

Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina Counties Kimberlin Dennis, Merle Gordon, Terry Allan Co-Chairs

Executive Committee Minutes Wednesday, April 17, 2019 4: 00 pm to 5:30 pm Westshore Opportunity Center 9830 Lorain Ave., Cleveland

Facilitating Co-chair: T. Allan

Start:4:15 pmEnd: 5:15 pmMoment of SilenceWelcome and Introductions

Approval of Agenda:April 17, 2019Motion: N. O'NealSeconded: B. GlassVOTE: In Favor: AllOpposed:0Motion passesAbstain: 0

Approval of Minutes:March 20, 2019Motion: C. BarnettSeconded: K. DennisVOTE: In Favor: 13Opposed: 1- R. RollingAbstain: 0C. Barnett requested to be Executive Committee attendance roster, since he is co-chair of S&F.Motion passes

Approval of Planning Council Agenda:April 17, 2019Motion:C. BarnettSeconded: R. RollingVOTE:In Favor:AllOpposed:0Motion passes

Grantee Report – M. Rodrigo

Grantee Report - April 2019 – Planning Council

- 1. Grantee Report
 - a.ODH reorganized goals in State Integrated Plan. There are four main goals to include: Achieve Viral Suppression, Reduce New Infections, Strengthen Data Coordination and Reduce Disparities. ODH going to put together one document with the updates. Sent out copy to PC chairs of Quality Improvement.
 - b. Clinical Quality Management committee continues to meet with the efforts focusing on disparities in viral suppression. The grantee is changing meeting structure. The approach is to allow providers more time to work on clinical quality improvement projects. All providers are solidifying an aim for an 8 month project to complete during the FY19 grant year. TCQ Plus trainers scheduled a meeting with Lorain clients on April 11th.



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- c. Grantee team received our full award for the FY19 grant. The total award is \$4,769,668.00. This is an increase of \$40,652.00 from FY18. There are fiscal meetings occurred with all providers. All contracts have been distributed and are coming back to go to Board.
- d. ODH sponsored needs assessment update. They are working on the survey strategy. The survey strategy has been sent to the Quality Co-Chairs. OU is requesting input regarding targeting specific populations based on ODH EPI. This would request IRB approval to obtain the specific data. Resulting in the project taking a few months longer due to getting additional data sets based on ODH EPI.
- e. Grantee released a Newsletter in June and December of 2018. Feedback welcome.
- f. Preparation for FY2019 included: the standards of care are being updated, the website is being updated, the FY19 program kickoff was conducted March 19th, and eligibility forms have been updated with provider input. Grantee conducted showcase of services for the FY19 start of grant year. All providers presented at the meeting how their Part A services are conducted.
- g.Grantee helped sponsor the U=U local lecture. The grantee is incorporating U=U language into standard of care requirements for OAHS and MCM.
- h. Data to Care discussions continue with ODH and community partners. Meeting was conducted March11th to obtain provide input about direction of the project.
 Providers seem interested. Grantee has an input form out to seek further input from medical providers. Working on putting in a TA request to a third party for data to care support.
- i. Grantee working on closeouts for FY18 and FY19 initial reports.
- j. Ryan White Services Report (RSR) was submitted March 25th. This is a client-level data reporting requirement that monitors the characteristics of **Ryan White** HIV/AIDS Program Parts recipients, providers, and clients served.
- k.Grantee conducted a meeting with prevention to identify all EIIHA meetings dates for FY19. The goal is to ensure a seamless transition from the prevention region changes with existing Part A funded EIS and Outreach providers. The EIIHS meeting took place March 11th at CCBH. Prevention lead the discussion briefing on upcoming ODH changes and requirements.
- I. Grantee conducted a training in conjunction with the AETC on February 21st at CCBH included a HIV 101, Cultural Competency, and a Trauma informed Care. CEU's were provided for the training. Attendees provided positive feedback. Grantee to send out training survey to identify additional trainings for FY19. This approach was done in FY18 as well. Trying to identify all training for the FY19 grant year.



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- m. HRSA conducted a webinar regarding the new HIV plan for March 13th. All but one of the counties reside in a Part A region. HRSA is responsible for a few items in the pillars of the plan. Funds expected to be dispersed from different avenues including HRSA. An application would need to be submitted for the funding.
- 2) The FY2018 grant is processing invoices. Current split is 79.17% Core and 20.83% Support. Total spent is 92.00% should be at 100%. The Part B funds concluded in June of 2018 which impact Mar-June charges as well as clients served.

Green = underutilization, White = on target, Red = Over utilization

Planning Council Business

Monthly Progress Update from HRSA Project Officer – S. Harris

HRSA monthly call update - S.Harris reported the following during the call:

- CLC sponsored Mini outreach and May 2nd forum
- S&F is currently prioritizing services as part of PSRA; Epi data presentation and HOWPA utilization presentation will be head at PC on April 17.
- Membership working on attendance tracking; came up with a LOA policy; MRM is current hold its open nomination process and recruitment efforts underway for new members.

HRSA expressed satisfaction with PC body of work overall

HRSA question: How we are targeting our recruitment; Youth, Hispanics and Transgender are target communities for recruitment.

Committee members encouraged to be creative in recruitment efforts, such as providing rides to meetings if transportation barriers are an issue

Zach applauded for Quality presentation in Lorain; very effective

Confirm Receipt of Annual Confirmation Forms - S.Harris

All forms are in except three. S. Harris will contact remaining members.

HRSA Site Visit- Reflectiveness - S. Harris (Additional agenda item)

HRSA could be planning to conduct another site visit soon (it has been 5-years since their last visit). From HRSA last site visit in 2014 the made numerous recommendations. The recommendation cited were specific to the PC:

I. Reflectiveness/Representation

- **a.** Time-limit nomination process that reflects the HIV epidemic of the TGA; identify a slate of candidates/pool
- **b.** Routinely track and monitor attendance
- **c.** Establish committees of records
- **II.** SF to develop a PRSA plan to address carryover, service category ranking, allocation of funding to ranked categories, and annual spending plan. HRSA recommended to report service category utilization quarterly, not monthly. Suggestion is to do every month, because it has a learning component.
- III. MRM Training; standard orientation, on-line training/webinar, one-on-one mentoring



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IV. Committee structure

- **a.** Expanding role of the QI committee to take on needs assessment. The committee has also taken on the lead role of developing directives for PSRA.
- **b.** Revising the role of the Executive Committee to be more of a governance committee, providing oversight to ensure PC legislative responsibility is achieved.

Committee Reports

a. Community Liaison Committee None

b. Strategy & Finance – C. Droster

Motion was made to determine how to best use funding allocation to HIPSCA for upcoming grant year 2020. In committee, vote was: For: 8, Opposed: 0, and Abstained: 1. Issue raised on clients remaining on Part A funding, rather than switching to Part B funding in the current grant year..

Motion: To give grantee permission to proceed to put together a transition plan on how to use the funds in HIPSCA category.

Motion: B. Glass Second: N. O'Neal Vote: For: 10 Oppose: 0 Abstain: 1 (J. McMinn) *Motion passes*

HRSA recommendation: applying for a waiver, not sure whether this is an option, since the waiver request must be based on data, that demonstrate a need.

c. **Membership, Retention & Marketing** None

d. **Quality -** R. Watkins

Second year 2018 Continuum of Care model was a move for Outreach Services in our support category to merge with Intervention Services. A vote was taken today and passed a motion will be presented to the Executive Committee and full PC at the May 15th meeting.

Other Business

Regarding National HIV strategy, Democrats planning to go to universal health care plan Issues: Existing plan, how to transition w/o leaving anyone out? Comment: Molecular Surveillance important issue, more focus needed, concern for potential impact on minority individuals.

Announcements None

<u>Adjournment</u>

Motion: R. Rolling

Seconded: C. Droster



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	Executive Committee	Jan	Feb	Mar	Apr	May	June	Aug	Sep	Oct	Nov
1	Kimberlin Dennis – Co-Chair	10	10	10	10						
2	Terry Allan – Co-Chair	10	10	10	10						
3	Merle Gordon – Co-Chair	10	10	10	10						
4	Naimah O'Neal	10	10	10	10						
5	James Stevenson	10	10	10	10						
6	Clinton Droster	10	10	0	10						
7	Brenda Glass	10	10	0	10						
8	Chris Ritter	10	0	0	0						
9	Jason McMinn	10	10	10	10						
10	Robert Watkins	10	10	10	10						
11	Clifford Barnett			10	10						
	Total in Attendance	10	9	8	10						

PC Members: B. Jones, R. Rolling, M. Deighan, T. Leonard **Staff:** S. Harris; T. Mallory; Z. Levar, V. Panakkal, M. Rodrigo **Guests:** G. Gage, S. Washington