



Cuyahoga Regional HIV Prevention and Care Planning Council

Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina Counties
Kimberlin Dennis, Brian Kimball, Christy Nicholls, Co-Chairs

Full Planning Council Minutes

Wednesday, April 17, 2024

5:30 pm to 7:00 pm

Start: 5:34 pm

End: 6:52 pm

Facilitating Chairperson: K. Dennis

Moment of Reflection

Welcome and Introductions

Approval of Agenda: April 17, 2024

Addendum:

Motion: J. Toombs Seconded: P. Scardino

In Favor: All Opposed: 0 Abstained: 0

Approval of the Minutes: March 20, 2024

Addendum:

Motion: J. Stevenson Seconded: J. McMinn

In Favor: 16 Opposed: 0 Abstained: 3- N. O’Neal, P. Scardino, J. Toombs

Part A Expenditure Report – April 2024 - M. Baker

Priority Ranking	Category	Total Awarded	YTD Spending %	YTD Spending Total	Unduplicated
	Core Services Total	\$3,545,646.00		\$3,042,582.45	
5	Outpatient/Ambulatory Health Services	\$1,259,597.00	87.49%	\$1,102,044.77	2282
6	Medical Case Management	\$1,221,912.00	89.64%	\$1,095,301.66	935
1	Oral Health Care	\$302,252.00	75.34%	\$228,459.78	285
11	Mental Health Services	\$280,500.00	85.30%	\$239,274.94	724
14	Medical Nutrition Therapy	\$79,993.00	86.47%	\$69,166.19	168
8	Early Intervention Services	\$334,310.00	72.46%	\$242,253.11	397
12	Home Health Care Services	\$11,896.00	98.49%	\$11,716.82	31
13	Home/Community Based Health Care	\$54,186.00	100.33%	\$54,365.18	28
	Support Services Total	\$848,090.00		\$827,004.20	
3	Medical Transportation	\$110,170.00	93.61%	\$103,128.22	1212
15	Emergency Financial Assistance	\$5,200.00	34.91%	\$1,815.51	5
7	Non-Medical Case Management Services	\$345,620.00	96.73%	\$334,321.90	1330
9	Psychosocial Support	\$54,000.00	90.44%	\$48,838.67	90
16	Food Bank/Home Delivered Meals	\$88,100.00	96.70%	\$85,194.56	408
4	Other Professional Services	\$245,000.00	103.55%	\$253,705.34	149
	All Totals	\$4,393,736.00	88.07%	\$3,869,586.65	3148

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Part A Recipient Report – M. Baker

Administrative Updates: Provider updates, HRSA reporting, Full/Partial Awards, RSR, etc.

RSR successfully submitted, Sub recipient contracts are Board approved, Compiling data for Annual Progress Report, Compiling data for all fiscal closeout reports, awaiting full award for FY24

Planning Updates: HRSA updates, State Integrated Plan, RFPs, Monitoring, Needs Assessments, etc.

Updated Standards of Care feedback discussion with all sub-recipients

Medical Case Manager Network Updates: Topics discussed, MCM related initiatives, etc.

MCM meeting took place on 4/16, Reviewed the new HIV/STI data dashboard

Training Updates: Trainings held/attended, upcoming provider trainings, upcoming PC trainings, etc.

Recipient office will host Eligibility training on May 1st for sub recipients, Recipient office held Part A Kick-off and sub-recipient provider meeting with all sub recipients on in March

Clinical Quality Management Updates: QI projects, QI meetings, CQM Plan updates, etc.

New CQM Program Manager is becoming familiar with CQM goals for 2024 and is planning to hold a CQM committee meeting May 6th to resume project activities, CQM Program Manager researching relevant training opportunities

Collaborative Updates/Info Share: EHE, Prevention, newsletters, etc.

EHE team hosted quarterly CAG meeting on 4/10; highlighted the Black Maternal Health Summit and Fall 2024 Community Health Program at CSU

FY2023 Part A Funding Update: Current Expenditure split, total expenses, etc. *Green=under, *White=on target, *Red=over

Core: 92.22%, Support: 100.92%, Expenses: 95.51% for 12 months, Target: 100%

Full Award provided \$4,917,218, \$145,087 carryover added, \$5,062,305 new total

YTD Ryan White Expenditure Overview – M. Baker

M. Baker - We are still awaiting one invoice, as we work with many different providers and all fiscal departments vary. However, we should be receiving that one soon. For trends, we see support services in high demand. Also, Other Professional Services, which relate to housing assistance, Food Bank Home-Delivered Meals, Non-Medical Case Management, again housing, are at the very top of the list of things that are concerning to people who receive services from our sub-recipients. Medical Transportation is also a service that is heavily utilized, so when making decisions about our allocations, we want to consider how money has been spent and how services were utilized within the last grant cycle, as that gives an idea of where the needs are and of the higher needs.

***Question: J. Patterson** - What was the lowest overall % expended category, like the ones mostly green.

***Response: M. Baker** – It looks like Emergency Financial Assistance (EFA) was the least expended, but that is ideal for this program. We want to utilize our funds from the top, rather than reaching into EFA funds, as Emergency Financial Assistance for our TGA (Transitional Grant Area) is in reference to prescription medication and eyeglasses.

***Question: L.J. Sylvia** - Also what about Oral Care expenditures and Early Intervention Services (EIS), which are both pretty low at 82% and 83%, respectively?

***Response: M. Baker** – Oral care is always in high demand and need. When looking at why funds in oral care were not used, often it may be that there are extensive procedures that cannot always be funded through RW funds, all the time. There are also times when those procedures start in one year and continue into the next grant year, in which there is a lag-behind element in the use of oral care funds.

***Comment: B. Jones** - At some point, maybe for categories on what we don't fund, it could be made clear on other resources that cover things. This may help people understand and not feel left out because of what may not be payable for RW funds.

***Comment: L.J. Sylvia** – So the idea is we should make sure people know what RW covers, and inform them of resources available.

***Response: N. O'Neal** - That is an undertaking, but can be do-able, as not only does Marketplace and Medicaid have to be looked at across the board, but we also have to look at things individually.



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Medicaid Update – A. Thomas

As the unwinding has now ended, we want to remind all to continue completing renewal packets, soon as possible, so we can better serve and do our part with Medicaid.

***Question: B. Jones** - When people can go on Medicaid and Passport should be made more aware to people.

***Response: C. Nicholls** – We will share our LTC Medicaid brochure with a brief overview of the waivers in the next few days.

Ryan White Part B Update – K. Ruiz (via email)

The PPL portal is still down for reconciliation, once it is over, offers can be submitted again.

J. McMinn – The PPL is the Public Partnership LLC, ODH uses to write their checks. They close it down in April to reconcile, which means checks cannot be written from Part B until everything is reconciled in their books.

HOPWA – T. Greene (via email)

They are still waiting to hear about the grant that they submitted for innovative strategies for HOPWA and they're also coming to an end for their current grant cycle.

Planning Council Business

2024 Forms ** Due Tuesday April 30, 2024 ** - L.J. Sylvia

The annual forms (4) required for all PC members to complete are due by April 30, 2024. They are the Conflict of Interest, PC Code of Conduct, PC Confidentiality, and the Ryan White Ethics Laws Acknowledgement forms. For the online form: https://na4.documents.adobe.com/public/esignWidget?wid=CBFCIBAA3AAABLbIqZhD-cqfDKO7NBgR28KwfJIZ-jRI2T2UFJtLLbEF3aMSy4YdveBN_6UkFD-T7wruPTFw*.

Brief Update on Member Feedback Survey- C. Nicholls

We discussed future meeting schedules and we will report back in May to full PC on final recommendations.

Mini Training: Active Participation in Planning Council – Presented at March 27th MRM Orientation – L.J. Sylvia

This information was presented at the March 27, 2024 MRM Orientation, in looking at ways to have an impact and/or actively participate in Planning Council.

SPHERE OF CONTROL	SPHERE OF CONCERN
<p>To have an impact on Planning Council, focus on what we can control:</p> <ul style="list-style-type: none"> - Show up on time and prepared. - Participate ACTIVELY in Full Planning Council, your Committee of Record, and PSRA. - Learn as much as you can -- about Planning Council, about HIV and people living with HIV, about Ryan White Services. Attend trainings, ask questions and learn. - If you don't understand something, ask! Questions are welcome during meetings. You can also reach out to co-chairs or the facilitator. 	<p>Topics in the sphere of concern are items that we CANNOT influence through Planning Council:</p> <p>We may wish to advocate for or against certain policies, but it is important to remember the role of Planning Council. For example, Federal funding decisions and criminalization laws are important topics that impact people who receive Ryan White services. However, Planning Council is not the avenue to advocate on these topics.</p>

***Comment: M. Deighan** - In recalling the slides, we did this at the MRM in-person orientation meeting.

***Comment: B. Jones** – There are a lot of things you don't have control over. Early on, we were just figure heads at the table, because HRSA said we had to have people living with HIV. Now with other systemic disparities, many still feel we don't have control or an integral voice. All that being said, there is a lot more that we do have control

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over now, depending on where you are on the spectrum. This is about life, dying, and being able to come to the table and understand what is at stake.

***Question: K. Dennis** - How about having influence on how RW dollars are spent?

L.J. Sylvia – Yes, you have influence in that.

***Comment: C. Droster** - We have influence on how dollars are spent that affects PLWH in the community, also in educating people and making sure people have knowledge of HIV.

L.J. Sylvia - All of this is in our control. As members and participants, you have control over how you show up and participate, making sure we are learning of PLWH and their lives, about RW services and other resources, and being willing to ask questions, as the power of a question can shift the direction of a conversation.

***Comment: J. Patterson** – Can control my vote, and also influence, positively or negatively with our conduct at meetings by engaging in ways that would make the meeting more productive.

L.J. Sylvia - Yes, your vote, how you vote, and inviting others to meetings. Who you invite to meetings is a great way to influence. Also making motions. During the meeting, you have the power to make a motion. If you think a committee should discuss something or take a vote on something, you can make a motion. The reason for motions is so that you can influence the meeting, and so the meeting is not a dictatorship with decisions only made by the chair.

***Comment: B. Jones** - PC should not just be at the table but also in the community in our networks.

***Comment: N. O’Neal** – Also, you can influence how you show up. If you’re excited, it may encourage others to be excited, like with the survey, where we encourage folks we knew to fill out forms and offered help if needed.

L.J. Sylvia – Yes, we did personal invitations for the listening sessions, followed up with calls, and some members provided rides for attendees to the in-person session.

***Comment: C. Droster** – We also have the right to influence the medical community and doctors on how we live.

***Comment: Dr. Gripshover** – We have influence to partner with and meet people who share advocacy interests.

L.J. Sylvia – For now, if you're a member of Planning Council and still not sure how to really use your influence or how you can better serve, please reach out and we can discuss this further.

Committee Reports – Two minutes each please.

Consumer Liaison Committee (CLC) – N. O’Neal

L.J. Sylvia - CLC is updating the survey on how to make it ready for next year. We got good feedback on this and will next send it out to medical case managers for their input.

N. O’Neal – Our plans are to do it again over the summer, as we’re trying to recruit people to either get or share tables where we can put information on Ryan White, HIV and AIDS out there, as well.

We also discussed upcoming Cleveland, Lorain, and Ashtabula Pride events, with the hope not just CLC members will show up, but also folks across planning council.

B. Aguiriano – Ashtabula Pride has been moved from Bridge street to Walnut street due to repairs.

Strategy & Finance (S&F) – C. Droster

We got a lot accomplished on priority settings, all the non-funded categories were ranked, as well as the support services. This year we are ahead of schedule, and we will have our first work group for the year, next week to discuss flagging services.

J. Patterson - In “flagging”, we basically try to look at info and data related to different categories. We talk through some of the changes and trends over the last couple years, and then bring the categories we want to “flag”, or mark for further attention, to PSRA meeting in June for discussion on whether to either increase or decrease funding in those areas for the next grant year. In summary: 1. The “flagging” discussion begins next week, April 24th at the work group meeting. 2. Listing the categories that will be “flagged”, will take place on the first Wednesday in May at S&F committee meeting.

Membership, Retention & Marketing (MRM) – B. Gayheart

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We received five (5) new applications, completed two interviews, and will finish with the remaining three this upcoming Friday. We are now looking to see how to review the bylaws and make amendments, beginning in May. L.J. Sylvia - Also, for the pending new and renewal applicants, they will be going before County Council for approval on April 30th, and if any members are interested in supporting them, please notify us.

Quality Improvement (QI) – J. McMinn

We met today, finished our deep dive into aging, and had a great presentation and feedback from the Part A Office on the Standards of Care (SOC) that RW funds for clients receiving services. We will update next steps in May.

HIV Prevention (Prevention)- D. Houston

We enjoyed a presentation on Doxy PEP and PrEP, and got updates on the effectiveness of doxy, in which we will look to do more presentations, specifically with women on Doxy. We were also informed on a past CLAW Corp. (a national leather charity) event, in which we attended and administered tests there.

Public Comments

J. Patterson – Dr. Gripshover gave a great presentation at Bryan’s Town Hall Event.

B. Jones - Thanks to AIDS Funding Collaborative (AFC) for allowing five people to attend the NASIM Conference, the organization for African American LGBTQ men dealing with health disparities. As a result of this, found out yesterday of being awarded at an upcoming black tie gala for the Legacy Award. This is not just a testament to me in receiving the award, but also show that Cleveland does produce and that we do meaningful things, as part of the national agenda in trying to end the HIV and AIDS epidemic. Also, many thanks to Julie and AIDS Funding Collaborative and Dr. Gripshover for being absolutely fabulous at the Town Hall meeting.

Announcements

J. Stevenson - Nueva Luz is doing a Springtime Closet event, this Friday the 19th at 6600 Detroit Ave., from 10am-4 pm. They will have free clothes, accessories, and household items, all funded by the City of Cleveland and the Three Arches Foundation.

N. O’Neal - On May 16th, QI Co-chair and I will be joining a conversation between a patient, a client, and a social worker, in which we will answer questions and give feedback. We encourage folks to attend and participate. This is set for May 16th, around noon to 1:30pm, and a flyer will come out, hopefully before the end of this week.

Adjournment

Motion: J. McMinn **Seconded:** N. O’Neal

Attendance

	Planning Council Members	Jan	Feb	Mar	Apr	May	June PSRA	Aug	Sep	Oct	Nov
1	Kimberlin Dennis – Co-Chair	20	20	20	20						
2	Brian Kimball – Co-Chair	20	20	20	20						
3	Christy Nicholls- Co-Chair	20	20	20	20						
4	Biffy Aguiriano	0	20	20	20						
5	Jeannie Citerman-Kraeger	20	0	0	0						
6	Michael Deighan	20	20	20	20						
7	Clinton Droster	20	20	20	20						
8	Billy Gayheart	20	20	20	20						



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9	Tiffany Greene	20	0	20	0						
10	Barbara Gripshover, MD	20	20	20	20						
11	Deairius Houston	20	20	20	20						
12	Bryan Jones	20	20	20	20						
13	LeAnder Lovett	0	0	0	0						
14	Jason McMinn	20	20	20	20						
15	Lorsonja Moore	20	20	20	20						
16	Naimah O'Neal	0	20	0	20						
17	Julie Patterson	20	20	20	20						
18	Faith Ross	20	20	20	0						
19	Karla Ruiz	20	20	0	0						
20	Peter Scardino	0	0	0	20						
21	James Stevenson	20	20	20	20						
22	Anthony Thomas	20	20	20	20						
23	Joye Toombs	0	20	0	20						
24	Stephanice Washington	20	0	0	0						
25	Rhonda Watkins	0	0	0	0						
26	Leshia Yarbrough-Franklin	20	20	20	20						
	Total in Attendance	21	20	18	19						

PC Attendees: D. Gallee, T. Mahdi, S. Rivera, C. Krueger, A. Rollins, L. Spangler, B. Willis

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