

**Greater Hampton Roads HIV Health Services Planning Council**  
**Quality Improvement & Strategic Planning Committee Meeting**  
Norfolk Department of Human Services, 741 Monticello Avenue  
**Thursday, October 15, 2015 – 4:00 p.m.**

**Call to Order:** The meeting was called to order at 4:02 p.m.

**Moment of Silent Reflection:** A moment of silent reflection was observed for those affected and infected by HIV and AIDS.

**Welcome/Introductions/Roll Call:** The following committee members were in attendance:

**Present:**

Andre Christian  
Charmaine Brown  
Todd England  
Jerome Cuffee  
Robert Bailey  
Jacquelyne Wiggins-Grantee Staff  
Teresa-PC Support Staff

Catherine Derber  
Doris McNeill  
Gloria Anderson  
Katrina Fontenla  
Marsha Butler-Grantee Staff  
Thomas Schucker-P.C Support

**Excused:**

Julie Newsome  
Gwendolyn Ellis-Wilson  
Tanya Kearney

Jenny Carter  
LuAnn Gahagan

**Review of Minutes:** The committee reviewed the minutes from the last meeting. A motion was moved by Jerome and properly seconded by Robert to approve the minutes as written. The motion passed with one abstention.

**Review the P-CAT:** The committee reviewed the Planning Council Activity Timeline (P-CAT). The committee is on track based on activities outlined on the P-CAT. The committee discussed the following:

**Old Business:**

*Review implementation of Health Care Reform/National HIV/AIDS Strategy Impact to Ryan White:* At last month's meeting, the committee discussed the National HIV/AIDS Strategy and the Health Care Reform and how its impact on the Ryan White Program. The committee reviewed and discussed a presentation by Support Staff regarding the implementation of the National HIV/AIDS Strategy 2020 and the Integrated HIV Prevention and Care Plan. The committee was urged to begin considering the committee's role in the 2016 Triennial Needs Assessment. The committee was also presented with the importance of the needs assessment.

*Define Needs Assessment:* At the last meeting, the committee agreed to do a targeted needs assessment based on the discussions with VDH. During the conference call,

VDH liked the idea of doing targeted needs assessments on non-virally suppressed people living with HIV/AIDS in the area, as aligned with the goal of the National HIV/AIDS Strategy ("NHAS"). The committee agreed with the focus of doing a targeted needs assessments to interview non-virally suppressed people living with HIV/AIDS. Such a study would be important to identify the needs, barriers, and gaps to bring all clients who receive Ryan White Part A Program services to viral suppression. The committee was requested to discuss survey questions and themes.

During discussion, the committee reviewed and discussed a theme for the 2016 Triennial Needs Assessment and was agreed that the focus of the assessment remain the three populations of Out of Care, In Care, and the Newly Diagnosed. The committee will continue to work on themes and drafting questions for the needs assessment in future meetings. Some of the questions for the New to Care, should include: where the testing was done, was the client made aware of Ryan White services, the time it took to get into care, and how long before the client started on medications. For MSMs: the questionnaire should include: the frequency of one's use of social media. The survey will also include demographic questions such as: age, gender, race, ethnicity, sexual orientation, etc... For individuals who are virally suppressed, the following questions should be included in the survey:

- Are you virally suppressed?
- How long it took to reach viral suppression?
- What keeps you virally suppressed?

Service utilization should be part of the survey. This will give an idea of what services clients are utilizing. A question on non-virally suppression and holistic care should also be included. As many as possible, Community Access Committee members should be brought to the table when the committee starts drafting the questions.

After the Needs Assessment, the committee agreed to do a special study to look at *People Lost to Care*. The committee will, at some point in time, also review and discuss doing a study on "*Pathways to Care*," that is, identifying the Points of Entry.

*Review the Comprehensive Plan:* The committee reviewed the Integrated Plan Outline for HIV Care and Prevention Services. After review, a motion was moved by Robert and properly seconded by Katrina to adopt the VDH Strategies for the Comprehensive Plan. The motion passed. This Plan will be part of the TGA Comprehensive Plan and will be submitted to HRSA and the CDC as a joint effort.

*Refine Standards of Care:* The Grantee Staff did not present Standards of Care for review at this meeting. However, the committee discussed the next service category Standards of Care that will be reviewed and updated. After discussion, the committee agreed to review Medical Case Management (MCM). It was decided to align Part A Standards along with the revision of the Part B Standards. The working group will continue to work on the Standards and report back to the committee.

## **New Business:**

*Review HRSA:HIV/AIDS Bureau (HRSA:HAB) Performance Measures:* The Norfolk Part A TGA has always adopted the HRSA Performance Measures. Grantee asked the committee to review and select certain Performance Measures for review this year.

*Determine Specific Plan-Do-Study-Act ('PDSA') Initiatives and review results:* The committee briefly reviewed and discussed HRSA/HAB measures to do a PDSA (Plan-Do-Study-Act). It was agreed to defer the discussion to the November meeting. However, the Grantee Staff stated that Part A is working with the State and doing the Medication Adherence. All Case Management agencies as well as Primary Care have been submitting information and will share data at upcoming meetings.

*Service Utilization Report:* The Grantee Staff presented the 2<sup>nd</sup> Quarter Service Utilization Report including a breakdown for:

- Emergency Financial Assistance:
  - Housing Assistance, and
  - Utility Assistance).
- Early Intervention Services-MAI
  - Out of Care
  - New to Care and
  - Not Identified
- Health Insurance Premium & Cost Sharing Assistance:
  - Laboratory Co-Pay
  - Medication Co-Pay
  - Medication Co-Pay (PAP)
  - Mental Health Co-Pay
  - Office Visit Co-Pay, and
  - Specialty Office Co-Pay)

The committee determined the Grantee was on track with the service category expenditure.

*Compile Unresolved Issues in Parking Lot:*

*Part A Formulary/Hepatitis C Program in the Area:* In discussing the Part A Formulary, Katrina stated that the highest population of people needing Hepatitis C treatment is in the Eastern Region. There are 208 people who are co-infected and only four (4) people are currently in care. The region needs to find out why the number of co-infected people is so low. Katrina will bring some informational documents about Hepatitis C to share at the next Council meeting.

**Any Other Business:** VDH will hold the Part B Ryan White Case Management Standards of Care Training on October 23, 2015 from 8:30 a.m. to 5:00 p.m.

**Date of Next Meeting/Adjournment:** The next meeting will be on Thursday, November 12, 2015 from 4:00 to 5:30 p.m. With no further business, a motion was moved by Robert and properly seconded by Gloria to adjourn the meeting. The motion passed.

Respectfully submitted:

Doris McNeill-Chair