

Cuyahoga Regional HIV Prevention and Care Planning Council

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

Jason McMinn, Chair



Quality Improvement Committee Minutes

Wednesday, March 15, 2023

3:00 pm to 4:00 pm

Start: 3:15 PM

End:

3:56 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: March 15, 2023

Addendum:

Motion: F. Ross

Seconded: J. Citerman-Kraeger

Vote: In Favor: All

Opposed: 0

Abstained: 0

Approval of the Minutes: February 15, 2023

Addendum:

Motion: F. Ross

Seconded: K. Dennis

Vote: In Favor: All

Opposed: 0

Abstained: 0

New Business

Psychosocial Service Category Review- J. McMinn

We hope to finish the review for psychosocial this month, looking at the first point on support groups to be developed and managed. Also, with evening groups, we want to let people know of them and tell providers that more are welcome, and finds ways to encourage people to try them. That conversation led to developing other support groups more, “out of the box”, which led to educational forums as a way to spark interest to join conversations or build connections to support people in some way.

***Comment: K. Dennis** – Soon will be starting a Women’s Group at AIDS Task Force.

***Comment: M. Baker** – In past, calling support groups a panel discussion made them seem less of a therapy/treatment session and more of a conversation, making them comfortable to share info.

***Response: N. O’Neal** - Good idea, as many think support groups are just to talk on life, sadness, which turn off some who don’t want to show emotions.

***Comment: L. Yarbrough-Franklin** - Would like an educational forum.

***Comment: C. Droster** – We talked about a podcast last meeting, think some are into that.

***Comment: Dr. Gripshover** – They are popular, but would count on younger folks to do this.

***Comment: N. O’Neal** - Also heard of support groups out of the area, online, and other platforms. Maybe groups like that could work, as people could remain anonymous and join them from anywhere. Social interactions is what people crave most, not just a support group to vent.

***Comment: R. Watkins** - UMADAOP (Urban Minority Alcoholism & Drug Abuse Outreach Program) has a radio station to promote advocacy. Will look to invite them and get back with update.

***Comment: J. McMinn** – This is a general calendar and we can re-do and update as we go along.

***Comment: F. Ross** - There is a group every Friday run by Nueva Luz, facilitated by James Stevenson.

***Comment: C. Droster** - Sr. Susan also has meetings last Thursday of every month, 12-1:30 pm, at St. Augustine.

***Comment: F. Ross** - For Mercy, those are not consistent dates, sometimes on Tuesdays or Thursdays.

***Comment: K. Dennis** -Every second Tues, old Task Force, 2829 Euclid, 11:30-1:30, once a month.

***Comment: N. O’Neal** - UH has counselor connections with their clinic, but unsure on grief support.

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- *Comment: Dr. Gripshover** – UH has complicated relationship grief groups, also success with Cornerstone of Hope.
- *Comment: L. Yarbrough-Franklin** - We (ADAHMS board) contract with them as well.
- *Comment: R. Watkins** - Troubling not more grief support groups, maybe keep mindful people still need that.
- *Comment: J. McMinn** - Good points. In some groups, newly diagnosed get full rally of support, as groups know when someone needs more. Maybe look at educational forums on newly-diagnosed, or breakout group, etc.
- *Question: T. Moyel** - For podcast, would guests be visible, as it's an excellent idea?
- *Response: Dr. Gripshover** –The idea is visible to people who design, but could be open for others to just listen.
- *Comment: Z. Levar** – We could try to take on and manage this, as we're in process of getting new website vendor.
- *Comment: J. McMinn** - Now with directives, maybe we can ask recipient to support these items. Would be nice to have a comprehensive forum through recipient website, as these were thoughts on how to put this into directives.
- *Question: M. Baker** - What is meant by promoting this?
- *Response: J. McMinn** – As some are hesitant on issues of mental health, not willing to open, or not believing or buying into them, ways to message and encourage support groups may be to offer more flexible times, provide incentives, change names/phrasing of support groups, and educate community health workers on support groups.
- *Question: T. Moyel** - Can we promote like on Facebook, as 'A Night at a Forum', but educational?
- *Response: R. Watkins** - People may lose anonymity.
- *Comment: C. Droster** – For those afraid to ask for help, maybe consider doing testimonials.
- *Response: J. McMinn** - Under the mental health wheel, there should be support services available for that.
- *Comment: L. Yarbrough-Franklin** – Therapists can give ideas on lowering anxiety and depression w/out meds.
- *Comment: M. Baker** – It's unfortunate, things have gone that way in the therapy field, as meds are what people often come to get, and not the root cause of the issue. Many want quick fixes, so providers do that as first option.
- *Comment: L. Yarbrough-Franklin** – Always up to client, but should only be for severe mental illness diagnoses.
- *Comment: Dr. Gripshover** -We collaborate care where sw does intensive eval then refers if they want meds.
- *Comment: N. O'Neal** - The stigma around this is part of reason why people don't want to come in for MH care. Maybe talk around that should happen as people will always fall in the cracks.
- *Comment: M. Baker** - Getting around the stigma of mental health treatment is not something as first course of action. Barriers are coming down, strides being made, and messages have been out there, but still work to do.
- *Comment: B. Gayheart** -Being of the original group of podcasters, can give info on podcasting. It's easy, inexpensive, and there are all kinds of ways in this. If CCBH wants to do website updates, podcasts can be posted on website, to listen to testimonials, guest speakers, keeping in mind, host/ presenter should have a radio voice.
- *Question: J. McMinn** - Maybe podcasting could be a sub-recipient goal?
- *Response: Z. Levar** – We have to be wise on what Part A puts out, on recipients, subs-recipients, or provider level.
- *Comment: D. Smith** - May being mental health month, maybe promote what other organizations are doing for mental health month to highlight as part of the directive.
- *Comment: Z. Levar** - If podcast was something considered to dive, PC would play an integral role on if they wanted that, as it may exceed capacity. Also, CLC's listening session is a good way to hear what PLWH want to know and how we can meet those needs, which may lead to a podcast.

Takeaways

- K. Dennis** – Soon to start a Women's Group at the old AIDS Task Force building.
- M. Baker** – Referring to support groups as a panel discussion presents them less therapeutic and more of a conversation, where people can comfortably talk and share info.
- J. McMinn** – Ways to message may be to encourage support groups that offer more feasible hours, incentives, changing group names/phrasing, and educating community health workers on support groups.
- C. Droster** – For those afraid to ask for help, maybe consider doing testimonials.
- J. McMinn** – We can look at educational forums, breakout groups for newly-diagnosed, those experiencing anxiety, isolation, and grief issues, as under the mental health wheel, there should be support services available for that.
- L. Yarbrough-Franklin** – Therapists can give ideas on lowering anxiety and depression, without medications, as meds should only be given for severe mental illness diagnoses.

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D. Smith – For May/Mental Health month, promote other agency MH events, and highlight as part of the directive.

C. Droster – We talked about a podcast last meeting, think some are into that.

B. Gayheart –As an original group of podcasters, can give info on podcasting. It's easy, inexpensive, and a variety of ways to do such as, posting podcasts on a website to listen to testimonials, guest speakers, etc.

Z. Levar – If looking to deep dive on podcasts, PC will play an integral role on deciding, as this project may exceed capacity. CLC's listening session is a good way to hear what PLWH want to know, which may also lead to a podcast.

Next Steps – J. McMinn

1. Review things discussed today and email directive ideas, as we will look to vote on directives next month.

2. After finishing psychosocial category, we can look at discussions on services for the aging population.

3. Discuss directives around messaging mental health/psychosocial supports, such as a best practices worksheet.

Standing Business

Agree on QI Committee work activity (if any) to be reported at March 2023 Planning Council Committee Meeting

– **J. McMinn** – To report on today's psychosocial discussion.

Determine formal CAREWare Data Request (if any) - None

Parking Lot Items

Review QI Committee Work Plan for Compliance - Done

Announcements

Z. Levar- As recently suggested by PC member, Peter Scardino, we tapped into resources and just developed a Spanish version of the CLC survey that people can now use.

Adjournment

Motion: F. Ross Seconded: L. Yarbrough-Franklin

Attendance

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

PC Members: K. Dennis, C. Droster, N. O'Neal, F. Ross, R. Watkins

Attendees: T. Moyel

Staff: M. Baker, L. James, Z. Levar, T. Mallory