

Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina Counties Kimberlin Dennis and Terry Allan Co-Chairs Planning Council Minutes

Wednesday, November 18, 2020

5:30 pm to 7:00 pm

Start:5:34 pmEnd:7:14 pmFacilitating Co-Chair: T. Allan

Moment of Silence Welcome and Introductions

Approval of Agenda: November 18, 2020

Motion: N. O'NealSeconded: R. RollingVOTE: In Favor: AllOpposed: 0Abstained: 0

Approval of Meeting Minutes for October 21, 2020

Motion: C. NichollsSeconded: C. BarnettVOTE: In Favor: 19Opposed: 0Abstained: 1- F. Ross

The following amendments to the October 21, minutes were made by J. Citerman-Kraeger in reference to the HOPWA report section of the minutes:

- 1. The correction is that there *is (replacing was)* a Short-term Supported Housing Program.
- 2. The correction is the "Short-term Supported Housing Program" is a "regular" HOPWA program and it is only available up to 60 days.
- 3. The correction should read, "The Workforce Development Program is partnering with Ohio Means Jobs/Cleveland-Cuyahoga and looking for PLWH/A who want to be gainfully employed and would like to help them develop this program."
- 4. The correction is that the Open House for the Workforce Development Program will <u>not</u> occur, due to Covid.

Flu & Covid Update – T. Allan and Dr. B. Gripshover

T. Allan - Things have been moving in a very precarious position. There are now 500-600 new cases that have come in everyday, over the past week. In the first two weeks, we have reported 50 deaths just in our jurisdiction. Some of the models from CWRU, show us looking at more than 1,000 cases daily. There is growing concern with hospitals having enough beds to accommodate illnesses and concern with the decrease in available medical staff that are out sick, due to isolation. We are seeing this surge across the state. The governor has issued a curfew from 10:00 pm to 5:00 am for over next three weeks. Also, the public health advisors, mayor, and County officials are encouraging people to stay in if it is not essential, to limit groups to ten or less, such as weddings, and/or to postpone these events, if possible. They are also asking people to work remotely as much as possible. The concern now is over upcoming holiday mixing and gatherings. From the flu standpoint, those numbers are low and masking should help, but if it increases, it could be a problem with both viruses circulating. It has been a sobering few days, having to triage over a thousand to 1,500 individuals that have to be called



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each day. We are also still trying to continue with testing and making resources for kids available such as Wi-Fi and so forth and a lot of other things happening around support. We are currently at 15% with positive testing and while we prepare if those number climb, we are hoping the surge doesn't continue.

Dr. B. Gripshover – The numbers are up in the hospitals. In July we were in the 40's and now we are back up further than before. We are pleading for everyone to get flu shots and to continue masking, as this should help decrease the spread of illnesses.

*Question: C. Droster – Is there any distinct differences between Covid and the flu?

**Response: Dr. Gripshover* - The one feature that is distinctive in Covid, is that there is a loss of the sense of taste and smell. There could also be a fever, extreme fatigue, and a dry cough. With the flu, the symptoms are more sudden at the onset, whereas with Covid, symptoms may not show up until at least a week to ten days into the infection.

Grantee Report - November 2020 – Planning Council

- 1. Grantee Report
 - a.ODH State Integrated Plan no update.
 - b. Clinical Quality Management committee continues to meet with the efforts focusing on disparities in viral suppression. Grantee CQM members met with providers regarding ongoing 2020 projects. The third sessions of meeting have started with the providers. The November 16th meeting will be the annual project and lessons learned meeting for the group.
 - c. Grantee team finalized the closeout report for the FY2019 grant year. The remaining balance for the FY2019 grant year is \$101,950.89. All funds are allowable for carryover as we are below the 5% of the Formula award were requested for the Official FY2019 carryover into FY2020. The funds were received in the FY2020.
 - d. S&F is completing reallocations in November 2020.
 - e. ODH sponsored needs assessment update. The surveys have been released for completion requesting all parties to distribute widely if possible. The survey closed at the end of June. CCBH will present once data has been received.
 - f. Grantee completed version five of the newsletter and it was sent out on June 1st. Feedback welcome. Next version December 2020.

g. The AETC presented at Planning Council in October.

h. Data to Care - The 3rd cycle is currently being worked on by the medical providers.
CCBH received legal feedback from John Hopkins University. The Not-In-Care (NIC) process uses a combined approach integrating data from CCBH and medical providers. This project is a funded Ending the HIV Epidemic initiative.



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- i. CCBH continues to work with sub-recipients in regards to data completeness and productivity.
- j. CCBH fully migrated to CAREWare 6. The system has many differences when running reports. This has caused CCBH staff to spend many hours creating new reports as well as determining what data is now being pulled.
- k.Ryan White Part A received COVID-19 funding. CCBH and CDPH conducted joint listening sessions with providers. CCBH completed a large order of masks for clients as well as distributed funding to all providers based on Part A eligible clients served.
 Providers working on invoices and monthly reporting requirements.
- I. The Ending the Epidemic award was received in the amount of \$750,000. The following projects have been moving forward social media campaigns for U=U/stigma reduction for HIV positive clients. Community Health Worker Certification program in coordination with Cleveland State University, Data 2 Care program support, Intensive MCM program support, Medical Transportation program support and Rapid Art program support.
- m. Ending the Epidemic Plan update:

Community Solutions is working through the planning process with the Cuyahoga County EtHE plan. There have been preparation meetings. An EtHE advisory committee meeting was conducted. Community Solutions completed a community engagement meeting virtually. The plan was granted an extension now due end of the year. The situational analysis has been completed and presented to the local advisory committee. The advisory group is meeting weekly to meet the target completion date for the plan. Focus groups for plan review are November 12th and 13th.

n. Prevention funded CTR sites have been invited to PC as PC prepares to review its bylaws to integrate prevention and care planning efforts.

The FY2020 grant. The allocations split is 76.25% core 23.75% Support the expenses are at 43.68% for six months which is underutilized. Six months should be 50.00% there are a few providers behind schedule. I would anticipate a major reallocation on November.

Administrative Update & Fiscal Report – M. Rodrigo

We had a Clinical Quality meeting this past week, we came up with good project ideas and although Covid has impacted us, overall everyone did a good job. We are continuing to work through the Needs Assessment. We got a draft of it today and will look at making edits and getting them in by the December 7th due date. The Data to Care project is creating another cycle. The list is being compiled and will be sent to Ohio Department of Health (ODH) this week. Focusing on the Ending the HIV/Aids Epidemic (EtHE) grant has taken the largest amount



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of our time, and we are putting together the application for 2020-21 grant year. The Covid report was due November 15th and has been submitted. The planning continues with the EtHE grant and working through strategies. Most of the attendees on today's meeting call participated in last week's listening sessions. A release of the draft on the discussion ideas will be submitted to ODH by early December. An important piece is to take the plan back to the committee, invite advisory group members to planning council to discuss EtHE tasks. The hope is that the best practices will be put in place which can be used for both Cuyahoga county and extended to other areas. Some of the projects include a social media campaign in conjunction with Prevention, developing an advisory committee, marketing PrEP and U=U campaigns, as well as "medical transportation support," "Intensive Medical Case Management," and the Rapid Art Program support." The Community Health worker project with CSU is also underway and ongoing. Data to Care is working on the not in care lists; that data is being compiled and will be sent back first to ODH, then to the CDC.

*Comment: B. Jones – Regarding the CSU Community Health Worker program, I received and email about the 2nd cohort, is that related to HIV? It is a concern that there are certain elements that hopefully will not be missed, and that PLWH/A with firsthand knowledge and experience are not being engaged and this is troubling. Also, as for the advisory committee, they should find a way to reach community-based organization and those most affected, as it appears to us advocates that it is not reaching them, and only going so far. We should be able to integrate agencies that are more reaching into the community.

*Response: M. Rodrigo - That is a good point, we should be looking to reach the most needed areas. We are currently looking at how agencies without huge infrastructures could be more helped; looking at those grassroots organizations that are already doing great work. The CSU project is just a cohort right now; we will have to see what HRSA will provide for this going forward.

*Comment: C. Barnett – Regarding the uniqueness of these programs, they have been very good, providing listening to the community, and getting positive feedback. The work that's being done in these programs is really positive, life-changing work going into good places. There are Community Health worker parts, and other parts that are good such as learning about blood pressure reading and HIV testing. Kudos to those that put in the hard work to make these programs possible!

*Comment: B. Jones – We are trying to get funding to provide mini grants for community workers in the left out or hard to reach communities so they can partner or link them with a larger group and take it even further into the community. We also used to do Night Rides, where we would directly go to sex workers and others in left out areas and engage them in real conversations. Those real, personal initiatives need to be looked at and happen again.

Fiscal Report



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We are currently at 50% and the split is fine. The vote on the carryover funds will follow later in the S&F committee report.

Medicaid Update – C. Nicholls

Medicaid continues not to take negative actions, unless someone is deceased, moves out of state, or requests to close their case. That may be changing, so it is recommended to get applications in soon as possible, as there is a larger pending Medicaid number, now in open enrollment. Based on the stay at home advisory, we are also anticipating a change in the service delivery model in order to keep people safe. We will continue to provide information on social media, our Facebook page, or you can reach out directly for updates.

*Question: B. Glass- How would people without computer access get that information? *Response: C. Nicholls – The information can be found on our Facebook page and it will also be sent to PC support for mail distribution. If anyone has suggestions on other ways to distribute the information, please let us know.

Part B Update – S. DiCocco

- The ODHAP client survey closed on November 3, with 431 responses, Michelle Krelko from Data and Quality team is working on results.
- All OHDAP Coordinators and the OHDAP Administrator have transferred their work desk line to their work cell phone which will allow them to be more accessible to case managers and clients.
- Open Enrollment for ACA started November 1, 2020 and will end December 14, 2020
- Open Enrollment for Medicare started October 15, 2020 and ends December 7, 2020
- Open Enrollment for Medicaid Managed Care plan is open until November 30, 2020
- Draft regional reports for the statewide needs assessment have been received from Ohio University (OU), including the report for the Cleveland TGA region. The draft has been forwarded to the Part A grantee for reviewing and feedback to OU. Target date return feedback is around December 7th.

HOPWA Update – L. Clayton

Two items new this year – We have started the "Getting to Work Program" and it is up and running. If anyone is interested in a presentation, let us know. We will also reach out to PC in the next couple weeks. Next discussion will be on the short-term housing program that provides opportunities for individuals who otherwise are homeless to stay up to 60 days in a hotel as long as they are working with a case manager at Nueva Luz, EDEN, or the AIDS Task Force.

Planning Council Operations

Monthly Progress Report from HRSA Project Officer

No meeting was held this month.



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Update – Coordination of HIV Care & Prevention

We are still soliciting members to join the work group. An outline will go out next week with updates of the Bylaws and a schedule on how to proceed. We want to have hourly calls, each week, with the bulk being done in December so that by the end of January everything will be done and ready to present for approval in the February 2021 meeting. The following is an updated list of the current members.

Work Group Members: Robert Watkins, Clifford Barnett, Naimah O'Neal, Faith Ross, Rachel Austermiller, Julie Patterson, Bryan Jones, Tina Marbury, Cederick Taylor, Ronald Rolling, and Michelle Jackson-Rollins.

Committee Reports

Community Liaison Committee (CLC) – N. O'Neal

We met last week and finalized the housing survey and it has started going out. It was developed so people can go onto a link and complete it anonymously. There have been three surveys returned so far, maybe by January we will have a better count. We are still trying to make sure we can do a community forum, virtually next year, depending on Covid. We again extend thanks and congratulations to Ronald Rolling, on becoming the official new Co-chair for the Community Liaison Committee (CLC).

Strategy & Finance (S&F) – C. Barnett

The Strategy & Finance Committee met on November 4th on the Reallocation process and had a major carryover. Three motions were made for committee to vote on for the carryover. A Special Reallocation and Carryover meeting was done today to move funds from the Oral Health Services category to Mental Health and Emergency Intervention Services (EIS) categories so we won't lose those funds.

*Question: B. Jones – What about the use of dollars designated for gas cards and food for inperson meetings, now that everything is virtual?

**Response:* M. Rodrigo: We can talk about this; however, most unused funds are redirected into other service categories so no funds are left on the table.

<u>Motion #1:</u> To reallocate grant funding by moving funding from Oral Health Services to Mental Health and Emergency Intervention Services (EIS).

Motion: C. BarnettSeconded: R. Watkins**VOTE:** In Favor: 17Opposed: 0Abstained: 3

Motion #2: To approve the reallocation of funding as approved by the Strategy & Finance Committee to address the current funding needs.

Motion: R. RollingSeconded: K. DennisVOTE: In Favor: 21Opposed: 0Abstained: 0



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Motion #3: To carryover 5% or \$144,259 Part A funds to go into Outpatient Ambulatory Health and Medical Case Management Services.

Motion: K. DennisSeconded: R. RollingVOTE: In Favor: 17Opposed: 0Abstained: 4

Membership, Retention & Marketing (MRM)-B. Glass

Held the Annual New Member Orientation and Refresher Training for new and current members, conducted by the PC facilitator. We reminded everyone of the Bylaws update plans to integrate prevention.

Quality Improvement (QI) - R. Watkins

There was a presentation on 2017-2019 Oral Health Standards of Care Outcomes and a data presentation of Part A, Oral Health Utilization. A brief overview of a prior Oral Health survey findings. In January the committee will look to put together an agenda and ask the Grantee to invite oral health providers to participate in a virtual call to discuss oral health issues. Afterward, we will compile the feed and decide next steps. The committee is specifically interested in information on why people don't seek more oral health care. A regional draft report of the Needs Assessment is in the final stages and will be ready for presentation in 2021.

Public Comments

B. Glass - There have been a lot of e-mails going out to the PC members, how can we limit these so they are not confusing and interfering with daily official PC e-mails and work responsibilities?

S. Harris – I agreed with Brenda, it get overwhelming. Information should be specific to PC business and the Cleveland TGA jurisdiction, if not; individuals who want to share the information can report the information during the "Public Comment" period of the agenda. Then shared via the sender's own network; with them as the contact person. It is recommended that only official PC business be distributed through PC support. It is also suggested that blind e-mails should be sent to designated recipients only, so they won't be read by everyone.

Announcements

Atty., T. O'Donnell - An extension has been granted going into next year for public meetings, including meetings like Planning Council to continue with virtual meetings, extended until in July 2021.

B. Jones – The International Conference on Stigma will be held tomorrow, and CLC Co-Chair, Naimah O'Neal, is being honored at the conference as a recipient of the Stigma Warrior Award. We Think 4 A Change is being honored by Equitas as the New Organization of the Year.

Adjournment

Motion: K. Dennis

Seconded: R. Watkins



Cuyahoga Regional HIV Health Services Planning Council

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Attendance:

	Planning Council	Jan	Feb	Mar	Apr	May	June	Aug	Sep	Oct	Nov
						20	PSRA	20	20	20	20
1	Kimberlin Dennis – Co-Chair	20	20				20	20	20		
2	Terry Allan – Co-Chair	20	20			20	20	20	20	20	20
3	Merle Gordon – Co-Chair	20	20			20	20	20	0	0	0
4	Clifford Barnett	20	20			20	20	20	20	20	20
5	Michael Deighan	20	20			0	20	0	0	0	20
6	Clinton Droster	20	20			20	20	20	20	20	20
7	Brenda Glass	20	20			20	20	20	0	0	20
8	Barbara Gripshover, MD	20	20			20	20	20	20	20	20
9	Tina Marbury	20	20			20	20	20	20	20	20
10	Jason McMinn	20	20			20	20	0	20	20	20
11	Christy Nicholls	20	20			20	20	20	20	20	20
12	Naimah O'Neal	20	20			20	20	20	20	20	20
13	Chris Ritter	20	20			0	0	0	20	20	0
14	Marlene Robinson-Statler	0	20			0	20	20	20	20	20
15	Ronald Rolling	20	20			0	0	0	0	20	20
16	Robert Watkins	20	20			20	20	20	20	20	20
17	Leshia Yarbrough- Franklin	20	20			0	20	20	20	20	20
1	Nicole Carter					0	0	0	0	0	0
2	Jeannie Citerman-Kraeger					20	20	20	20	20	20
3	Billy Gayheart					20	20	20	20	20	20
4	Deairius Houston					0	0	0	0	20	20
5	Tracy Johnson					0	0	0	0	0	0
6	LeAnder Lovett					0	0	0	0	0	0
7	Jeffrey Mazo					20	0	0	0	0	0
8	Earl McCray					0	0	0	0	0	0
9	Julie Patterson					20	20	0	20	20	20
10	Faith Ross					20	20	20	20	0	20
11	William Simpson					0	0	0	0	20	0
12	Stephanice Washington					20	0	0	0	0	0
	Total in Attendance	16	17			18	19	16	17	19	20
	C Attendees: S DiCocco B Anderson-Freese H Searfoss-Allaire M Jackson-Rollins B Jones C Taylor B										

PC Attendees: S. DiCocco, B. Anderson-Freese, H. Searfoss-Allaire, M. Jackson-Rollins, B. Jones, C. Taylor, R. Austermiller, L. Boyer

Staff: M. Rodrigo, S. Harris, M. Halko, T. O'Donnell, T. Mallory