

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

January 17, 2024

10am – 12pm

Meeting ID: 831 1730 5348

Passcode: 664436

MINUTES

MEMBERS PRESENT

Kerry Thomas, Chair
Nancy Duncan, Vice-C
Wendy Abt
Susan Baldrige
Eileen Bryant
Carmen Feliciano
Cathy Martens
Maria Mezzatesta
Victoria Osk, Esq.
Anuolu Oyadiran
Angie Partap
Colin Pearsall
Scott Petersen
Joseph Pirone
Jacqueline Ponce-Rivera
Denise Ragsdale
Claire Simon
Edward Soto
June Tappan

MEMBERS ABSENT

Tyrone Banister
James Colson
Irina Gelman, DPM
Lance Marrow
Gregson Pigott, MD
Sofia Porres
Stephen Sebor
John Van

GUESTS

Arthur Brown
Ernest Burke

UWLI STAFF

Georgette Beal
Myra Alston
JoAnn Henn
Katie Ramirez

COUNTY STAFF

Andrew Knecht, DO, NCDOH

I. Welcome, Moment of Silence, & Welcome

Mr. Thomas, Chair, began the meeting at 10:06 am and welcomed everyone. Introductions were made in the Chat. Mr. Thomas requested a moment of silence to remember all those infected and affected by HIV/AIDS.

II. Approval of November 8, 2023 Minutes

Ms. Ragsdale made a motion to accept the meeting minutes as read. Ms. Martens seconded the motion.

12 Approved 8 Abstentions 0 Opposed

III. Committee Reports

Ms. Duncan reported on the **Executive Committee** which met on Monday January 10, 2024. The Council agenda was reviewed and approved which includes the annual member orientation, a presentation on Ryan White Part A data, and the annual member training needs assessment survey. As part of an administrative update, the committee was informed that the Estimated Unobligated Balance and Carryover Request was submitted in December prior to the deadline. As in previous years, the EMA expects to receive a partial

Notice of Award by the end of January or the beginning of February. A Core Support Services waiver has already been approved for the next contract year. Provider agency visits are scheduled to be completed by the end of February. United Way is working with a consultant to finalize the report for the HIV System Assessment that was conducted last year and with a different consultant to complete the triennial consumer survey. At the conclusion of the meeting the committee discussed finishing the bylaws update for approval by the larger planning group. Executive Committee meeting dates were set for the 2024 calendar year.

Ms. Baldrige reported on the **Consumer Involvement Committee (CIC)**. The committee met on December 15, 2023 for their annual holiday party. They enjoyed lunch, games and gift exchanges. United Way staff thanked the members for their commitment to the planning process and especially for their hard work over the past few months planning a successful World AIDS Day event. Approximately 140 consumers, agency staff, and community members attended the event on December 1st at Captain Bill's in Bay Shore. Many thanks to the individuals, agencies, and companies who supported the event through sponsorships, individual donations, and raffle donations. The committee will be meeting in February to discuss improvements, the new location, and the raffle process in preparation for the next celebration in December 2024.

Ms. Ponce-Rivera reported on the **Strategic Assessment & Planning Committee (SAP)** meeting that met on Wednesday, January 10, 2024. The committee was introduced to the new Integrated Plan (IP) Pillars and Strategies Template which is a tool for tracking progress on implementing the Integrated Plan. The IP is centered around the four pillars of Diagnose, Treat, Prevent, and Respond. Over the course of this year, SAP will be responsible for populating the Pillars and Strategies template with regional activities that correspond to the various goals and objectives related to each pillar. The committee spent a significant portion of the January meeting reviewing and updating the questions for the 2024 Consumer Survey. Survey administration dates will be finalized once the survey questions are complete.

The **Clinical Quality Management (CQM) committee** is scheduled for Thursday, February 24, 2024. A meeting of the **Membership Sub-committee** will follow the February CQM meeting.

IV. Annual Membership Orientation

The Annual Member Orientation is presented at the first Planning Council meeting of the new year. Besides being a HRSA requirement, the goals and objectives of the orientation were to: provide information about the purpose and scope of the RWHAP program, specifically Part A, provide an overview of the goals and purpose of the Planning Council, familiarize members with often used acronyms, and assist members in gaining a better understanding of the planning process. The member orientation educates new members while offering a refresher for current members.

Topics covered included:

- How Ryan White Part A Works
- Legislative requirements
- Mission Statement
- Coordination of Services
- Priority Setting and Resource Allocation (PSRA)
- Planning Council Membership, with a focus on consumer input and participation
- Description of standing committees, sub-committees, and their responsibilities.
- Confidentiality, Conflict of Interest, and Grievance Policy.

The presentation ended with a ten-question quiz, making the orientation more interactive while assessing understanding and retention of the material that was presented.

A copy of the member orientation was sent to members as well as uploaded to the Planning Council's website www.longislandpc.org.

V. Data Presentation

Ms. Alston presented on Nassau-Suffolk EMA Ryan White Data (Part A and MAI) by priority for FY2022-2023. Slides included:

ADAP (AIDS Drug Assistance Program) data showed total enrollment for the different ADAP programs, with a breakdown of *Uninsured, Medicaid Interim, Insured Partial Current Active* and *New Enrollment* for a three-year period. (2020-2022). There were slight fluctuations in the three-year comparison.

There was a breakdown of the total clients served by priority for Ryan White Part A in FY2022 which covers the timeframe of March 1, 2022-February 28, 2023.

Medical Case Management (MCM) had the highest number of clients served. (1,532)

The remaining priorities listed in order of number of clients served by priority, (high to low), are as follows:

- Medical Transportation Services (327)
- Emergency Financial Assistance (302)
- Oral Health Care Services (267)
- Mental Health Services (252)
- Medical Nutrition Therapy (154)
- Other Professional Services-Legal (128)
- Early Intervention Services (31)*
- Outpatient Ambulatory Health Services (26)
- ADAP (2)

*Early Intervention Services (EIS) is no longer a funded priority. Funding for this priority ended in April 2023, based upon recommendations of the RFP process.

Note: The figures that are represented are unduplicated clients by priority and should not be added together to get an unduplicated count for the region.

Gender:

EPI data shows 70.4% of PWH as Males as compared to those served by Ryan White Part A at 60.14%. 38.70% PWH in the EMA are women served as compared to those served by Part A at 29.6%. Although there was no EPI data for Transgender MtF, FtM, or additional gender identity, RW data showed 32 (MtF); 2 (FtM), and (1) additional gender identity.

Race/Ethnicity:

Categories were: White, not-Hispanic, Black not-Hispanic, Hispanic. Asian/Pacific Islander, American Indian/Alaska Native, Multi-race, and Unknown.

- The EPI data percentage of White, not- Hispanic PWH in the EMA was almost double that of the White PWH served by Part A; (36.6% vs. 18.38%, respectively).
- RW data percentage for Black not-Hispanic served by Part A was about 6.8% higher than that of the EPI data percentage (41.17% vs, 34.3%, respectively).
- The RW percentage was also higher for Hispanic compared to the EPI (38.04% vs. 24.4%)
- Asian/Pacific Islander EPI percentage was almost double that of those served by RW, (3.1% vs. 1.48%)
- American Indian/Alaska Native was less than 1% for both data sources.
- There was less than a .5% difference between EPI and RW data for More than one race (1.2% vs .79%)
- The Unknown category has (2) for both data sources.

A breakdown of the priorities included the number of clients, Units of Service, Planned/Allocated funds and what was spent, in addition to the following sections:

- Gender (Male, female, Trans MtF, FtM)
- Race/ethnicity (Black/African American, Hispanic, White, more than one race)
- Age group (13-24, 25-44, 45-64, 65+)
- Risk factors include hemophilia, heterosexual. IDU, MSM, MSM and IDU, Perinatal, other, and not specified.

The age group (45-64) had the largest usage for all the priorities noted on the PowerPoint. It should be noted that 0% doesn't necessarily mean that there were no clients for that category, but rather that the numbers were too small to register a full percent. There was not always a difference between allocated and spent funds for some services, but when there was, the amounts were not overly significant (with a range of \$84 to \$5,803)

A copy of this data presentation was emailed to the Planning Council membership.

VI. 2024 Member Training Needs Assessment

Our planning body is responsible for training members in their roles and responsibilities. Presenters can be brought in to keep members aware of changes in the HIV Continuum. A member training needs assessment survey was sent to Council members to help with deciding future Council topics and training. Members were asked to rank topics on a scale of 0-4 as to their importance, list training topics they would like to present, suggest trainers, and to share any comments or suggestions to help plan the training. Ms. Partap suggested contacting Ms. Karen Timour to speak to the Council regarding ADAP and any changes and trends that are occurring. The results of this needs assessment will be shared with the Council.

VII. Public Comment

There was no public comment.

VIII. Other Business/ Announcements

Mr. Thomas reminded the Council that Thursday's Child is an EFA provider that can assist with food cards and utilities. Although rental assistance is limited, it is viewed case-by-case, and some help may be available.

Ms. Beal informed the committee that FY2023 ends at the end of February. Providers are asked to be mindful of expenditures as that date approaches. As per an email that was received from HRSA, the new fiscal year will start with a partial award.

IX. Adjournment

Ms. Ragsdale made a motion, which was seconded by Ms. Ponce-Rivera to adjourn the January 17, 2024, Planning Council meeting. All in favor-Motion carried.