

**NASSAU-SUFFOLK HIV HEALTH SERVICES PLANNING COUNCIL
UNITED WAY OF LONG ISLAND, DEER PARK, NY**

November 13, 2024

10am – 12pm

Meeting ID:

Passcode:

MINUTES

MEMBERS PRESENT

Kerry Thomas, Chair
Nancy Duncan, Vice-Chair
Susan Baldrige
Pam Biafora
Eileen Bryant
Jody Brinson
James Colson
Carmen Feliciano
Maria Mezzatesta
Anuolu Oyadiran
Angie Partap
Gregson Pigott, MD
Joseph Pirone
Jacqueline Ponce-Rivera
Sofia Porres
Denise Ragsdale
Stephen Sebor
June Tappan

MEMBERS ABSENT

Wendy Abt
Tyrone Banister
Arthur Brown
Clara Crawford
Irina Gelman, DPM
Margret Henry
Lance Marrow
Cathy Martens
Colin Pearsall
Scott Petersen
Edward Soto
John Van

GUESTS

Anthony Santella, DrPH
William Doepper
Avis Giddiens

UWLI STAFF

Georgette Beal
Myra Alston
JoAnn Henn
Katie Ramirez

COUNTY STAFF

I. Welcome, Moment of Silence, & Acknowledgement

Mr. Thomas, Chair, began the meeting at 10:10 am. The meeting was held in person and by Zoom. Mr. Thomas welcomed everyone and Introductions were made. A moment of silence was observed to remember those living with and affected by HIV/AIDS. Mr. Thomas encouraged us to set our intentions on what we can do and contribute to this cause. Ms. Jody Brinson, from Legal Services of Long Island, was welcomed as the newest Planning Council member.

II. Approval of September 11, 2024 meeting minutes

Ms. Mezzatesta made a motion to accept the September meeting minutes with the grammatical correction. Ms. Ragsdale seconded the motion.

16 Approved 2 Abstained 0 Opposed

III. Committee Reports

Ms. Duncan reported on the **Executive Committee** that met on Monday, November 4, 2024. The committee approved the November 13th Planning Council meeting agenda, which included the 2024 Consumer Survey

Report results presentation as well as the annual Member Training Needs Assessment. Several presentation and training topics were suggested by the Executive Committee for the upcoming year. Comprehensive agency monitoring visits have begun. This year, the focus will be on following up on any identified issues, and providing technical assistance needed. The committee discussed increasing the Planning Council's social media presence by creating a Planning Council Facebook and Instagram account. These tools will be utilized to promote Planning Council meetings, Awareness Days, and share information about HIV testing and locations. World AIDS Day registration and sponsorships are open.

Ms. Baldrige reported on the **Consumer Involvement Committee (CIC)** that met on Friday, October 11, 2024. The primary agenda for this meeting was centered on planning for the 2024 World AIDS Day event. There are three co-chairs for this year's event. The event will be held on Friday, December 13, 2024, from 6-10pm at Captain Bill's in Bay Shore. This year's theme is *Achieving 95% Viral Load Suppression: Communities Make a Difference* to recognize the N-S EMA as one of the few regions in the country that have reached the 95% viral load suppression benchmark (according to CDC) and pay homage to the work of our planning bodies and communities in achieving this milestone. Nominees were accepted for Nassau and Suffolk County Provider and Consumer awards. Council members are invited to attend the World AIDS Day event, which is free for participants. Registration is required and seating is limited, with a limit of two staff per agency. The Council could not host this event without generous support from our sponsors so please consider sponsoring. New Co-Chair terms will begin starting in November.

Ms. Ponce-Rivera reported on the **Strategic Assessment & Planning Committee** meeting that met on Wednesday, November 6, 2024. Congratulations were extended to Ms. Rivera and Mr. Pirone on being selected as the SAP Committee Co-Chairs for 2024-2026. The Early Identification of Individuals with HIV/AIDS (EIHA) Plan for FY25-27 (from the grant submission) was shared with the committee for discussion and input, followed by an update and quarterly discussion on progress in implementing the 2022-2026 Integrated Plan. The committee will make every effort to invite prevention providers to future SAP meetings and actively share data to assist in implementing and monitoring progress on EIIHA and the IP.

Ms. Partap reported on the **Clinical Quality Management (CQM) committee** that met Thursday, October 24, 2024. Congratulations were extended to Ms. Mezzatesta and Ms. Partap on their co-chair terms for 2024-2026. The CQM agenda for October included an update on the MNT CQI project and a discussion on trends in new infections and Stigma. The goal of this project is to improve health outcomes of Part A clients by increasing the number of clients receiving medical nutrition therapy services. The next steps in the MNT CQI project are to create a brief assessment tool for MCM staff to use to determine if clients should be referred to MNT as well as create an MNT client brochure. Members also suggested creating informational videos about MNT for those who struggle with literacy. Despite significant overall progress, HIV infections for Latinos are increasing nationally and regionally. Slides were shown regarding the current state of the US Latino HIV epidemic, prevention and treatment progress, trending data by ethnicity, and responses to the situation. The discussion on stigma and language was tabled until the next CQM meeting.

Membership Sub-committee-

Two Planning Council candidates were approved for balloting at the November Council meeting. After the vote, required documentation will be sent to the respective counties.

IV. FY 2024-2025 Reallocation (Vote)-

The reallocation chart was shared with the Council. Funded providers were asked to look at their spending patterns to determine how much in vouchers have been submitted to date, if they intend to spend all their funds and if additional funds are needed.

The total amount of funds returned was \$31,230. Funds were returned under medical case management (\$27,380) due to staffing changes and OAHS (\$3,850) because of a decrease in utilization. Both are CORE services.

Programs are requesting funds for Emergency Financial Assistance (SUPPORT) and Mental Health Services (CORE). \$24,000 will be allocated to EFA for food cards, utilities, and housing related costs including rent. \$7,230 will be allocated to Mental Health Services for EMR software. All requests are allowable expenses.

The proposed reallocation of FY2024-2025 priorities is that \$31,230 is returned from MCM and OAHS and that amount will be reallocated to MH and EFA in the breakdown stated above. If Core or Support funds are returned between now and the end of February 2025, less than or equal to \$50,000, they will be reallocated to ADAP as per today's vote unless a request is identified under another priority which will take precedence over ADAP. If funds are returned which exceed this amount, the request must be brought back to the Council's Executive Committee for consideration prior to February 7, 2025. It should be noted that when reallocation moves from CORE to SUPPORT services it requires Planning Council approval. If the reallocation stays within CORE or within SUPPORT, it can be moved by the recipient without Council approval.

Ms. Ragsdale made a motion to accept the reallocation. Ms. Mezzatesta seconded the motion
14 Approve 4 Abstain 0 Opposed.
Motion carried.

V. 2024 Consumer Needs Assessment Report- Anthony Santella, DrPH

Dr. Santella, a former Planning Council member, who now lives in Connecticut and teaches at Fairfield University presented on the results of the 2024 Consumer Survey. Dr. Santella thanked Ms. Beal and Ms. Ramirez for their assistance with the 2024 Consumer Survey. He acknowledged the efforts of the N-S EMA partners, and all those who contributed to the success of the survey as well as the SAP Committee for reviewing and updating the survey tool.

The Consumer Survey was developed by the Strategic Assessment and Planning (SAP) Committee of the Nassau-Suffolk HIV Health Services Planning Council with the objective to identify and address the evolving needs of PLWH in the Nassau-Suffolk EMA. It has been conducted periodically and contains data comparisons from 2007-2024. The 2024 iteration of the survey includes new sections on food security, aging challenges, stigma, and discrimination. The survey incorporates a "status neutral" approach to balance care and prevention regardless of HIV status which is reflected in the way many of the questions are written. Led by United Way of Long Island, in collaboration with providers and bilingual peers at key sites, the surveys were available in English and Spanish, in various formats (online, phone, paper). Providing different ways to complete the survey helps to address confidentiality concerns, language barriers, literacy and comfortability with technology. A \$25 gift card incentive was given to increase participation.

The goal was 500 completed surveys. The survey period which began in March was extended to July to receive more responses. This yielded 364 responses. Although the number is less than anticipated, it is a good representative sample of the region. The data was analyzed with assistance from ChatGPT to identify group differences,

Dr. Santella summarized the survey results from the lengthy and informative PowerPoint presentation. The report will be uploaded to the Planning Council website:

Survey Demographics:

Age: predominantly 55-64 (29%); Gender: Male (53%), Female (47%); Racial Identity: Black/African American (43%), White (33%), Latino/a/x (40%); Language: 72% primarily speak English; 94% access services in preferred language.

Health and Comorbid Conditions:

Common conditions: High blood pressure (43%), high cholesterol (46%), vision issues (33%)
Concerns about aging, HIV, and medication effects noted.

Housing and Employment:

Living independently (46.1%), shelters/group homes (16.6% each); Employment: 46%, with 43% at or below federal poverty level.

Access to Services and Barriers:

Adequate access to outpatient services (60%) and medications (68%); Social service usage high for case management (64%) and transportation (39%); Main barriers: Lack of awareness (19%) and financial limitations (5%).

It should be noted that the majority of the responses were self-reported, not all the questions were answered, and some questions had *check all that apply*; numerous answers can affect the percentages so that the results do not necessarily equal 100%.

Who completed the survey?

83.3% of PLWH completed the survey themselves; 16.4% had agency staff help them, and the remaining .03% had a friend or relative help them to complete the survey. A breakdown of the locations where the surveys were completed, including the different agencies, online, and by phone was shared with the Council. The percentage of county residents was similar. Of the 351 respondents, 52.4% reside in Nassau County; 47.6% reside in Suffolk County. The top nine Long Island towns (4 from NC; 5 from SC) were listed, with Hempstead having the largest number of respondents.

When asked to describe their overall health, respondents answered as follows:

Very good (37.3%); Average (23.8%); Excellent (21%); Fair (16.5%); and Poor (1.4%). It was suggested that these results may be indicative of the region's health care system. A question regarding active military service was added. 3.1% of respondents said they had served in active duty either in regular Military, Reserves or National Guard. The rationale behind adding this question was to assess the number of veterans and how they were accessing care. Regarding level of education, more than 50% had a high school diploma or GED; 20.8% had less than a high school degree; 19.7% had some college, while 6.4% had a Graduate Degree.

When first diagnosed with HIV, 44.9% were diagnosed in Nassau County; 27.1% in Suffolk County, while the remaining 28% were diagnosed in other states or countries. The question, *Who are your sexual partners?* gave the option to check all that apply. The breakdown is as follows: 57.3% Male; 25% Female; .6% Transgender Male; .6% Transgender Female, 24.4 % replied they were not sexually active. When asked which type of organization provided your HIV diagnosis? The results were: Hospital or emergency room (40.2%); Health center/community clinic (29.6%); private doctor (13.4%); other (8%) Community based organization (3.4%); jail/prison (3.1%); and HIV Testing van (2.3%). The question was asked as to why urgent care centers weren't an option. A member suggested that respondents may have considered urgent care centers as clinics and perhaps it should be added for clarity in future surveys. Unprotected sex was the primary mode of transmission at 81.9%; 7.7% through sharing needles, and 5.7% through a blood transfusion.

Regarding homelessness, 73.7% replied they were never homeless, while 3.1% reported they were currently homeless. The remaining percentage, 23.2%, reported being homeless at some point in their lives. Current and previous housing situation percentages were shared as well as present sources of total household income. Health insurance questions included types of insurance, specific insurers and any challenged with enrolling in Medicaid or the Health Insurance Marketplace.

Food insecurity is a growing problem on Long Island. 30.7% of respondents worry where their next meal will come from. A significant number replied there was a time when family faced food insecurity issues (check all that apply) including but not limited to not having enough to eat, skipping a meal and not being able to eat healthy food. 42.5% of households have used SNAP benefits or food stamps in the past twelve months and 51.7% have been referred to or connected with a nutritionist or dietary specialist to manage a specific medical condition. After they were diagnosed with HIV, 73.2% reported going for medical care in less than a month, 11.2% reported waiting 1-5 months; 7.4% (6-12 months) and 8.9% waited more than 12 months to get medical care.

The majority of respondents receive HIV care from large healthcare institutions, with the most common being NUMC (88), Northwell (77), Sun River Health (60), CPH and Stony Brook (each with 40 mentions). A smaller number of individuals reported receiving care from FQHCs like Harmony Health Care, NYU, and private doctors, or community organizations such as Thursday's Child and the Hispanic Counseling Center. A few respondents mentioned receiving care from less common locations such as Callen-Lorde, clinics in Ecuador and Haiti, or while incarcerated in Broward County Jail. Some also mentioned ADAP or other assistance programs, while a small number reported not having a regular care provider or not remembering where they receive care. HIV and Medical Care questions involved labs, medications, comorbidities, mental health, substance use, and access to needed services.

This presentation was a summary of a long and collaborative process. Consequently, not everything could be covered at this meeting. This report will be on the Planning Council website for reference and review. Dr. Santella was thanked for his presentation and asked when he plans to return to Long Island.

VI. Member Training Needs Assessment-

The Planning Council is responsible for training members in the roles and responsibilities. To better understand the Council's training needs, and decide which topics to include in 2025, the annual assessment form was distributed to Council members. Suggestions on ways to make the training courses useful and interesting are always encouraged as well as adding additional topics for consideration. The form lists various topics, including but not limited to Aging and HIV, cultural competency training, the importance of advocacy, Medicaid redesign, and stigma. Council members were asked to rank the topics on a scale in terms of importance, as well as suggest presentations, and trainers. The information gathered from the assessment will be shared at the next Planning Council meeting.

VII. Ryan White Conference

The National Ryan White Conference on HIV Care and Prevention took place from August 20-24 in Washington DC. Ms. O'Keefe, Ms. Partap, and Ms. Alston attended in person and shared their experiences. Ms. O'Keefe shared the following statistics: 8,085 people registered for the conference; over 2,700 attended in person, while the remaining participants attended virtually, which included the department staff. There were 162 concurrent sessions/workshops. 127 poster presentations, and 1,000 community members. There were different tracks to follow; Ms. O'Keefe participated in the Clinical Quality Management. The different tracks were advantageous since the three of them did not necessarily attend the same workshops and different information could be shared. The daily plenaries were informative.

Ms. Partap expressed her thanks for the opportunity to attend the conference. She didn't want to miss anything and attended as many sessions as possible, often taking her lunch or a snack with her to save time. One of her highlights was meeting Ryan's White mom. Ms. Partap noted that attendees were more interested in the state you came from than the position you held. It was interesting to meet and get to know people from other areas.

Ms. Alston compared her experience to previous conferences. This conference was face-paced and there were a lot of people. She attended workshops on data and would have liked more topics options. Ms. Alston commented on *Empowering Black Women Living HIV* session she attended, stating it was very good and offered good suggestions.

All three women appreciated the opportunity to attend the conference.

VIII. Other Business/ Announcements

Sun River Health is hosting two Thanksgiving luncheons. The first will be on November 20 at the Brentwood location and the second on November 27 at the Patchogue location. Both luncheons begin at 12pm. RSVP to Ms. Mezzatesta or Ms. Biafora. Ms. Biafora was invited back to be a spokesmodel for the 2025 HIV Stops With Me campaign.

The Second Annual Suffolk County recognition of World AIDS Day is Friday, December 2 at 3:30pm Dennison Building in Hauppauge. There will be great speakers, and the building will be lit in red to commemorate the event.

Northwell is having their World AIDS Day event on December 2, 2pm-4pm at the Inn at New Hyde Park. Registration is required.

December 5 is the date for NUMC's World AIDS Day event. Details to follow. The CIC holiday meeting is Friday, December 6 at United Way.

Registration is underway for the Council's World AIDS Day event on Friday evening, December 13 6PM-10PM at Captain Bill's in Bay Shore. Event information including sponsorships is also available in the mailing. Contact Ms. Henn if you have any questions,

IX. Adjournment

Ms. Ragsdale made a motion, which was seconded by Ms. Biafora, to adjourn the November 13, 2024, Planning Council meeting.

All in favor-Motion carried.