

Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina
Clinton Droster, Julie Patterson – Co-Chairs
Strategy and Finance Committee Minutes
Wednesday, September 4, 2024
2: 00 pm to 3:30 pm

Start: 2:06 pm End: 3:28 pm Facilitator: C. Droster

Moment of Silence

Welcome and Introductions

Approval of Agenda: September 4, 2024

Addendum:

Motion: J. Patterson Seconded: N. O'Neal **Vote:** In Favor: All Opposed: 0 Abstained: 0

Approval of the Minutes: August 7, 2024

Motion: N. O'Neal Seconded: K. Dennis

Vote: In Favor: 5 Opposed: 0 Abstained:1- L. Yarbrough-Franklin

Fiscal Report Review - M. Baker- Part A Program - Cleveland TGA YTD Expenses by Service Category

Priority	Category	Total Awarded	YTD Spending	YTD Spending	Unduplicated	
Ranking			%	Total		
	Core Services Total	\$3,315,898.00		\$773,321.48		
5	Outpatient/Ambulatory Health Services	1,166,577.00	23.63%	275,693.21	1347	
6	Medical Case Management	1,143,044.00	25.14%	287,370.98	738	
1	Oral Health Care	232,811.00	16.36%	38,079.85	186	
11	Mental Health Services	307,953.00	25.87%	79,664.86	318	
14	Medical Nutrition Therapy	66,817.00	6.19%	4,138.50	70	
8	Early Intervention Services	343,225.00	18.17%	62,352.28	202	
12	Home Health Care Services	11,766.00	42.09%	4,952.51	23	
13	Home/Community Based Health Care	43,705.00	48.21%	21,069.29	22	
	Support Services Total	\$816,099.00		\$356,913.69		
3	Medical Transportation	90,771.00	44.29%	40,202.28	787	
15	Emergency Financial Assistance	12,187.00	0.00%	-	2	
7	Non-Medical Case Management Services	373,170.00	39.98%	149,211.48	831	
9	Psychosocial Support	61,774.00	59.94%	37,028.34	70	
16	Food Bank/Home Delivered Meals	82,787.00	35.28%	29,208.89	281	
4	Other Professional Services	195,410.00	51.82%	101,262.70	138	
	All Totals	\$4,131,997.00	27.35%	\$1,130,235.17	2521	

OVERUTILIZED ON TARGET UNDERUTILIZED

Fiscal Report Review September 2024 - M. Baker

This is an overview of the funds up through July on expenditures, which was 27.35%. As we still have several providers that have not submitted invoices, we anticipate more will come in and be processed, well in advance of the next full Planning Council meeting. Also, we are currently looking at coming up with a better way to do invoices, as there are ways to make improvements, overall, which will employ other people to help in that process.

^{*}Question: J. Patterson – Is the YTD info where we are now at half the year, in which there's no need for alarm?

^{*}Response: M. Baker - This is a preliminary view right now.

^{*}Question: B. Gayheart - What is the full award amount?

^{*}Response: M. Baker – It may be five million, not sure, but will get back on the exact amount.



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Carryover Trends/Overview

Below is a review of the trends in Carryover funding over the years. Traditionally the carryover request was due every August, after the close of the previous grant cycle. The August due date allowed Planning council to review final expenditures and gaps (over/under utilized) for the previous grant cycle, and allowed them to make an informed decision about carryover allocation. However, as a recent update, there have been a few changes in which our carryover request normally due in August was, beyond our knowledge or control, moved to June. Additionally, upon the final expenditure review in June, wherein we had not expended our oral health fund that was assigned for the past carryover, our request for new carryover funds was denied for 2025. However, this now allows us to fully expend 100% of the grant without any programmatic issue, in knowing what to anticipate so as to avoid this situation in the future.



<u>FY</u>	Amount Requested	Designated Category
2021	\$144,259	MCM & OAHS
2022	\$142,409	OAHS & Psychosocial
2023	\$145,087	MCM & Other Professional Services (Legal)
2024	\$147,818	Oral Health & Other Professional Services (Legal)

Resolution Moving Forward

In order to avoid this situation in the future, we propose having one additional verification/vote by PC in the June Strategy & Finance meeting in order to confirm categories we want designated for carryover funds, by the June carryover request deadline. This will mean voting on this in November and having a final review/vote in June, for each grant cycle. This will ensure that the vote in November is still relevant according to final expenditures, and will allow time to choose alternative categories if applicable.

^{*}Question: C. Droster - What is FFR?

^{*}Response: M. Baker – It's our fiscal financial report, or somewhat of a close out report.

^{*}Question: C. Droster - How much extra was in dental?

^{*}Response: M. Baker – We will report back on the final expenditures, however, it was not all spent.

^{*}Comment: J. Patterson - This presentation was very helpful and reassuring in knowing that we did not fall short in this process. Just to confirm: 1. Carryover if requested properly, is given at a maximum of five percent (5%), which has for some time been a steady figure. 2. HRSA, unknown to us, moved the deadline to apply for carryover funds.

3. Along with that change, they also created new criteria or requirements for applying for carryover funds.

^{*}Response: M. Baker – As we are only allowed to carryover five (5%) of the total budget, it is not known as to what criteria HRSA used before, whether this is new, but more so what is required now. Overall, this appears to be a timing thing, as we performed our due diligence, and will just continue to move forward in reaching our 100% goal.

^{*}Comment: B. Gayheart - Based on the expenditure report from last meeting, there appears to be a \$700,000 difference, without the carryover.

^{*}Response: M. Baker - This report only shows provider services, not administrative.



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*Response: Z. Levar - Between administrative and quality, a minimum of 85% goes to direct service, the remainder to administrative, then up to five percent goes to clinical quality services. Also, the FFR gives a clearer report, in which if it were not accurate we would not have our award.

*Question: J. Patterson - Do we as a committee need to support the new resolution, or a motion to amend the committee work plan to include this?

*Response: C. Droster: We can do this all next month when we do our PCAT (Planning Council Activities Timeline).
*Comment: M. Baker – We will put together something for voting, if needed.

*Comment: Z. Levar - This carryover scenario has happened in the past. It is just that this time HRSA made the rules on the carryover, changing it from our level to their level, in which we just have to do some shifting in the process to make sure we have our final request ready to submit request in June. Also, as note, our HRSA site visit is set for March, in which we want to make sure everything is in place.

*Question: B. Gayheart - Is there any way to spend that money, as it seems it could still help someone struggling?
*Response: M. Baker – It is high in perspective to the overall grant, however, we are spending most of the funds.
Also, HRSA allows us to carryover, as that is the reason carryover is in place.

*Comment: J. Patterson - We appreciate the work you do, just as it is our job in S&F to be able to understand, see the whole picture, and to do the best job we can.

*Comment: Z. Levar - Agree this was good input in making corrections, as our goal is to make sure all monies are pushed into the community to help PLWH. We are finally getting to a point that we are settling down, having some direction, and can focus on improving fiscal processes so as to provide accurate data.

L.J. Sylvia - We can say we are doing the best we can, and that are still trying to grow. Thanks for all you do, this is a tremendous amount of work.

New/Old Business

Assessment of the Efficiency of the Administrative Mechanism (AEAM) Presentation - L.J. Sylvia, M. Baker

Cuyahoga Regional HIV Prevention and Care Planning Council
ASSESSMENT OF THE ADMINISTRATIVE MECHANISM OVERVIEW - AEAM
Presented to: Strategy & Finance Committee September 4, 202

Data for this presentation is from FY2023.

What is the Assessment of the Efficiency of the Administrative Mechanism and why do we do it?

- The Assessment of the Efficiency of the Administrative Mechanism is an evaluation by the Planning Council of how rapidly Part A funds are allocated to the areas of greatest need within the TGA.
- Planning Councils have a legislative requirement to conduct an annual AEAM.

Legislative Language States:

The Planning Council is required by law to assess the efficiency of the administrative mechanism in rapidly allocating funds to the areas of greatest need within the TGA.

Provide a narrative that describes the results of the Planning Council's assessment in terms of:

- Assessment of Recipient activities to ensure timely allocation/contracting of funds and payments to contractors; and
- If any deficiencies are identified by the Planning Council, what were the deficiencies, what was the Recipient's response, and what is the current status of the Recipient's corrective actions?

Assessment Questions

QI: Part A funds were expended in a timely manner.

Q2: Part A contracts with service providers were signed in a timely manner?

Q3: During FY 2023 the TGA had less than 5% carryover in Part A funds?

Q4: Part A resources were reallocated in a timely manner to ensure the needs of the community are met?

Q5: Part A Programs funded in FY 2022 matched the service categories & percentages identified during the Council's Priority Setting & Resource Allocations Process?



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Answers

Q1. Part A funds were expended in a timely manner, (Net 30)? There was a 37-day average for invoice processing and payments during grant year 2023. (30 in 2022, and 28 in 2021).

Q2: The initial contractual process for FY2023 was completed primarily in March, with amendments created in May upon receipt of full award from HRSA. The budget was subsequently established in June and finalized in July 2023. We completed contract changes due to reallocation with Planning Council's approval during November 2023. The average timeframe was roughly 3-4 weeks once the program staff obtained the signed document to when the contract was approved by the contract review committee or the full board depending on the contract amount.

Q3: Yes, the FY2023 grant had a 5% carryover. The total amount unspent was \$252,362, in which we were eligible to carryover \$145.087.

Q4: The Part A resources were reallocated at two times in FY2023. In November 2023, the main reallocation occurred, where Planning Council approved substantial movement of funds between service categories to address community needs. In February 2024, the Recipient conducts a smaller reallocation at the sub-recipient level, where agencies can move unspent dollars between categories in the final month of the grant year to allow for maximization of spending and needs being met, per the PC Bylaws rapid reallocation process.

Q5: Yes, Planning Council allocations matched disbursed awards by the Recipient. The contract amounts matched the Planning Council percentages approved during the June 2023 resource allocation meeting.

C. Droster – To help in understanding this process, consider this in relation to your personal budget at home, in which you have your bills, electricity, gas, house note, and/or other household and living expenses you have to pay. However, for the Recipient, they're responsible for ensuring the proper allocation of all Ryan White grant funds to each their sub-recipients, for them to be able to provide quality services, 15 different categories, to persons living with HIV in our grant area. As some of the category amounts are set in stone, and others often need adjustments over time, particularly as we get close to the end of the fiscal year, this proves to be a major task, and one that is easier said than done. With that, we appreciate their efforts in providing the AEAM update for this year, and now ask for a motion to approve the 2024 Administrative Mechanism report.

Motion: To approved the 2024 Assessment of the Efficiency of the Administrative Mechanism (AEAM) report presentation for this year, as written.

Motion: J. Patterson Seconded: B. Gayheart

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

Motion passed.

Review of Planning Council Budget - M. Baker

Motion: To table the Planning Council Budget Report for next month.

Motion: J. Patterson Seconded: K. Dennis

Vote: In Favor: All Opposed 0 Abstained: 0

Motion passed.

Standing Business - None

Parking Lot – We will look to review the PCAT for 2025.

Announcements

N. O'Neal - CLC will have their first Listening Session on Wednesday, September 25th, in-person, the next one will be online on October 23rd, and we ask for all to help in spreading the word.

Adjournment:

Motion: K. Dennis Seconded: J. Patterson



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Attendance

		Jan	Feb	Mar	Apr	May	June	Aug	Sep	Oct	Nov
	S & F Members						PSRA				
1	Clinton Droster, Co-chair	20	0	20	20	20	20	20	20		
2	Julie Patterson, Co-chair	20	20	20	20	20	20	20	20		
3	Jeannie Citerman-Kraeger	20	20	0	0	0	20	0	0		
4	Biffy Aguiriano	20	20	20	20	0	20	20	0		
5	Anthony Thomas	0	20	20	0	20	0	20	0		
6	Leshia Yarbrough-Franklin							0	20		
7	Tiffany Greene							20	0		
8	Kimberlin Dennis	10	0	0	10	10	10	10	10		
	Total in Attendance	7	7	6	6	6	6	7	4		

PC Members: B. Gayheart, T. Mahdi, X. Merced, N. O'Neal

Attendees: None

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