

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

Meeting Minutes of

Monday, May 10, 2010

2:00 p.m. – 4:00 p.m.

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

Present: Christine Ambrose (Co-Chair), John Churchville, Dawna Edwards, Gerry Keys (Co-Chair), Eric Paulukonis

Excused: Kate Kozeniewski

Absent: Raymond Hayward, Miguel Matos, Carlos Morales, Ronald Sy

Guest: Kevin Smith

Staff: Debbie Law, Briana Morgan

Call to Order:

C. Ambrose called the meeting to order at 2:12 p.m.

Approval of Agenda:

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

Report of Co-Chair:

G. Keys asked the members to continue asking other RWPC members to join their committee. C. Ambrose stated that they would have another joint meeting on June 2 from 10 a.m. – 1 p.m. to finish the Priority Setting process. She added that they had a tentative date set for the full Priority Setting meeting on June 17 from 2 p.m. – 4 p.m.

Report of Staff:

B. Morgan stated that there were business cards available with links to the Office's MySpace, Twitter, Facebook, and Blogspot accounts. She asked those present to hand them out to community members to help keep them in touch with the Office.

Discussion Items:

• **Update on Needs Assessment Activities**

D. Law stated that they had had 149 participants between all of the town halls (*see – attached handout*), in addition to 21 online surveys. M. Ross-Russell explained that they were trying to decide how to collapse the data, since the online survey was different from the surveys done at the town halls. D. Law then returned to the 2010 Town Hall Overview. C. Ambrose pointed out that they were missing consumers in their 20s and early 30s. She then asked how many PLWHA participated last year. D. Law replied that they had had approximately 120 participants the previous year. C.

Ambrose stated that their participation was increasing each year. D. Law then noted that they had not had any participants from Salem County this year.

C. Ambrose stated that it was interesting that medical care was only at 50% utilization on the town hall survey. M. Ross-Russell replied that this meant that these PLWHA were out of care, based on their definition. D. Law stated that 91% stated that medical care was very important to them, followed by dental care, case management, ADAP, and mental health services. She then reviewed the number of comments on various services and needs in an open-ended question. She also pointed out comments on various service categories.

C. Ambrose stated that it was problematic that doctors were not respecting confidentiality in Delaware County. M. Ross-Russell explained that this could relate to a variety of issues, and that they would need to conduct a needs assessment to get more information on this topic. She went on to say that staff do not always understand the issues surrounding HIV. D. Edwards added that there is a big difference between privacy and confidentiality. M. Ross-Russell explained that staff in doctor's offices understand confidentiality and what they can discuss, but they do not understand the smaller issues. She went on to say that there was previously an issue with a clinic that only saw PLWHA on a specific day, which effectively disclosed their statuses.

D. Law then indicated the comments on food and health insurance premium/cost-sharing assistance. She explained that some people were having problems with their co-pays. M. Ross-Russell stated that the new service category definitions had been released, which specifically addressed that they were unable to make federal funding whole with another federal funding stream. She added that she did not believe that a doctor could turn patients away for not being able to afford their co-pays.

D. Law continued on to review more comments from consumers at town halls. M. Ross-Russell pointed out that they did not fund home health care through Part A, even though they had had comments on this service. D. Law also pointed out a request that AACO review transportation. M. Ross-Russell stated that transportation had been a consistent issue, and they had to consider how they would address it. She noted that one person had commented that they had lost their housing because their transportation was late to pick her up for her appointment. She explained that consumers had stated that they were expected to be on time and reliable, but that the transportation provider was not held to the same standard. C. Ambrose suggested doing a needs assessment on this topic and submitting an instruction to the grantee. She then asked if they could instruct the grantee to get a response from the provider in Delaware County and bring it before the group. She suggested including a note that 9 of 33 town hall participants in Delaware County had complained about the service. M. Ross-Russell replied that she would draft language regarding this issue. She then added that there were only two agencies big enough to support this service in Delaware County. G. Keys stated that most providers are aware that there is a problem with transportation, and that they try to have a degree of flexibility if a patient is late.

C. Ambrose asked what the grievance process was for a consumer. M. Ross-Russell replied that they would first need to file a complaint with the person they had an issue with, then their supervisor, and finally call the AACO hotline if it had not been resolved. C. Ambrose asked if there had been any complaints on transportation through the AACO hotline. M. Ross-Russell replied that she would find out.

The group moved on to discuss the web-based town hall survey. M. Ross-Russell stated that they would not have the same richness of response by service with the online survey. G. Keys asked when the online town hall survey began. D. Law replied that it opened in the beginning of March. C. Ambrose asked if providers knew about the survey. D. Law replied that the survey had not been publicized to providers, since they were trying to avoid providers taking the survey themselves. M. Ross-Russell explained that they had had a discussion previously about not identifying users through their IP addresses, so they had no way to monitor whether a person took a survey multiple times.

D. Law then reviewed a comparison between the town hall and demographics of the epidemic in the Philadelphia EMA (*see – attached graph*). M. Ross-Russell explained that they were missing youth, since they would not find the town halls to be very appealing. She went on to say that they might need to use other means to tap into this group. C. Ambrose asked if they could do a public service announcement, since youth generally watch TV and listen to the radio. She stated that Clear Channel would be doing something for AIDS Education Month, and suggested trying to utilize this. J. Churchville agreed that this would be perfect timing for such an announcement.

C. Ambrose asked if they would need any kind of clearance to do a radio commercial. M. Ross-Russell replied that she did not believe that this would be a problem. She added that RWPC members might need to seek permission for a PSA. E. Paulukonis suggested contacting Poz Radio for a smaller-scale announcement. The group agreed to pursue this outside of the committee.

G. Keys suggested asking E. Torres to request that her staff give consumers information about the survey. B. Morgan added that she would change the link on the website to make it easier to find.

• **Epi Profile Survey Mailing (African Immigrant Population)**

D. Law stated that she had not heard back from K. Kozeniewski about her list of service providers for immigrants, but that she had done a search online to develop her own list (*see – attached handout*). C. Ambrose suggested adding Community Legal Services and AIDS Law Project to the list. D. Law replied that she had not included agencies that only provided services related to gaining citizenship, because there were a great deal of services available to serve that need.

G. Keys asked how many surveys they had received back from the providers. M. Ross-Russell replied that they had gotten 13 back, which was a little less than a 20% response rate.

C. Ambrose suggested adding any other agencies that provide services to immigrants, and posting the full list on the website. She then suggested adding phone numbers and/or web addresses for the agencies, and sending the list to providers. G. Keys suggested distributing this to case managers in particular.

• **Next Steps**

C. Ambrose reminded the group that they would have a joint meeting on June 2 before their committee meeting on June 14.

Old Business:

None.

New Business:

None.

Announcements:

None.

Adjournment:

Motion: E. Paulukonis moved, J. Churchville seconded to adjourned the meeting at 3:28 p.m. **Motion passed:** All in favor.

Respectfully Submitted by,

Briana L. Morgan, Staff

Handouts distributed at the meeting:

- Meeting Agenda
- 2010 Town Hall Overview
- EMA Demographic Breakdown
- Resources of Providers for Immigrant Populations
- OHP Calendar

RYAN WHITE PLANNING COUNCIL (RWPC)

Needs Assessment Committee

Meeting Agenda

Monday, May 10, 2010

2:00p.m.-4:00 p.m.

Office of HIV Planning 340 N. 12th St. Suite 203, Philadelphia PA, 19107

Call to Order/Introductions

Approval of Agenda

Approval of Minutes (*None*)

Report of Co-Chairs

Report of Staff

Discussion Items

- Update on Needs Assessment Activities
 - Results from Town Halls
 - Web Based Consumer Survey 2010
- Epi Profile Survey Mailing (African Immigrant Population)
 - Identify a List of Provider Resources

Next Steps

- Needs Assessment Meeting Monday, June 14th, 2-4pm

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, June 14, 2010 from 2 pm-4pm. at the Office of HIV Planning, 340 N. 12th 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, for updated committee meeting information.

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

2010 Town Hall Overview

149 participants were at the 2010 town hall meetings (3 youth).

117 filled out the adult surveys (see results below).

An additional 21 surveys were filled out at hivphilly.org

Survey Demographics:

Gender -

69%	Male
30%	Female
1%	Transgender

Ages ranged from 34-82 years old with a 43% falling between 46-55 years old.

Race/Ethnicity -

59%	African American
26%	Caucasian
3%	Asian
5%	Multi-racial
2%	Native American/Native Hawaiian
5%	Other (includes African and Puerto Rican)
7%	Hispanic

Education -

17%	Less than High School
28%	High School Graduates
55%	Some College or more

Housing -

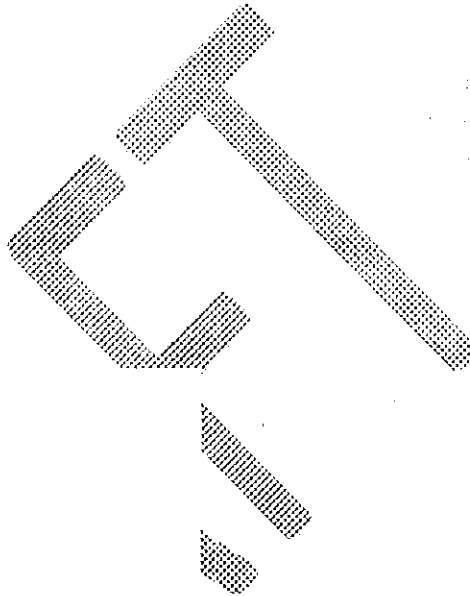
48%	Rent/Own
12%	HOPWA
12%	Section 8
12%	Staying with family/friends
8%	Transitional Housing
3%	Homeless/On the Street
4%	Other housing (Nursing Home, Temporary Rental Assistance, Going between friends/family & the street)

Insurance Status –

- 89% Have medical Insurance
- 9% No Insurance
- 2% Unsure

County of Residence –

- 2% Burlington County
- 11% Camden County
- 5% Gloucester County
- 9% Bucks County
- 1% Chester County
- 33% Delaware County
- 5% Montgomery County
- 34% Philadelphia County



Area of Residence within Philadelphia County -

- 12% Center City
- 3% South Philadelphia
- 4% North Philadelphia
- 3% West Philadelphia
- 3% Southwest Philadelphia
- 4% Olney/East Oak Lane
- 1% Greater Northeast Philadelphia
- 2% Lower Northeast Philadelphia
- 3% Germantown/Chestnut Hill/Mount Airy
- 2% Another area not listed above

Prevention Services Offered:

- 72% Condoms or safe sex kits
- 8% Safer injection/bleach kits
- 56% Information on safer sex practices
- 13% Information on needle exchange programs
- 9% Information on HIV counseling for pregnant women
- 22% Street outreach (a person gives you info. about STDs on the street)
- 21% Partner notification (assistance contacting previous sex partners after positive diagnosis)
- 32% Information on substance use treatment programs
- 43% Information on how to tell someone about your HIV status (disclosure)

Service Feedback:	Used Service?	Very Important	Ranked #1
AIDS Drug Assistance Program	36%	80%	44%
AIDS Pharmaceutical Assistance	23%	79%	29%
Case Management (Medical)	61%	83%	33%
Case Management (Non-Medical)	48%	78%	26%
Child Care Services	1%	35%	10%
Dental Care	62%	86%	24%
Early Intervention Services	7%	67%	19%
Emergency Financial Assistance (DEFA)	25%	74%	18%
Food Bank/Home Delivered Meals	38%	61%	21%
Health Education/Risk Reduction	30%	62%	14%
Health Insurance Premium/Cost Sharing Assistance	4%	58%	17%
Home & Community Based Health Services	10%	49%	19%
Home Health Care	6%	49%	9%
Hospice Services	4%	56%	13%
Housing Assistance Services	16%	73%	27%
Legal Services	25%	65%	17%
Linguistic/Translation Services	3%	39%	11%
Medical Care	50%	91%	32%
Medical Nutrition Therapy	24%	60%	19%
Medical Transportation Services	33%	76%	27%
Mental Health Services	34%	80%	21%
Outreach Services	14%	60%	16%
Psychosocial Support Services	37%	62%	18%
Rehabilitation Services	6%	54%	16%
Respite Care	3%	40%	12%
Substance Abuse Services (Outpatient)	19%	53%	20%
Substance Abuse Services (Inpatient)	15%	48%	17%
Treatment Adherence Counseling	9%	54%	16%

Is there anything you feel needs to improve with HIV/AIDS prevention and care services?

Housing Services (x7)

Case Management (x5)

DEFA/Financial Support (x5)

Accessing information (x4)

Support Groups (x4)

Dental (x3)

Transportation (x3)

Food (x3)

Is there anything else you want to say about trying to get HIV-related services?

- DEFA has so much red tape that the need is never cared for.
- Someone available 24-7 to speak with or help you with your situation.
- Given the state of financial problems, I urge more use of internet messages. Send minutes of meetings out on a regular basis.
- More medical doctors in Bucks County.
- More or better way to get the information to the consumers.
- More programs in South Philadelphia.
- There is a lot of immigration living with HIV/AIDS and they have immigration issues. We need help in filing and getting our status right.
- There is not enough info on what services are available.
- Yes. Once again, it has been since before October, I would like my back teeth. It is now April. Some foods I can no longer eat and choking.
- There needs to be less rules and more monies to help in time of great need. The time it takes to get help your deeper in the holes.
- Either case management needs to expand existing co's or get more agencies.
- You need to get a buddy program.

Preliminary Draft from the Town Hall Meetings (Discussion Portion)

Case Management

- Understaffed with high case loads (PH, NJ, PA)
- Inconsistent quality and performance of case managers (x2) (PH)
- High turnover rate for case managers (PH, NJ)
- Need more accountability for case managers (PH)
- Need more transparency of information (PH)
- Difficulty getting case manager to return calls (x3 Del, x1 NJ)
- Commitment clause for case managers for at least five years without taking a promotion to encourage continuity of care (PH)
- Need more funding (Del, NJ)

Dental

- Better services from private dentists (PH)
- Need option to choose between student or a dentist (PH)
- Dentists postpone appointments all the time (PH, NJ)
- Lower quality care because they are at a teaching college (PH, NJ)
- Wait time is too long (Del, NJ)
- Need more funding (NJ)

DEFA

- Hard to access funding (PH, NJ)
- Takes two weeks to get emergency food vouchers (Del)
- Too much paperwork (PH, NJ)
- Denied services (x2 PH, x1 Del, NJ)

Early Intervention

- Doctors do not respect confidentiality as much as larger institutions (x6 Del)
- Had no counseling and it was weeks before someone contacted me - "was afraid to hug my kids" (NJ)

Food

- Not enough variety of food (PH)
- Much more difficult accessing this service in the past year (x2) (PH)
- Had to stop because they sent too much canned food (x2 NJ)
- Have to keep going back for referrals for food bank (Del)
- Delivered expired food (NJ)

Health Insurance Premium & Cost Sharing Assistance

- People are struggling with co-pays (x1 NJ, x1 Bucks)
- Was not able to see doctor because he could not afford co-pay (x1 NJ)
- Fund this service (NJ)

Home Health Care

- Application too long (PH)
- Process took several months (PH)
- Needed program (x2 NJ)

Housing Services

- Housing list is too long (x2) (PH)
- Too much ambiguity around housing and available slots (PH)
- Only have one housing counselor (Del)
- More services needed (NJ)

Legal

- Not enough law firms to handle this (Del)
- Need more funding (x2 NJ)

Medical Care

- No communication directly between specialists (PH)
- Long wait times (PH)
- Lack of services in Bucks County (Bucks)

Medical Transportation Services

- Not enough tokens available (X4) (PH)
- Not able to get to appointments on time (PH)
- Need to request the appointment eight days in advance, they can't do math and then get the day wrong (PH)
- Have to call a week or two in advance (x9 Del)
- They come late if they come at all (x9 Del, x3 NJ)
- If not ready, they leave you (x4) (PH, Bucks, NJ)
- Need better coordination of vans (PH)
- Review transportation services through AACO (x3 PH)
- Streamline the rides (PH)
- Transportation to dental care is a problem, I need a way to get to Philly for the services and sometimes it's not there (Bucks)
- Bucks county has lousy public transportation (x2)
- Missed housing appointment and got thrown out because transportation was late. Called five times and told to hang up and stop calling (NJ)

Mental Health Services

- Not enough mental health providers (PH)

Outreach Services

- System is not supported enough (PH)

Substance Use Services

- IOP system does not work (PH)
- Standards in inpatient are so structured compared to outpatient, and it leaves a gap (Del)

Resources of Providers for Immigrant Populations

- ACLAMO of Montgomery County Norristown, PA
- ASIAC (AIDS Services in Asian Communities) Philadelphia, PA
- Catholic Social Services Philadelphia, PA*
- CCMC Hispanic Resource Center Chester, PA
- Congreso de Latinos Unidos Philadelphia, PA*
- CSS Chester, Springfield, PA
- Intercultural Family Services, Inc. Philadelphia, PA
- Jaisoun Center (interpretation for Korean languages) Philadelphia, PA
- Korean Community Development Services Center Philadelphia, PA
- Nationalities Service Center of Philadelphia, Philadelphia, PA*
- Pennsylvania Immigration and Citizenship Coalition (PICC) Philadelphia, PA*
- SE Asian Mutual Assistance Assoc. Coalition (SEAMAAC) Philadelphia, PA*

Table 1 For The Philadelphia EMA (9 Counties)

<i>Race/Ethnicity</i>	AIDS Incidence: 01/01/07 to 12/31/08		AIDS Prevalence as of 12/31/08		HIV (not aids) Prevalence as of 12/31/08		HIV & AIDS Prevalence as of 12/31/08	
	Number	% of total	Number	% of total	Number	% of total	Number	% of total
White, not Hispanic	384	23%	3,575	25%	2,713	26%	6,288	26%
Black, not Hispanic	1066	65%	8,738	62%	6,324	60%	15,062	61%
Hispanic	164	10%	1,634	12%	1,287	12%	2,921	12%
Asian/Pacific Islander	18	<1.0%	82	<1.0%	56	<1.0%	138	<1.0%
American Indian		<1.0%	10	<1.0%	26	<1.0%	36	<1.0%
multiple races	6	<1.0%	23	<1.0%	28	<1.0%	51	<1.0%
Other/Unknown		<1.0%	20	<1.0%	54	<1.0%	74	<1.0%
total	1643	100	14,082	100	10,488	100	24,570	100
sex								
Male	1137	69%	10,261	73%	7,059	67%	17,320	70%
Female	506	31%	3,821	27%	3,429	33%	7,250	30%
total	1643	100	14,082	100	10,488	100	24,570	100
age at Diagnosis								
<13		<1.0%	165	1.17%	148	1.41%	313	1.28%
13-19	24	1.46%	175	1.24%	481	5%	656	3%
20-44	884	54%	9,537	68%	7,294	70%	16,831	69%
45 & up	731	44%	4,186	30%	2,541	24%	6,727	27%
total	1643	100	14,063	100	10,464	100	24,527	100

Cases diagnosed as of December 31, 2008. 11027 AIDS, 7607 HIV 75.84%
and reported as of March 31, 2009 for PA Counties 1737 AIDS, 1533 HIV 13.31%
and reported as of June 30, 2009 for NJ Counties 1318 AIDS, 1348 HIV 10.85%
HIV/AIDS Surveillance - Bureau of Epidemiology
Data Support - Bureau of Health Statistics
Pennsylvania Department of Health