

**NASSAU-SUFFOLK HIV HEALTH SERVICES PLANNING COUNCIL
UNITED WAY OF LONG ISLAND, DEER PARK, NY
July 13, 2022
10am – 12pm**

MINUTES

MEMBERS PRESENT

Traci Shelton, Chair
Felix Ruiz, Vice-Chair
Ilvan Arroyo
Hector Alcalá
Susan Baldrige
Arthur Brown
Eileen Bryant
Nancy Duncan
Juli Grey-Owens
Cathy Martens
Johnny Mora
Angie Partap
Colin Pearsall
Scott Petersen
Jacqueline Ponce-Rivera
Claire Simon
Katelin Thomas
Kerry Thomas

UWLI STAFF

Georgette Beal
Myra Alston
Nancy O’Keefe
JoAnn Henn

MEMBERS ABSENT

Tania Chiu
Nashon Clark
Clara Crawford
Lawrence Eisenstein, MD
Victoria Osk, Esq.
Gregson Pigott, MD
Denise Ragsdale
Erik Rios
Edward Soto
June Tappan
John Van

GUESTS

James Colson
George Marzen
Joseph Pirone
Patricia Ross
Kareem Strong

COUNTY STAFF(absent)

Nina Sculco, NCDOH
Tavora Buchman, NCDOG

I. Welcome and Goodbye

Ms. Shelton, Chair began the meeting at 10:06 am and welcomed everyone. Ms. Henn read the names of the attendees.

Ms. Katelin Thomas, from Stony Brook SPARC is retiring at the end of July. This is her last Planning Council meeting. Ms. Shelton thanked Ms. Thomas for her dedication and patience and all she has contributed.

Ms. Beal praised Ms. Thomas for being a super team player and for training the new generation, acknowledging that they have big shoes to fill. Memories were shared, sentiments of thanks and congratulations echoed. We wish Ms. Thomas well as she begins this next chapter of her life; she will be sorely missed. Ms. Thomas thanked everyone and introduced Ms. Sofia Porres, who will be assuming the Part D Coordinator position at Stony Brook as well as sitting on the Planning Council.

II. Moment of Silence

Ms. Shelton requested a moment of silence to remember why we are here, to remember those living with HIV/AIDS, those who are suffering with COVID as well as those in Ukraine; keep the whole world in our thoughts.

III. Public Comment on Agenda Items Only

There was no public comment.

IV. Approval of May 11, 2022 Minutes

Ms. Thomas noted a missing word in the meeting minutes which was corrected. She then made a motion to accept the minutes as corrected, a motion that was seconded by Mr. Alcalá

15 approved 2 abstentions 0 Opposed -Motion Carried

IV. Administrative Update

HRSA Site Visit recap

Ms. Beal reported that HRSA scheduled a virtual monitoring visit during the week of June 27-July 1, 2022. These comprehensive visits are scheduled every approximately every five years. Our last one was held in 2017. The 2022 visit concentrated on the areas of admin, fiscal and CQM. Not too much time was spent on Planning Council, although there were questions about its budget. Planning Council is responsible for deciding which needs assessments will be conducted.

A presentation was requested to learn more about us and how we operate. This was shown on the first day, during the entrance conference. Both Ms. Shelton and Mr. Ruiz were in attendance at this meeting, Meetings were also scheduled with consumers, the executive committee, Dr. Eisenstein and two funded providers. HRSA randomly chose these providers. The providers were surprised at how tough some of the questioning was. There were some technical glitches with links and logging in for the consumer and Executive Committee meetings. The meeting invites were generated by HRSA and UWLI staff was not present at these meetings.

Minimal feedback was received on the consumer and Executive Committee meetings. However, one thing that was mentioned is that consumers don't know how to access services after hours; who to call and how to get access to care when the office is closed. HRSA wants us to avoid over utilization of ERs and recommended that we remind MCM providers to include this information in their P & P. This information is also in UWLI's Policies and Procedures to ensure agencies have such processes in place. The Executive Committee shared that many questions were about the PSRA process and agreed that HRSA was impressed with the collaboration across the board.

Overall, UWLI and Nassau County were pleased with the results of the HRSA virtual site visit. Staff was commended for the strength of the program as well as fiscally. We were one of the few that efficiently and successfully properly utilized all COVID funds. Although a grueling process at times, there were not too many recommendations, acknowledging that there is always room for improvement. Those recommendations included the timeliness of the contracting process and some contracting language. The HRSA site visit report and corrective action plan is expected with 45 days with 30 days to respond and follow-up.

Planning CHATT-Recruitment and Retention

There is a (HRSA) Health Resources & Services Health Administration requirement of 33% unaligned consumer membership on the Planning Council. Unaligned means that a Council member neither works for nor sits on the board of a RW Part A funded agency. At times it has been a challenge to maintain that

percentage as a result of consumers entering the workforce, moving out of the region, or cycling off their second Planning Council term.

PC staff and leadership participated in a learning collaborative by HRSA on consumer recruitment and engagement. There were six sessions of the learning collaborative, culminating in a final homework assignment. Various regions shared their challenges, strategies, and successes so that we could learn from each other. With the identified goals of increasing unaligned consumer membership to comply with the HRSA requirement, as well as keeping the current membership engaged and maintaining reflectiveness, (which includes unaligned membership), a PowerPoint presentation was given at the last session of the learning collaborative. This presentation was shared with the Council.

To summarize, the key activities implemented to accomplish these goals were:

- Contact previous unaligned consumers to encourage them to join the Council. Many have expressed interest and one new Planning Council application has already been received.
- Outreach via a recruitment letter sent to providers
- Include updated information about the Planning Council on the website and in the weekly grant mailings.
- Create and implement a mentoring program
- Explore social media options as a way to share information about the Planning Council.

This presentation also cited successes and challenges:

- Current members have committed to a second three year term.
- There has been increased attendance; consequently there has been more interest. The convenience of virtual meeting may have been the cause of this increase.
- Since not all are English speaking, language continues to be a challenge as our meetings are conducted entirely in English.

V. Committee Reports:

In the interest of time, the committee reports, which were sent prior to the meeting were not read.

VI. Defining Sex, Gender, and Love...and a Trip to Montauk

Ms. Grey-Owens gave a presentation with the following goals:

- Provide proper terminology and concepts used to define gender in order to better connect with transgender, gender non-binary and intersex people.
- Explain the categories and characteristics that describe every human's sex, gender, how we express our gender, and who we love.
- Provide ways your organization can become welcoming & inclusive.

She stressed that importance of asking questions. If anything was unclear, she encouraged those present to ask for clarification and not to fear asking improper or embarrassing questions.

Ms. Grey-Owens spoke about self-identifying. People have the right to define their gender and sexual orientation. This includes creating, defining, and using new labels that provide a sense of self and a concise way to express their identity. It is important to ask a person how they identify before placing labels on that that you think might fit. Definitions and concepts continue to evolve. Presentation slides explained cisgender, transgender, gender conforming, gender non-binary, and gender dysphoria.. Not everyone's gender identity matches their biological sex.

An illustration of the Genderbread Person with the areas of identity, attractions, expression, and sex was included in the presentation. The continuum of the Genderbread Person eliminates boxes and defines

categories with continuous lines made up of an infinite number of points. Health care issues and concerns of the Trans community were also discussed.

Ms. Grey-Owens effectively used a Trip to Montauk as a gender transition metaphor. There are many stops along the way as person transition. This presentation will be made available. Ms. Grey-Owens was thanked for her informative presentation

VII. Overview of the PSRA Process

Even though the Ryan White Part A grant is now multi-year, the requirement for an annual PSRA Process (Priority Setting and Resource Allocation) remains. Ms. Henn provided an overview of the process. The Planning Council's most important role is as decision-maker for the use of RWHAP Part A program funds which is approximately 85% of total grant award. PSRA decisions greatly influence the system of care. The topics covered in the presentation include:

- PSRA definition and legislative language.
- Roles and responsibilities.
- List of Core and Support services

PSRA process begins with SAP committee reviewing data and ranking the priorities.

Priorities for service categories are based on:

- The size & demographics of the epidemic
- Needs of persons not in care
- Disparities in access & services, priorities of the HIV/AIDS community
- Coordination with HIV prevention & substance abuse treatment/prevention programs, and
- Compliance with core/support services percentages (75/25)

Priorities should be set without regard to the availability of funds (RWHAP Part A or other funds)

Rankings are then sent to the Finance Committee for resource allocation, which is the process of determining how much RWHAP Part A program funding will be allocated to each service category.

Resource allocations components include:

- Current clients receiving Ryan White Part A or MAI services
- The expected number of new clients based on the EMA's Epidemiological Profile
- Estimated number needing but not receiving services and the additional cost to serve these clients.

Resource Allocation percentages are developed and approved by the Planning Council based on the total grant request.

The PSRA process is a system made up of many checks & balances. It is important to have all these steps in place to in order to ensure that the funding decisions are correctly made to benefit the entire Long Island region. Regional service needs are prioritized and funded based on evidenced based data that is as up to date as possible and involves lengthy discussions and feedback from committee members and public.

PSRA meeting dates were provided. Consumers were encouraged to get involved and participate in the process.

VIII. Announcements/Adjournment

- There is a SPARC Consortium/Steering Council meeting on Tuesday, July 26 at 10am-12pm at Project Safety Net in Patchogue. Although this is the first in-person meeting since COVID, there is still the option to participate virtually, via Zoom. A meeting with agencies interested in using SPARC transportation services will begin at 12:15pm. If you are interested in attending please contact Ms. Thomas.

- Ms. Simon informed the Council that an open call for ETE abstracts is due Friday, July 16
- A few tickets are available for the Long Island Ducks and BBQ event on Sunday, July 24 at 3pm. Contact Mr. Thomas, if interested.

In her last act as a Planning Council member, Ms. Thomas made a motion which was seconded by Ms. Bryant to adjourn the May 13, 2022 Planning Council meeting. All in favor-motion carried.