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

March 10, 2021 10am – 12pm

MINUTES

MEMBERS PRESENT

Felix Ruiz, Chair

Traci Shelton, Vice-Chair

Ilvan Arroyo

Lisa Benz-Scot, PhD

Arthur Brown Nashon Clark

William Doepper

Lawrence Eisenstein, MD

Juli Grey-Owens

Kevin McHugh

Teresa Maestre

Victoria Osk, Esq.

Colin Pearsall

Scott Petersen

Joseph Pirone

Jacqueline Ponce-Rivera

Anthony Santella, DrPH

Claire Simon

Katelin Thomas

James Colson

Angie Partap

Clara Crawford

Johnny Mora

Gregson Pigott, MD

MEMBERS ABSENT

Denise Ragsdale

John Van Tania Chiu

Cathy Martens

Erik Rios

Rafael Rivera

June Tappan

GUESTS

Alison Karppi Town of

Brookhaven

Bijan Mossadeghi, MD (Stony Brook Resident)

Kerry Thomas

Dr. Tarika James

UWLI STAFF

Georgette Beal

Nancy O'Keefe

Myra Alston

Katie Ramirez

COUNTY STAFF

Nina Sculco

I. Welcome and Moment of Silence

Mr. Ruiz, Chair, called the meeting to order at 10:07 am. He welcomed everyone and acknowledged new UWLI staff member, Nancy O'Keefe. There was a moment of silence to remember those we have lost to HIV and those who are still struggling.

New members/guests were introduced/introduced themselves and an announcement was made that today is National Women's and Girls HIV/AIDS Awareness Day (March 10th).

Ms. Maestre shared with us that much of the focus of International Women's Day (March 8th) originates from the tragic fire at a garment factory in NYC (in which over 140 women perished).

II. Public Comment on Agenda Items Only

There were no comments on the agenda.

III. Approval of January 13, 2021 Minutes

Mr. Doepper asked that we correct the SAP meeting date to 2021. Ms. Crawford was moved to the present column after she stated later in the meeting that she was present. Ms. Shelton made a motion to accept the minutes with the correction. The motion was seconded by Ms. Thomas.

15 Approved 1 Abstention 0 Opposed - Motion Carried

IV. COVID Vaccinations for PLWH: What You Need to Know

Dr. Tarika James, Chief Medical Officer at LIFQHC, began her presentation with some background information about the LIFQHC's centers and services. The LIFQHC is well connected with HIV wellness.

Facts:

- 29.1 million people have been infected with the coronavirus in the US. Of the 29.1 million, 421,052 are healthcare workers, of which 1391 have died.
- Black people make up 14.4% of all COVID-related deaths; a total of 42,000 and are 1.6 times more likely to die from COVIC-19 than their white counterparts.
- 92.1 million vaccines given across US and 5.42 million in NY State 5.42 (as of 3/8/2021);
 Approximately 10% of US population vaccinated.

Vaccines:

- Three vaccines Pfizer/Biontech, Moderna, Johnson & Johnson/Janssen; Pfizer requires deep freezing, Moderna can be refrigerated, J&J can last 3 months in a refrigerator
 - Pfizer and Moderna are mRNA vaccines
- Side Effects
 - Pfizer pain at injection site, tiredness, headache, muscle pain, chills, joint pain and fever.
 - Moderna same as Pfizer with the addition of: swollen lymph nodes in the same arm as the injection, nausea and vomiting
 - O Johnson & Johnson pain at injection site, tiredness, headache, muscle pain, joint pain and fever.

Side effects are more prevalent with the second dose, usually last two days, and are a result of the body's production of antibodies after the first dose.

Science:

 mRNA vaccines make antibodies against the spike proteins found on the coronavirus – mRNA is not new technology

Clinical Trials: (for J&J vaccine)

• Included a wide-range of people from different ethnicities, genders and age

Eligibility:

• There are vaccination phases. Phase 1a and 1b included health care workers and essential workers. The eligibility is changing frequently now and people interested should check the NYS and County websites for more information.

Pros and Cons:

- Pros:
 - once you're immunized you are (mostly) protected from getting infected; variants are being studied.
 - good safety profile
 - o herd immunity (will help protect children who are not eligible for vaccination)
- Cons:
 - o side effects, anaphylaxis (.63% of population)

Hesitancy:

- Reasons:
 - o deep-rooted historic distrust of the healthcare system (Dr. James said the trials have been racially and ethnically diverse and as a result, this may diminish)
 - o the speed of development and the lack of longitudinal studies
 - o the belief that the vaccine will make you sick with COVID-19 virus;
 - o once you've had the virus, you don't need the vaccine.

Vaccines and Masks:

• Are masks still necessary after vaccination – Yes. The CDC recently provided guidelines when individuals can go without masks.

Vaccine Resources:

How to get the vaccine – some sites are run by the State, some by the county and some by pharmacies and they may have different eligibility criteria – most restrictions have been eased. Pre-register in your priority group.

Dr. James provided resources for locating vaccination sites (see attached PowerPoint Presentation)

Questions and Answer Session:

Dr. James and Dr. Eisenstein answered some questions regarding gender differences in vaccination side effects.

Q: Are there contraindications for people taking HAART to getting vaccinated?

A: People with HIV were included in the trials and there are no contraindications.

Q: Are there contraindications to getting some screening tests soon after getting vaccinated?

A: There are some findings regarding inflammation or swollen lymph nodes near the injection site after COVID vaccination. There may be a need to postpone some tests (i.e. mammograms). Check with your physician.

Dr. Eisenstein discussed NCDOH rollout of vaccines.

He also discussed the J&J vaccine and the idea that it is "less effective." J&J was 100% in preventing hospitalization deaths. The vaccine was tested later in the pandemic and in South Africa where there is a variant. Regardless of the vaccine, get vaccinated.

Dr. Pigott agreed with Dr. Eisenstein and shared vaccination sites and how allocations work (who is eligible dictated by the State). Suffolk is expanding to seven days in Brentwood.

Q: Can we mandate the vaccine for people working with vulnerable populations?

A: We cannot mandate the COVID vaccine because it was approved under emergency use authorization.

Q: How are we addressing Latinx individuals who have low vaccination rates? Are there strategies? A: Dr. Pigott, is using targeted outreach through relationships he has in communities in need. Messengers need to talk about distrust and work through it. Dr. Pigott reached out to partners who work with Latinx folks and had good success getting people to vaccination sites. Dr. Benz-Scott offered Spanish-speaking social work and public health students to help with the vaccination efforts.

V. HOPWA Update:

Ms. Allison Karppi provided an update on HOPWA. The Town of Brookhaven in conjunction with UWLI did a needs survey (and public hearings). Housing and transportation are greatest needs. HOPWA will focus on these. They are recommending housing with congregate areas based on a model that Town of Islip has for senior housing. There will be six individual studio apartments. Dr. Santella asked what the request is to the Planning Council. Ms. Karppi responded that she is just asking for feedback, ideas, to include in annual plan. Ms. Grey-Owens asked if gender has any impact on placement. Ms. Karppi responded that it does not. Ms. Maestre asked about undocumented individuals. Ms. Karppi said that the not-for-profits will decide who gets housing. Mr. Doepper asked about a new building that was discussed last year. Property was purchased in Coram and the United Veterans Beacon House will operate the building. It's in the permitting phase. Mr. Doepper asked what the best way is to contact HOPWA. Alison Karppi — 631.451.6596. akarppi@brookhavenny.gov. Ms. Beal shared with Alison that UWLI does annual community forums and that HOPWA should consider attending since housing is often a topic of conversation.

VI. Committee Reports:

Ms. Shelton reported on the **Executive Committee** which had a conference call on Thursday, March 4, 2021. The region has received a partial award and the full award should be out in the next 2 months. The FY20-21 contract ends on February 28, 2021. Providers have until March 30, 2021 to submit final vouchers. All comprehensive site visits have been completed.

The Integrated Plan was temporarily put on hold due to the pandemic and will now be due at the end of 2022. Guidance will be sent regarding updating of Integrated Plans by July 2021. Guidance for the revised Unmet Need framework will be included with the Grant application. Starting in 2022 the Ryan White Part A grant will be a multi-year grant. Timelines regarding Inter-Governmental Agreement (IGA) and Technical Support Agency (TSA) agreements will be discussed in the summer, with Request for Proposals (RFP) issued in late fall to align with the new multi-year award.

Ms. Nancy O'Keefe, formerly of Planned Parenthood has joined the Planning and Grants Management Department as Contract Administrator/Quality Manager. Plans continue for the virtual open house, tentatively scheduled for the week of April 12th. One Planning Council application was reviewed and approved for balloting at the March Planning Council meeting.

Ms. Partap reported on the **SAP Committee** which met on Wednesday, March 3, 2021. Discussion of 2021 community forums focused on a review of previous community forum questions for clarity, relevance and brevity. This year, the community forums will be held virtually, with one in each county and one conducted solely in Spanish. In addition to the question review, logistics, the role of facilitators, confidentiality concerns, and incentives were discussed. A provider survey will also be conducted this year as part of the PSRA process. The next meeting of the Strategic Assessment and Planning Committee is scheduled for May5, 2021.

Mr. McHugh reported on the **CIC** which held its first meeting of the new year on Friday, February 12, 2021. During this meeting the committee reviewed its work plan, which included development of an outreach plan for increasing PLWH on the Planning Council, timeframe and importance of the PSRA process, and a beginning discussion of regional events such as National HIV Testing Day and World AIDS Day. The next meeting of the Consumer Involvement Committee is scheduled for April 9, 2021.

Mr. Pirone reported on the **CQM Committee** which met on Thursday, February 25, 2021 to review of the CQM workplan which includes objectives, activities, lead, staff/resources and timeframes. It is important to maintain a CQM plan for the purpose of driving and guiding the formal assessment and evaluation of the quality of services provided in the Nassau-Suffolk EMA. Service standards need to maintained and monitored, performance measures for all Part A funded priorities also need to be monitored based upon HAB/HRSA performance measures and best practices. In addition, Continuous Quality Improvement (CQI) Initiatives need to be developed and implemented system wide throughout the EMA.

Mr. Pirone also reported on the **Membership Sub-Committee** which continues discussing the virtual open house tentatively scheduled for the middle of April. One Planning Council application was reviewed and will be voted on by Planning Council members.

Current Planning Council Demographics as of March 10, 2021

Black, non-Hispanic= 26% Male= 52%
White, non-Hispanic= 39% Female= 45%
Hispanic= 29% Transgender= 3%

Asian=6% Consumers= 42% total; 35% unaligned

Native American = 0%

We will vote on the new member through a survey monkey ballot sent from Ms. Henn.

VII. <u>Public Comments</u>

Mr. Arroyo thought Dr. James' presentation on COVID was really good and recommended that we have COVID updates at future meetings.

Ms. Maestre reported that HCC staff are back in the office full time.

Mr. Doepper asked Ms. Maestre how HCC is serving clients who may not have access to technology or have limited funds. Ms. Beal explained programs received COVID funds that helped clients purchase tablets, phones, prepaid calling cards, etc. to ensure continued access to care and services.

Dr. Santella stated that Ms. Karppi presented similar information in the past without a proposal and this is not the first time we have asked for a written document with a concrete proposal. She asked that there be a request from the committee to have our group participate in the needs assessment process that Ms. Karppi referenced.

VIII. Adjournment

Mr. McHugh made a motion, which was seconded by Mr. Doepper to adjourn the March 10, 2021 Planning Council meeting.

All in favor, motion carried.