

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 20, 2024

3:00 pm to 4:00 pm

Start: 3:02 pm

End: 4:01 pm

Facilitator: J. McMinn

Moment of Reflection

Welcome and Introductions

Melissa Hansen, new CCBH Ryan White CQM (Clinical Quality Management) Program Manager, Shayla Clark, Jordan Community Resource Center, Lead Clinician HIV AIDS Initiative and Program Director, and Susan DiCocco, ODH (Ohio Department of Health in for K. Ruiz.

Approval of Agenda: March 20, 2024

Motion: C. Nicholls

Seconded: B. Gayheart

Vote: In Favor: All

Opposed: 0

Abstained: 0

Approval of the Minutes: February 21, 2024

Motion: Dr. Gripshover

Seconded: B. Gayheart

Vote: In Favor: 8

Opposed: 0

Abstained: 1-B. Aguiriano

New Business

Positively Aging Update – J. McMinn

The work that has been done in our committee for the last six months has been around growing older with HIV. We looked at research on government guidance and policies and had two great presentations from DSAS (Department of Senior & Adult Services) and Benjamin Rose on their programs for the aging population. Last, the Statewide Integrated Plan (SIP) is to have an aspect around growing older with HIV and we hope to follow that, as it would be good to have guidance from the state on where to start for involving our TGA.

***Comment: L.J. Sylvia** - In our latest CLC (Community Liaison Committee) survey at the end, we asked the question for PLWH over 55, on if they had specific challenges related to their age and HIV and, if so, to describe them in detail. From that survey, we had 232 responses as a whole, but few answered the challenges question. The thing most noticed, however, was that the population of PLWH is growing and that some of the concerns reflected in this survey, as well as in our CLC listening sessions, also mirror other concerns, like housing, stigma, and provider communication/interaction issues.

***Response: J. McMinn** - We touched or covered most of these items at some point in our discussions.

***Question: N. Pietrocola** - Are providers looking at geriatrician (primary care doctors who have additional specialized training in treating older patients) referrals?

***Response: Dr. Gripshover** - Access to geriatrics is not very easy, though haven't tried referring many, we have been doing primary care. As people get older with multiple issues, this may need investigating.

***Comment: J. McMinn** - Over past decades, most HIV doctors have tried to do most primary care themselves. Now as people age and things get more complex, doctors may need to starting looking to refer to other doctors in helping to provide quality care to patients. We will look into spots for geriatric care, like how they get referrals, are patients coming in for appointments, etc.

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***Comment: K. Shumate** - We need to talk about PLWH aging with our HIV doctors, as a lot of new physicians are coming up through the ranks and need to be updated so things can be better.

***Comment: L.J. Sylvia** – After the directives, we can invite primary care physicians in to present on this.

***Question: C. Droster** - What about life insurance for PLWH?

***Response: J. McMinn** - We will review this with end of life discussions.

Discuss Directives – J. McMinn

Directives are instructions that the Planning Council gives to our Recipient, the Part A Office, on things we see through the year in our deep dives into our service categories. We then come up with ideas, proposals and suggestions and turn them into directives. As chair of Quality Improvement, our committee holds the responsibility of coming up with directives for the Part A program by looking at ways we can improve access, reduce barriers, and provide quality service to our Ryan White customers. Now that we have shared and reviewed our proposed directives that were developed from our discussions on the service category, Positively Aging, we now want to see what we can do as a committee to make a difference in this area. Also, as we confirm our final directives for the upcoming grant year, 2025-26, please keep in mind that directives can have cost implications to our grant budget, which if requiring immediate attention, may not necessarily be approved right away.

Potential 2024 Quality Improvement (QI) Directives

1. RWA (Ryan White Agency) training on Aging - To include detailed presentations from DSAS (Department of Senior and Adult Services) and Benjamin Rose Institute, for all RWA providers.
2. Promote socialization through marketing of senior centers.
3. Training on Advanced Directives, Long-Term Care (LTC) issues, and burial planning.
4. Screening tools – Ad Hoc committee to review/recommend use in RFP (request for proposal)?

***Comment: N. Pietrocola** – It's doable from the DSAS end, and we will provide what you need.

***Comment: L.J. Sylvia** – Maybe the transition to Medicare challenge can be included in the training.

***Response: J. McMinn** c for the first directive, then have the Medicare point added as the third and last directive.

***Comment: M. Baker** - We do have funds to provide training in various capacities, and we can look into the parameters around this. As for consumer training, it would be great to have training with sub-recipients and consumers together.

***Comment: J. McMinn** - We could partner this with CLC for consumers and can also look into senior centers in something to market to them.

***Comment: N. Pietrocola** - We have a list on senior centers that we can provide.

***Comment: J. McMinn** – With a lot of screening tools around, it may be good to work with the Statewide Integrated Plan in this.

***Response Z. Levar** – Also, with screening, there won't be an RFP for FY 25, as this is a three-year cycle.

***Comment: Dr. Gripshover** – In looking to do more, maybe we should ask trainers what needs to be included in trainings to introduce this, before making it mandatory. We need to know if we're missing things, which the screening tool would show.

***Comment: K. Shumate** - We took all the goals in the SIP from the ideas that came up, then combined some things. With that, two elements were created: For PLWH of all ages, there is a storytelling component to give input on experiences and challenges LWH, as the new folks coming up have never witnessed this. For specifically over 50 plus folks, the focus is on providing end of life resources,

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improving quality of life, socialization, and looking at seeing folks in places or locations other than HIV-specific areas, which can't be all things to all people.

***Question: L.J. Sylvia** - Does the housing component include housing referrals?

***Response: K. Shumate**- We will do more homework and get back on this.

Jason – With all in agreement, we will now vote to approve three directives for 2025-26 listed below.

Approved Quality Improvement (QI) Committee Directives for Grant Year 2025-2026

1. RWA (Ryan White Agency) training on Resources for Aging - Include detailed presentations from DSAS (Department of Senior and Adult Services) and Benjamin Rose.
2. Promote socialization through marketing of senior centers, Area Agencies on Aging, and support groups for 60 plus.
3. Training on advance directives, long-term care issues, transition to Medicare, funeral and burial planning.

Motion: To approve the three (3) Quality Improvement (QI) Committee Directives for the 2025-2026 grant year, as written for Strategy & Finance Committee recommendation as our new objectives.

Motion: Dr. B. Gripshover Seconded: C. Droster

Vote in Favor: All Opposed 0 Abstained 0

Motion passes.

Directives Discussion Takeaways

1. Directives are instructions that the Planning Council gives to our Recipient, the Part A Office, on things we see through the year in our deep dives into our service categories. We then come up with ideas, proposals and suggestions and turn them into directives.

2. We looked at research on government guidance and policies, had two great presentations from DSAS (Department of Senior & Adult Services) and Benjamin Rose on their programs for the aging population, and as the Statewide Integrated Plan (SIP) is to have an aspect around growing older with HIV, we hope to follow that guidance from the state on where to start involving our TGA.

3. In forming our directives around Positively Aging, we want to see what we can do as a committee to make a difference in this area, keeping in mind directives can have cost implications to our grant budget, which if requiring immediate attention, may not necessarily be approved right away.

4. The things most noticed in our deep dives was that the population of PLWH is growing, and that concerns reflected in the CLC surveys and listening sessions, mirror other concerns elsewhere, like housing, isolation, stigma, and provider interaction issues.

5. As people age, doctors may need to refer to other doctors in helping to provide quality care to patients, and we will look into spots for geriatric care, on how they get referrals, if patients are coming in for appointments, etc.

6. With screening tools, we should ask trainers how to introduce this in trainings, as we need to know if we're missing things that screening tools would show.



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7. Two new elements of the SIP include: 1. A storytelling component for PLWH of all ages, to give input on experiences and challenges and 2. For PLWH 50 plus, the focus is on providing end of life resources, improving quality of life, socialization, and looking at seeing folks in places or locations other than HIV-specific areas.

Standing Business

Agree on QI Committee work activity (if any) to be reported at March 20, 2024 Full Planning Council Committee Meeting – J. McMinn – We will report today’s discussion on finalizing and approving the QI directives on PLWH aging.

Determine formal CAREWare Data Request (if any) – None

Parking Lot Items – None

Next Steps – J. McMinn

We will follow up with Kate Shumate on State Integrated Plans (SIT) plans, as they relate to QI directives on PLWH aging.

Announcements - None

Adjournment

Motion: L. Lovett Seconded: C. Nicholls

Attendance

		Jan	Feb	Mar	Apr	May	June PSRA	Aug	Sep	Oct	Nov
1	Jason McMinn, Chair	20	20	20							
	Vacant Co-chair										
2	Barb Gripshover	0	20	20							
3	Leshia Yarbrough-Franklin	20	0	0							
4	Karla Ruiz	0	20	20							
5	Lorsonja Moore	20	20	20							
6	Billy Gayheart	10	10	10							
7	Naimah O’Neal	0	10	0							
8	Rhonda Watkins	0	0	0							
9	Biffy Aguiriano	0	0	10							
	Total in Attendance	4	6	6							

PC Members: C. Nicholls, C. Droster, L. Lovett

Attendees: S. Clark, J. Garcia, T. Mahdi, K. Shumate, N. Pietrocola

Staff: M. Hansen, M. Baker, Z. Levar, L.J. Sylvia, T. Mallory