

Cuyahoga Regional HIV Prevention and Care Planning Council

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

Jason McMinn, Chair



Quality Improvement Committee Minutes

Wednesday, September 21, 2022

3:00 pm to 4:00 pm

Start: 3:00 pm

End: 4:01 pm

Facilitator: J. McMinn

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."*

Approval of Agenda: September 21, 2022

Addendum:

Motion: K. Dennis **Seconded:** D. Smith

Vote: In Favor: All Opposed: 0 Abstained: 0

Approval of the Minutes: August 17, 2022

Addendum: To correct the sentence on page two (2), under Medical Transportation reading, "Note that Medicaid" to read "Medicare".

Motion: J. Citerman-Kraeger

Seconded: K. Dennis

Vote: In Favor: 9 Opposed: 0 Abstained: 2- L. Yarbrough-Franklin, C. Nicholls

New Business

Updates from Statewide Integrated Plan Activities – J. McMinn, K. Ruiz

J. McMinn - There were six categories, with themes, all looks good and they are currently finalizing objectives and we welcome all who participated to share feedback. The Affinity groups were common themes thought best to organize integrated plan going forward. They were sent to chairs for final review and soon we will hear from Kate and Michelle on further edits. Plans are to continue QI reviews, another thing is to encourage involvement in the integrated plan.

K. Ruiz - This will all be shared at the September 29, 2022 meeting. Also plan to share with PC councils and group to make sure they are on board. Please review to make sure it follows intent that it was created to reflect. The deadline was extended to allow for leadership changes.

The six (6) Statewide Integrated Plan categories are: *Prevent, Diagnose, Treat, System-wide Improvements, Education and Training, and Messaging.* Listed are some of the outcomes.

1. Goals under Prevention:

- Access to nPEP (non-occupational post-exposure prophylaxis), increase the number of providers, resources, and awareness, as there is much info on PrEP (pre-exposure prophylaxis), but little on nPEP.
- For Pharmacy under Prevention, the goal is to increase access to nPEP and syringes.
- Increase access to Harm-Reducing Vending Machines – This great concept offers syringes, medication, using unique codes for anonymous conversations, and the most popular thing is the dispense container.

***Comment: K. Ruiz** - This is good, got to participate on the training of the Harm-Reducing vending machine. When you go, the first office is harm reduction, there you can do a Q&A to ask questions about the program right on the machine and their office is located in Cincinnati.

***Comment: B. Gripshover** – We have heard U.H. is working on that and it would be good to see.

Cuyahoga Regional HIV Prevention and Care Planning Council

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

Jason McMinn, Chair



***Comment: N. O'Neal** - They are in process at the Centers and we already provide syringes, so this would be easier to navigate, making it 24-hour access to get what people need.

***Comment: L. Yarbrough-Franklin** - We plan on purchasing four or five at various locations where it will be a combination of syringes, test strips, and Narcan (Naloxone), an FDA-approved prescription medicine that can block the effects of opioids, and reverse an overdose. The Q&A is very helpful and it gives special codes to use in order to get merchandise. They used to offer it on Fridays but will search and update.

Jason – Good to hear Cuyahoga is on board getting things on this and we will push for outlying communities like Lorain to get access.

2. Goals under Diagnose:

- Clinical sites for HIV/STI/viral Hepatitis testing, and increase no. of people screened in ED (emergency departments, UC (urgent care) and health centers.
- Mobile care- develop a model for mobile care in rural regions.
- Test at home – access program reach, sustainability plan. The focus is not on the big three regions, Cuyahoga, Columbus, and Cincinnati, but more on the other counties and the next seven big counties.

***Question: J. McMinn** - Do we have a mobile model?

***Response: K. Ruiz** – There has been discussions and we are currently discussing prices.

***Question: S. Harris** - Is the need greater in rural or urban areas and where they would likely go?

***Response: J. McMinn** -Mostly open availability.

3. Goals under Treat:

- Prison/Jails - enhance collaboration. This is not our state prisons, ODH does this, but more local, county, and city jails, making sure HIV clients lacking funds get services they need and can get meds.
- Pharmacy to Care model feasibility - A model where if a person missed a refill, the pharmacy would alert the medical office that person did not pick up their meds and that medical agency could follow up with that client. The results were not feasible helping people in care, more looking at a different way.
- Rapid Start – build capacity and increase intervention. This model of care says once a person is diagnosed, it is important to get them on meds so they can immediately increase their chances of becoming virally suppressed and staying in care. It is more to educate smaller providers and assist people in rural places to same day med access.
- Long-Acting Injectable – on OHDAP (Ohio HIV Drug Assistance Program) formulary, tracking of adherence. These last a month and replace taking oral meds. This new tool shows to be successful and something for planning.

***Comment: S. Harris** – Pharmacy to care is a good idea, it allows clients to link with outreach coordinators or navigators and gives opportunities to engage clients and keep them in care.

***Comment: N. O'Neal** – For RS at Centers, once a person tests positive, the work begins, labs, meds, etc.

***Comment: N. O'Neal** – We had a couple successes with LAI, but it is a challenge and patients must want this. Some are tired of taking pills, so we look at candidates, talk with them, and go from there.

***J. McMinn** – This could impact EtHE (Ending the HIV Epidemic), as the whole integrated plan is under a status-neutral approach, meaning regardless of an HIV test, a person is wrapped around, linked to care. If they are positive, they get meds, if negative, PrEP and prevention strategies.

4. Goals under System-wide Assessments

- Systems Assessment - comprehensive assessment of Prevention, Surveillance and Care – identify and remove barriers in access and retention in the network of services provided.
- Client/Consumer participation – inclusion of youth and 50+ in programming – ensure their voices in decision-making process.
- Provider Network – increase diversity and capacity of workforce.
- Provider Tools – increase cultural competence, age appropriate care.
- Assessing and Addressing Stigma - access where we are and need to go, client/consumer participation, provider tools, accessing and addressing stigma.

Cuyahoga Regional HIV Prevention and Care Planning Council

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

Jason McMinn, Chair



***Comment: J. McMinn** – There is also something in there on internalized stigma.

***Question: S. Harris** - Was this referring to the client's own?

***Response: J. McMinn** - Yes.

***Comment: N. O'Neal** – Going to the dentist or other places where info is shared may cause internalized stigma.

5. Goals for Education and Training

- Training Opportunities identified

- Employment Support – develop document of services available to employers of individuals with HIV

***Comment: J. Citerman-Kraeger** - This is for training opportunities and employment support. The Workforce group talked about support for those who work in the industry and support to PLWH who may want to become part of the workforce arena and about documentation to support everyone no matter what their perspective. We have Ohio Means Jobs that provides training. This is not something provided across the state, but more on a county-provided level, and when talking about what they provided, not all knew what it was or what they do.

***Question: S. Harris** - Was goal to find ways to ensure PLWH know where to look and access employment support?

***Response: J. Citerman-Kraeger** - Yes, and to brush up on skills, training, and to network. They could also be offered a warm send off on how to proceed.

***Comment: N. O'Neal** – For employers, sometimes it is hard for them to see clients or patients as employees and what that looks like. Most changes don't always happen right away and those dynamics are a different challenge.

***Comment: J. McMinn** – We have in Ohio Means Jobs our region but other regions need this type of help to get people back in the workforce. Karla notes the full goal below.

***Comment: K. Ruiz** - *"Education and Training Goal 2: By June 30, 2023, Ohio will have a formal documentation of services available to employers of individuals with disabilities (including HIV) that will be shared with case management networks."*

***Question: S. Harris** – Is the framework for employment support under WIOA (Workforce Innovation and Opportunity Act)?

***Response: J. Citerman-Kraeger** - Potentially, though not entirely, but it is mandated to come from that.

Jason – we want to make sure all providers know about status neutral and approach clients in that way so we provide services to everybody.

6. Goals for Messaging

- Increase status neutral messaging to spotlight resources and re-establish trust in public health and medical providers.

- Messaging to people who might benefit from prevention and care services.

- Messaging will increase visibility and accessibility of physical prevention resources (barriers, lube, and literature).

- Messaging will increase visibility of those growing older with HIV.

J. McMinn - These goals are things that will come out of the integrated plan. The committee should keep these things in mind when further exploring and working on goals. We will plan on another update next month.

Lessons Learned from National Ryan White Conference

J. McMinn - Sharron will send the link to everyone, as HRSA was to post the sessions to review.

C. Nicholls - One of the sessions focused on a QI committee directive, in looking at anti-racism as a health factor, and this was a great approach to factors facing the community.

Mental Health & Psycho-Social Service Category Review – J. McMinn

The next deep dive will look into the mental health and psycho-social categories. We will be discussing issues on isolation and loneliness that many experienced amidst the Covid crisis. We want to dive into these to help promote a sense of self, find ways to do some messaging, provide education to our sub-recipients, and come up with suggestions to build sense of connectedness and support for PLWH. Starting next month, we may also talk about data from the recipients.

Cuyahoga Regional HIV Prevention and Care Planning Council

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

Jason McMinn, Chair



***Question: B. Gayheart** - Will you include with mental health, SUD (substance use disorder), as even with the integrated plan they combine the two. This is important, want to share a lot on this.

***Response: J. McMinn** - Though not funded as a service category, it should be part of the next conversation.

Review Available Data for Decision-Making - Tabled

Identify Any Additional Data Needs- Tabled

Standing Business

Agree on QI Committee work activity (if any) to be reported at September 2022 Planning Council Committee meeting – J. McMinn

We will report on today's updates of the Statewide Integrated plan.

Determine formal CAREWare Data Request (if any) - None

Parking Lot Items

Review QI Committee Work Plan for Compliance- Tabled

Next Steps - J. McMinn

- The committee will further explore and work on goals for the Integrated Plan.

- Though not funded as a service category, SUD (substance use disorder) will be part of the next conversation.

Announcements - none

Adjournment

Motion: C. Barnett

Seconded: B. Gripshover

Attendance

		Jan	Feb	Mar	Apr	May	June PSRA	Aug	Sep	Oct	Nov
1	Jason McMinn, Chair	20	20	20	20	20		20	20		
	Vacant Co-chair										
2	Barb Gripshover	20	20	20	20	20		20	20		
3	Leshia Yarbrough-Franklin	20	0	20	20	0		0	20		
4	Billy Gayheart	20	20	20	10	10		10	10		
5	Jeannie Citerman-Kraeger	20	20	20	20	20		20	20		
6	Karla Ruiz	20	20	20	20	20		20	20		
7	David Smith	20	20	20	20	20		20	20		
8	Anthony Thomas				20	20		20	0		
	Total in Attendance	8	7	8	10	8		7	7		

PC Members: K. Dennis, N. O'Neal, C. Nicholls, C. Barnett

Attendees: T. Moyel, K. Cloud, R. Lewis

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