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

November 9, 2022 10am – 12pm

MINUTES

MEMBERS F	PRESENT
------------------	---------

Traci Shelton, Chair Kerry Thomas, Vice-Chair

Ilvan Arroyo Susan Baldridge Eileen Bryant James Colson

Nancy Duncan
Carmen Feliciano
Irina Gelman, MD
Cathy Martens
Johnny Mora
Victoria Osk, Esq
Angie Partap

Gregson Pigott, MD Jacqueline Ponce-Rivera

Colin Pearsall Sofia Porres Erik Rios Claire Simon

Scott Petersen

Edward Soto

UWLI STAFF

Georgette Beal

Myra Alston Nancy O'Keefe

Katie Ramirez JoAnn Henn

MEMBERS ABSENT

Wendy Abt Hector Alcala Nashon Clark Denise Ragsdale June Tappan John Van

GUESTS

Tyrone Banister John Fuller Karen Hagos Joe Kelly Joseph Pirone

COUNTY STAFF

Nina Sculco, NCDOH

Tavora Buchman, PhD, NCDOH

I. Welcome, Moment of Silence, & Welcome

Ms. Shelton, Chair, began the meeting at 10:10am and welcomed everyone. She acknowledged new Vice-Chair, Kerry Thomas. New Council Members, Sofia Porres, Wendy Abt, and James Colson were welcomed; Ms. Partap and Ms. Ragsdale were acknowledged for their appointment to a second term on the Council. She requested a moment of silence to remember those who are sick and suffering, struggling with COVID, HIV and everything else that is going on.

Mr. Thomas thanked everyone for having him on board as the new Vice-Chair. He stated that the Council does such an important job and acknowledged all the work that is done. He added that it is an honor to be a part of this group and is looking forward to continuing to work with everyone.

II. Public Comment on Agenda Items Only

There was no public comment.

III. Approval of September 14, 2022 Minutes

Ms. Martens made a motion to accept the minutes as read and Mr. Thomas seconded the motion. 14 approved 5 abstentions 0 Opposed - Motion Carried

IV. Committee Reports

Ms. Shelton reported on the November 7, 2022 Executive Committee meeting. During this meeting, the committee reviewed and approved the agenda for the November 9, 2022 Planning Council meeting. The EMA's Non-Competing Continuation Application was submitted on October 3, 2022. All sub-recipient site visits have been scheduled through February 2023. One site visit has already been completed. The 2022 Ryan White Part A RFP (Request for Proposal) was released on Friday and is available on United Way's website. The deadline for submission is January 13, 2023 by 5:00pm. Membership was also discussed during this meeting.

Ms. Martens reported on the Consumer Involvement Committee meeting, which took place on Friday, October 17, 2022. There was a presentation on COVID, HIV, and the Flu that covered the symptoms, risks and available treatment. During this meeting, the committee also discussed the theme and format for this year's Annual World AIDS Day observance. The event will be held virtually on Friday, December 3, 2022 from 7-8:30. The Zoom meeting will open at 6:30 for networking and conversations. A save the date flyer will be sent out shortly.

Mr. Arroyo reported on the SAP committee. The Strategic Assessment and Planning Committee met on Wednesday, November 2, 2022. Members were informed that an HIV System Assessment that was created several years ago is in the process of being updated. As part of the process the committee was asked to participate in a SWOT Analysis of N-S EMA's HIV System of Care, to identify strengths, weakness, opportunities, and threats in the areas of Planning, Clients, Services, Funding and Quality. Also on the agenda was a brief update on the Integrated Plan and a discussion about filling the SAP Co-chair position upon Mr. Arroyo's retirement.

Ms. Partap reported on CQM committee, which met on Thursday, October 27, 2022. Members reviewed survey questions for the annual Administrative Mechanism Assessment. This involves assessing the efficiency of the process used by the Recipient(Nassau County) and the Technical Support Agency (United Way of Long Island) to rapidly allocate funds to areas of greatest need in terms of timeliness and efficiency in carrying out or overseeing the contracting process, including the requests for proposals (RFP) process, awarding grants/contracts to providers, and disbursement of funds. If the administrative mechanism is not working well, the Planning Council is responsible for making formal recommendations to the CEO of the EMA. There were separate survey questions for funded providers and for Council members. A link will be sent out to complete the surveys. The meeting concluded with presentations on Performance Measures, CQM Annual Work Plan Update for the 2nd Quarter and a brief presentation on viral load suppression data that has been stratified for Part A. Ms. Angie Partap has assumed the position of CQM Co-Chair.

The Membership Sub-committee met after the CQM meeting on October 27, 2022. New applications were reviewed and approved for balloting. A Survey Monkey link will be sent to Council members for voting.

IV. Integrated Plan Update and Concurrence Vote

Ms. Claire Simon, Ms. Karen Hagos, and Mr. John Fuller, from the AIDS Institute presented on the updated NYS Integrated Plan in preparation for a Council vote on Concurrence. UWLI staff and community co-chairs participated in statewide coordinating groups at meetings throughout the year to develop the Plan and provided regular updates to the Planning Council.

The Plan was made available to the public and was posted for a two-week public comment period. Feedback was heard and incorporated into the Plan. The NYS HIV Integrated Prevention and Care Plan for 2022-2026 is the second iteration of a five-year plan and guidance that was developed by HRSA and the CDC. It builds upon the initial version by allowing each jurisdiction to develop new goals and objectives that align public and private sectors to leverage strengths from the last five years to address local health inequities that may remain. Each jurisdiction needed to create a plan to address four goals:

- Prevent new HIV infections
- Improve HIV-related health outcomes for people with HIV
- Reduce HIV -related disparities and health inequities
- Achieve integrated coordinated efforts that address the HIV epidemic among all partners and stakeholders.

Input has been received from over 1,000 stakeholders including government agencies, consumers, service providers, community leaders, advocacy groups, and research entities. The partnerships and collaboration have been essential to the development of this Plan.

Building on ETE Beyond 2020, beginning in the summer of 2019 and throughout 2020, the AIDS Institute facilitated 23 listening sessions and an online survey for feedback and input to identify outstanding needs and areas of focus for ETE efforts. The findings are outlined in the ETE Beyond 2020 Addendum Report with which the Integrated Plan is aligned.

NYS has recommitted to the Ending the Epidemic efforts through 2024, with outcome results measuring ETE progress reported by December 2025.

The Ending the HIV Epidemic (EHE) Initiative was funded in February 2019 with aims to reduce new HIV infections by 75% in five years. By 90% in ten years. Its four pillars are:

- <u>Diagnose-</u>all people with HIV as early as possible
- Treat-people with HIV rapidly and effectively to reach sustained viral suppression
- <u>Prevent-</u> new HIV transmissions by using proven interventions including PrEP and Syringe Services Programs (SSPs)
- Respond- quickly to potential HIV outbreaks and get needed prevention and treatment services to people who need them

The NYS HIV Integrated Prevention and Care Plan for 2022-2026 is aligned with EHE, ETE, and Addendum report. This document is 100 pages. An outline of the Integrated Plan's Table of Contents was presented:

- 1. Executive Summary
- 2. Community Engagement/Description of Jurisdictional Planning Processes
- 3. Contributing Data Sets and Assessments
- 4. Situational Analysis Overview
- 5. 2022-2026 Goals
- 6. Planning, Implementing, Monitoring, Follow-up
- 7. Letters of Concurrence

What is concurrence? Concurrence is an acknowledgment that the planning body has reviewed the NYS Prevention and Care Plan submission to CDC and HRSA to verify that it describes how programmatic activities and resources are being allocated to the most disproportionately affected populations and geographic areas with high rates of HIV. Members of the HIV Planning Coordinating groups convene 6x a year to review progress and ensure that the jurisdictional planning processes are well coordinated and responsive to statewide needs and priorities.

There were no questions. A motion was requested that the Planning Council concurs that the Plan submission fulfills the requirements put forth by the CDC's Notice of Funding Opportunity for Integrated surveillance and prevention programs for health departments and Ryan White HIV/AIDS program legislation and program guidance. Ms. Shelton made the motion, which was seconded by Ms. Martens. All Planning Council members present voted to approve. We have concurrence.

Ms. Beal took this opportunity to thank all involved for the work they did it getting this accomplished. She thanked Ms. Simon for her efforts to ensure that Long Island was represented and the needs of the region were addressed. While the needs may be similar to other jurisdictions, it was important that Long Island was not lost in the process. Although this is a government requirement for the Part A region, Ms. Beal expressed appreciation for the opportunity to coordinate with New York State and NYC to achieve our goals.

Next step is to have the Letter of Concurrence signed by Planning Council chairs in time for the December 9, 2022 submission date.

V. Ryan White Part A Update

Ms. Alston presented the Nassau-Suffolk EMA Ryan White Update (Part A and MAI) by Priority for 2021-2022. She began with a three-year comparison (2019-2021) of ADAP. There is a monthly ADAP report for the long Island region. Data included:

- 2021 total number of clients served by priority
 - Medical Case Management (MCM) had the highest number of clients.
- 2021 Service utilization by priority
 - MCM and Medical Transportation were the top utilized services.
- All served in 2021 by gender
 - Male (1,790); Female (1194); Transgender MtF, (34); Numbers not available for FtM
- All served in 2021, by Race/Ethnicity
 - The largest percentage served was Black, African-American at 1,236, followed by Hispanic (1,111); and White (592)
- Type of insurance
 - Medicaid followed by Medicare were the most used type of insurance
- <u>2021 Ryan White all served by risk factor with the following percentages</u> Heterosexual (55.95%); MSM (30.84%); IDU (7.15%); Perinatal (2.19%): Transfusion (1.72%); MSM and IDU (1.09%); Not specified (.76%); Hemophilia (.30%)

There was also a comparison of EPI data vs. RW data, by gender and race/ethnicity. This data was further broken down by Gender, Race/Ethnicity, Risk Group, and Age Group for each funded priority. Included on that slide were the number of clients served, units of service, planned/allocated and actually spent funds. The presentation ended with a HIV risk factor comparison of 2021 with 2022, with little change or fluctuation; MSM and IDU both increased by only 1%. This presentation gave a good overview of the region's Ryan White Part A data.

Announcements/Adjournment

Ms. Martens took this opportunity to acknowledge United Way for 25 years of outstanding work in the HIV community. She thanked the UWLI staff for all they do.

Ms. Shelton informed the Council that there are many employment opportunities available at Options, encouraging them to check out its website for more information and share the information with those who may interested.

Mr. Pearsall reminded the Council about Options' housing application. This information is included in the weekly grant mailing.

Ms. Duncan spoke about the National Aging and Advocacy Network. It is a national program for consumers who are 55+ and new members are welcome. She included her contact information for those who are interested, want an application or may have questions. She and Ms. Martens are co-chairs of the membership committee.

Mr. Soto from Sun River Health informed the Council that all of the locations have HIV Navigation Services with integrated care that includes PrEP, HIV and HepC testing, and substance use. Sun River Health is a one-stop agency that can test, treat, evaluate and link individuals to care. His contact information was provided.

Mr. Arroyo commented on 30 years of service in the field of HIV, stating that his retirement is bittersweet. However, it is time. He stated that being a part of the Planning Council, to connect with all of us who share a common bond and make a difference was important. He reflected on the progress made during that time. He is most proud of the Peer Certification program, noting the impact of consumers, especially long-term survivors. Ms. Baldridge thanked him, saying that she is happy and grateful to announce that she is now a Certified Peer, adding that Mr. Arroyo is ending on a good note; she is starting on a good note. The Council extended expressions of thanks, congratulations, and good wishes to Mr. Arroyo. He will miss us and we will miss him.

Mr. Arroyo, in his last act as Planning Council member, made a motion to adjourn the November 9, 2022 Planning Council meeting. Ms. Martens seconded the motion. All in favor. Motion carried.