



# Continuum of Care Committee MEETING SUMMARY

Thursday July 11, 2024, from 10:00 AM to 11:30 AM Videoconference via Zoom: <a href="https://us06web.zoom.us/j/82086702402">https://us06web.zoom.us/j/82086702402</a>
Teleconference: (929) 205-6099 / Meeting ID: 820 8670 2402

Present	Excused Absences	Unexcused Absences
<ol> <li>Viesha Morales (Chair)</li> <li>Cezar Dumago</li> <li>Sharon Postel</li> <li>Ann Bagchi, Ph.D. (Secretary)</li> <li>Ashanti Simpson-Little</li> <li>Lauro Rocha</li> <li>Dr. Wanda Figueroa</li> </ol>	8. Nancy Scangarello	9. Dr. Lucy Efobi

**Guests:** Ashley Bramble

Support Staff: Roberto Benoit, Richell Garcia

#### 1. Welcome and Moment of Silence

Morales called the meeting to order at 10:05AM 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

Bagchi conducted the roll call. Quorum was established.

#### 3. Public Testimony

There was no public testimony at this meeting.

### 4. Approval of Meeting Summaries from May 9th

The May 9<sup>th</sup> meeting summary was distributed electronically and was motioned to be approved by the committee. Morales called for a motion to accept the May 9th meeting summary; Bagchi made the motion; Dumago seconded the motion. There were no abstentions, or oppositions. All were in favor. The Meeting Summary was successfully passed.

## 5. Standing Committee Updates

## Research and Evaluation Committee (REC)— Bagchi provided the report:

- The committee last met on Monday June 17, 2024
- During the meeting, the committee received an update on the Administrative Mechanism.
   2024
- The committee received a presentation on the 2024 Epidemiologic Profile and an update of the Needs Assessment report.
- The committee members reviewed updates on the Funding Stream Report.
- The REC meeting for July was canceled. Business will continue through email in preparation for August. .
- The next REC meeting will be held on Monday Aug 19th at 10 am Zoom.

## Comprehensive Planning Committee (CPC) – Ricardo Salcido provided the update.

- o The CPC last met on Friday, June 21, 2024.
- o During the meeting, committee discussed the priority setting and resource allocation process.
- The committee received the resource service utilization presentation from the recipient office.
- Lastly the committee received an update of the EPI profile and Needs Assessment.
- The Funding Stream analysis was tabled and will be presented upon completion.
- The next CPC meeting will be held on Friday July 10, 2024, at 9:30am via Zoom.

## Community Involvement Activities Committee (CIA) - Support Staff provided the update.

- The committee last met on Wednesday, June 26th, 2024, at 5PM via Zoom.
- During the meeting, the consumer member had the opportunity to provide additional feedback on the Priority Setting and Resource Allocation.
- The committee received a presentation from Ryan Moulton from Rutgers Cancer Institute.
   The topic was "Cancer and Genetics",
- The next CIA meeting will be held on Wednesday July 30, 2023, at 5 PM via Zoom.

#### Nominations Committee (NC) – Support Staff provided the update.

- The committee last met on Friday May 17, 2024.
- The Nominations committee selected the consumers that will be attending the Ryan White conference.
- The committee will be meeting to select a candidate for the Treasury Position.
- o The Nomination committee meeting is table until further notice.

#### 6. New Business

## Monitoring for the 2022-2026 HIV Prevention and Care Plan

Postel presented the NEMA HIV prevention and Care Plan finding:

- There have been small changes between the bimonthly reporting periods.
- The number of RWHAP clients continues to increase in 2024 by 4.7% from 6413 to 6712 as 4/30/24. Mostly due to undocumented individuals.
- MSM account for 26% of RWHAP clients in the EMA
- Black/African America are nearly 2/3 of clients. 36% are men and 27% women.
- The youth 13-24 and 19-24 totals stayed the same
- The ages 25-34 increased slightly from 15.2% to 15.3%
- The Transgender and new to care increase slightly.
- Individual with Medicaid decreased from 44.7% to 44%

- The uninsured individuals increased from 19.7% to 20.2%. The newly diagnosed individuals as of 4/30/24 were 238. Increase of 3.5 % from the previous year and increase of 27 % from the baseline.
- The main two pillars from the integrated plan are diagnosis and the second pillar is treatment in NFMA
- The goal for linkage to care is 95% by 2026. The NEMA current percentages total decrease to 79.9%
- The goal for VLS is 95% by 2026. <sup>3</sup>/<sub>4</sub> of RW individual are VLS for 2 years straight. all the counties decrease
  - Or. Figueroa mentioned that there is an increase in newly diagnosed individuals speaking Creole. Dr. Figueroa added the individual are mostly here through a two-year working program that can expire in 2025. The noticed creole speaking individual may different cultural barrier from other groups. Lastly, mentioned all races are grouped together in the Viral Load Suppression database.
    - Bagchi added that patient outcomes for undocumented individuals are different for cultural and legal situations
    - Morales mentioned that the CDC is better tracking country of origin information for newly diagnosed individuals. Morales added that case manager in her organization asked about country of origin
    - Postel mentioned that the CHAMP group is working in expanding the race and ethnicity guidelines in the fields. CHAMP is currently being updated and that is a great time to refer this information to the department of Health.
    - Dumago added general for all the country and additional window to add open Capture as many details as possible.
    - Bagchi added the race guidelines in the chat:
      - The new set of minimum race and/or ethnicity categories are:
      - American Indian or Alaska Native
      - Asian
      - Black or African American
      - Hispanic or Latino
      - Middle Eastern or North African
      - Native Hawaiian or Pacific Islander
      - White
      - Requiring the collection of additional detail beyond the minimum required race and ethnicity categories for most situations, to ensure further disaggregation in the collection, tabulation, and presentation of data when useful and appropriate.

**Presentation**: Quality Management (Bramble)

Bramble presented the FY 23 Quality Management report Part A and EHE report. Bramble presentation findings:

- NEMA represents 35.6% of the state 37776 PLWHA.
- Newark remains the epicenter of the New Jersey epicenter with 14% of the PLWHA.
- Nearly half of our clients are very low-income receiving Medicaid.
- Nearly 1 in 5 (19%) are uninsured.

- In the five-year trend there were fluctuations in the MCM care plan, linkage to care and retention.
- The EIRCs Committee discussed linkage to care within 30 days and determined the barriers.
- NEMA receives between 500 and 600 clients that are in and out of the system. The barriers mentioned were data entry, delay in referrals and client base issues/ loss of care.
- Bramble is working closely with the Program Monitor to include them in the outcome reporting.
  - MCM Care Plan some of the barriers are new staff turnover and training needs. The MCM plan percentage was 50%. Bramble mentioned working diligently in this project to increase the percentage.
  - Bagchi mentioned that it is Important for the clients to receive care plans in their language.
  - Dumago recommended there needs to be a separation in the data tables between new patients with high viral load, new patients coming from other counties and not suppressed/not adherence to their treatment. Dumago mentioned that many patients do not have coverage and are coming from agencies without ADDAP. Dumago added that distinguishing the cause of the viral load suppression is needed.

## Review/ Update Services Standards

#### Mental Health Service Standards

 The committee reviewed the Mental Health Service Standard. Dumago made a motion to approve the service standard and Rocha second. All were in favor, there were no abstentions or objections. The service standard was approved and submitted to the PC for a 30-day review.

## Non- medical Case Management

The committee reviewed the Non- Medical Case Management Service Standard. Bagchi made
a motion to accept the service standard and Dumago seconded the motion. All were in favor,
there were no abstentions or objections. The service standard was passed and will be
submitted to the PC for a 30-day review.

#### **Emergency Assistance Service Standard**

- The committee reviewed and updated the Emergency assistance Service standard. Bagchi
  made a motion to approve the service standard and Dumago seconded. There was no
  opposition or abstentions for the service standard. The service standard was approved and
  submitted to PC for a 30-day review.
- Morales requested more guidance on the rental assistance security deposit for NEMA program. Bramble mentioned that guidance on how to utilize the security deposit will be circulated for FY25

#### 7. Old Business

#### 8. Administrative Issues— PC Support Staff

There were no administrative issues.

#### 9. Announcements

- NJCRI is hosting a Back-to-School Health Care on August 9th.
- HRSA site visit will be held from July 30th to August 2, 2004.

The next COC meeting will be held on Thursday, August 8th, 2024, at 10AM via Zoom.

## 10. Adjournment

Morales called for a motion to adjourn the meeting. Bagchi seconded the motion. The meeting was adjourned at 11:30 AM.