

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

**May 12, 2021
10am – 12pm**

MINUTES

MEMBERS PRESENT

Felix Ruiz, Chair
Traci Shelton, Vice-Chair
Ilvan Arroyo
Lisa Benz-Scot, PhD
Tania Chiu
Nashon Clark
James Colson
William Doepper
Lawrence Eisenstein, MD
Juli Grey-Owens
Kevin McHugh
Teresa Maestre
Cathy Martens
Johnny Mora
Victoria Osk, Esq.
Colin Pearsall
Scott Petersen
Gregson Pigott, MD
Joseph Pirone
Denise Ragsdale
Erik Rios
Rafael Rivera
Anthony Santella, DrPH
Claire Simon
June Tappan
Katelin Thomas

MEMBERS ABSENT

Arthur Brown
Clara Crawford
Angie Partap
Jacqueline Ponce-Rivera
John Van

GUESTS

Lorraine Baum
Ernest Burke
Eileen Bryant
Tara Conlon
Ernesto Hernandez
Brian Hewson
Halim Kaygisiz
George Marzen
Melissa Shikora
Kerry Thomas
Crissy Witzke
Gio Giampietro

UWLI STAFF

Georgette Beal
Nancy O’Keefe
Myra Alston
Katie Ramirez
JoAnn Henn

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 requested a moment of silence to remember those whom we have lost to HIV and those who are still struggling. As well as those affected by COVID 19.

II. Public Comment on Agenda Items Only

There were no public comments on the agenda.

III. Approval of March 10, 2021 Minutes

Ms. Shelton made a motion to accept the minutes with the correction.
The motion was seconded by Mr. Doepepr.

19 Approved 6 Abstentions 0 Opposed - Motion Carried

IV. Committee Reports:

Ms. Shelton reported on the Executive Committee Zoom meeting that was held on Tuesday, May 4, 2021. The Planning Council agenda was reviewed and includes a presentation on Youth and HIV/Awareness. The EMA received its full FY21-22 grant award in the amount of \$5,428, 868, a slight increase of approximately \$118,793 over our FY20-21 base award (without carryover). Our grant application received a score of 99 out of 100. Additional funding was allocated to mental health and other professional services. A small amount was reallocated from medical transportation to Emergency Financial Assistance (EFA) as was approved by the Planning Council.

With a new way to calculate unmet need framework, the challenge is to match Ryan White data with state surveillance data. The PSRA timeline has been moved back, since the data needed for the PSRA process will not be available by June. The grant application is usually released in July with an October deadline so there should be enough time with the change in schedule.

Ms. Victoria Osk was congratulated on her new position as Executive Director of of Nassau-Suffolk Law Services

Mr. Ruiz reported on the SAP Committee which met on Wednesday, May 5, 2021. The Provider Survey was reviewed for relevance and clarity in preparation for the PSRA process. This survey is administered every 2 years. The revised Provider Survey will be completed on Survey Monkey by Part A funded agencies. Three virtual community forums are being scheduled with one in each county and one conducted entirely in Spanish. Current co-chairs terms will end at the end of September.

Mr. Doepper reported on the CIC which met on Friday, April 9, 2021. During this meeting, the CIC workplan was reviewed, updated and approved. One of the outreach goals of the work plan is to review and/or create flyers and brochures to share with CABs and support groups. The Planning Council brochure was reviewed. Suggestions and recommendations were made.

Mr. Pirone reported on the COM which met on Thursday, April 22, 2021 to review the HIV QM Module results regarding viral load suppression and care plan trends for the last two quarters. Other quarters will be added, to the comparison table to better help identify trends. The committee was provided with an overview of updates to the region’s Service Standards. This update included what should be addressed in the service standards as well as the general standards for all services. Current co-chair terms will end in September of this year.

Membership

Membership is currently at 32 members. Three Planning Council members whose first terms are ending at the end of September, have agreed to continue a second term. Membership sub-committee approved to have them balloted by Planning Council via Survey Monkey.

Current Planning Council Demographics as of May 12, 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%

V.COVID Vaccine Presentation

Dr. Pigott, Suffolk County Health Commissioner presented on the COVID vaccine, specifically vaccine hesitancy. His approach was to speak on where we were a few months ago, where we are now, and to break down complicated scientific information into ways people can understand.

The first COVID case in Suffolk County was on Sunday, March 8, 2020, a Greenport resident, who hadn't traveled contracted the virus. The first COVID case reported in Nassau County was a few days earlier. Hospitals began to admit more patients with COVID. The peak was April 10, 2020, when 1,658 people were hospitalized in 11 hospitals due to COVID. Drastic measures were taken, schools were closed, businesses and agencies deemed non-essential were shut down. People were working remotely, if at all.

During the summer months, from June until September, the positivity rate was at or below 1%. In fall of 2020, as the weather cooled, people had more social gatherings indoors. The virus is more likely to spread indoors, in a crowded environment, rather than in the open spaces of the outdoors. An increase in positivity rates began around Halloween and subsequent holidays resulted in a significant spike in the number of COVID cases with a 12.8% positivity rate at the end of December. A COVID vaccine became available at the end of December 2020, with the Pfizer vaccine, followed by the Moderna vaccine a few weeks later.

Comparing 2021 with 2020, peaks were not as high, and the number of hospitalizations and reported cases declined. During the second week of January, there was a reported 863 COVID-related hospitalizations in Suffolk County. Two thirds, or 70% of those hospitalized were 65 years or older (January) as compared to 45% in March of 2021. In May 2021, there was a positivity rate of 1.1% as compared to a rate of 4.5% in April. Data shows that the vaccine is working, and having an impact.

The initial decrease of COVID cases in 2020 could be attributed to the economy being shut down, social distancing, and other restrictions. In 2021, although not fully open, there were less restrictions and the economy was not shut down to the same degree as in 2020. The vaccines are proving to be effective in keeping people out of hospital, reducing the number of COVID-related death, and decreasing the positivity rate.

The speed at which a vaccine was available was of concern to some. Could it truly be effective since it created so quickly? Dr. Pigott addressed this concern by reminding us that much effort and funds were extended through research and engaging the entire scientific community to find the solution, a vaccine for the virus. This was accomplished by analyzing the strengths and weaknesses of the virus. The COVID virus was new, it spread quickly often without warning, sometimes without symptoms. 580,000 people have died in the United States from COVID; 3400 in Suffolk County. But the virus had a weakness, it had spikes. The hypothesis was that if the human body and its immune system could identify those outward spikes as foreign, an immune response could be created to combat and neutralize the virus. The hypothesis proved to be correct.

Currently 50% of Suffolk County residents have been vaccinated. However 70-75% need to be vaccinated in order to achieve herd immunity, so that the virus cannot spread. Both doses are necessary. It also appears to be successful in combatting the UK variant as well. There were questions regarding vaccinating 12-15 year olds. Although not as susceptible as adults, it is possible for them to transmit the

virus to family members. The vaccine dosage would be the same as adults. Since household spread is prevalent, vaccination and education are important.

The focus is now on addressing vaccine hesitancy, not everyone is getting their second dose. This is being addressed through education and outreach in the community. Mass vaccination sites are showing less of a turnout, consequently, more community sites are offering vaccinations to allow easier access for its residents. Dr. Eisenstein credits intense follow-up to ensure that second doses are administered. Even if the second dose is received later than scheduled, it is better late than never. He also mentioned using vaccine ambassadors to assist with vaccination efforts. The Planning Council members thanked Dr. Pigott and Dr. Eisenstein for the information presented.

As a side note, at 12pm today, to be aired tomorrow, Drs. Pigott and Eisenstein will be on Newsday Live with Joy Brown to discuss vaccine hesitancy. Ms. O'Keefe put the link in the chat box.

VI. Youth and HIV/AIDS Awareness Presentation

In recognition of National Youth HIV/AIDS Awareness Day (April 10), Ms. Tara Conlon and Ms. Melissa Shikora from Stony Brook Medicine presented on the topic. Ms. Conlon addressed the prevention aspect, while Ms. Shikora shared her experiences working with adolescents and youth living with HIV.

Ms. Conlon stressed the importance of having adolescents and young adults be aware of their status, to realize the importance of getting tested and having access to testing. Although campaigns such as Know Your Status and the CDC/s GTY (Get Yourself Tested) exist, many youth and young adults still do not know their status. In New York State, parental permission is not required for testing or medication. However, barriers still exist. Transportation, especially Long Island public transportation is challenging and not everyone has a car. Explanation of Benefits statements and access to on-line portals jeopardize the confidentiality of status and prescribed medications. To address these concerns, community-based rapid testing is available, which is free and does not require going through insurance. Routine testing is held on Stony Brook campus once a week for four hours. It is open to everyone not just Stony Brook students, in the Wellness Center where other services are also offered, Confidentiality is protected and there are no red flags. The test results take about 20 minutes which provides the opportunity to discuss risk reduction, HIV prevention, STI testing, next steps if test is positive, and other resources.

The key is to normalize the testing, to have be part of the annual battery of tests that are taken an annual doctor visits. Dr, Eliscu speaks to medical students and residents about the importance of HIV testing. She and Ms. Conlopn spoke to a private medical practice in Riverhead about the importance of HIV testing for those 13 years or older. Youth and young adults need to be empowered and learn to advocate for their health.

When Ms. Shikora began working with youth and young adults living with HIV, the average age was 10-12 years old who were primarily perinatally infected. They have since transitioned to adult care. The individuals she currently works with are behaviorally infected, under the age of 26, using a collaborative multi-disciplinary approach, the program offers specialized care and is tailored to meet the individual needs of adolescents and young adults. Primary care, pediatric, and pediatric endocrinology are all in the same office. (The latter especially helpful for Trans clients).

It is important to link individuals to the correct program in order to properly asses and address individual needs that differ from those of adults. Extra support at the beginning is vital, Such needs may include access to HIV and medical appointments, accompanying them to those appointments, medicine adherence, mental health and substance use issues, counseling as needed, nutrition resources, link to PEP or PrEP, SPARC, or getting used to a routine, normalize that routine. Some don't have a support system. Stigma, by friends, family and or the community, confidentiality concerns, not wanting to share status,

not wanting to feel different are real and significant barriers for youth and young adults. This program is a needed support for many.

Ms. Shikora explained that she is able to help the newly diagnosed or those lost to care get back to care quickly, often within a 24 hour period. There are many clinic locations throughout Suffolk County with flexible hours, including evenings and some Saturdays. Unfortunately, youth and young adults are often referred to adult care because those who refer clients are unaware this specific program exists.

She ended her presentation by stressing the importance of taking age into consideration when making referrals. Offer a choice. Giving youth and young adults to help and support as they eventually transition to adult care cannot be underrated.

Ms. Conlon added that monthly injectable HIV medication is becoming available. Many feel that taking a daily medication is a constant reminder, causing struggles with medicine adherence. Although there may be challenges with injectable medication, this may be option to address such concerns. The most recent data for youth and young adults showed no new diagnoses for those under 12 years old. 11 diagnoses reported in the 13-19 age range (6%); 23 diagnoses in the 20-24 age range (13%), for a total of almost 20% for new diagnoses under the age of 25.

V. Public Comments/Announcements

There were no public comments or announcements.

VI. Adjournment

Ms. Martens made a motion, which was seconded by Ms. Ragsdale to adjourn the May 12, 2021 Planning Council meeting.

All in favor, motion carried.