

Cuyahoga Regional HIV Prevention and Care Planning Council

Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina Counties

Jason McMinn, Chair



Quality Improvement Committee Minutes

Wednesday, February 15, 2023

3:00 pm to 4:00 pm

Start: 3:01 pm

End: 3:58 pm

Facilitator: J. McMinn

Moment of Reflection

Welcome and Introductions

***Please note:** PC members who have a conflict of interest must inform the committee at the beginning of each meeting. A Conflict of Interest, as it pertains to the Ryan White Planning Council Bylaws, is defined as “an interest (actual or perceived) by a Planning Council member in an action that may result in personal, organizational, or professional gain for the member or his/her spouse, domestic partner, parent, child, or sibling.”-*

Approval of Agenda: February 15, 2023

Addendum:

Motion: F. Ross Seconded: L. Lovett

Vote: In Favor: All Opposed: 0 Abstained: 0

Approval of the Minutes: January 18, 2023

Addendum:

Motion: N. O’Neal Seconded: F. Ross

Vote: In Favor: Opposed: 0 Abstained: C Nicholls

New Business

Psychosocial Service Category Review- J. McMinn

We continue our deep dive into psychosocial services, now that finished the mental health review last month. A power point presentation will now be put together on what we came out of the mental health discussion. For today, the plan is to finish up with psychosocial today and figure the next steps. Also, another item noted for review was support groups. This seems to be an area that provides a lot of help, but the many may not have access to the support meetings, or know they exist. Perhaps this could be a directive on keeping people informed of support groups.

***Comment: N. O’Neal** – Not all area support groups use psychosocial funds, thought to be led by licensed SW’s.

***Response: Z. Levar** – The majority of RW support groups are professionally led, but not necessary, as there is no requirement that a support group under Part A needs to be run by a Medical Case Manager. The four funded under Part A are listed on the website.

***Comment: S. Harris** - We are only RW dollar funding on the jurisdiction for our support groups. Others in areas, not funded from Part A, may also do them. We also discussed organizing a fact sheet that could maybe list the groups by jurisdiction, give explanations on their regular audiences, and that lists the group’s goals and objectives. This could be just a little narrative, providing guidance on what to expect in support groups.

***Comment: K. Dennis** – Currently attend groups at Metro, UH, and St. Augustine w/Sister Susan.

***Comment: N. O’Neal** - No support groups for PLWH who are full daytime workers, navigating a lot, but may be isolated in the sense there are no evening groups.

***Question: J. McMinn** – Appreciate the feedback on considering evening groups. From a clinical perspective, how are support groups presented and using what resources?

***Response: Dr. Gripshover** – We are lucky because we have groups on Wednesdays, and we have social workers and community health workers to link people. Having them everywhere would be good, especially for those would benefit.

***Comment: Z. Levar** – In looking at how to advertise this, like maybe through smaller groups. We must also consider, as PC develops its directives, whether more funding psychosocial support need to be added. This is

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something to consider as we now have another agency who may start a group and will need funding. It is always good to have money available upfront rather than having to reallocate money later.

***Comment: Dr. Gripshover** - Support groups are amazing, but many don't want to try them, though needed. Maybe there are ways to provide psychosocial support using a different method.

***Comment: N. O'Neal** – Many don't go because they don't have positive image of them. Maybe informational group discussions, could help people can bond, attend the info groups, and become a community.

***Comment: S. Harris** - We may have to prime the energy to get it started, and change impressions of support groups, maybe give a success story, a presenter who may give a good perspective that came from that experience.

***Comment: F. Ross** – in Lorain we're trying to do a mentor thing like PC for newly diagnosed, that may be a way to start that process, by a one-on-one support method.

***Comment: S. Harris** – A podcast could be something to discuss.

***Comment: Z. Levar** - Another stakeholder to involve would be community health workers, located in many facilities that offer psychosocial areas, could comfortably show the ropes, introduce, and give lists to them.

***Comment: J. McMinn** - Not just one size fits all, always meet patient's needs.

***Comment: F. Ross** – Have like Teams meetings, option to put name or be anonymous, a virtual aspect to these groups where you don't have to be anonymous.

***Comment: S. Harris** - Consider funding if growing and possible need to increase budget.

***Response: Z. Levar** - From Part A perspective, we do require sign-ins to justify groups are truthful. Maybe guests could visit a couple times anonymously and just state names, as a way to get people in the door.

***Comment: B. Gayheart** - Maybe look at how these groups are structured, when in session, and if something is being left out, as there is currently no standard on how groups are done.

***Response: Z. Levar** - The SOC (standards of care) for psycho support is vague to have freedom to do different things to get people engaged, and maybe discuss things like U=U, RW services, etc., which are local standards.

***Comment B. Gayheart** - Out of all support groups known, only can go to two, so we try to reach people best possible. Problem is only so much can be done in a timeframe, maybe need to structure them differently.

***Response: J. McMinn** - Maybe form in the directives a way of encourage evening support groups.

***Comment: C. Droster** - Maybe put on the current survey we have and get feedback.

***Response: N. O'Neal** - Current survey is good, won't add, but maybe existing groups can pose these questions.

***Comment: Z. Levar** - Also reach out to agencies that have tried eve support groups and get their input.

***Comment: J. McMinn** – Metro doing a patient satisfaction survey, hope to tally in March, and will share feedback.

***Comment: S. Washington** - We do need more support groups, especially for newly diagnosed.

Next Steps – J. McMinn

- Continue bringing ideas for support groups.
- A Power Point will be put together of items discussed to help lead in the final stretch of this category.
- After psychosocial, we will review available services offered to our aging population, and where to go from there.

Standing Business

Updates from Statewide Integrated Plan Activities - None

Agree on QI Committee work activity (if any) to be reported at October 2022 Planning Council Committee Meeting – J. McMinn – We will report today's discussion on psychosocial services.

Determine formal CAREWare Data Request (if any) - None

Parking Lot Items

Review QI Committee Work Plan for Compliance – None

Announcements – *A Farwell Message from our wonderful, long-serving PC Facilitator, Sharron Harris*



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"This is my last meeting with QI, now retiring and looking to take some foreign trips with husband. It has been a pleasure, I've enjoyed the experience, and admired the way Planning Council and the Part A administration worked together so well together. For me, this was never experienced before, and you all should be proud of the relationship, mutual respect, and way you work to get things done in the community. Hopefully, I had a tiny part in helping PC understand its role in RW, as you all have made this very enjoyable for me.

J. McMinn - "You are the 'bee's knees', happy retirement!"

Dr. B. Gripshover - "Thanks for all you've done and Happy Retirement!"

S. Washington – "Thanks for all your help."

Adjournment

Motion: F. Ross Seconded: S. Washington

Attendance

		Jan	Feb	Mar	Apr	May	June PSRA	Aug	Sep	Oct	Nov
	QI Committee										
1	Jason McMinn, Chair	20	20								
	Vacant Co-chair										
2	Barb Gripshover	20	20								
3	Leshia Yarbrough-Franklin	20	0								
4	Jeannie Citerman-Kraeger	20	0								
5	Billy Gayheart	10	10								
6	Karla Ruiz	20	20								
7	David Smith	20	20								
8	Anthony Thomas	0	0								
9	Daytona Harris	20	20								
	Total in Attendance	8	6								

PC Members: K. Dennis, C. Nicholls, C. Droster, D. Houston, L. Lovett, N. O'Neal, F. Ross, S.

Washington, R. Watkins

Attendees: M. Brooks, S. DiCocco

Staff: M. Baker, Z. Levar, C. Perez, A. Cassady, S. Harris, T. Mallory