HIV Integrated Planning Council Friday, February 9, 2018 2-4 pm

Office of HIV Planning, 340 N. 12th Street, Suite 320, Philadelphia, PA 19107

Present: Juan Baez, Katelyn Baron, Henry Bennett, Michael Cappuccilli, Keith Carter, Mark Coleman, Lupe Diaz, Tiffany Dominique, Alan Edelstein, David Gana, Pamela Gorman, Gus Grannan, Sharee Heaven, Peter Houle, La'Seana Jones, Gerry Keys, Nicole Miller, Jeanette Murdock, Joseph Roderick, Clint Steib, Coleman Terrell, Gail Thomas, Adam Thompson, Leroy Way, Lorrita Wellington, Melvin White, Jacquelyn Whitfield, Robert Woodhouse.

Excused: Kevin Burns, Jen Chapman, Lorett Matus, Dorothy McBride-Wesley, Ann Ricksecker, Samuel Romero, Christine Quimby

Absent: Johnnie Bradley, Martha Chavis, George Matthews, Terry Smith-Flores, James Tarver

Guests: Kathleen Brady -AACO, Chris Chu -AACO, Ameenah McCann-Woods -AACO

Staff: Mari Ross-Russell, Briana Morgan, Nicole Johns, Debbie Law, Stephen Budhu

Call to Order: K. Baron called the meeting to order at 2:16pm. Those present then introduced themselves.

Approval of Agenda: K. Baron presented the agenda for approval. Motion: M. Cappuccilli moved, L. Way seconded to approve the agenda. Motion Passed: All in favor.

Approval of Minutes: K. Baron presented the minutes for approval. Motion: L. Way moved, M. Coleman seconded to approve the January 11, 2018 minutes. Motion Passed: All in favor.

Report of Chair: K. Baron apologized for her absence last month. She thanked A. Thompson for chairing the meeting in her absence.

Report of Staff: None

Special Presentation: Epidemiology Update—Dr. Kathleen Brady

K. Brady introduced the Epidemiology Update: Disparities in the HIV Continuum of Care. She stated the presentation was separated into 5 parts: HIV Continuum of Care, Priority Populations, Trends in Disparities, Geographic Disparities, and the Conclusion.

I. HIV Care Continuum

K. Brady explained the what the HIV Care Continuum was and listed its benefits. She explained for individuals living with HIV to fully benefit from antiretroviral therapy they need to:

- · Know that they are HIV positive
- Be engaged in regular HIV care
- · Receive and adhere to effective Antiretroviral Therapy (ART)
- · Various obstacles or barriers contribute to gaps in testing and care
- An individual's care status can fluctuate, moving forwards or backwards

K. Brady explained the HIV Care Continuum consists of 4 parts: HIV-Diagnosed/Unaware Estimates, Linkage to Care, Retention in Care, and Viral Suppression.

K. Brady noted the largest percent of acute HIV infections are seen in emergency departments. She stated an epidemiologist at the health department authored a proposal to CDC that asked for the expansion of transgender persons data. Currently the health department is awaiting CDC response.

K. Brady stated the next steps to improve the disparities she presented are:

- Implementation of activities under CDC Prevention/Surveillance grant (18-1802)
- Expand CoRECT (Data to care activities)
- Restructuring of MCM in EMA
- Further research on interventions to improve viral suppression once patients engaged in HIV care

Action Items:

Allocations Discussion

A. Edelstein stated the Recipient has learned the EMA will be receiving a partial award of 20% of the grant at the beginning of fiscal year 2018 (FY18). Based off policy, the HIPC would usually go with the previously submitted level funding budget for the past fiscal year, but since the award is lower than expected, and it is believed there will be a decrease in the overall award, the Recipient recommended a 2.5% decrease budget. After discussion in the Finance committee, the committee has decided to recommend the Recipient-proposed 2.5% decrease budget to the HIPC. A. Edelstein asked the council to look over the allocations spreadsheet. He informed them the black columns are current year level funding budget, blue column is this year's level funding budget after accounting for the amount of PLWH, and the red is the Recipient proposed 2.5% decrease budget.

A. Edelstein briefly reviewed all three budget allocations for the EMA. He stated the 2.5% decrease budget was based off the 5% decrease budget from the previous year. He stated all service category funding was decreasing proportionally to the 5% decrease budget except for the substance abuse category. He explained the HIPC previously decided to only reduce the substance abuse service category by 3%, instead of 5%. Since the 2.5% decrease budget was based on the previous year's 5% decrease budget, the substance abuse category was adjusted to be 1.5% decrease*.

Motion: Finance Committee moved to recommend the 2.5% decrease budget for FY18. Vote 25 in favor, 0 opposed, 2 abstentions. Motion Passed

A. Edelstein informed the HIPC at the last Finance Committee meeting the Recipient presented the 3rd quarter underspending to the committee. He stated the reconciliation of invoices forwarded to the Recipient for processing in December 2017 indicates approximately 3% underspending of our total overall award or \$442,815 (includes MAI, and Carry Forward funds). Underspending across all service categories (Part A and MAI) in the EMA accounts for about 66% or \$292, 987. System wide allocations accounts for about 34% of overall underspending or \$145, 380.

Discussion Items: None

Report of the Committees:

* (Since the substance abuse category was kept at a 3% decrease instead of 5% it is analogous to $\frac{3}{5}$, which equals 0.6, or 60%, therefore its allocation in the 2.5% decrease budget was calculated by 0.6 * 2.5, which equals 1.5%).

Comprehensive Planning Committee—Tiffany Dominique and Adam Thompson, Co-Chairs

A. Thompson stated T. Dominique is the new co-chair of the committee. A. Thompson stated the committee reviewed their November brainstorming ideas, and organized them into green, yellow and red categories that signify feasibility. He explained the committee reviewed the ideas under the red and yellow categories and hopes to finish the review in the upcoming meeting. The committee will meet next, Thursday, February 15, 2018 from 2-4 pm. T. Dominique thanked A. Thompson for welcoming her.

Executive Committee

K. Baron stated the committee did not meet for February as yet, and their next meeting is Thursday, February 22, 2018 from 2-4 pm.

K. Baron reminded there is a 6-month interim position for HIPC officer. Nominations are open and will be closed in March 2018. She encouraged all those interested in the position to speak with her or OHP staff after the meeting.

Finance Committee— Alan Edelstein and David Gana, Co-Chairs

No further report

Needs Assessment Committee—Gerry Keys, Chair

K. Baron stated the Needs Assessment Committee still meets with the Comprehensive Planning Committee.

Nominations Committee—Kevin Burns and Michael Cappuccilli, Co-Chairs

M. Cappuccilli stated the committee did not meet this month as yet, and will probably meet Thursday, February 15, 2018.

Positive Committee—Keith Carter and Jeanette Murdock, Co-Chairs

K. Carter stated the Positive Committee will meet Monday, February 12, 2018 from 12-2 pm.

Prevention Committee Lorett Matus and Clint Steib, Co-Chairs

C. Steib stated the committee is reviewing the integrated plan and priority setting. He informed the council the committee is looking for new members and encouraged all to attend the next meeting on Wednesday, February 28, 2018 from 2:30-4:30 pm.

C. Steib reminded the council the PrEP work group will meet next Wednesday, February 21, 2018 from 2-4 pm.

Old Business: M. Ross-Russell informed the council the Recipient and OHP had the opportunity to talk to their project officer and CDC representatives about the integrated plan via conference call. She thanked C. Steib and K. Baron for being part of the call. She stated anyone who was present at the time of the call should share how the call went. A. Thompson asked if the call was based on the integrated plan feedback document that was sent out. C. Terrell replied yes, even though they expanded on their critiques, there was no new feedback. K. Baron stated it was a great learning experience and mentioned as a co-chair you have the opportunity to be involved in these conversations. C. Terrell stated the comments and feedback were minor, and he felt Philadelphia did a great plan. A. Thompson added Philadelphia's integrated plan was the sample plan used in the national curriculum of leadership program.

New Business: None

Announcements: M. White announced the planning for AIDS education month has begun. He stated if anyone had any questions or ideas on what should be presented, contact Philadelphia FIGHT with their query.

Adjournment: Motion: D. Gana moved, J. Whitfield seconded to adjourn the meeting at 3:31pm. Motion Passed: All in favor.

Respectfully submitted by,

Stephen Budhu, staff

Handouts distributed at the meeting:

- Meeting Agenda
- Meeting Minutes
- OHP Calendar
- 3rd Quarter Underspending Report
- Underspending spreadsheet
- Allocations Budgets