

**Greater Hampton Roads HIV Health Services
Planning Council Meeting Minutes
Thursday, June 5, 2008: 5:00 p.m.
Norfolk Department of Public Health
830 Southampton Avenue, Norfolk, VA 23510**

Members Physically Present: –

Judy Anderson
Stacie Walls-Beegle
Pierre Diaz
Shelley Taylor-Donahue
Gregory Fordham
Robert S. Hewitt, Jr. – Co-Chair
Nancy Johnson
Gloria McCall
Janelle Parsons
Clifford G. Reid, Jr.
Marie St. Rose
Anthony L. Ruffin – Co-Chair
Sharon H. Scott – P.C. Secretary
Gwendolyn Ellis-Wilson
Lafayette K. Williams

Members on Teleconference:

There was no teleconference facility
Jeff Kibler – requested use of T.C.

Absent Members:

Janet Hall
Richard Hall
Dan Alvarez
Russell Jones
Ruby Jones
Nancy Pearl

Planning Council Staff:

Jacquelyne Wiggins
Teresa Malilwe

Grantee Staff:

Christine Carroll-RW Part A Programs Manager
Robert Hargett – Grantee Staff

Call to Order:

The meeting was called to order at 5:00 p.m. Mr. Robert Hewitt welcomed Council members and guests and thanked them for their attendance.

House Keeping Rules: Participants were requested to turn off their cell phones and electronic devices or place them on mute mode. The meeting was to be conducted in an orderly manner in accordance with the Bylaws - Conducting meetings, Article 6, Section 7. Mr. Robert Hewitt requested attendees who were not Planning Council members to refrain from comment or questions unless designated or called upon. .

Moment of Silence and Reflection: A moment of silence and reflection was observed for those individuals who have succumbed to AIDS and those that are living with the disease. We pause to think of why we are here today. We pause to have the strength in making the decisions that will improve the care for those we serve. We pause to be thankful for what we have accomplished today.

Attendance

The roll for Planning Council members was taken by the Planning Council Secretary, Ms. Sharon Scott. In accordance with excused absences as established in the Bylaws; Attendance-Article 3, Section 5, it was moved and properly seconded to accept the member absences as noted on the roster. The motion passed. It was established that there was a quorum for the Planning Council to conduct its business.

The Chair requested that it be noted that there was no teleconference capability for the Planning Council meeting held on June 5, 2008. Members who requested to participate by teleconference will be excused for their absence from the meeting.

Introduction of Visitors - Public Comments:

There were no visitors present at the Council meeting.

Approval of Minutes:

The minutes from Thursday, May 1, 2008 Planning Council meeting were reviewed. The following correction was noted:

- Page 3: Under Community Access Committee report, 2nd line: should read as follows: "... will hold a Town Hall Meeting on *May 5, 2008* and not March 5.

After review, it was moved and properly seconded to accept the minutes with noted correction. The motion passed.

Planning Council Support Staff Report:

Ms. Jacquelyn Wiggins, the Program Supervisor reported as follows:

- Planning Council members were requested to update their contact information on the document which was circulated for that purpose. This will assist Support Staff to contact Council members quickly via email. She encouraged those without email accounts to make an effort to get an account.
- Council members were requested to update and sign their Conflict of Interest Disclosure Forms. She noted that this procedure is normally done on the day of the Priority Setting and Resource Allocations Session. However, it was agreed at the last Allocations meeting that the procedure be completed before the day of the Session.
- Council members were urged to RSVP to Support Staff to indicate their intent to attend the Planning Council/Grantee Retreat. This will assist the Ad Hoc Committee members plan for how much food to order for participants. The Planning Council/Grantee Retreat was scheduled for June 13, 2008.
- The new Attendance Cycle starts in July.

Some members stated that they can only respond to email messages if information is sent to their accounts, at least 24-hours before a required deadline. Ms. Sharon Scott stated that she usually leaves her house for work at 8:00 a.m. and requested to be notified, in some other way, for any message that might need an urgent response after that time.

Committees Chairs' Reports:

Executive:

Mr. Anthony Ruffin stated that the committee did not have a report to present. He noted, however, that this was Mr. Robert Hewitt's last day as the official Planning Council Co-Chair. He took the opportunity to thank Mr. Hewitt for his hard work and diligence, and to let him know that the Council appreciates him, and his work.

Mr. Hewitt responded by stating that he enjoyed his work as Co-Chair working alongside Mr. Anthony Ruffin and seeing a lot of changes in the Planning Council, including the different City Manager's Liaisons. He noted that the present Liaison has a lot of interest in the Ryan White Planning Council and what it is all about, which was a positive energy to tap into. He advised new Planning Council members that even if they might know anything about the Program, they should speak up, become leaders, and get involved and get the training needed to be productive. He emphasized that the Planning Council should always be consumer driven. That is what the Ryan White Program is all about. He stated that the new Modernization Act will come into effect in 2009 and unfortunately no body knows what will happen to the Ryan White Program. He thanked Council members for their dedication, interest, and tolerance during his tenure as Co-Chair.

Care Strategy Committee:

Ms. Stacie Walls-Beegle stated that according to the Committee's Work Plan for 2008, members reviewed the Primary Medical Care Standards which were included in the Planning Council packets. She noted that HIV Clinical Performance Outcomes were received from HRSA. The committee was working on incorporating these Outcomes into the Norfolk Standards of Care so that, as a Planning Council, members will get reports back from the Grantee's Office about how the TGA is performing. She stated that the document talks about how Planning Councils will be moving towards more Performance Outcomes. Stacie gave a brief discussion about the updates/corrections that were made to the Primary Medical Care Standards. She stated that the committee will frequently make updates to the Primary Medical Care Standards as HRSA checks the TGA to go to the next tier of Performance Outcomes. The committee was awaiting a report from the Consultant's contracted by the Grantee's Office on the Quality Management reviews to see where the TGA currently stands on baselines. After review of the Primary Medical Care Standards of Care, it was moved and properly seconded to accept the recommendation with noted updates/corrections as presented. The motion passed.

Stacie requested the Grantee's Office to distribute the approved Standards to all Ryan White Providers as quickly as possible so that the committee can start to get data back on them. Mr. Robert Hargett was requested to take note of the request.

Stacie noted that the committee met twice during the month of June. Some months ago, the committee had requested some data from providers via the Grantee's Office regarding some case management information to help with the Priority Setting and Resource Allocations definitions of Medical and Non-Medical Case Management. At the meeting last month, the committee did not get a report from the Grantee's Office because not all the providers had responded to the request. The committee, however, got a report at the June 3 meeting. Members reviewed the report and noted that there were, at least, 400

people in the TGA that would, based on HRSA definition, be eligible for Non-Medical Case Management. However, currently, there is no funding for Non-Medical Case Management that is not Pre-Release. The committee was, therefore, working to put some data together to submit for the Priority Setting and Resource Allocations Process that will further define it. She noted that HRSA was looking at EMAs/TGAs to come up with their own definition of Medical and Non-Medical Case Management and see how people are doing it. What the committee is struggling with is that the TGA's definition of the VDH Standards is not congruent with the HRSA definition. The committee got more information at the last meeting that there are more people for Non-Medical Case Management. It was, therefore, felt that people are forced into Medical Case Management when it was, probably not needed in an attempt to make it easier. This is more expensive for the TGA. The committee also received from the Grantee's Office, the Service Utilization Data Report. Jackie, in the Support Office, has been requested to contact other TGAs with the same level of funding like the Norfolk TGA; with about the same demographics, to get copies of their Standards of Care for Medical and Non-Medical Case Management to see what other TGAs are doing. The committee will then work on it.

Community Access:

Mr. Gregory Fordham stated that the committee's attention was currently on the Campaign to End AIDS. The committee will, at the next meeting, start working on plans for the upcoming Retreat.

Shelley wanted to know the outcome of the Town Hall meeting held on May 10, 2008. Gregg noted that it was a good event with a lot of information. Jackie did a great job doing the needs assessment piece. It was noted by one of the facilitators at the Town Hall meeting that, from the survey which was conducted, most of the participants seemed not to need medical case management. There was some discussion about the Case Management; Medical, and Non-Medical. Gregg stated, however, that the challenge was to get people to such events. As a result, the Community Access Committee representatives attended the Providers meeting to make a plea for agencies to get involved and facilitate transportation to their clients to attend Community Access Committee events. It was noted that transportation was a barrier in the TGA. Gregg also requested Planning Council members to attend Community Access Committee Town Hall meetings/Retreats.

Finance:

In the absence of Ms. Janet Hall, the committee did not present a report.

Membership and Nominations:

Ms. Judy Anderson stated that a synopsis of candidates who went through the interview process on April 29, 2008 was enclosed in the Planning Council packets. She requested for a motion for the four recommendations to be accepted. There are currently only 23 members on the Planning Council. Membership should, at least, be 30 up to 33. Mr. Robert Hewitt noted that right now the TGA was not in compliance with HRSA membership requirements. The Membership and Nominations Committee was working

aggressively to fill the vacant slots. After discussion, it was moved and properly seconded that:

Candidate No. 1 – recommended for Category 1 - be approved as recommended. The motion passed.

Candidate No. 2 was an alternate for candidate No. 1.

There was extensive discussion about Category 9 – Community Leader. Some members wanted an example of a non elected community leader. Mr. Robert Hewitt noted that a community leader can be anybody; a Pastor, Teacher, or just a citizen. It was recommended that as the Planning Council approaches the required membership number, there should be multiple people under the harder to recruit positions because of the turnover. However, Judy reiterated that Planning Council membership should be reflective of the epidemic in the TGA.

Candidate No. 3 – recommended for Category 9 be approved as recommended. The motion passed with three members opposed.

Candidate No. 4 was recommended as an alternate.

Candidate No. 6 – recommended for Category 5 – Mental Health Provider: be approved as recommended. The motion passed.

There was no alternate for this recommendation.

Candidate No. 7 – recommended for Category 8 – Affected communities; be approved. The motion passed.

Candidate No. 8 was recommended as an alternate.

Shelley felt that candidate no. 7 be recommended to fill the “formally incarcerated category rather than category 8. Mr. Robert Hewitt noted that there was already someone on the Council filling that slot. According to the Bylaws; Article III-Membership; Section 2-Composition – the definition is as follows:

- *“Category 15 – A representative of individuals who formerly were Federal, State, or Local prisoners, was released from the custody of the penal system during the preceding three years, and had HIV disease when released.”*

However, some members felt that because of the time limit, after some time on the Planning Council, efforts should be made to find a candidate who was recently released from incarceration. The member currently occupying that slot can be moved to another category. After some discussion, Jackie was requested to find the correct definition for category 15 and present a report to the Membership and Nominations Committee.

The Planning Council then proceeded with the elections of the Junior Co-Chair and the Planning Council Secretary, as follows:

- Gloria McCall - Junior Co-Chair
- Sharon H. Scott - Planning Council Secretary

Fourteen members of the Planning Council present at the meeting voted. Two were absentee ballots.

Needs Assessment and Comprehensive Planning:

Ms. Shelley Taylor-Donahue stated that the committee met as scheduled and reviewed the following:

- Monitoring of the Comprehensive Plan - Committee Chairs were requested to indicate the Progress of how their committees were completing the assigned tasks according to the Comprehensive Plan.
- Comprehensive Plan - Activities are being planned to start work on the new Comprehensive Plan. The current Comprehensive Plan expires this year (2008).
- Needs Assessment – Committee discussed activity plans to start work on the new Needs Assessment.

Shelley stated that the committee recently reviewed the needs assessment for the Hispanic population. According to the Comprehensive Plan, the Needs Assessment and Comprehensive Planning Committee was tasked to establish formal linkages with area Hispanic HIV-providers to conduct research in order to identify and reduce barriers among the Hispanic population. A data request was submitted to the Grantee's Office and the response was that all individuals reported as Latinos had received services last year. The committee wanted to know whether the services these individuals received were Primary Medical Care or Medication Co-Payments. If not, according to HRSA's definition, they are still out of care. Another data request was submitted to the Grantee's Office asking specifically what one service the individuals received; was it Primary Medical Care or Medication Co-Payment.

- With Jackie's help, the committee completed its Work Sheet for 2008 and was working on the Comprehensive Plan timeline.
- The next meeting will be on Tuesday, June 10, 2008 at 5:30 p.m.

Shelley made another request for more committee members and a committee vice-chair. Mr. Robert Hewitt recommended that Mr. Anthony Ruffin and the in-coming Co-Chair review committees' membership and make sure that individuals are appropriately assigned to a committee in accordance with the Bylaws.

Policy and Procedures:

Mr. Pierre Diaz stated that the committee did not have a report to present. However, Pierre made an observation that there are individuals on the Planning Council who are on five/six committees. He stated that, despite being a volunteer entity, people should have a passion for and be committed to the cause.

Priority Setting and Resource Allocations:

In the absence of the Chair, Jackie reminded Planning Council members that training for the Priority Setting and Resource Allocations Session has been scheduled for Thursday, June 19, 2008 starting at 5:30 p.m. at the Department of Human Services, in Conference Room 106. The Executive Committee meeting will start at 4:45 p.m. on the same date. There was no confirmed date for the Session. The Project Officer has submitted a request for Technical Assistance to facilitate the Priority Setting and Resource Allocations Process. Two dates of Saturday, July 19 and Saturday, July 26, 2008 were submitted to the Project Officer for the Session. Individuals who are not able to attend the training should watch the training video in order to participate in the Priority Setting and Resource Allocations Process.

Stacie stated that her committee was trying to gather some information (numbers and definitions of service categories) that will be critical to the Priority Setting and Resource Allocations Process. The information will help the Planning Council make informed decisions for the various service categories, in particular, Case Management. Stacie wanted to know if this data should be submitted to Jackie for inclusion in the binders. After discussion, it was agreed that data which will be included in the binders should be submitted to the Support Office as follows:

- Training date – June 19: Deadline to submit data - Monday, June 16, 2008 by 12:00 noon
- P&A Session – July 19 or 26: Deadline to submit data - July 14, 2008 by 10:00 a.m.

Support Staff were requested to forward whatever data will be submitted to the Needs Assessment and Comprehensive Planning Committee; and the Care Strategy Committee for review.

When requested to make any comment, Ms. Nancy Johnson volunteered to participate on those committees that needed additional membership. She stated that she will try to participate whenever her schedule allows it.

RW Part A Programs Manager's Report:

In the absence of Ms. Christine Carroll, Mr. Robert Hargett reported on two items included in the Planning Council packets as follows:

- The final Expenditure Summary for Fiscal Year 2007 dated May 30, 2008 for the period ending February 29, 2008. For the fiscal year ending February 28, the TGA expended 89% of the funds that were awarded to the TGA in Supplemental funds, formula funds, and in Carryover; that is \$594,000. He noted that it turned out much better than was originally projected. The Carryover award was \$940,000.00. Without the Carryover, some of the services would have been interrupted. The Planning Council was not able to spend all of it, but expenditure was better than was originally planned. Any Carryover that has not been used this fiscal year will go back to the US Treasury. However, HRSA has advised that there is a small amount that the TGA can request, that is, about \$38,000.00. The Grantee's Office and the Priority Setting and Resource Allocations committee will meet to decide on where the funds will be used. The Grantee Staff will present a recommendation for consideration at the next committee's meeting. The recommendation will be based on the current expenditure trends as observed by the Grantee's Office.
- The current Fiscal Year Expenditure Summary for March also included in the Planning Council packets dated June 12, 2008. He noted that there are services that are expending at a higher rate, such as:
 - Drug Reimbursement
 - Medication Co-Pays.

Mr. Hargett stated that these are core services that will be targeted right away. With the small amount in Carryover, these are some of the services the Priority Setting and Resource Allocations Committee will be requested to consider. Because there will be no

Carryover this year, the Grantee's Office will, during the course of the year, intensely be focusing on those services that will be under-spending so that funds can be reallocated to services that will require extra funds.

Stacie discussed expenditure between salary-based service categories, versus other categories that can only spend what they have. They cannot overspend; like in medication co-pay and drug re-imbursement. She felt that it was unfair to just look at agencies that are over-spending because there are a lot of people who have salary-based category funding Agencies that are not spending what they should be spending because they cannot fill the positions. The services that are overspending need to spend in twelve-months increment.

Gregg wanted to know why there was inadequate funding for dental services. It was noted that there was no sufficient data to support a funding decision for dental services. Mr. Robert Hewitt recommended that if a data request needs to be made, copies should also be sent to the Co-Chairs, Ms. Nancy Johnson and the Project Officer. Ms. Nancy Johnson indicated that if there is an issue with getting data at the Grantee's Office, she will work with them to help to put the data together and expedite the process.

Mr. Robert Hargett stated that the Grantee's Office was in the process of working on the Conditions of Award. He also noted that the Grantee's Office was looking forward to the Planning Council/Grantee Retreat on June 13, 2008. The Grantee Staff and Support Staff met with the consultant who will be facilitating the event. Members of the Planning Council were encouraged to attend the Retreat.

After the count of the vote, the following individuals were elected:

- Gloria McCall - Junior Co-Chair.
- Sharon H. Scott - Planning Council Secretary

On behalf of the Planning Council, Mr. Robert Hewitt congratulated Gloria and Sharon. Ms. Gloria McCall thanked members of the Planning Council for the vote and noted that her leadership abilities do not start here. She served on many Planning Councils in other EMAs. She also noted that she does not come as a provider or a consumer, but is driven by passion and love for the cause.

Announcements:

Gwen informed the Council that her son was graduating from High School. Stacie reiterated that her agency was relocating to 248 West 24th Street in Norfolk.

Once again, Mr. Anthony thanked Mr. Robert Hewitt for his dedication and commitment to the Planning Council.

Next Meeting:

The next meeting will be July 3, 2008 at 5:00 p.m.

Adjournment:

With no further business, it was moved and properly seconded to adjourn the meeting.
The motion passed.

Robert S. Hewitt, Jr.

Anthony L. Ruffin