HIV Integrated Planning Council Comprehensive Planning Committee Thursday, August 16, 2018 2-4pm

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

Present: Katelyn Baron, Keith Carter, Mark Coleman, Tiffany Dominique, David Gana, Pamela Gorman, Peter Houle, La'Seana Jones, Gerry Keys, Nicole Miller, Joseph Roderick, Adam Thompson

Excused: Peter Houle, Dorothy McBride-Wesley, Jeanette Murdock, Ann Ricksecker

Absent: Lorrita Wellington

Guests: Sebastian Branca, Carla Fields, Charles Gillian, Robert Rivera, Julia Scarlett

Staff: Mari Ross-Russell, Nicole Johns, Stephen Budhu

Call to Order: A. Thompson called the meeting to order at 2:07 pm. Those present then introduced themselves.

Approval of Agenda: A. Thompson presented the agenda for approval. <u>Motion:</u> D. Gana moved, M. Coleman seconded to approve the agenda. **Motion Passed:** All in favor.

Approval of Minutes: A. Thompson presented the minutes for approval. <u>Motion: K. Carter moved, G. Keys seconded to approve the minutes. **Motion Passed:** All in favor.</u>

Report of Chair: T. Dominique reminded the committee they did not meet in July due to the regional allocations meetings. A. Thompson thanked the committee for their participation in the regional allocations meetings. He noted the red, yellow, green barriers to retention discussion worked well and he was pleased recommendations from that discussion were incorporated into the regional allocations discussion.

Report of Staff: M. Ross-Russell thanked the committee for their participation during the allocations process. She stated the HIPC will look for creative ways to reengage members within meetings. The HIPC will start doing ice breaker activities again and also focusing on group activities.

Action Items: None

Discussion Items:

Allocations Debrief

N. Johns stated the regional allocations process has concluded and today the committee would review all finalized decisions. Within the meeting packet the Instructions to the Recipient from each region and from this committee, as well as the parking lot items and unmet needs that were discussed.

N. Johns reiterated the allocations meetings were modified, group discussion was incorporated into the process to ensure everyone present participated. N. Johns asked the committee for their feedback about the allocations process. C. Fields stated she liked the use of group discussion, it created an environment where everyone could participate. She noted it seemed as though people were unaware of the allocations process and she suggested a briefing maybe necessary before the actual allocations meeting. She informed the committee she attended the South Jersey regional allocation meeting and shared some of the

discussion with the committee. She explained her main takeaway is the HIPC needs to focus on the integration and coordination of activities between Philadelphia and South Jersey. People who reside in the South Jersey EMA counties are unaware of the services that may be available within the region.

- G. Thomas stated she liked the group breakout, she felt she was able to actively participate.
- A. Thompson stated the allocations process was better than the past, the group discussion helped to break up the monotony. He mentioned the handouts were a bit overwhelming and he suggested streamlining the handouts. The meeting may have benefited from more time or if the materials were reviewed over a two-day period. Compressing all that information into a 3-hour block is challenging. T. Dominique agreed with A. Thompson's comment. N. Johns agreed more time would have been better, but it is difficult to get people to attend an allocation meeting over the course of a full day or over the course of two days.
- C. Fields explained the information distributed within the meeting was useful, but it may not have been understood by everyone present within the meeting. Specifically, for the New Jersey regional allocations meetings, some of those who attended were confused about the process and the information that was presented to them. The HIPC should explore creative ways to inform people about the allocations process and the Ryan White care continuum.
- P. Gorman informed the committee the non-Planning Council members who attended the New Jersey regional allocations are part of a community advisory board that is frequently trained about Ryan White services. She stated during this allocations period there was discussion about the funding, discussion about the service categories, and also consumer input. Yes, there were individual(s) who shared their problems accessing services but M. Ross-Russell was able to help those individual(s) after the meeting. Overall the meeting was a success and she hopes the format of the future allocations will be similar.
- A. Thompson explained he heard more problems with services in New Jersey from the New Jersey regional allocation meeting than all of the previous HIPC meetings. If those individuals who attended the regional New Jersey allocation meeting attend HIPC meetings in the future the HIPC will be able to better understand the barriers to service in New Jersey.
- G. Keys stated the regional allocations were a success but noted the meetings at times became open forums. She suggested those individuals could attend HIPC meetings during the planning year to address their issues with accessing services. Regional allocations meetings should not be open forums, they should be reserved for reviewing financial data and making informed decisions about funding services.
- A. Thompson stated the consumer input was useful, but he agreed with G Key's comment. Maybe the HIPC needs to have an allocations introduction meeting. Within that meeting the allocations process will be explained within those meetings as well as explaining the handouts within the allocations packet.
- S. Branca asked if there was a way to get Instructions to the Recipient expediently. He noted the MCM committee at AACO will be reconvening in September and he requested the committee to provide the community input that was presented during the allocations process. With that input the Recipient may be able to address some of the gaps of services especially as they pertain to medical case management.

The committee discussed how consumers are surveyed about their access to services. The committee felt how surveys were presented to consumers were inadequate and suggested ways to possibly change the process. A. Thompson informed the committee that surveying was difficult, it may take hours to create a single question. S. Branca added AACO has been working on making their surveys more consumer driven and consumer friendly. There are mandatory surveys that AACO conducts that have narrow answer choices but other surveys will have answers that are more representatives of real world outcomes.

A. Thompson suggested tabling this conversation and incorporating surveying into the work plan in the future.

• Work Plan for 2018-2019

N. Johns explained the committee needs to create a work plan for the upcoming year. To help with work planning the parking lot items and unmet need have been included in the meeting packet for all three EMA regions.

For parking items and unmet needs see attached within meeting packet.

A. Thompson suggested the committee should review medical case management over the course of two meetings. N. Johns agreed and suggested the committee should also conduct priority setting at some point. She suggested the committee could do service priorities in the planning year, possibly in the winter. A. Thompson stated at the conclusion of the MCM meetings the recommendations would be shared with the Recipient. S. Branca thanked A. Thompson and stated that time frame works, the recommendations will be incorporated in the new medical case management model.

C. Fields stated the committee needed to focus on the shortcoming of medical transportation as well as improving the medical case management model. S. Branca explained the vendor for Medicaid transportation is contracted by the state, and the Recipient has no control over that entity. It is well known that there are issues with Medicaid transportation. A. Thompson suggested the committee should look to find alternatives forms of transportation, such as ride sharing services. He noted the alternative forms of transportation could only be used after medical transportation fails. M. Ross-Russell explained that she has attended HRSA meetings and the problem with transportation is national. She explained many of the states use the same transportation vendor. The complaint process is complex, often to file a complaint an individual must have the driver's information, the van number, the time the driver was supposed to arrive and so on.

A. Thompson switched gears and stated the committee should focus on the opioid epidemic. He referenced an article from the New York Times that stated the epidemic is getting worse. The CDC estimates that 74,000 people have died from overdose in 2017. P. Gorman suggested the committee should discuss the opioid epidemic before priority setting. The committee also needs to discuss the homelessness issue since it goes hand in hand with opiate use.

A. Thompson summed up the committee's suggestions and stated the opioid epidemic should be discussed in November, and possibly in December as well. September and October will be reserved for the MCM review. S. Branca suggested the committee should look to reach out to the Opioid Task Force to attend the November meeting or at least to inform the committee of their efforts. A. Thompson agreed and stated he would contact task forces in South Jersey. He reminded the committee they needed to be cognizant of the differences between drug use and addiction in suburban/rural areas and urban areas.

The committee briefly discussed the opioid epidemic and the problems in Philadelphia. The committee noted there are no estimates to how many people are addicted, how many people are addicted and HIV positive, or how many people were prescribed opioid during a certain time frame. The opioid epidemic is a national multi-faceted issue. G. Thomas mentioned the recent support for safer consumption sites. She stated with supervised injections the system is not addressing the drug problem. A. Thompson explained treatment is more successful as well as treatment adherence, when there is no pressure on sobriety.

A. Thompson reviewed the committee's suggestion for its work plan. The committee will review case management in September and October, review the opioid epidemic in November and possibly

December, priority set in January and February, and finally discuss transportation in March. N. Johns suggested the committee could focus on the aging Ryan White population. She stated the discussion was presented in the regional allocations meetings but it was placed in the parking lot. K. Carter stated D. Gana and he would reach out to the Elder Initiative for possible trainings or if they could come to meetings. A. Thompson suggested transportation should be replaced with the aging population discussion in March.

- P. Gorman noted that housing was not placed on the work planning calendar, it was a priority in all of three regional allocations meetings. She suggested the committee could talk about housing in the spring, before the allocations process. A. Thompson suggested the committee could discuss housing in April.
- S. Branca stated from a prevention stand point the city is focused on identifying acute infections in the younger population. Testing and linkage programs have missed cases in the younger population, testing has occurred in the aging population and that has failed to adequately identify new cases. 50% of new HIV cases have been observed in those aged 15-31. T. Dominique agreed with the initiative, but noted that there is an issue with marketing. The system does not reach the younger age group, and treatment adherence is lower in the younger population compared to the aging one.

A. Thompson summarized committee discussion in context of work planning. He stated the following:

• September & October: MCM

• November & December: Opioid epidemic

• January & February: priority setting

• March: the aging Ryan White population

• April: Housing

• May: Transportation

• June: Allocations preparation

• July: Allocations (committee may not meet)

• Racial Inequality

N. Johns reminded the committee this discussion item has been tabled for a few months due to time. At this time does the committee still wish to incorporate this discussion into their work plan or should this topic be tabled. D. Gana stated that racial inequality could be covered in each of the topics in the work plan. A. Thompson suggested the committee could review health inequalities over the course of the year.

Old Business: None
New Business: None

Announcements: None

Adjournment: adjourned by consensus at 4:10pm.

Respectfully submitted by,

Stephen Budhu, staff

Handouts distributed at the meeting:

- Meeting Agenda
- Meeting Minutes
- OHP Calendar
- Instructions to the Recipient
- Parking Lot Items