

## **Cuyahoga Regional HIV Prevention and Care Planning Council**

*Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina Counties*

**Kimberlin Dennis, Brian Kimball, Christy Nicholls, Co-Chairs**



### **Combined Executive and Full Planning Council Minutes**

**Wednesday, May 18, 2022**

**5:30 pm to 7:00 pm**

**Start:** 5:35 pm

**End:** 7:11 pm

**Co-chair: B. Kimball**

#### **Moment of Reflection**

##### **Welcome and Introductions**

*Please note: PC members who have a conflict of interest must inform the committee at the beginning of each meeting. A Conflict of Interest, as it pertains to the Ryan White Planning Council Bylaws, is defined as "an interest (actual or perceived) by a Planning Council member in an action that may result in personal, organizational, or professional gain for the member or his/her spouse, domestic partner, parent, child, or sibling."- Conflicted: B. Gripshover, N. O'Neal, D. Smith, J. Stevenson*

#### **Approval of Agenda: May 18, 2022**

##### **Addendum:**

Motion: C. Barnett      Seconded: N. O'Neal  
In Favor: All      Opposed: 0      Abstained: 0

#### **Approval of the Minutes: April 20, 2022**

##### **Addendum:**

Motion: C. Barnett      Seconded: S. Washington  
In Favor: All      Opposed: 0      Abstained: 0

#### **FLU & COVID-19 UPDATE**

##### **Brian Kimball, Interim Director, City of Cleveland**

The current report for Cleveland is 529 new cases, which is 139 new cases per 100,000 residents. We have seen rates increase in Cleveland, combining hospital and new cases, but countywide still defined low. This is good though seeing an increase in positive cases per day. Over the past week, hospitals increased slightly, as we continue recommending vaccines and boosters as the best protection. Yesterday, the federal government started taking orders for a third round distribution of home tests, now available through U.S. mail.

**\*Question: N. O'Neal** – What is the wait time for boosters?

**\*Response: Dr. Gripshover** – It is recommended four months after the first shot, second boosters, and for people 50 and over with underlying conditions.

**\*Question: S. Harris** – If it is beyond the four-month period, can u still get them?

**\*Response: Dr. Gripshover** – Yes, for most healthy people, with at least four months you can get second booster. For people with serious conditions, at risk for severe Covid, such as, untreated HIV, diabetes, hypertension, obesity, kidney disease and chemotherapy, they should consult their doctor first.

**\*Question: N. O'Neal** - Do you think we will get new boosters, or get a shot every year, like the flu shot?

**\*Response: Dr. Gripshover** – Right now, it's the same shot over and over, but they're working on technology for that. We hope to get to the place where we don't need them every time.

**\*Question: R. Watkins** - Do we have numbers on transitions from Covid?

**\*Response: B. Kimball** – In Cleveland, there was total of 982 deaths since onset.

**\*Question: C. Barnett** - With more and more vaccines that still have side effects, will that go away?

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**\*Response: Dr. Gripshover-** Some side effects are from immune responses and are usually short-lived, for a day. Tylenol helps stop aches and fever but, if exposed before, you will probably have side effects.

**\*Question: S. Washington** - What if you had it in 2020 and got all three shots, are you a candidate for the next booster.

**\*Response: Dr. Gripshover** - It does not make you a better candidate to get a booster or not get one. Sadly, prior Covid does not protect you from getting again.

**\*Comment: S. Washington** – It looks like when masks come off it goes back up, like a no end situation.

**\*Comment: B. Kimball** - Masks are the best prevention.

### **Dr. Barbara Gripshover, M.D., Immunology Medical Director, University Hospitals**

The flu is still around but going down, but we hope this is the end of this season. At UH, Covid positivity rates are way up, 17% for new cases. On a good note, numbers for people who are A-symptomatic are low, but there is still Covid around.

### **Recipient Report – May 2022 -Planning Council**

1. Recipient Report
  - a. ODH State Integrated Plan – at the 4/21 meeting, 9 affinity group sign ups were finalized, co-chairs of each group are being determined and groups should be beginning soon. Next statewide meeting occurring 5/19 from 9-11 am
  - b. Clinical Quality Management Committee- currently working with HRSA staff to revise CQM plan
  - c. ODH Sponsored Needs Assessment - ODH conducting key informant interviews
  - d. Next edition of CCBH HIV Services Newsletter planned release in early June
  - e. FY2022 trainings held by Recipient:
    - a. Stigma Training – TBD
    - b. **(PC Directive)** Cultural Competency for Dental Providers - TBD
  - f. Part A Medical Case Manager Network Meeting - recent quarterly meeting occurred on 4/19 and included robust discussion about HIV criminalization and PC consumer survey
  - g. CCBH submitted Ryan White Program Services Report(RSR) in March 2022 to comply with data reporting requirements of HRSA
  - h. Prevention Committee – Next meeting occurring June 1<sup>st</sup> from 4-5:30
  - i. **Part A Funding** – notified on 4/28 that full award should arrive shortly
  - j. **Ending the HIV Epidemic Funding** - The following projects are continuing in FY2022:
    - a. Social media campaigns (Pride, Hispanic Heritage Month, Black History Month focused campaigns)
    - b. Community Health Worker Certification program
    - c. Data 2 Care program
    - d. Intensive MCM program
    - e. Medical Transportation for non-VLS clients program
    - f. Rapid Start of ART program
    - g. Peer Navigator program
  - k. Ending the Epidemic Plan update:
    - Anti-Stigma campaign: <https://www.loveleadshere.org/yourewelcome/>
  - l. Staffing Update: Two new HIV supervisors starting on 5/9
    - a. Part A Supervisor – Monica Baker
    - b. EHE Supervisor – Gloria Agosto Davis

### **Administrative Report – Z. Levar**

- The State Integrated Plan is still moving along. The statewide meeting set for tomorrow will not take place, due to ODH setting up Affinity groups. They will start transitioning to those smaller groups where

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they will focus on areas to address for the plan. It will all kick back off in June and Kate will update on meeting times.

- The next HIV newsletter is releasing in early June.

- Part A funding – We are still operating on the partial award and we received an email from HRSA that the full award is coming very soon. The Project Officer also said will get a substantial, 3% increase this year, for about \$150,000 or more. While operating with the partial award, there was no lapse in funding to providers

- EtHE will continue the same programs as last year, as we were excited with that work and will look to expand. One good one was the social media campaign where many PC members got involved. This year we will have similar campaigns, taking different approaches, focusing on certain points in the year, like Pride events, in the fall, Hispanic Heritage month, and in February, Black History month. We will be looking for feedback along the way.

- Staffing update: Monica Baker, who has been with CCBH 11 years and licensed social worker in the Newborn Home Visiting program, has now assumed role of Part A supervisor. Gloria Agosto-Davis, who has been part of the EtHE (Ending the HIV Epidemic) program as manager for a couple years, will now oversee all EtHE programs as the new EtHE Program Supervisor.

**\*Question: M. Jackson-Rollins** - Are you continuing the community certification programs?

**\*Response: Z. Levar** - With CSU, we have done community certification programs for two cohorts. One of the factors in becoming certified required trainees to complete 150 hours of community work, which was difficult during Covid. For now, CSU is paused on a third cohort and will work closely with cohorts one and two on solidifying those service hours, and look to engage a new cohort next year.

**\*Comment: B. Jones** - The peer-led, second part was not solidified. The Sankofa Initiative will give them the peer led component of that, as the goal of the program is for PLWH to engage in that process.

**\*Comment: Z. Levar** –We appreciate the efforts in engaging with those cohorts.

**\*Question: R. Strong** – Is EtHE its own department or under Prevention?

**\*Response: Z. Levar** – Ryan White is the standard care division, second is Prevention, and third is EtHE, and each of the three (3) teams has its own, separate supervisor who oversees that team.

**\*Question: B. Jones** - Will we come up with ways so the community base can be part of this initiative for funding?

**\*Response: Z. Levar** - Yes, one thing to do this year, ETHE has less monies than Part A, but one thing we want to do is a smaller RFP (request for proposal) and RFQ (request for quote) application, making it more simplistic so that we can fund smaller initiatives, projects, and programs. We are awaiting our full award to see how much we have in that to get to grassroots campaigns.

**\*Comment: B. Jones** – We need more around racial equity lens training and for training ASO's (administrative services organization) in that. We need a conversation on that and a dollar amount.

**\*Question: D. Houston** - Do we have timeline on RFP's?

**\*Response: Z. Levar** – That will be dependent on our full award. We can tentatively expect it in June or July and, for Part A, those services will be out for bid early fall.

**\*Comment: T. Marbury** - Please consider using abbreviations in our comments.

**\*Response: Z. Levar** - Thank you, RFP's are requests for proposals, RFQ's are requests for quotes, for small awards less than 25 dollars.

**\*Comment: S. Harris** – They require more comprehensive responses, as opposed to the proposal quote.

**\*Question: N. O'Neal** - For the new request, will it be ongoing?

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**\*Response: Z. Levar** - This is new this year, so we can't guarantee anything beyond this budget, but if it goes, we can try again.

**\*Comment: J. McMinn** – In discussions of wanting to apply for these funds, consider conflicts.

**\*Comment: S. Harris** - This is more of a procurement (contracting) discussion, outside of PC. Our job as PC is to focus on services PLWA need and how to designate dollars to that.

**\*Comment: B. Jones** - Hope we can have a PLWH focus group and prioritize this, as dollars are short and the network needs to be in place.

**\*Response: S. Harris** - CLC is working on feedback for important services for PLWH and when there is a request for these services, we have to respond how we would provide the services.

**\*Comment: B. Jones** – We must have real-time conversations, prioritizing with Part A, what PLWH need.

**\*Comment: Z. Levar** – As a reminder, this is a Part A PC and we don't want to get off track with EtHE.

### **Fiscal Report – Z. Levar**

**FY2021 Part A Grant:**

**Final Expenditure split - 79.40% Core - 20.60% Support**

**Expenses are at 95.50% for 12 months (100% target)**

We ended just over four (4) mil in expended dollars, \$180,000 more than last year and we are on track, having spent over 95% of the budget. We ended the year with a safe core and finished the year serving over 3,300 clients, which is about 545 PLWH in our region.

**\*Comment: S. Harris** - Those numbers turned out good and the split is great.

**\*Comment: C. Droster** - At end of this fiscal year, we want to acknowledge Zach and the team for reaching our client potential, great work and effort.

**\*Comment: Z. Levar** – The credit goes to S&F being on top of allocations. We appreciate all of your hard work.

**\*Question: B. Jones** - Any info on making adjustments, due to Covid?

**\*Response: Z. Levar** - Yes, in committees, we are looking at prior years before Covid as a benchmark, rather than 2020.

**\*Response: S. Harris** – We have also had an S&F workgroup since February that was looking at those trends with Covid and having these conversations leading up to PSRA.

**\*Question: J. Patterson** - Does the fact that we hit 95.5% mean that we can carry over everything not spent? If so, congrats!

**\*Response: Z. Levar** - We will still be eligible to carryover 5% of our formula award (roughly 150,000) and we always make sure we carry over 5% of award. The grant is in three different buckets, core, supplemental, and minority AIDS initiatives and we will be able to carryover from that.

**\*Question: B. Jones** - With oral care for Case dental school dental implants, will carryover do that?

**\*Response: Z. Levar** - Implants and other services are in that expansion process. We are continuing to work on that program and Part A network as a whole.

### **Medicaid Update – A. Thomas**

During April meeting, it was announced that the public health emergency is extended to July 15<sup>th</sup>. We usually get a 60-day announcement on extensions, but as of Monday, we did not get it extending beyond July 15<sup>th</sup>. We possibly may receive one in the future. If it comes, they typically can extend up to 90 days, or in shorter increments. The next generation of MCO's (Managed Care Options) slated to begin in July, now pushed back to October. The past few months hit hard with Medicaid applications, which caused many to be delinquent. On Monday, we are now under 3,500 Medicaid apps, and based on

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those, 83% processed more timely. There is a long-term care forum on June 15, 2022, from 9:30-11:30a via Teams invite. If you want to attend, send me an email at, [anthony.thomas@jfs.ohio.gov](mailto:anthony.thomas@jfs.ohio.gov).

**\*Question: N. O' Neal** - Are the MC options like Buckeye and Molina?

**\*Response: A. Thomas** - Yes, those Medicaid providers will still be there, we will just get three more.

**\*Comment: C. Nicholls** - Because we were not notified that the public health emergency would end on July 15<sup>th</sup>, it will extend, we just don't know how long, 30, 90 days. However, it will extend but just a waiting game to find more details.

### **Ryan White Part B Update – K. Ruiz**

The Medical Advisory committee cancelled last month and are working on global hospitals

Integrated Plan now dividing into Affinity groups

Increase in syphilis in Ohio, upcoming training on syphilis medical perspectives, on June 1<sup>st</sup> & 2<sup>nd</sup>

#### **\*OHDAP:**

The Medical Advisory Committee meeting cancelled last month. We are in the middle of procuring the PBM contractor and are unable to give updates. We are also starting to meet with local hospitals about piloting Cabenuva at their clinics. We want to provide a more thorough update at the next MAC at the end of July.

#### **\*INTEGRATED PLAN**

Please let folks know that we have a number of Affinity Groups working to help set the goals for Ohio's Integrated HIV Prevention and Care plan--designed to guide our collective work over the next 5 years. If you are interested in joining an Affinity Group, please email Kate Shumate at [Katherine.shumate@odh.ohio.gov](mailto:Katherine.shumate@odh.ohio.gov) or give her a call at 614-980-8172. The Affinity Groups are, **Centering the Voices of PLWHA**, **Rural Issues and HIV**, **HIV Workforce** (about both those living with HIV being in the workforce and those who work in the field of HIV. We are hoping this group will also address the overlapping places where PLWHA work in the HIV field.), **Growing Older with HIV**, **Interventions** (with a status neutral lens), **Treatment** (with a status neutral lens), **Mental Health and Substance Use Disorders** (MH/SUD), and **Youth and HIV**. We are encouraging a diversity of participants in each group to learn more about what is working well and what could be working better (within the parameters set by our federal funders). Because of potential conflicts with scheduling meetings for this many groups, we are asking individuals to limit their participation to no more than two groups, as we have a lot of work to complete within a limited amount of time.

#### **\*STI AND HEPATITIS:**

Syphilis and congenital syphilis continue to rise. Providers can learn more about syphilis and congenital syphilis by participating in a live webinar – The webinar will cover such topics as the clinical diagnosis and management of syphilis. This webinar is intended for clinical providers who provide patient care. Continuing Medical and Nursing Education will be provided for free. Sponsored by the NYC STD Prevention Training Center at Columbia University and the Ohio Department of Health. Registration is required. Please click on the links below to register. This webinar is being offered at the following dates/times: [June 1, 2022; 8-9am](#) and [June 2, 2022; 12-1pm](#). Additional syphilis information: <https://www.cdc.gov/std/treatment-guidelines/syphilis-hiv.htm>. **\*For information about COVID-19:** [coronavirus.ohio.gov](https://coronavirus.ohio.gov) 1-833-4-ASK-ODH

**\*Question: C. Barnett** - For meetings, how to sign up?

**\*Response: S. Harris** – We will send out after the meeting, click on links to get more info.

**\*Comment: K. Ruiz** – We would also register for their newsletter.

### **HOPWA (Housing Opportunities for PLWHA) Update – J. Citerman-Kraeger**

We are in process of finalizing reviews of continuing applications and we will announce funding decisions in the next week-two weeks. There is a meeting this Friday to review with community development on how to change incoming city procedures. We will keep you posted.

### **Planning Council Operations- K. Dennis**

Monthly Progress Report from HRSA Project Officer

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We met with the project officer last week. They are very pleased in our work with the surveys in CLC workgroup and the allocation workgroup for PSRA. They are also happy with our new members now sworn in and in our reflectiveness numbers being intact.

### **Mandatory Confirmation Forms – Update – S. Harris**

So far, we have 16 mandatory forms in and we will continue to follow up and track as needed. The mandatory forms are more important, whereas, the COR (committee of record) forms helps us track attendance, which we can only track properly if you tell us.

### **Committee Reports**

#### **Community Liaison Committee (CLC) – N. O’Neal**

We met last Wednesday and discussed the new survey for service needs of PLWH that we have been pushing out. We want to be able to show what PLWH say is important to them to use for PSRA. We are also trying to come up with educational things for PLWH to help them better understand and communicate with doctors and social workers. The LTC workgroup will next work on a form for social workers to use for those clients not seen and often fall through the cracks. First, the form is completed, evaluated, and then followed up with a social worker. The last group may be Thursday depending on how to proceed with the form. It may become a precursor to the psychosocial assessment, but we will first do a pilot program to determine its use and get more data, as this is all data-driven.

**Strategy & Finance (S&F) – C. Droster** –We are working on getting oral health dental exceptions approved earlier in the year, we started the priority settings for PSRA and will finish June 1<sup>st</sup>, and, last, the next Resource Allocation workgroup meeting is Thursday, May 26<sup>th</sup> at 10:00 am.

#### **Membership, Retention & Marketing (MRM) – B. Gayheart**

We met on May 4 and went over the mandatory confirmation and COR (committee of record) forms. We also discussed membership attendance updates and set up a new member training/orientation, which will replace membership’s next meeting on June 1, 2022. This will be a brief training and overview, not replacing the full orientation training that usually takes place in November.

#### **Quality Improvement (QI) – R. Watkins**

We had our meeting earlier today. It was interesting, as we defined and agreed on two categories to review, using data from years 18, 19, and 20. We discovered mental health was trending up, and flagged it for future category review. We will also use the CLC survey for more informed decisions. We received an update on the Integrated Plan, meeting tomorrow cancelled, they will now look at Affinity groups to proceed. The next QI meeting is Wednesday, August 17, 2022.

#### **HIV Prevention (Prevention) –C. Barnett**

At last meeting, we discussed meeting will remain on a quarterly basis. We finalized our PCAT (Planning Council Activity Timeline) schedule, approved and voted, and will make needed additions going forward. We are in the final year with Prevention funding and will soon begin the next competitive process for CTL sites. We also introduced the new DIS staff and they will be at next meeting on June 1<sup>st</sup> at 4:00 p.m. Last, we had an update from Signature Health on their Prevention efforts and talked about the impacts of Covid 19.



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### **Public Comments –**

**B. Jones** – Currently in talks with the International Aids Conference on doing a facilitators training for U=U and recently received an invite from the Minister of Canada to facilitate training, as Canada was the first country to sign on for U=U. This is all thanks to help from the Aids Funding Collaborative.

**S. Washington** – Thanks to the Sankofa HIV Initiative for their retreat, it was wonderful. This was a good retreat for newcomers, as we felt loved and got lots of information as PLWH. We need more things like this to educate, relax, and receive information on HIV.

### **Announcements**

**Z. Levar** – For Pride Month update: Saturday, June 4<sup>th</sup> is downtown Cleveland, June 11<sup>th</sup> is Ashtabula, and June 11<sup>th</sup> is Lorain Pride. CCBH will be at all those and Billy and Naimah will work tables at Lorain Pride. We also have giveaways and if PC wants anything at the table, let us know.

**N. O’Neal** – Women We Think 4 A Change is sponsoring three retreats, July in Cleveland, October in Columbus, and October in Youngstown. Link info will go out to women interested in signing up for these one-day retreats.

**J. Toombs** – The next Cuyahoga network meeting for PAHA (Positive Action Housing Alliance) is set for June 8, 2022. We will provide link info when available.

### **Adjournment**

**Motion:** S. Washington

**Seconded:** C. Barnett

### **Attendance**

	Planning Council Members	Jan	Feb	Mar	Apr	May	June PSRA	Aug	Sep	Oct	Nov
1	Kimberlin Dennis – Co-Chair	20	20	20	20	20					
2	Brian Kimball – Co-Chair	20	20	20	20	20					
3	Christy Nicholls- Co-Chair	20	20	20	20	20					
4	Clifford Barnett	20	20	20	20	20					
5	Uleta Carter	20	20	20	20	0					
6	Jeannie Citerman-Kraeger	20	20	20	20	20					
7	Michael Deighan	20	20	20	20	0					
8	Clinton Droster	20	20	20	20	20					
9	Billy Gayheart	20	20	20	20	20					
10	Brenda Glass	20	20	0	0	20					
11	Barbara Gripshover, MD	20	20	20	20	20					
12	Deairius Houston	20	20	20	20	20					
13	Bryan Jones	0	20	20	0	20					
14	LeAnder Lovett	20	20	20	20	0					
15	Tina Marbury	20	20	20	0	20					
16	Jeffrey Mazo	0	0	0	0	0					

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17	Jason McMinn	20	20	20	20	20					
18	Naimah O'Neal	20	20	20	20	20					
19	Julie Patterson	20	20	20	20	20					
20	Marlene Robinson-Statler	0	20	20	20	0					
21	Faith Ross	20	20	20	20	0					
22	Karla Ruiz	20	20	20	20	20					
23	Peter Scardino	0	0	0	0	0					
24	William Simpson	20	0	0	0	0					
25	David Smith	20	20	20	20	20					
26	James Stevenson	20	20	20	20	20					
27	Anthony Thomas				20	20					
28	Joye Toombs	20	20	20	20	20					
29	Robert Watkins	20	20	20	20	20					
30	Stephanice Washington	0	20	20	0	20					
31	Leshia Yarbrough-Franklin	20	20	20	20	20					
	<b>Total in Attendance</b>	<b>26</b>	<b>28</b>	<b>27</b>	<b>24</b>	<b>23</b>					

PC Attendees: K. Hunter, K. Hill, M. Jackson-Rollins, R. Lewis, R. Strong

Staff: M. Baker, Z. Levar, M. Kolenz, J. Mills, S. Harris, T. Mallory