

**GREATER HAMPTON ROADS HIV HEALTH SERVICES
PLANNING COUNCIL MINUTES**

Thursday, March 31, 2022: 5:00 p.m.

Call to Order: The Planning Council virtual meeting for the Greater Hampton Roads HIV Health Services Planning Council, held via Microsoft Teams on Thursday, March 31, 2022 was called to order at 5:03 p.m.

Present:

Jerome Cuffee
Clay Porter
Lynea Hogan
Dr. Michael Bane
Syreeta Dawkins

Ashley D.D. Brown
Jonathan Albright Williams
Meyoni Beale
Rhonda Russell
Welton Rouse

Introduction of Guests

Gwendolyn Ellis-Wilson
Sharon Scott
Yasmine Black
Ryan Alvey
Doris McNeill-LGBT Life Center
Dr. Tanya Kearney-EVMS/AIDS Resource Center
Vonda McKeithan-EVMS/AIDS Resource Center

Recipient/PC Support Staff:

Christine Carroll-Program Manager
Teresa T. Malilwe-PC Support Staff

The Planning Council had a quorum.

Moment of Silence and Reflection:

A moment of silent reflection was observed for those affected and infected by HIV/AIDS.

Confirmation of Notice of Meeting Posting:

There was no response received from Sub-Recipients to the notice of meeting.

Public Comment and Discussion:

There was no public comment or discussion.

Review of Minutes:

The Council reviewed minutes from the October 28, 2021, January 27, 2022, and February 24, 2022 meetings. After review, a vote was taken, as follows:

- **October 28, 2021, meeting:**
A motion was made by Clay and seconded by Meyoni to approve the minutes as written. The motion passed
- **January 27, 2022, meeting:**
A motion was made by Dr. Bane and seconded by Ashley to approve the minutes as presented. The motion passed.
- **February 24, 2022, meeting:**

A motion was presented by Meyoni and seconded by Clay to accept the minutes as written. The motion passed.

Planning Council Activity Timeline (P-CAT)

For the month of March, the Planning Council will:

- Receive monthly reports from Standing Committees
- Hear Program Updates and Collaboration with the Recipient's Office
- Review and Resolve Parking Lot Items
- Approval of New Planning Council members
- Receive Award from HRSA/HAB for Grant Year. Review and Approve Final Allocations based on the actual Award Amount. *(If a partial Award is received, this process could take place again when another Award is received).*
- Review Scope of Work and Planning Council Activity Timelines (P-CAT)
- Approval of Directives to the Recipient.

Committee Reports:

Community Access Committee:

The Community Access Committee met as scheduled on March 9th at 6:00 p.m. The committee:

- Discussed the upcoming virtual Town Hall tentatively scheduled for April 20th and 21st at 6:30 p.m. This will be a two-day event scheduled for one hour on each day. The committee discussed a basic agenda for the two-day event:
 - **Day 1:**
 - Aging and HIV
 - Consumer Perspective on Support Group
 - **Day 2:**
 - Taking Ownership of your Health and How to Navigate the Ryan White Services
 - Medical Pharmacy's view on Care and adherence
- During the Town Hall, the committee will administer a zoom evaluation to collect some data. Emails of the evaluation will be sent out to participants who do not have the zoom capability. On the evaluation, participants will be asked about their interest in attending the Statewide Consumer Retreat.
- The Chair reached out to Part B for assistance with transportation to Wakefield, Virginia; the venue for the event. The Chair and a Part B Representative are still in discussions regarding transportation assistance.
- Because of the absence of Planning Council Support, the committee is behind schedule with distribution of the Consumer Survey which was approved at committee level. The survey was reviewed by the Council.
- The committee is still on schedule for the June 26-27, 2022, Statewide Consumer Retreat to be held in Wakefield, Virginia.

The next committee meeting will be Wednesday, April 13th, at 6:00 p.m.

Membership and Nominations Committee/Executive Committee:

The committee met as scheduled, prior to the Planning Council meeting. The committee was scheduled to interview an applicant for Planning Council membership. Prior to the interview, the Chair gave a brief synopsis of the applicant. The applicant is self-disclosing about their status. The applicant works at one of the Agencies as a Community Health Navigator.

After the interview, the committee recommended that the applicant be encouraged to, initially, participate on a committee because of the applicant's affiliation with a RW agency. The applicant will be considered for placement on the Council when a suitable slot opens up. Support Staff will send a letter inviting the applicant to join a sub-committee of their choice. The Council will be updated regarding the applicant's committee of choice.

Quality Improvement/Strategic Planning (QISP) Committee:

The committee met, as scheduled on Tuesday, March 15th at 4:00 p.m. The committee did not have much to work on, independent of assistance from the Planning Council Support. The Committee's Annual Budget request was submitted to the Recipient's Office. The budget request was to enable collaboration with the Community Access Committee for the Statewide Consumer Retreat scheduled for June 2022.

Work on the Needs Assessment will continue when the contract is awarded for Planning Council Support. Conducting of the Needs Assessment was included in the scope of work for Planning Council Support RFP. When the contract is awarded, the contractor will work with the QISP Committee to complete the Needs Assessment.

Priorities, Allocations and Policies Committee

The committee met on Thursday, March 31st prior to the Executive Committee meeting. The meeting was limited because some agenda items needed guidance from Planning Council Support. The following agenda items were, therefore, deferred to the April 28th, committee meeting:

- Review Needs Assessment Outcomes and Data
- PSRA – Review Framework and Meeting Logistics for PSRA
- PSRA – Identify Datasets for PSRA

The committee reviewed the Part A Expenditure Reports by Service Category which showed an increase in expenditures. Some members expressed concern that the information on the report is not up to date because it was one month behind. However, an explanation by the Recipient and Jonathan from Part B, indicated that the numbers were up to date in terms of the invoices that were submitted for a particular month. Jonathan also gave a brief discussion about the Part B invoicing process.

With regard to the Notice of Award, the Part A Norfolk TGA received a partial award. However, because of funding assistance from the City of Norfolk, contracts were awarded at level funding and will be adjusted, accordingly, when the full award is received.

The Part A Norfolk TGA added two more service providers for the current RFP:

1. A Mental Health Provider on the Peninsula, and
2. A Primary Care Provider.

The Part A Norfolk TGA has not had a Drug Reimbursement Provider for about a year and half. No one applied for the Drug Reimbursement Service Category for the current RFP. Funds in the Drug Reimbursement Service category will, therefore, be reallocated to other services. In order not to lose a group of people that still need this service, it was recommended that a specific question relating to Drug Reimbursement be included in the Triannual Needs Assessment Survey. This will ensure that there are no barriers and gaps for clients to get their medications.

All service categories must submit their invoices by April 15, except HIPCSA which has been given up to the end of April to submit their invoices.

The committee presented the following recommendations that were approved at committee level for review and a vote:

- 2022 Directives to the Recipient
- Memorandum of Understanding (MOU) between the Planning Council and the Recipient
- Code of Conduct

The above items that were discussed at previous Council meetings were not voted on because of lack of quorum. Also presented to the Council but not voted on were:

- The Consumer Survey
- Applicant for Planning Council membership

Consumer Survey:

The Planning Council reviewed the Consumer Survey. After review, and responses to raised questions, the Planning Council voted to approve the Consumer Survey as presented by the committee. The motion passed with:

- o – Nays
- o – Abstentions

Approval of Applicant for Planning Council Membership:

The Co-Chair gave a short synopsis of the applicant. The Planning Council voted to approve the applicant's application for Council membership as presented by the Membership and Nominations Committee with:

- o- Nays
- o- Abstentions

Planning Council Support Staff will submit the Council's recommendation to the CEO for his approval and official appointment of the candidate to the Council.

Directives to the Recipient:

The Priorities, Allocations and Policies Committee did not make revisions to the 2021 Directives. However, the committee briefly discussed:

- *Directive 1.2: Rapid Reallocation Tool for the Recipient*, which states as follows:
 - o The Recipient may rapidly reallocate funds without Planning Council consent based on the following conditions:
 - o Up to 10% of the Service Category allocation at any time during a grant year;
 - o Service Category reallocations can be made from Support to Core, Core to Core, and Core to Support Services;
 - o After October 30th of every grant year, the Recipient's Office may reallocate service category allocations without a 10% cap;

- The Recipient will report all reallocations to the Priorities, Allocations and Policies Committee at the next scheduled committee meeting following the reallocation.

After review of the Directives, the Planning Council accepted to adapt the 2021 Directives for 2022 without revisions, with:

- – Nays
- – Abstentions

Code of Conduct:

This document discusses conflicts with regard to the Priority Setting and Resource Allocations Process. The document was emailed to Council members prior to the meeting for review. The Planning Council voted to accept the Code of Conduct as presented by the Priorities, Allocations and Policies Committee with:

- – Nays
- – Abstentions

Memorandum of Understanding (MOU):

The Priorities, Allocations and Policies Committee presented the MOU between the Planning Council and the Recipient's Office for review and a vote. The document lists the Planning Council responsibilities and those for the Recipient's Office. The document was updated at the beginning of last year and the only revision made to the document was that the Monthly Expenditure Summary Report, presented by the Recipient's Office at the Priorities, Allocations and Policies Committee meeting, will be presented to the Executive Committee and the Planning Council by the Council Co-Chair. After review, the Council voted to accept the MOU as presented with:

- – Nays
- – Abstentions

Program Updates:

RW Part A Program Manager's Report:

In the report, the Program Manager stated that:

- The Part A Norfolk TGA only received a partial award in the amount of \$1.9 million.
- The RFP Process has been completed for all services and the award letters have been issued. The Recipient's Office is waiting for revised budgets, then the contract process will start.
- The RFP Process for Planning Council Support has also been completed. Collaborative Research was selected. The Recipient's Office is waiting for the Purchasing Department to contact Collaborative Research to set up a meeting for negotiations with them.
- The Recipient's Office is in the middle of a single audit by the City of Norfolk, which is a requirement by HRSA that the Federal funds for Ryan White get a single audit every two years.

Part B Update:

The following Virginia Ryan White Part B Updates for Norfolk TGA Planning Council, 03/31/2022 was presented by the Part B Representative:

1. VDH is making changes to Ryan White Part B eligibility process beginning April 1, 2022:

1. VDH will now require clients to complete a full client eligibility assessment for Ryan White Part B services every 24 months.
 2. VDH is also moving towards Unified Eligibility that will allow clients to complete one client eligibility assessment for all Ryan White Part B services, including medication access services.
 3. Even though April 1 is the start date given to Unified Eligibility, it will take 9-12 months to fully include all clients into the Unified Eligibility process and update their eligibility on the new 24-month cycle.
 4. **It is not necessary nor recommended that subrecipients enter assessments on all clients into the Provide system by 4/1/2022.** Subrecipients should complete assessments for clients as their records indicate an updated eligibility (i.e., recertification) is due. Any client assessment completed and approved in Provide on 9/1/2021 or after will count as the client's updated eligibility and starts the 24-month counter for when the next full eligibility update is due.
 5. All of these steps will aid in spreading out eligibility due dates over a longer period of time, which will prevent subrecipients from needing to complete a large volume of assessments 24 months after 4/1/2022.
2. VDH is hiring for multiple positions. For more information on those positions as well as how to apply: <https://www.vdh.virginia.gov/disease-prevention/ddp-recruitment/>.
 3. Virginia Department of Health invites providers, consumers, and community members to attend a Virtual Public Hearing to provide input on the next Virginia Integrated HIV Prevention and Services Plan. This plan will be a roadmap and lead Virginia in how we address and end the HIV Epidemic in Virginia.
 1. The meeting will be held virtually on **Wednesday, April 20, 2022 from 4:30 – 6:30 PM** through an Online ZOOM session with a phone-in option.
 2. Attached is a flyer for the event (with both a clickable link and a QR code that can be scanned to reach the registration page) - Please post the flyer around your agencies where clients can see it.
 3. Please also share this information widely with your network of providers and consumers who may provide or receive services, including medication pick up.
 4. If you would like to participate, please register using the link: <https://vdh.zoom.us/meeting/register/tJcpc-yvqTsrHdJupbA4ne3wuUgTaDsHhFDK>
 4. **Part C Update:**

The following is a summary report of Ryan White Part C, EIS activities from September 30, 2021 through March 31, 2022.

 1. The Part C resident geographical area covers patients residing in the following areas:
 - a. Norfolk TGA,
 - b. State of Virginia, and
 - c. North Carolina, inside and outside of Currituck County
 2. The award performance period is May 1 through April 30.

3. Costs not covered by Parts A and B
 - a. Parts A and B claims paid after those grants closed but before the Part C closes. Mental health and other cost shares are examples.
 - b. Costs for TGA patients not covered by Part A due to limited TGA funding
 - c. Costs for oral health provided non-TGA providers
 - d. Costs for rare other services needed but not covered by Parts A or B. An example is transportation or food assistance for a North Carolina patient that resides outside of the TGA.

The below data covers patients served during the period between September 30, 2021 through March 31, 2022.

4. What is the Part C grant?

Below is HRSA information regarding Part C grant. This information can be found at [Part C: Early Intervention Services and Capacity Development Program Grants | HIV/AIDS Bureau \(hrsa.gov\)](https://www.hrsa.gov/part-c)

Part C: Early Intervention Services and Capacity Development Program Grants

Part C of the Ryan White HIV/AIDS Program provides grant funding to local community-based organizations to support outpatient ambulatory health service and support services through Early Intervention Services (EIS) program grants.

Service	09/30/21 through 10/28/2021	10/29/21 through 11/25/21	11/26/21 through 12/23/21	12/24/21 through 01/27/22	1/28/22 through 2/24/22	2/25/22 through 3/31/22	
Non-MCM	45	51	46	32	27	39	
Food Bank	0	0	0	0	0	0	
HIPCSA	8	3	2	0	0	0	
Oral Health	7	2	6	4	9	2	
Office Visits/Labs	43	55	40	28	18	36	
Medical Transportation	0	0	0	0	0	0	
Total Unduplicated Patients	71	80	73	56	41	60	

HOPWA Update:

In the absence of the HOPWA Representative at the meeting, there was no HOPWA update presented to the Planning Council.

New Business:

Election for a Planning Council Co-Chair:

A list of two individuals eligible to hold the position of Planning Council Co-Chair was emailed to Council members prior to the meeting. Of the two individuals, Lynea declined the nomination

which left Ashley as the only candidate for the position of Co-Chair. After a brief discussion, Ms. Ashley D.D. Brown was unanimously elected as the Co-Chair for the Planning Council with:

- o – Nays
- o – Abstentions

The Planning Council congratulated Ashley on her election as the new Council Co-Chair.

Announcements by Members:

Council members were encouraged to attend Planning Council meetings and participate on committee. A lot of work is done at committee level where some questions raised by Council members would most likely be answered.

Adjournment:

With no further business to discuss, a motion was moved by Ashley and properly seconded by Lynea to adjourn the meeting. The motion passed.

Respectfully Submitted:

Jerome Cuffee – P.C. Co-Chair