

**Ryan White Planning Council (RWPC) of the Philadelphia Part A EMA  
Needs Assessment Committee**  
Meeting Minutes of  
**Monday, December 14, 2009**  
**2:00 p.m. – 4:00 p.m.**  
Office of HIV Planning, 340 N. 12<sup>th</sup> Street, Suite 203, Philadelphia, PA 19107

**Present:** Christine Ambrose (Co-Chair), John Churchville, Dawna Edwards, Raymond Hayward, Kate Kozeniewski, Eric Paulukonis, Wendy Walters

**Excused:** Gerry Keys, Miguel Matos, Tom McCoy, Ronald Sy

**Absent:** Carlos Morales

**Guests:** Joseph Malloy

**Staff:** Monica Getahun, Debbie Law, Briana Morgan, Mari Ross-Russell

**Call to Order/Introductions:**

C. Ambrose called the meeting to order at 2:25 p.m. All those present introduced themselves.

**Approval of Agenda:**

C. Ambrose presented the agenda for approval. **Motion:** J. Churchville moved, E. Paulukonis seconded to approve the agenda. **Motion passed:** All in favor.

**Approval of Minutes (9 November 2009):**

C. Ambrose presented the November 9, 2009 minutes for approval. **Motion:** C. Ambrose moved, D. Edwards seconded to approve the minutes. **Motion passed:** All in favor.

**Report of Co-Chair:**

C. Ambrose stated that the Finance, Comprehensive Planning, and Needs Assessment Committees would be working closely together for Priority Setting in the coming year, and that they would be conducting several joint meetings.

**Report of Staff:**

M. Getahun stated that she had received about eight surveys back from the providers that had received them with the epidemiological profile summary. She then directed those present to review the survey (*see – attached handout*). C. Ambrose stated that she had not immediately noticed the survey when she received her summary packet in the mail. D. Law replied that the introduction letter had been two to three pages long, followed by a resource inventory update form, and finally the short provider survey. M. Getahun explained that the survey requested information about demographics for documented and undocumented immigrants, as well as information about food bank/home-delivered meals

and legal services. She stated that the Office had conducted two focus groups on food bank/home-delivered meals in New Jersey, which had included about eight consumers. She went on to say that they would have the results from focus groups ready before the town halls commenced. She added that they had recruited through providers, and that it had been very informative.

### **Discussion Items:**

- **Planning Town Halls**

M. Getahun stated that the group had previously discussed conducting pilot key informant interviews, and that they had agreed to review the populations on their parking lot. She added that they would need to discuss recruitment specifics for the town halls. C. Ambrose asked what populations they might want to target for key informant interviews. M. Getahun pointed out that they would likely conduct a youth town hall again, and that they had already done case management interviews. She noted that she was also working on a literature search for 50+/co-morbidities. She then added that the initial survey should give them baseline information on the African immigrant population. K. Kozeniewski stated that she had previously suggested doing a key informant interview with the homeless as a control group to compare it to the information from their town halls. M. Getahun agreed, pointing out that they could possibly piggyback this type of interview off another group they were already working with.

C. Ambrose stated that it would be helpful to conduct key informant interviews with the immigrant population. She then asked if they had done these interviews before. M. Ross-Russell replied that they had done this for providers, and they had also targeted Hispanic populations. She added that they had not done specific activities around African immigrants before.

C. Ambrose asked the group to review the committee calendar (*see – attached handout*), stating that it would be very important to plan for the key informant interviews within their time constraints. M. Getahun suggested focusing on town halls and recruitment for the present. C. Ambrose asked M. Ross-Russell how many joint meetings they would have leading up to Priority Setting. M. Ross-Russell replied that they had previously discussed having three joint meetings. She noted that they had previously discussed allotting 30 minutes of each joint meeting to the host committee's business, and then 90 minutes to priority setting.

C. Ambrose asked the group what populations they would like to target with key informant interviews. She noted she had heard immigrants and 50+ as suggestions. D. Law noted that their committee parking lot included youth, API, trans, ESL, and immigrant populations. W. Walters suggested doing interviews with seniors. C. Ambrose asked for the median age of those attending town halls. M. Getahun replied that the majority of the people were ages 45-55. C. Ambrose stated that they were hearing from that consumer group. W. Walters suggested talking to single parents, since that group would have unique issues regarding transportation, child care, and other areas. C. Ambrose asked if single parents had been targeted in the past. M. Ross-

Russell asked if they wanted to know about single parent issues, or respite care. She explained that there were ways to get respite care, but that it was difficult to access since it was no longer funded. W. Walters replied that she was referring to the overarching situation in the face of HIV. C. Ambrose suggested looking at single mothers that might be falling out of care due to the loss of respite care. M. Ross-Russell explained that one major problem was the lack of knowledge that the service exists. She went on to say that this issue frequently came up during town halls. W. Walters asked how they could ensure that information about respite care was disseminated to the public. M. Ross-Russell replied that the Office would not be able to do this, but that they could relay this information to the grantee. She added that the RWPC could make very specific requests, but they still had limitations. W. Walters added that they would want to speak with single fathers as well. M. Ross-Russell replied that Circle of Care would probably have the most information on this population, so they could request that a representative from that organization speak to the group. She explained that this could help them to determine whether there had been any shifts in needs after the cut in funding for respite care. C. Ambrose stated that this would be a great population to put on the parking lot.

K. Kozeniewski stated that she had found four EMAs that had conducted key informant interviews, so the group could use them as a resource in planning their own interviews. C. Ambrose asked how they would recruit consumers for the key informant interviews. M. Ross-Russell replied that they would probably want to invite stakeholders to a committee meeting first, to act as a panel. She explained that this would help them understand the group they wished to interview. C. Ambrose agreed that that they should invite stakeholders to their meeting. M. Ross-Russell explained that they typically send any questions to the stakeholders in advance, and that the answers could help them determine what their next steps would be. C. Ambrose stated that they would need to come up with a list of stakeholders for the French-speaking African population. She suggested getting representation from a variety of areas, including West Philadelphia, Upper Darby, and Chester. She asked if the case manager at Action AIDS would know who the stakeholders were. K. Kozeniewski agreed, adding that she could call the AIDS Library to ask about providers in the area. W. Walters stated that there were not many French-speaking Africans in Chester. C. Ambrose suggested contacting Dr. Kwakwa and the health centers. K. Kozeniewski stated that there was an African Community Center in West Philadelphia as well. C. Ambrose said that the group would need to consider who they would like to invite to their meeting, and what they would like to ask them. She asked if they had a standard list of questions for a panel like this. M. Getahun replied that they did have some questions available. C. Ambrose suggested asking if the target population was in care, and what barriers there were to care for this group. K. Kozeniewski suggested asking what services were available, and if the people in their community were accessing them. She then suggested creating a pared-down version of the town hall questions.

- **Next Steps**

J. Churchville asked for the group's timeline. M. Getahun stated that the group would be reviewing their town hall information after March, and that they would also be

working on priority setting. C. Ambrose suggested asking the stakeholders to come to their February meeting, and finalizing their list of questions in January. She stated that the panel discussion would help them to determine how to go about addressing that population.

C. Ambrose stated that they would begin recruitment for the town halls in January. M. Ross-Russell noted that they would also be conducting a consumer empowerment workshop before the town halls, so they would hopefully recruit consumers to attend from that event. She added that this workshop would be a modified LEAP Training. She went on to say that the RWPC would have a presentation in January regarding the shifts that had occurred with the Ryan White reauthorization. She added that they would also be doing Part B Priority Setting later in the year. C. Ambrose asked if it would be possible to conduct the town hall at the consumer empowerment training. M. Ross-Russell replied that they were already condensing a three-day training event into a one-day event, so this would not be possible. She noted that they were going to begin conducting town halls in March.

C. Ambrose asked about the youth town hall. M. Ross-Russell replied that there were barriers with the youth town halls, including concerns from both providers and participants. She explained that they would have to work very closely with a youth provider and piggyback the youth town hall on an existing meeting. C. Ambrose asked what barriers there were for youth. J. Churchville replied that one barrier would be that they were youth at all; in other words, they had other priorities. He then asked if they were in touch with established groups for youth. M. Ross-Russell replied that they had targeted everyone that they knew that worked with positive youth, so the organizations were all aware that the youth town hall was happening. W. Walters asked where the youth town hall had been held the previous year. C. Ambrose replied that it was held at St. Luke's Church. W. Walters asked if they commonly have a youth group at St. Luke's. M. Ross-Russell explained that they had chosen this location because it was neutral. W. Walters stated that many people know that HIV/AIDS groups meet at St. Luke's, so this could have been a barrier. C. Ambrose replied most youth were probably not aware of this fact.

M. Ross-Russell stated that going to an existing group felt like an invasion, and that group participants were generally not comfortable with outsiders coming to their group. C. Ambrose stated that the youth would probably be alright with Office staff attending one group session as long as the facilitators had prepped them. K. Kozeniewski suggested conducting one small youth town hall at CHOP with another at St. Christopher's, as it would be better than not hearing from anyone. C. Ambrose noted that there had also been issues around having perinatal youth and behavioral youth in the same group. W. Walters suggested conducting a survey just among youth to complete in their groups rather than having a full town hall. She then suggested asking where they would feel comfortable meeting as a part of the questionnaire. C. Ambrose stated that they had done this in the previous year. M. Ross-Russell noted that the Youth Round Table had also previously held a panel discussion that could be helpful.

D. Law added that the panel had been conducted in 2006 with a mixture of positive and negative youth.

M. Ross-Russell suggested conducting a focus group with youth. She then added that it would be important not to discuss the status among youth, and they could never force disclosure. C. Ambrose then suggested using her youth group for the first youth town hall, and if it was successful, offering the same to St. Christopher's, Mazzoni, and Action AIDS. She also volunteered to visit one or two other sites to assist with the extra work. M. Ross-Russell replied that this seemed to be a viable suggestion.

K. Kozeniewski stated that the Office of National AIDS Policy had recently held town halls across the country, and that they had asked people to submit written testimony online as well. She explained that this could be a good way to get information from those that did not want to complete a long survey. C. Ambrose agreed that this sounded like a good idea. She then asked how they could reach consumers. K. Kozeniewski stated that they would need to have this online, and let the providers know that it was available. She suggested giving consumers cards to hand to a friend that had not been able to attend the town halls. M. Ross-Russell replied that logistics could be an issue, as they would need to restrict this to consumers in their area. She also asked if they would like to leave this open-ended, or present it as a series of questions. C. Ambrose replied that it should be open-ended. She noted that security would also be a potential issue. M. Ross-Russell replied that the Office had its own web server with firewalls. K. Kozeniewski asked how she would go about working on such a survey. M. Ross-Russell replied that Aneeza Agha typically works on this type of project. She noted that they would typically dump data daily when dealing with confidential information. C. Ambrose asked what a reasonable timeline would be for this project. M. Ross-Russell stated that Survey Monkey would be a good option for them, and it would be less time consuming than their other option. C. Ambrose suggested coming up with a short survey that included basic demographic information. M. Ross-Russell suggested asking what services participants use most often. C. Ambrose stated that A. Agha could help them determine what to ask.

K. Kozeniewski suggested keeping the survey more open-ended, and acknowledging how many people they heard from. She stated that this could give them a basic knowledge of demographics, and would help them determine what activities they would like to conduct in the next year. M. Ross-Russell noted that open-ended questions could be very difficult to analyze. C. Ambrose suggested having participants check off what services they use, and then complete a few open-ended questions. W. Walters suggested having a list of the fourteen funded services to check off. M. Ross-Russell next suggested asking what services they use as an open-ended question. K. Kozeniewski then suggested including examples in the question. She then volunteered to meet A. Agha before their January meeting.

**Old Business:**

None.

**New Business:**

None.

**Announcements:**

None.

**Adjournment:**

The meeting was adjourned at 3:49 p.m. by general consensus.

Respectfully Submitted by,

Briana L. Morgan, Staff

Handouts distributed at the meeting:

- Meeting Agenda
- Meeting Minutes from November 9, 2009
- Needs Assessment Committee Calendar
- Sample Provider Survey
- Needs Assessment 2009 Parking Lot
- OHP Calendar

RYAN WHITE PLANNING COUNCIL (RWPC)  
**Needs Assessment Committee**  
Meeting Agenda  
Monday, December 14, 2009  
2:00p.m.-4:00 p.m.  
Office of HIV Planning 340 N. 12<sup>th</sup> St. Suite 203, Philadelphia PA, 19107

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**Call to Order/Introductions**

**Approval of Agenda**

**Approval of Minutes** (*November 9, 2009*)

**Report of Co-Chairs**

**Report of Staff**

- Epi Profile Survey Mailing
- Food Bank & Legal Services Activity

**Discussion Items**

- Planning Needs Assessment Activity
  - Planning Town halls

**Next Step**

- Reviewing of Calendar and Activities
- Parking Lot Items

**Old Business**

**New Business**

**Announcements**

**Adjournment**

*Please turn Phone to Silent or Vibrate*

*The next meeting date and time of the Needs Assessment Committee will be on Monday January 11th, 2010 at 2 pm-4pm. at the Office of HIV Planning, 340 N. 12<sup>th</sup> St. Suite 203, Philadelphia PA 19107 Please refer to the Office of HIV Planning's attached Calendar of Events or its website, [www.hivphilly.org](http://www.hivphilly.org), for updated committee meeting information.*

*If you require any special assistance, please contact the office at least 5 days in advance.*

**Ryan White Planning Council (RWPC) of the Philadelphia Part A (Title I) EMA  
Needs Assessment Committee**

Meeting Minutes of  
**Monday, November 9, 2009**

**2:00 p.m. – 4:00 p.m.**

Office of HIV Planning, 340 N. 12<sup>th</sup> Street, Suite 203, Philadelphia, PA 19107

**Present:** Christine Ambrose (Co-Chair), Dawna Edwards, Kate Kozeniewski, Marcelo Fernandez-Vina, Tom McCoy, Eric Paulukonis, Ronald Sy, Jacqueline Whitfield

**Excused:** John Churchville

**Absent:** Raymond Hayward, Miguel Matos, Carlos Morales

**Guests:** Ronald Lassiter, Joseph Malloy

**Staff:** Monica Getahun, Debbie Law, Briana Morgan, Mari Ross-Russell

**Call to Order/Introductions:**

C. Ambrose called the meeting to order at 2:18 p.m. All those present introduced themselves.

**Approval of Agenda:**

C. Ambrose presented the agenda for approval. **Motion:** T. McCoy moved, R. Sy seconded to approve the agenda. **Motion passed:** All in favor.

**Approval of Minutes (9 October 2009):**

C. Ambrose presented the October 9, 2009 minutes for approval. **Motion:** T. McCoy moved, R. Sy seconded to approve the minutes. **Motion passed:** All in favor.

**Report of Co-Chair:**

None.

**Report of Staff:**

M. Getahun stated that she would review the activities conducted by the Office over the past several years (*see attached handout*). She first listed all past activities from 2001 on, followed by the current activities. These included the regional town halls, youth-specific town halls, census tract levels for severe need, and an impact assessment in New Jersey. She then reviewed the comparison between the 2002 and 2007 consumer surveys. R. Sy asked if some of the consumers that had taken the survey in 2002 retook the survey in 2007. M. Getahun replied that these were anonymous surveys, so she had no way to determine this. T. McCoy stated that he was curious to know whether unmet need amongst African-American men was also related to income. He went on to question why MSM were less likely to have dental care. M. Getahun stated that many PLWHA receive

dental care through a provider for those with lower income. She went on to say that dental care had been a continuous problem.

#### **Discussion Items:**

##### **• Planning Needs Assessment Activity**

M. Getahun stated that staff had mostly developed the focus group discussion guide for food bank/home-delivered meals, and asked the group to review the guide (*see – attached handout*). C. Ambrose suggested adding the words “food bank” to the second and fifth questions for clarification. M. Getahun noted they would be recruiting consumers that had used food bank services. C. Ambrose asked about designing a question regarding any change in utilization due to the economy. M. Getahun replied that she had added the question “How has your food bank utilization changed within the past year?” T. McCoy suggested asking what percentage of a consumer’s food comes from a food bank.

M. Ross-Russell stated that a consumer did not have to receive food stamps to qualify for most food banks. She went on to say that most of those accessing food banks did so through referral. She then suggested asking if a consumer’s monthly needs were met through the food banks. R. Sy suggested asking if the food bank was the consumer’s sole source for food. K. Kozeniewski stated that they had previously talked about income requirements for food, and suggested clarifying a question that read “What processes are involved in getting the food you need?” to read, “What do you have to do to get the food you need?” C. Ambrose suggested asking if lack of transportation made it difficult to get food. M. Getahun agreed that a similar version of this question could be included. M. Ross-Russell explained that the Office was trying to develop a comprehensive list of all food banks in New Jersey, regardless of whether they were HIV/AIDS-specific. She noted that there was currently a waiting list at the organizations funded for food bank/home-delivered meals.

M. Getahun stated that the focus group activity would most likely overlap with a consumer group that regularly meets in New Jersey. T. McCoy emphasized the importance of having a strong consumer voice in New Jersey. R. Sy asked if they would be interested in asking how food bank/home-delivered meals could be improved during the focus groups. T. McCoy asked how they would reach those consumers that do not come to the committee and RWPC meetings. M. Ross-Russell stated that they would be doing a one-page survey that would be sent out along with the summary for the epidemiological profile that would be mailed to all of the providers on their mailing list.

E. Paulukonis stated that it could be difficult to get involvement, and asked if it would be possible to get consumer participation online. M. Ross-Russell replied that this would be a possibility, and that it would come down to what the group would want. C. Ambrose asked if there would be a way to put the full consumer survey online. M. Ross-Russell replied that this could be a very time-consuming venture. She went on to explain that an eleven-page survey requires a great deal of coding, so a shorter version of the survey might work better. C. Ambrose suggested seeing if other EMAs do online

surveys. M. Ross-Russell replied that they probably do, but that they would most likely be shorter surveys. C. Ambrose asked if they would be able to shorten the survey and still have continuity. M. Ross-Russell replied it could be possible, and that it would depend on what questions they wanted to cut out. She noted that they began the 2007 survey in 2005, so they would likely begin working on the next survey in 2010 to be disseminated in 2011. C. Ambrose asked Office staff to create a draft version of the consumer survey for them to look at. R. Sy then asked if they were thinking of doing the survey both online and on paper. C. Ambrose agreed. T. McCoy noted that they would have to remember that many consumers do not have email or consistent internet access.

K. Kozeniewski stated that she had done some research on the town halls and other ways to get feedback from consumers, noting that she had a federal guide on ways to gather consumer data. She explained that key informant interviews would give them a way to reach those that do not come to town halls. She noted that they could also ask for referrals in the key informant interviews, and that they could think about using the key informants online. C. Ambrose noted that staff time would be an issue, and that they could ask what they as a committee would be willing to do. T. McCoy stated that the town hall format had worked very well on some levels, because they needed to look at what they could do with limited staff and limited time. He suggested not limiting themselves in dialogue, but recognizing that there would only be so many things that they could do.

K. Kozeniewski suggested thinking about the way they gather input in a different way, and went on to say that there could be a way to get the Positive Committee to help with this process. T. McCoy replied that the Positive Committee had difficulty coming together outside of meetings, especially because they do not have phone numbers or email addresses for many participants. He went on to say that they did not have a core group of consistent consumers in the Positive Committee that they could depend on to help with this. J. Malloy noted that M. White could be willing to help as the co-chair of the Positive Committee.

C. Ambrose asked what had been done to increase participation in needs assessment activities and town halls in the past. M. Ross-Russell stated that they had looked at locations where people would feel comfortable, and that many issues came down to who was present at the town hall. She noted that a case manager sitting at the town hall, for example, could cause a consumer to leave. C. Ambrose asked if the Office had considered conducting a town hall online. M. Ross-Russell replied that there was an accessibility issue, as well as having computers available to participants. T. McCoy added that it was difficult to get a good idea of who the participants were if they could not see them face-to-face.

M. Ross-Russell stated that town halls and other events seemed to work best when piggybacking off another group that meets regularly. T. McCoy agreed. C. Ambrose pointed out that consumers that were not comfortable with their status would not come to Action AIDS. T. McCoy asked if it would be possible to conduct separate town halls

with consumers and providers. M. Ross-Russell replied that they try to make the town halls consumer-only events, but that their meetings must be open to the public. She went on to say that some providers also feel that they need to be present because they think that their voices are stronger than the consumers' voices. She then stated that they had tried a variety of ways to get additional participation, including picking consumers up at their homes. She added that weather also had an impact on town hall attendance. T. McCoy stated that many consumers are accustomed to attending grandiose dinners sponsored by pharmaceutical companies, and that they might get better attendance if they held one big dinner for the town halls.

K. Kozeniewski stated that she had read a section in the Needs Assessment guide that recommended community forums for prevention rather than care. She then suggested doing more outreach in the community. C. Ambrose asked if K. Kozeniewski would volunteer to go out to the community. K. Kozeniewski agreed, as did C. Ambrose, T. McCoy and J. Malloy. M. Ross-Russell stated that the Office had previously conducted key informant interviews, and that any volunteers would have to be trained to ask every question in the exact same way. She noted that this would be one of the more difficult aspects of conducting key informant interviews. K. Kozeniewski replied that it would be important to have qualitative data, and that they would have to be flexible about the interviews. M. Ross-Russell went on to say that they had only been able to get a wide pool of data on service utilization through the town halls and accompanying surveys. She then explained that they would be using any data they gathered in key informant interviews as a basis for their decisions, so the data would be much better if they gathered it in a uniform way.

C. Ambrose stated that the key informant interviews should not replace the town halls, and that they would conduct them as a pilot addition to the process. She suggested asking about consumers about the RWPC, including a question about what prevents them from participating in meetings. M. Ross-Russell noted that they could ask very specific questions based on each area. She stated that, for example, Bucks County does not have an infectious disease doctor, so they could ask how that affects consumers' abilities to get services. She suggested using the key informants to get answers to very specific questions that they cannot answer any other way.

T. McCoy asked if they would be asking what the individual's issues were, or if they would be asking for that person's impression of their whole community. He went on to emphasize the importance of interviewing consumers that were active with and involved in their communities.

M. Ross-Russell stated that they could review data from the town halls and the consumer survey to determine what the outliers were. She explained that they would need to determine what they wanted to know before they could talk about what they would like the needs assessment to look like. T. McCoy suggested having the committee brainstorm about what they would like to find out. C. Ambrose stated that they would first have to identify a target population, then the desired outcome, and finally the questions and activities.

K. Kozeniewski stated that the homeless were over-surveyed at town halls. T. McCoy stated they could look at the African community. C. Ambrose noted that it would help them to begin with a community that they could easily reach. She asked if the group could think of anyone with ties to the African community. K. Kozeniewski stated that her agency had a French-speaking African case manager. R. Sy noted that he could talk with some limited English proficiency APIs. M. Ross-Russell replied that they had begun with a difficult population, since the volunteers were English speakers. C. Ambrose asked if M. Ross-Russell had a suggestion. M. Ross-Russell replied they would need to find a trusted person within that population that could act as the interviewer. She added that the group would be able to ask the questions if they were within a population that speaks English well enough to answer questions. She then explained that they had previously done key informant interviews in the trans community, with a key person in the community for an access point. She explained that this person had brought participants to them. She then stated that they would need to develop a relationship with someone that would be comfortable giving access to their group. R. Sy replied that their best option would be a first-generation immigrant who is proficient in English.

C. Ambrose stated that this population might not be the best option for their first set of key informant interviews. D. Law replied that she would bring the committee's parking lot to the next meeting so they could discuss any other populations that they might want to interview. T. McCoy stated that they could continue conducting interviews for different populations once they developed a process. K. Kozeniewski suggested interviewing this group as a pilot activity, and then interviewing a population that they already knew a great deal about to see if their key interview responses matched up with what they already know about that group. C. Ambrose stated that she and K. Kozeniewski would do some homework on this topic.

• **Next Steps**

M. Getahun stated that they had finalized the focus group questions, and that she would do a presentation of the literature review on the 50+ population either in January or February. She noted that the committee should begin discussing the town halls for the year in January or February. She added that she would give the group information regarding the baseline for the New Jersey legal services focus groups around that time as well.

**Old Business:**

None.

**New Business:**

None.

**Announcements:**

None.

**Adjournment:**

The meeting was adjourned at 3:56 p.m. by general consensus.

Respectfully Submitted by,

Briana L. Morgan, Staff

Handouts distributed at the meeting:

- Meeting Agenda
- Meeting Minutes from October 5, 2009
- Needs Assessment Activity Slides
- Focus Group Discussion Guide for Food Bank
- OHP Calendar

DRAFT

**OFFICE OF HIV PLANNING**  
**PHILADELPHIA**  
 WWW.HIVPHILLY.ORG

The Office of HIV Planning Philadelphia would like information about the populations you serve for regional planning purposes. Please answer the following questions as best as you can & return using the pre-paid envelope included with your copy of the 2009 Epidemiological Profile Summary.

1. Which county do you serve? (Check all that apply)

*New Jersey counties*

- Burlington County     Gloucester County  
 Camden County       Salem County

*Pennsylvania counties*

- Bucks County       Delaware County  
 Chester County     Montgomery County  
 Philadelphia County

2. Approximately how many HIV+ clients do you provide services to every year?

- Less than 50  
 51 - 100  
 101 - 250  
 250 - 500  
 501 - 1,000  
 More than 1,000

3. Of these clients you provide services to, approximately how many are immigrants\*?  
 \_\_\_\_\_ (number of clients)

And approximately how many may be undocumented\*?  
 \_\_\_\_\_ (number of clients)

(\*“Immigrants” defined as those having a country of origin other than the U.S and “undocumented” defined as those without the needed document to prove their legal status in the U.S)

4. Do you have a food bank/home delivered meal service at your agency?

- Yes

Approximately how many of your clients utilize this service? \_\_\_\_\_ (number of clients)

What is the estimated wait time associated with accessing this service?

- \_\_\_\_\_ Hours     \_\_\_\_\_ Days     \_\_\_\_\_ Weeks     \_\_\_\_\_ Months

- No

Do you refer clients to other services and if so, where? \_\_\_\_\_

5. Do you have legal services available for clients?

- Yes

Approximately how many of your clients utilize this service? \_\_\_\_\_ (number of clients)

What is the estimated wait time associated with accessing this service?

- \_\_\_\_\_ Hours     \_\_\_\_\_ Days     \_\_\_\_\_ Weeks     \_\_\_\_\_ Months

- No

Do you refer clients to other services and if so, where? \_\_\_\_\_

For referred legal services, indicate the estimated wait time associated with getting the services

- \_\_\_\_\_ Hours     \_\_\_\_\_ Days     \_\_\_\_\_ Weeks     \_\_\_\_\_ Months

6. For legal services, what is the most frequently requested service type? \_\_\_\_\_

## Needs Assessment 2009 Parking Lot

1. Youth Population (not perinatal) (CONTINUE into FY2009)
  - How many positive youth are receiving care in this EMA (by County)
  - What are the demographics
  - What are the unmet needs
  - Utilization broken down by services
  - Data by mode of contraction
  - Group review AACO youth service utilization data (April 2008)
    - What is the number of African American, male, uninsured, ages 19-24, MSM and Heterosexual data look like
    - The data showed 374 youth in 2006, where are they getting care for the 1,144 HIV positive cases and the 1,221 AIDS cases
    - Look at other youth organization data on youth that is not receiving services from Ryan White Part A services
    - What is the number of lost to care? Is there any care outreach? Are there any linkages to care?
    - What is the percentage of youth receiving case management? What is the retention rate that are in care and remains in care
  - Comprehensive Planning would be able to look at the global issues, finding where HIV+ youth might be getting care outside of Part A
2. ~~Case Management Key Informant follow up concerns (ACTION: FORWARD to CPC for further activity~~
  - ~~CPC meeting with Evelyn Torres in December~~
3. Client with no insurance questions (from the CM interview and Dr. K. Brady's unmet needs presentation)
  - Are their gaps in population in which clients have no insurance (i.e. males that are between the ages of 19-24 don't have insurance)
    - Why don't they have insurance
4. Dental service (pending AACO findings FY 2009)
  - There is a long waiting list to get dental (town hall results)
  - Note: African American male has less dental care than White male\* (perhaps look at racial discrepancy in this service) source Consumer Survey 2007
  - Ask Philadelphia & PA Counties dental providers on general question around access for PLWHA
5. Migrant or seasonal farm workers
6. Trans-variant population –Research literature to see if there are any positives within this population
7. Newly infected 60+ population
8. African Immigrant population (pending)
  - Evelyn Torres: Data on African Immigrant Population forwarded to Coleman Terrell – what methods are in place to track national origin? Issues around data availability

9. How to project needs 3-5 years into the future
10. Late tester (long list)

Notes:

Case Management Key Informant follow up concerns (ACTION: FORWARD to CPC for further activity)

- Ask AACO what is the number of client that is on the waiting list for case management
- Ask AACO how many cases are counted as open, closed, inactive and continuous care, etc.
- What is the process of closing a case
- What is the difference between closing a case and being in continuous care? Does an opened case affect those that are on waiting list?
- What is AACO's policy for case closure
- What is the policy for inactive or continuous care cases, are they the same as closed cases
- What is the policy around reopening a case
- FORWARD information to CPC on the PA counties complaint of duplication of case management when a client is referred from counties to the city for service because counties don't have that service this creates duplication of case management work (cm interview and town hall)
- Ask Evelyn Torres of AACO on their CM survey process
  - Case she include follow up question such as the percentage of clients that don't have insurance
  - What is the standard and policy for home visit of a case manager
    - Can client opt-out for home visits

Legal services (NA reviewed data from AIDS Law) ACTION: FORWARD to CPC for further activity. The PA counties during the FY08 allocations requested a review what legal services were provided and the reasons why people were accessing it. After reviewing data from AIDS Law project the group felt that the information provided was insufficient and further questioned the service category. The committee was informed that CPC was also looking into legal services. The committee felt that it would be more appropriate for CPC to review legal services outside of RW Part A (i.e. Community Legal and Temple Law) as a whole.

- Need data from AACO instead of individual providers
- Definition of access (how is a client counted in terms of utilization, i.e. phone call, case going to court?)
- How many clients are serviced, by needs, by counties
  - The number of clients broken down by counties (specifically by the PA counties) compared to Philadelphia
  - How many are serviced by Ryan White funding and for what purpose/reason is the service accessed
  - Sort data by very specific access purpose and service
- Are client self referred or referred by case managers
- How many cases are related to HIV/AIDS specific

- Look at other sources of funding for legal services (i.e. Community Legal Services, Immigration Law Services, Temple Law)
- What other legal providers are available to PLWHA
- What are the legal services funded by Part A and not funded by Part A

### 2009-2010

Hepatitis (B & C) may be a cofactor for HIV, suggest looking at data.

African Immigrant Population:

- How many immigrant are being serviced in this EMA
- How does other jurisdiction capture their immigrant population?

Town Hall results and feedback:

- Compare town hall regional results to EMA data (cross tab survey results with AACO utilizations data)

Priority Setting debrief:

- Need additional consumer data besides town hall
- Joint meeting should have more people and consumers
- Training or explanation of the priority setting and allocation process should be done prior (consumer friendly and a schedule of trainings offered) (PS 101)
- Send out email reminders or phone calls for priority setting and allocations including a description of the 2 process

Legal service in NJ: as a result of

# Needs Assessment Committee

## 2009-2010\*

September	October	November	December
<i>Begin developing list of activities to address for the upcoming year based on priority setting decisions</i>	<i>Finalize developing list of activities to address</i>	<i>Finalize plan for needs assessment activities for following year</i>	<i>Begin process for needs assessment recruitment as necessary</i>
Self Assessment Module Completed	Develop timeline for upcoming year	<i>Begin plan for needs assessment activities for following year</i>	Joint Meeting w/ CPC on Client Services
	Begin activity plan for NJ Focus group		
	Begin literature review and activity plan for 50+ Comorbidities	Continue planning for legal services and de-brief on NJ focus group activity	<i>Overview of NJ activity results</i>
	Plan for legal services activity		Plan for 50+ activity and overview of literature summary
January	February	March	April
<i>Begin process of implementing needs assessment activities</i>	<i>Finalize implementation and begin needs assessment activities for year</i>	<i>Ongoing needs assessment activities</i>	<i>Ongoing needs assessment activities</i>
-Start Town Hall recruitment		- Regional Town Halls	- Regional Town Halls
-Youth Town Hall Survey	<i>Ongoing recruitment as necessary</i>	<i>Ongoing updates to Epi Profile</i>	<i>Ongoing updates to Epi Profile</i>
	-Finalize Town Hall recruitment	<i>Ongoing analysis of data</i>	<i>Ongoing analysis of data</i>
Report literature review for year	Begin update to Epi Profile		
May	June	July	August
<i>Results from Literature Review</i>		<i>Debrief planning year</i>	<i>Debrief planning year</i>
<i>Results from Town Hall</i>	<i>Priority Setting (Joint meeting with Comp Planning)</i>	<i>Evaluate process for past year</i>	<i>Evaluate process for past year</i>
<i>Results from Epi</i>		Debrief on Priority Setting	Start SAMS
<i>Prepare for Priority Setting - Review summarized data results</i>			Plan Activities for next Cycle