincoln, Yamhill, Jackson	Loralee Trocio
Clackamas, Multnomah, Washington	Cessa Karson-Whitethorn/Loralee Trocio
Jefferson, Marion, Polk, Umatilla	Cessa Karson-Whitethorn/Larry Hill

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