

Reginald Haden- Counties

*****Note: Question responses were collected from Mr. Haden, county health department employees, and the Department of Health and Mental Hygiene.**

Question 1-

Lack of legal services providers is listed as a challenge—we have been assured by BCHD that all counties had legal services being provided in the county. Why is this still a challenge?

Most of the county reports list issues with legal services for people that have been denied financial services. People in the counties are usually referred to Baltimore City for services because there are no legal service providers in the county.

Question 2-

How are Howard County individuals being assisted by Ryan White?

Through funding from Ryan White B Support Services, Howard County HIV Program provides:

*Non-medical case management including linkage to care services
Emergency Financial assistance in the form of transportation and/or food vouchers.*

There are two staff members who are each partially funded by Ryan White Part B. They provide the non-medical case management services. They assist those living with HIV to find services in our county such as medical care, housing, food, transportation and follow-up on those who are not accessing medical care to help link them to medical services.

Question 3-

How are those infected with HIV in the counties linked to care, and how are they being helped to stay in care?

Everyone goes through the same system in the beginning. New positives are referred to the county health department, which takes steps to link the individual to care. Partner services are used. Some of the smaller counties are part of the same territory, so they share partner services and case managers. In an effort to keep individuals infected with HIV in the counties linked to care and then help keep them in care, the Center of Prevention and Health Services works closely with MADAP staff who will keep us informed of case managers who have had an increased drop out rate. We ask that they support efforts to increase

treatment adherence and efforts to increase retention. Also, we ask case managers to contact the MADAP Clients to bring them back into care and to keep them in care. In smaller counties, care may be on a more personal level due to the size of the client base.