

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

**July 10, 2024**

**10am – 12pm**

**Meeting ID: 836 7601 9713**

**Passcode: 440174**

**MINUTES**

**MEMBERS PRESENT**

Kerry Thomas, Chair  
Nancy Duncan, Vice-Chair  
Susan Baldrige  
Eileen Bryant  
Pam Biafora  
Arthur Brown  
James Colson  
Clara Crawford  
Margret Henry  
Cathy Martens  
Maria Mezzatesta  
Victoria Osk, Esq.  
Anuolu Oyadiran  
Angie Partap  
Joseph Pirone  
Jacqueline Ponce-Rivera  
Sofia Porres  
Denise Ragsdale  
Stephen Sebor

**MEMBERS ABSENT**

Wendy Abt  
Tyrone Banister  
Carmen Feliciano  
Irina Gelman, DPM  
Lance Marrow  
Colin Pearsall  
Scott Petersen  
Gregson Pigott, MD  
Edward Soto  
June Tappan  
John Van

**GUESTS**

Avis Giddiens  
Martine Michel-Toure  
Hope Sender

**UWLI STAFF**

Georgette Beal  
Myra Alston  
JoAnn Henn  
Katie Ramirez

**COUNTY STAFF**

**I. Welcome, Moment of Silence, & Welcome**

Mr. Thomas, Chair, began the meeting at 10:15 am and welcomed everyone. New Planning Council members, Pam Biafora, Arthur Brown, and Clara Crawford were introduced and acknowledged. This Council meeting was a hybrid model, with five members attending by Zoom. There were two proxy votes. Introductions were made, then Mr. Thomas requested a moment of silence to remember all those whom we have lost, those living with HIV, and still others struggling with health problems and stigma.

**II. May 8, 2024 Minutes**

Ms. Martens made a motion to accept the meeting minutes as read. Mr. Brown seconded the motion.  
14 Approved                      5 Abstained                      0 Opposed

**III. Committee Reports**

Ms. Duncan reported on the **Executive Committee** which met on Monday, July 8, 2024. The Planning Council agenda was approved which including a Special Population discussion of *The Newly Arrived and Implications for Ryan White- Experiences from Part A MCM Programs*.

The grant was successfully closed out on May 29<sup>th</sup> and all reports were submitted by the deadline. A carryover request was submitted on June 29<sup>th</sup> for \$10,300.

The Ryan White Conference is scheduled for August 20-23. The Quality Manager and Data Manager will be attending on behalf of Part A administration. Ms. Partap will be representing the Planning Council. Two applications will be voted on at the July Council meeting, if approved both terms will begin October 1, 2024. The Planning Council brochure will be shared with provider agencies and consumers to engage new Council members. A suggestion was made to create a flyer with a QR code to the brochure.

Ms. Bryant reported on the **Consumer Involvement Committee (CIC)** which met on Friday, June 14, 2024. There was a presentation by some of the Long Island HIV Stops with Me Campaign spokesmodels which included promotional ads from the campaign, its importance and their own personal stories. The remainder of the meeting was devoted to continued planning for *Eating Well while Living with HIV* conference that is being sponsored by the CIC Committee in collaboration with the CQM Committee. The event will focus on nutrition, budget-friendly healthy meals, exercise and will provide a list of available resources. An ad-hoc planning committee will be formed to assist in the event planning.

The Strategic Assessment & Planning Committee is scheduled to meet on Wednesday, July 17, 2024, The meeting will begin with a data review session and conclude with setting and ranking priorities for FY 25-26.

Mr. Pirone reported on the **Clinical Quality Management (COM) committee** which met Thursday, June 27, 2024. This committee is responsible for conducting an assessment of the Administrative Mechanism, which involves assessing the efficiency of the process used by Nassau County and UWLI to rapidly allocate funds to areas of greatest need. There are two surveys, one for Planning Council members, the other for funded providers. The questions for the survey were reviewed and updated. The Survey Monkey link will be sent July 9<sup>th</sup> with a completed deadline of July 23<sup>rd</sup>. An update on the Medical Nutrition Therapy (MNT) CQI project was also presented.

The **Membership Sub-committee** approved four candidates, including a second term applicant to be balloted at the May Planning Council meeting. Membership demographics were included in the committee reports. There was a vote on two Planning Council members. One first term, filling an anticipated vacancy from a member cycling of their second term at the end of September and a second term nomination. A link will be sent to those attending by Zoom to vote on the candidates. The required documentation will then be sent to the respective counties for appointment, effective October 1, 2024.

#### **IV. Overview of the PSRA Process**

Ms. Beal presented a short overview of the annual Priority Setting and Resource Allocation (PSRA) process, which will be a review for some, new information for others.

Priority Setting and Resource Allocation is the process of deciding which HIV/AIDS services are the most important in providing a comprehensive system of care for all PLWH in the EMA. It is a legislative requirement that the Planning Council shall establish priorities for the allocation of funds within the eligible area, including how best to meet each such priority and additional factors that a Recipient (Nassau County) should consider in allocating funds under a grant. The PSRAS is the Planning Council's most important role; the Council is the decision maker about the use of RWHAP Part A program funds for direct service and is approximately 85% of the total grant award.

PSRA decision decisions greatly influence the system of care and includes:

- What services are available to PLWH in the EMA or TGA.  
Long Island is an Eligible Metropolitan Area (EMA).

- Accessibility to those services-where those services are provided, striving for parity so that both counties provide access to these services.
- Capacity of funded providers to meet the needs of specific PLWH subpopulations-and address HIV-related health disparities. HRSA is keen on identifying new and emerging trends
- Service models used
- Service retention
- Clinical outcomes like viral suppression.

A flow chart was shown to better illustrate the PSRA roles of the Recipient (Nassau County) and the Planning Council and roles related to procurement, monitoring and quality. PSRA is a data-driven and is conducted by two committees. The SAP committee selects and ranks the priorities, the Finance sub-committee, the majority of which are consumers, makes recommendations for allocating resources. The SAP committee reviews these allocations, and the results are presented to the Planning Council for a vote. The PSRA results will be used to respond to the FY25-27 Part A Competing Continuation Application that is due on October 1, 2024.

#### **V. Special Populations Discussion: The Newly Arrived and Implications for Ryan White-Experiences from Part A MCM Programs**

Ms. Michel-Toure, Administrator of Client and Medical Case Management Services at NUMC, spoke to the Council about the increase of newly arrived individuals needing services and the challenges staff are facing to meet these needs. In the last year, the number of clients increased by 8%, From January-April 2024, there have been 27 new diagnoses, nineteen of whom were identified as recent immigrants with the following breakdown: Salvadorean (7); Haitian (7); Dominican Republic (5); and Peruvian (2). Seventy percent of new patients were newly diagnosed.

The majority of the new arrivals are presenting with serious trauma. Trauma is defined as an event, series of events or series of circumstances that are experienced by an individual as physical, emotional, harmful, and or life-threatening and have lasting adverse effects on an individual's physical, mental social, and spiritual well-being. Trauma can include extreme poverty, violence, often gang-related, either as a victim or a witness, physical and sexual abuse. Others are seeking political asylum, not wanting to or unable to return home to their country. Once arrived, they are reluctant to disclose due to fear, retaliation, and not being accepted by their family. This vulnerable population has been subject to housing and social security scams. The challenge is to get them access to much-needed services and services.

Ms. Mezzatesta, Regional Manager for Genesis/MAT programs at Sun River Health, shared the experiences of her staff. Similarly, since January, her agency has had an influx of new patients, half of whom are new arrivals from El Salvador, Ecuador, Haiti, Dominican Republic, as well as Eastern Europeans from the Ukraine and Russia. There are two Haitian-speaking staff at Sun River Health. All new patients are tested during intake. New patients often present themselves as newly diagnosed, when they are not. It would be better to know this information beforehand, as it would streamline the intake process and save some steps. Ms. Mezzatesta acknowledged that disclosure is a trust issue. Many are reticent about sharing status and needs; fearful of family rejecting them and possible retribution. Younger women are being sponsored by older men, which raises concern about potential sex trafficking. Wyandanch has the largest cluster, which has a significant number of sponsors. Sponsors should never be asked to be translators as their intentions may be less than honorable. Ms. Porres reminded the Council that sex-trafficking has been occurring for many years. Sadly, it is not a new occurrence. Increased reporting has made more people aware of the problem. Another challenge is there is not always follow-up and not all clients are here year-round, which also skews retention numbers and can affect funding.

What are some solutions in response to the challenges being faced? Offer trauma informed care trainings which change the focus from *What's wrong with you?* to *What happened to you?* Collaboration is key. Sharing resources with other agencies by creating a directory that has a list of available resources to undocumented individuals that can be added to and shared. It's important that everyone is on the same page and aware of available resources. ADAP will help with HIV medications, NYS Emergency Medicaid is not the best program but will cover ER services but not medications.

Ms. Michel-Toure also created a new training/workshop, *Treating Your Haitian Patient*, with emphasis on Haitian history and culture. It also discusses why this population is not open to sharing and seeking mental health services. To protect a client, it was suggested using a code word or alias when calling, especially if living with family, also asking a question such as *Do you know where I am calling from?* helps to confirm you are talking to the client and not a family member or friend who is aware of the client's birthday and other personal information. Collaboration and cooperation are key to meeting these challenges.

**VI. Public Comment**

There was no public comment.

**VII. Other Business/ Announcements**

- Thursday's Child next CAB meeting is Thursday, July 11 from 12pm-2pm.
- There is a Positive Space workshop on Friday, July 19 12pm-2pm at Sun River Health, Patchogue location. Although geared to 50+, all are welcome.
- Ms. Porres announced that Genevieve Dawble retired as Women's Care Coordinator, at the end of May. Carmen Sanchez is the new coordinator. The phone number has remained the same.
- The deadline for completion of the Consumer Survey has been extended to Friday July 19, 2024.
- Please coordinate with Ms. Ramirez if you have any surveys.

**VIII. Adjournment**

Ms. Mezzatesta made a motion, which was seconded by Ms. Bryant, to adjourn the July 10, 2024, Planning Council meeting. All in favor-Motion carried.