

**Philadelphia EMA HIV Integrated Planning Council  
Positive Committee  
Meeting Minutes of**

**Monday, August 12, 2019**

**12:00 p.m. – 2:00 p.m.**

Office of HIV Planning, 340 N. 12<sup>th</sup> St., Suite 320, Philadelphia PA 19107

**Present:** PH (18), NJ (3)

**Staff:** Nicole Johns, Briana Morgan

**Call to Order/Introductions:**

K. Carter called the meeting to order at 12:08 p.m. Those present then introduced themselves and participated in an icebreaker activity.

**Approval of Agenda:**

K. Carter presented the meeting agenda for approval. **Motion: J.W. moved, D.G. seconded to approve the agenda. Motion passed: All in favor.**

**Approval of Minutes:**

K. Carter presented the meeting minutes from the July 2019 meeting for approval. **Motion: D.G. moved, J.W. seconded to approve the meeting minutes. Motion passed: All in favor.**

**Report of Chair:**

K. Carter reported that the HIPC had approved the 2020 allocations plans at their last meeting. He stated that they would also be discussing a code of conduct moving forward, and that they were currently recruiting new Planning Council members. He noted that paper applications were available, and that applications could also be completed online at hivphilly.org. M.C. asked if they would reach out to Latino organizations for recruitment purposes. N. Johns replied that they asked HIPC members to help with recruitment, so they could recruit applicants that they had existing relationships with. She noted that she recommended that anyone attend a Planning Council meeting before applying for membership.

K. Carter noted that the next Positive Committee meeting would be on the evening of Tuesday, September 10 from 6 – 8 p.m.

K. Carter reminded those present that they could call the health information helpline if they ever had issues accessing services, adding that the helpline could be reached at 215-985-2437.

**Report of Staff:**

N. Johns noted that she had included a flyer for the evening September meeting in everyone's meeting packets, and asked those present to share their flyer with a friend. She asked everyone who planned to attend to RSVP so she could order enough food for everyone. She added that the event had been posted on Facebook.

N. Johns then discussed the allocations decisions. She explained that AACO had to include budgets when they applied for Ryan White funding every year, and that developing these budgets was one of the Planning Council's responsibilities.

N. Johns first reviewed the budgets for Southern New Jersey, noting that that they would keep funding for services at current levels if they received the same amount of funding. She stated that if NJ received a 5% increase, they would put all the new funding into transportation. She then stated that, in the event of a decrease, transportation would be kept at current funding levels while all other services would be decreased proportionally. She stated that New Jersey had made these decisions because of high spending in transportation, which was needed to get people living with HIV to doctors' appointments, support groups, and other services. She went on to say that they also created directives as a part of the allocations, or budget, process. She stated that New Jersey had issued a directive related to "other professional services," which was the new category that include legal services. She explained that this category included support for people who had to file tax returns in order to demonstrate eligibility for health insurance subsidies. She stated that the directive was to assess how "other professional services" were being provided, and what was included.

N. Johns next reviewed the budgets for Philadelphia. She stated that the Philadelphia level-funding budget included a change to emergency financial assistance (EFA) – medications. She explained that this service category was for emergency medications only, and AACO had changed this service from a 30-day emergency medication supply to a 14-day supply. She stated that this budget moved \$228,000 out of that category and into EFA – housing, mental health services, and housing assistance. She stated that the 5% increase budget would start with this level-funding budget, and increase the other service categories proportionally. She concluded that the 5% decrease budget would reduce EFA – medications by \$228,000 and decrease other services proportionally.

N. Johns reported that Philadelphia had issued a directive that the recipient notify anyone calling the health information helpline for intake that the recipient may conduct a wellness check if they fall out of care. The group then discussed issues around health department contacts, including that the health department could be invasive and overreach when contacting people. N. Johns noted that the health department took reports about this seriously, and that any issues related to this should be reported to the health information helpline. S.C. reported that she had experienced significant privacy violations with the health department calling in 2015, and that she hoped they had gotten better. K. Carter stated that these calls were supposed to simply ensure that people were doing okay, and if this happened again, that they should file a complaint by calling the health information helpline.

N. Johns reported that Philadelphia's other directive to the recipient was to assess whether tobacco use was serving as a barrier to Ryan White services. She noted that everyone agreed that tobacco use should not stop someone from accessing services, so the directive was meant to assess whether this was already happening so it could be stopped. She added that there had also been a request that AACO update the Planning Council on the status of a directive from the previous year regarding transportation.

N. Johns next discussed the level-funding budget from the PA Counties, noting that they would receive a small increase. She stated that, in a level-funding scenario, the PA Counties would take half of their EFA – medications funding out, putting 50% into medical care, 25% into mental health services, and 25% into substance abuse services – outpatient. She went on to say that the increase budget would be spread proportionally across all service categories, based on the level-funding budget. She concluded that the decrease budget would start with moving 50% of the funding out of EFA – medications, and then proportionally spreading the rest of the decrease across all service categories.

M.C. asked if they could request that the Commonwealth of Pennsylvania look into the opioid crisis in the suburban counties. N. Johns replied that they were aware of the issue, and working on addressing it.

K. Carter noted that the Special Pharmaceutical Benefits Program (SPBP) would now be covering contraceptives. N. Johns noted that it covered every birth control option, including birth control pills, IUDs, injectables, implants, and any other form that an average person might use.

#### **Action Item:**

- **Meaningful Involvement of PLWH – Finalize Recommendations**

K. Carter reminded those present that they had been working on this action item for a long time. N. Johns then reviewed the discussion the group had in their May 2019 meeting (*see – attached handout*). She explained that she would like those present to divide into two groups. The group then broke to discuss the handout.

The group reconvened and shared highlights from their conversations. K.M. stated that they started with “presentations with people who are disabled, people experiencing homelessness, LGBTQ populations, youth, and people with substance abuse disorder,” and had a conversation about an issue where a shelter was not aware of issues related to HIV. She stated that they wanted confidentiality 101 trainings done within the shelter system. She then asked who was responsible for checking in on the shelter system. N. Johns stated that they could ask AACO who did this.

D.G. and K.M. stated that they should do outreach to family planning providers, public libraries, and nursing homes to let them know about the Planning Council. J.W. suggested reaching out to Narcotics Anonymous and Alcoholics Anonymous. N. Johns replied that they would have to physically send people to those meetings, since the people who attended them were anonymous. K.M. then stated that they should create a list of events and assign tasks. She added that they should send flyers to homeless youth, and suggested that they provide food. She asked if she would be able to provide peer counseling in a library, and N. Johns replied that they could discuss this suggestion later.

G.W. asked about the difference between the Planning Council and consumer advisory board (CAB). N. Johns replied that the federal government required the Planning Council to exist, and that the Council was responsible for allocating funds, defining community needs, and working with the health department to determine whether they were providing high-quality services. She explained that CABs are advisory, while the Planning Council makes decisions.

She explained that this was an unusual setup because HIV/AIDS activists fought for this level of accountability.

K.M. suggested that they also do outreach at balls and testing sites.

Next, the second group provided their suggestions. G.B. stated that they started with the issues related to Spanish and sign language, suggesting that they provide training to Positive Committee members on Spanish and sign language. She suggested that they also provide flyers in Spanish. N. Johns replied that she was not sure if they could pay for a tutor in Spanish, but committee members could do some peer-to-peer learning. R.B. stated that the City should have a website about these issues. N. Johns replied that they had a website at hivphilly.org, and that they could find specific services on their online service directory. He suggested that they provide that information to the City so they could post it. N. Johns explained that they could not control what was posted on the City's website. K. Carter suggested that they show meeting attendees how to use the service directory at their next meeting. J.M. stated that they had talked about a number of populations, but not hard-of-hearing people. N. Johns noted that they had included sign language on their list.

K. Carter noted that it could be very helpful to be a member of the Planning Council when it came to many of these issues, because Planning Council members could speak directly with health department staff.

R.W. stated that members of ACT UP had approached the health department about requiring that a shelter staff person be certified in order to distribute HIV medications. N. Johns noted that she would tell AACO that issues around HIV and confidentiality in the shelter system had come up, and ask what accountability looks like in terms of HIV and the shelter system. She stated that she would bring the answer back and then the group could move forward.

G.T. stated that ACT UP had also approached the health department about making sure that people living with HIV in the shelter system could have access to their HIV medications at any time of day.

### **Discussion Item:**

- **Ground Rules and Meeting Do's and Don'ts**

N. Johns explained that they were going to discuss ground rules for the group, noting that she had found some examples of ground rules online and included them in the packet (*see – attached handout*). She then played a video of a talk by Jay Johnson about how to deal with difficult people.<sup>1</sup>

K. Carter stated that the Executive Committee would be looking at the Planning Council's bylaws and code of conduct that Thursday.

### **Old Business:**

N. Johns stated that she had confirmed that they would have a conversation about U=U at the September Positive Committee meeting. She noted that they would also continue their mental

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<sup>1</sup> [https://www.ted.com/talks/jay\\_johnson\\_how\\_to\\_deal\\_with\\_difficult\\_people](https://www.ted.com/talks/jay_johnson_how_to_deal_with_difficult_people)

health conversation from their June meeting. She strongly encouraged everyone to RSVP to ensure that she ordered enough food.

N. Johns stated that they would be moving the Positive Committee meetings to the first Mondays of the month for October and November because OHP would be closed for City holidays on the regular meeting dates.

**New Business:**

None.

**Announcements:**

K. Carter announced that there was a Hepatitis A outbreak in the city and encouraged those present to wash their hands frequently.

K. Carter announced that flyers were available for upcoming events with the LGBT Elder Initiative.

**Adjournment:**

The meeting was adjourned by general consensus at 2:04 p.m.

Respectfully submitted,

Briana L. Morgan, staff

**Handouts distributed at the meeting:**

- Meeting Agenda
- Meeting Minutes from July 8, 2019
- Action Steps for Meaningful Involvement of People Living with AIDS/HIV
- Positive Committee Ground Rules
- September Positive Committee Meeting Flyer