Cuyahoga Regional HIV Prevention and Care Planning Council

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

Lorsonja Moore – Chair

Quality Improvement Committee Minutes Wednesday, August 20, 2025

2:30 - 3:30 PM

QI Planning Council Mem	bers	Planning Council Members	Community Attendees	Presenter(s)
1. Lorsonja Moore, Chair		Julie Patterson	Talib Mahdi*	
2. Barb Gripshover, M.D.		Christy Nicholls	Jeannie Citerman-Kraeger	
3. Karla Ruiz			Tony Elmore*	
4. Stephanice Washington			Cielle Brady*	
5. Kimberlin Dennis			Jimmy Garcia	Recipient Staff
6. Billy Gayheart			Michelle Jackson Rollins	Brittanie Evans
7. LeAnder Lovett				Lisa-Jean Sylvia
8. Xiomara Merced				Zach Levar
Total of 16 in attendance	P = Presen	t A = Absent O(Other) = Phon	e * Non-member Volunteer or Pe	nding PC Member
Call to Order	Chair, Lorsonja Moore, called the meeting to order at 2:36 pm.			
Moment of Silence				
Quorum Determination	5 of 8 QI committee members present - quorum of 5 needed.			
Welcome, Introductions	All members, attendees, and guests welcomed, and asked to state names, affiliations, and			
& Conflicts of Interest	conflicts o	of interest in the chat.		
	Conflicted: Talib Mahdi – NLURC; Cielle Brady - UH ; Barb Gripshover - UH ; Xiomara Merced –			
	MetroHealth; Lorsonja Moore – DSAS; Jimmy Garcia - NLURC			
Approval of Agenda	QI Committee reviewed and approved the agenda for August 20, 2025. Motion made by Kimberlin Dennis, seconded by Xiomara Merced			25.
		all; Opposed: 0		
Approval of Minutes	QI Committee reviewed and approved the minutes from May 21, 2025.			
	Motion made by Kimberlin Dennis, seconded by Barb Gripshover			
	In favor: a	all ; Opposed: 0; Abstained: C	hristy Nicholls	
Committee Business		g for a Needs Assessment – L		
	 Why do we need to do a needs assessment? It is a requirement from HRSA – reference the Part A Manual 			
		urpose –		
	1. Learn about PLWH who need services, what services they need, their experience			eed, their experiences
		seeking care, and their barri		
		•	are and the medical and suppor	•
		he annual survey is not comp e part of the needs assessme	rehensive enough to be a need nt.	s assessment, but it can



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- Components epidemiological profile, resource inventory, profile of provider capacity & capability, estimate & assessment of unmet needs, estimate & assessment of PLWH who are unaware of their status, assessment of gaps in service needs
- Best practice is a multi-year approach and the needs assessment is an ongoing process.
- This is a collaboration between the Recipient and the Planning Council. Often, outside consultants are a critical resource.

Zach Levar, CCBH:

- We have never done a needs assessment where Planning Council is the leader in the process. This takes a lot of time and effort to complete.
- We usually leverage State resources to conduct the needs assessment. The last needs assessment ran from 2017 – 2020 and consisted of listening sessions, epi profiles, and different phases. ODH contracted the needs assessment process to Ohio University.
- Link to the previous needs assessment: https://ccbh.net/ryan-white-reports-publication/
- HRSA wants something developed by and run by the Planning Council for the Cleveland TGA.
- We will likely need to hire a contractor, so we will need to plan and budget for that.

Lj:

- As a committee, what do we need to learn so we are ready to collaborate with the Recipient to design and implement a needs assessment?
 - Cielle consider identifying linkage to care coordinators and EIS workers and formalizing a way for patients to answer the needs assessment.
 - Alisha Cassady will join us next month regarding data for our deep dive topic into those PLWH but not receiving Ryan White services.
 - We could break up the list of needs assessment components.
 - Julie This about meeting the HRSA requirements but also how are we going to use the information. What can the Planning Council afford to do in a budget year with an outside contractor? See what other similar sized TGAs are doing.
 - Zach recommend reading previous needs assessment as a starting point.
 The goals of the needs assessment is to reach approximately 200 people, so we don't need to reach all 3,000 people in the Part A program.
 - Xiomara what resources should we be looking at? Lj I would start with the slides from HRSA or the 15-page quick reference. Zach – look at the outcome of the previous needs assessment, but you don't necessarily need to read all 100 pages.
 - Zach next state integrated plan is due to be submitted in June 2026.

Standing Business

a. Agree on QI Committee work activity to be reported at the Full Planning Council committee meeting

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	b. Determine formal CAREWare data request (if any)
Parking Lot Items	None
Next Steps	
Announcements	
Adjournment	Meeting adjourned by Lorsonja Moore at 3:31 PM
	Reminder: Check your Email or the Website for Minutes and Agendas
	Visit the Ryan White HIV/AIDS Homepage at: www.ccbh.net/ryan-white
	Next Meeting: September 17, 2025 2:30 to 3:30 pm