

Comprehensive Planning Committee

MEETING SUMMARY

Friday, March 11, 2022 from 9:31 AM to 11:09 AM
 Videoconference via Zoom: <https://zoom.us/j/83743175727>
 Teleconference: (929) 205-6099 / Meeting ID: 837 4317 5727

Present	Excused Absences	Unexcused Absences
1. Denise Brown	9. Janice Adams-Jarrells	13. Debbie Morgan
2. Allison Delcalzo-Berens	10. Ketlen Alsbrook (Non-Voting)	14. Calvin Toler
3. Delia King	11. Claudia Ortiz	
4. Julissa Lituma	12. Vieshia Morales	
5. Sharon Postel (Non-Voting)		
6. Aliya Roman (Non-Voting)		
7. Ricardo Salcido		
8. Al-Bayyinah Sloane		

Guests: Stephanie Antoine (Newark DOH)
Support Staff: Juanita Vargas and Unnati Guru

1. **Welcome and Moment of Silence**
 Guru called the meeting to order at 9:31AM and welcomed all in attendance. A moment of silence was observed for all those living with, those who have passed, and those affected by HIV/AIDS.

2. **Roll Call**
 Support Team conducted the roll call. There was no quorum for this meeting.

3. **Public Testimony**
 There was no public testimony at this meeting.

4. **Approval of the Meeting Summary January 14, 2022**
 At the last meeting, the committee approved the December 10th meeting summary as presented, and the approved version was posted on the NEMA PC website.

 The January 14th meeting summary approval was tabled to the next meeting due to lack of quorum.

5. **Standing Committee Updates**
 - **Continuum of Care Committee (COC)** – Support Team provided the March 10th COC report:
 - o Members reviewed data on outcomes for priority populations for CY 2021 to assist in identifying which priority populations the Newark EMA will focus on. There was a request to have the data broken down further to identify data based on other ethnicities for gender and age categories.

Action Item: Postel will further breakdown data for review at the April meeting.

- The Committee began drafting SWOT for the priority populations of young adults ages 18-24. Some of the challenges identified for this population include:
 - Stigma and lack of routinized HIV testing.
 - Are youth going to these sites to get tested?
 - Is outreach testing at clubs or events fruitful?
- War Talley advised regarding updates on the EHE plan: no movement has been made at this time with the state for data sharing agreements between CHAMP and EMR/EHRs
- Debbie Mohammed provided a presentation: *Mortality among Persons with Diagnosed HIV, New Jersey*. The main takeaways from the presentation include:
 - The main causes of death for those who are HIV positive: deaths due to HIV are mostly due to not receiving treatment.
 - The main causes of mortality due to non-AIDS defining causes are chronic illness and cancer.
 - There is a need for increased preventative measures

The next COC meeting will occur on April 14, 2022, at 10 AM via Zoom.

- **Research and Evaluation Committee (REC)** – Guru provided the February 14th REC report:

- The Needs Assessment topic previously agreed upon will need to be reworked to better align with the Integrated Plan requirements. A training session was requested for March for guidance and clarification regarding their requirements for the Integrated Plan.
- There was continued discussion for training needs for the FY 2022. Recommendations include:
 - Research 101 provided by Dr. Ann Bagchi.
 - Best practices for dealing with language minority populations
 - Training on the Integrated Plan
 - How to reach youth and the transgender community
 - Community Needs Assessments and see what other groups have done
- Kasny Damas was voted in as the new REC Secretary
- REC reviewed the draft outline of the Funding Streams Analysis to be completed by the Support Team. Recommendations were noted and work will continue as guided.
- The FY 2022 workplan was also reviewed. There was a note that some of the items will have to be updated once the Integrated Plan and Needs Assessment steps are more clear.

The next REC meeting is scheduled for March 21, 2022, at 10 AM via Zoom.

- **Community Involvement Activities Committee (CIA)** - Support Staff provided the December 15 CIA report:

- Aliya Roman facilitated a discussion for a Core Service Waiver. Attendees showed concern regarding how reducing the minimum 75% requirement for core services funding would affect early intervention services and consumers' access to mental health care. Roman cleared up any concerns by advising all providers have been funded, but not all of the funds are being spent, meaning the services are provided as needed with extra funding left over.

- Out of the ten attendees present at the CIA meeting, zero rejected the waiver.
- Attendees continued discussion around what other outreach can be done to encourage clients to join and participate in Planning Council meetings and further community engagement efforts. Suggestions included continued use of flyers, as they are most accessible for consumers.
 - The Support Team has put together a Planning Council information packet, which will be sent out to Ryan White Part A subrecipients to help spread the word about the work of the Planning Council.
- The goals and objectives drafted by the CPC committee for the Integrated Plan were reviewed, and attendees provided suggestions for objectives for each of the goals.

The next CIA meeting will be held on Wednesday, March 23, 2022, at 5PM via Zoom where the committee will host a Community Forum for providers and clients to share experiences providing and receiving Ryan White Part A services.

6. Recipient Report

- Roman advised the Recipient's Office is in the process of approving the RSRs that had a target date of March 7th for review. All but two programs sent in a submission by the target date; the two outstanding programs are those that did not receive funding in FY 2021. The Recipient's Office is working aggressively to reach out to those programs.
- Roman thanked all of the programs in attendance for their responsiveness to the request of program monitors. At the time of this meeting, 86% of the contracts have been reviewed, and 21 contracts (56%) were escalated for program adoption, with hopes of meeting a March 22nd deadline, and the execution of contracts deadline of end of April.

7. New Jersey HIV Planning Group (NJHPG) Report

Guru provided the following report:

- At the February 17th meeting, the NJHPG continued discussions from the leadership retreat regarding a restructuring of the NJHPG and what that would look like.
- The DHSTS provided updates, advising the Ending the HIV Epidemic Statewide initiatives are moving forward, and they are working on implementation with high priority objectives such as Medicaid collaborations and clinical protocol development. There will be more information to come regarding the implementation workgroup.
- As the Harm Reduction Package was signed, work has been started on developing strategies with the governor's office and administration.
- There was discussion for agencies that received funding for the ELIXIR grant (RFA: DHSTS22HIV), and an announcement for informational meetings for the recipients. The full RFA can be found at this link: [click here](#).
 - Attendees had questions regarding the ELIXIR grant, and what it was: The comprehensive grant is a combination of the State's HIV Prevention grant and the HIV Care and Treatment grant. As such, agencies can apply for the grant for one or both services: Prevention and/or Care and Treatment funds.

- Postel advised the Support Team that they will need to work with the State to ensure the funding streams documents how the funding was distributed, and what amount of funding went to Prevention versus Care and Treatment.

8. Old Business

- **Report on Retention in Care and Early Identification of Individuals with HIV/AIDS (EIIHA) Initiative Update by the Recipient**

- Roman provided a presentation on the EIRC case studies. The key points are as follows:
 - The Case Studies focused on the following goals of the National HIV/AIDS Strategy, with the participation from fifteen (100%) of the Newark EMA's Outpatient Ambulatory Healthcare service providers:
 - Link 75% of newly diagnosed to care within 30 days (60% was met in FY 2021)
 - Decrease GAP in medical visits to 10% EMA-wide (the GAP was 15% in FY 2021)
 - Increase Viral Load Suppression to 88% EMA-wide (VLS is at 89% as of FY 2021)
 - Increase prescription of ARV to 99% (FY 2021 shows 99.22%)
 - The report identified barriers from Cycle 75 (March 1, 2020 – February 28, 2021) and the interventions used for Cycle 80 (January 1, 2021 – December 31, 2021).
 - One takeaway from the report is to ensure that all staff have a sound knowledge of the Ryan White eligibility requirements. As Ryan White is Payor of Last Resort, barriers reported due to Insurance Lapse or Pending ADDP/Medicaid approval should not exist.
 - The report advised programs should find ways to eliminate barriers in the system of care and review their service delivery model to ensure no practices within their system of care contribute to the barriers reported in the case studies.

- **Review Membership Roster – determine areas of need for FY' 23-24**

- The Secretary and Vice-Chair positions are still vacant.
- Recruitment for more PC and CPC members.

- **Discuss Membership Recruitment strategies**

- Members provided the following recruitment strategies to encourage more agencies and individuals to become involved in the Planning Council:
 - Vacancies should be shared with RW Part A sub-recipients routinely, how often is yet to be determined.
 - Visual marketing, such as flyers, should continue with various partners to post in their clinics or waiting areas.
 - There should be targeted outreach to RW sub-recipients by cross referencing those who are not currently represented on the NEMA PC.
 - Training programs for consumers would help them feel knowledgeable about the Ryan White program, language, and services provided, so they can feel empowered to participate in meetings, discussions, and feedback on deliverables.
 - As consumers may not have a safe space to participate in meetings, providers can consider providing them a room or access to a computer for participation.
 - How consumers are recruited should be reviewed to ensure a lack of bias from providers who may only advise “good consumers,” those who would provide good feedback for their

care, rather than all consumers under their care. As such, it would be beneficial to consider recruitment methods for consumers through consumers.

- Transportation, wi-fi access/assistance, and zoom training for consumers should be considered as not all consumers have the same level of access or knowledge of technology.

- **Committee Member Orientation with Parliamentary Procedures**

- The Support Team presented the CPC Member Orientation, highlighting the following topics:
 - Purpose of the NEMA Planning Council and its structure
 - CPC committee objectives, roles, and deliverables (the Comprehensive Plan and annual PSRA)
 - Committee membership requirements, membership profile, and leadership
 - Decision Making and Robert's Rules of Order

- **Review**

- Operating Policies and Procedures (OPPs)
- Conflict of Interest Policy and Disclosure Statement
 - Both above items were reviewed in depth with the CPC members with each document being shared live. The CPC OPPs contained a lot of the same information provided in the membership orientation. Both documents are available on the NEMA Planning Council website: www.nemaplanningcouncil.org

9. New Business

There was no new business.

10. Announcements

- The Trinitas Regional Medical Center currently has vacancies for a bi-lingual (Spanish) Medical Case Manager and Mental Health Clinician positions. More information can be found on the RWJ website, as Trinitas is now affiliated with RWJ.
- The CIA Community Forum will be hosted on Wednesday, March 23, from 5-7 PM.

11. Next Meeting

The next CPC meeting will be held on Friday, April 8, 2022, at 9:30 AM via Zoom.

12. Adjournment

The meeting was adjourned at Guru's decree at 11:09 AM.