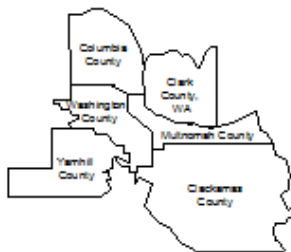




Portland Area HIV Services Planning Council

Advocacy and planning for people affected by HIV in the Portland metro area

Ryan White Program, Part A



Meeting Minutes

Meeting Date: June 5, 2018

Approved by Planning Council: TBD

Grantee: Multnomah County Health Department



MEETING MINUTES

Planning Council

Portland Area HIV Services Planning Council

**June 5, 2018
4:00 pm – 7:30 pm
McCoy Building
426 SW Stark St
Conference Room 10A**

Members Present:	Sara Adkins, Emily Borke, Erin Butler, Katy Byrtus, Tom Cherry (Council Co-Chair/Operations), Carlos Dory (Evaluation Chair/Operations), Maurice Evans, Greg Fowler (Operations), Alison Frye (Council Co-Chair/Operations), Shaun Irelan, Lorne James, Toni Kempner, Jonathan Livingston (Operations), Toni Masters, Julia Lager-Mesulam (Operations), Jeremiah Megowan, Scott Moore, Laura Paz-Whitmore, Robert Noche, Nathan Roberts, Michael Stewart, Michael Thurman (Membership Co-Chair/ Operations), Rosemary Toedtemeier
Leave of Absence:	NA
Members Absent (Excused):	Jace Richard (Membership Co-Chair/ Operations)
Members Absent (Unexcused):	Monica Dunn, Heather Leffler
Staff Present:	Jenny Hampton, Amanda Hurley, Margy Robinson
Others Present:	Jeff Capizzi, Myranda Harris
Recorder:	Jenny Hampton

Tom Cherry, Planning Council Co-Chair, called the meeting to order at 4:00 p.m.

Item:	Candle Lighting Ceremony
Presenter(s):	Margy Robinson
Summary:	Margy led the lighting of the ceremonial candle in recognition of the Planning Council.
Item:	Welcome & Introductions
Presenter(s):	Tom Cherry
Summary:	Tom welcomed everyone to the meeting and introductions were made with Council members declaring any conflicts of interest.
Item:	Announcements
Presenter(s):	All
Summary:	<p>Announcements:</p> <ul style="list-style-type: none"> • CAP SW Washington putting on a series of four events targeting stigma <ul style="list-style-type: none"> ○ 6/27, panelists - general broad conversation about stigma ○ Three more throughout year: <ul style="list-style-type: none"> ▪ U=U, PrEP ▪ Gender, women ▪ Long-term survivors & aging with HIV ○ Sara Adkins will send information to the group • Acknowledging Let's Kick ASS making LTS Awareness Day <p>Announcements from the Grantee (Amanda Hurley):</p> <ul style="list-style-type: none"> • Tonight is Margy Robinson's last meeting <ul style="list-style-type: none"> ○ Group photo before dinner ○ Photo frame - please feel free to sign ○ Thanks to Margy for 18 years of work!

	<ul style="list-style-type: none"> Received Notice of Award (NOA) from HRSA <ul style="list-style-type: none"> Decrease of \$37K in funding Equals around 30K in reduced services Based on previously agreed contingency plans, will impact EIS, Health Insurance (Clark County), Dental (Clark County) Working with providers now to determine new budgets Update on WA state ADAP program <ul style="list-style-type: none"> In WA, providers have to apply to be a vendor Kaiser had not been a vendor We have just received word that Kaiser is now a vendor Residential treatment program update <ul style="list-style-type: none"> We have found a provider who is very interested in using funds to prioritize two beds for RW clients

Item:	Agenda Review and Minutes Approval
Presenter(s):	Tom Cherry
Summary:	<ul style="list-style-type: none"> The agenda was accepted by unanimous consent May 1st meeting minutes <ul style="list-style-type: none"> Q: in expenditures section, outpatient services “not a need any longer” - is this accurate? A: Most have access to insurance or other sources of funds for outpatient services, but not residential The meeting minutes from the May 1st meeting were approved by unanimous consent with this addition: “there are other resources available for outpatient services”

Item:	Ryan White FY17-18 Annual Report
Presenter(s):	Amanda Hurley
Summary:	<p>See slideshow.</p> <p>17-18 Ryan White Year In Review</p> <ul style="list-style-type: none"> See slideshow presentation This presentation was also given at HIV Network meeting and Contractors meeting More detail will be provided at July Retreat <p>Requests for more information:</p> <ul style="list-style-type: none"> Housing status broken down by race Number of people who died Age breakdown of 157 newly diagnosed Instead of point in time, experienced homelessness or unstable housing at any point in year Both enrolled in mental health services and received housing (will be small number of people who received RW funded MH services) Add exact number of Federal Poverty Level <p>Considerations:</p> <ul style="list-style-type: none"> Insurance: not considering CareAssist as insurance for this count Medical engagement: issues with method of how this is calculated (some clients are not considered “in care” even though they are seeing their doctor as recommended by

	<p>doctor, taking meds, doing everything they need to do); we are in conversation about how we can measure this differently</p> <ul style="list-style-type: none"> • Q: is once a year doctor visit and labs standard practice? A: not yet, individualized
--	---

Item:	Carry Over Funding – Allocations Decision
Presenter(s):	Amanda Hurley
Summary:	<p>See handout.</p> <p>Q&A / Comments:</p> <ul style="list-style-type: none"> • Q: What are we doing to ensure that we don't have this same problem (excess carry over funds) next year? <ul style="list-style-type: none"> ○ A: Leftover funds were result of late starts of new programs (i.e. we funded a full year, but program was only spending fully for four months) ○ A: If we don't set up residential treatment contract in very near future, we need to reconsider those funds. We will need to keep close watch on contracting process. • Q: Are we consistently funding categories that are not spending their funds? <ul style="list-style-type: none"> ○ A: Cannot provide complete answer now, but will prepare information for allocations discussion at retreat. • HCS will be requesting \$125K carryover from HRSA • Suggestion: add EIS to carry over funding service categories • Suggestion: add EIS with understanding that HCS staff will review spending / need and offer funds based on need • This is for allocation request; would need another meeting to actually make changes • Suggestion: approve what's there, then change later <ul style="list-style-type: none"> ○ Better to have some funds in categories we think might need it ○ Allocating funds to a category not approved would require a new conversation • We have written into our contracts that if they are not spending at specified level by November, we have ability to move funds <p>Proposal:</p> <ul style="list-style-type: none"> • EIS - \$10K (could be spent Nov-Feb) • Medical care - \$80K • Health Ins - \$4K • MCM - \$31K <p>Proposal approved by unanimous consent</p>

Item:	EISO in Tri-County Area
Presenter(s):	Kim Toevs
Summary:	<p>See slideshow.</p> <p>EISO (Early Intervention Services & Outreach) in Tri-County Area</p> <ul style="list-style-type: none"> • Five years of significant amount of stable funding • Funds are regional – we receive funding as a Multnomah / Washington / Clackamas County region • Two main focuses: <ul style="list-style-type: none"> ○ Linking to care ○ Testing • Linkage - most work will be done by Disease Intervention Specialists <ul style="list-style-type: none"> ○ STD & HIV diagnoses are reported to local (Oregon state) health agency

	<ul style="list-style-type: none"> ○ DIS follow up & get more information ○ Make sure client received treatment, offer HIV test & PrEP (to non-HIV positive STD clients) ○ Partner services (i.e. contact tracing) ● Outreach to communities of color and rural communities ● Part A will still fund Early Intervention (not through County DIS services), and those services can be more intensive (i.e. service provider can go with client to first medical appointment)
--	--

Item:	Vote on Co-Chairs
Presenter(s):	Alison Frye
Summary:	Co-Chair Election: Nominees: Lorne James, Michael Thurman Elected: Lorne James

Item:	Vote on Operations Committee Members
Presenter(s):	Alison Frye
Summary:	Operations Committee Election: <ul style="list-style-type: none"> ● Nominees: Emily Borke, Greg Fowler, Julia Lager-Mesulam, Jer Megowan, Robbie Noche, Jace Richard, Michael Stewart, Michael Thurman ● Elected: Emily Borke, Julia Lager-Mesulam, Jer Megowan, Jace Richard, Michael Thurman, Michael Stewart ● Additional (non-elected) Operations Committee members: Tom Cherry (Co-Chair Emeritus), Jonathan Livingston (Part B Representative), Sara Adkins (Clark County Representative) ● At the first meeting of the new Operations Committee, the group will determine which three (3) elected members will hold a 1-year term, and which three (3) will hold a 2-year term.

Item:	Finalize Priorities & Service Categories, Review Guidance & Amendments
Presenter(s):	Alison Frye
Summary:	<p>The Council brainstormed ideas for new services / guidance, then individuals voted for their favorites (each person was able to vote for three). HCS staff will review the results and research feasibility and cost.</p> <p>Services (number of votes received):</p> <ul style="list-style-type: none"> ● Long-term survivor navigators / retirement housing (5) ● Bus passes / taxis / transportation (4) ● Youth focused education / linkage to care (7) ● Legal services (court support) – specifically for individuals at risk for deportation & for housing issues (7) ● “ACT” slots (intensive MH slots) (15) ● Peer FTE (3) ● Lockers (4) ● Cell phones (2) ● MCM FTE (8) ● MAI FTE (3) ● Doulas (HIV specific)

	<ul style="list-style-type: none">• MH / isolation support for LTS (3) <p>Possible additions to guidance:</p> <ul style="list-style-type: none">• Culturally appropriate treatment services to include all-gender treatment facilities (i.e. for those who are gender non-binary)• Continue to include clean/sober housing options within current guidance
--	---

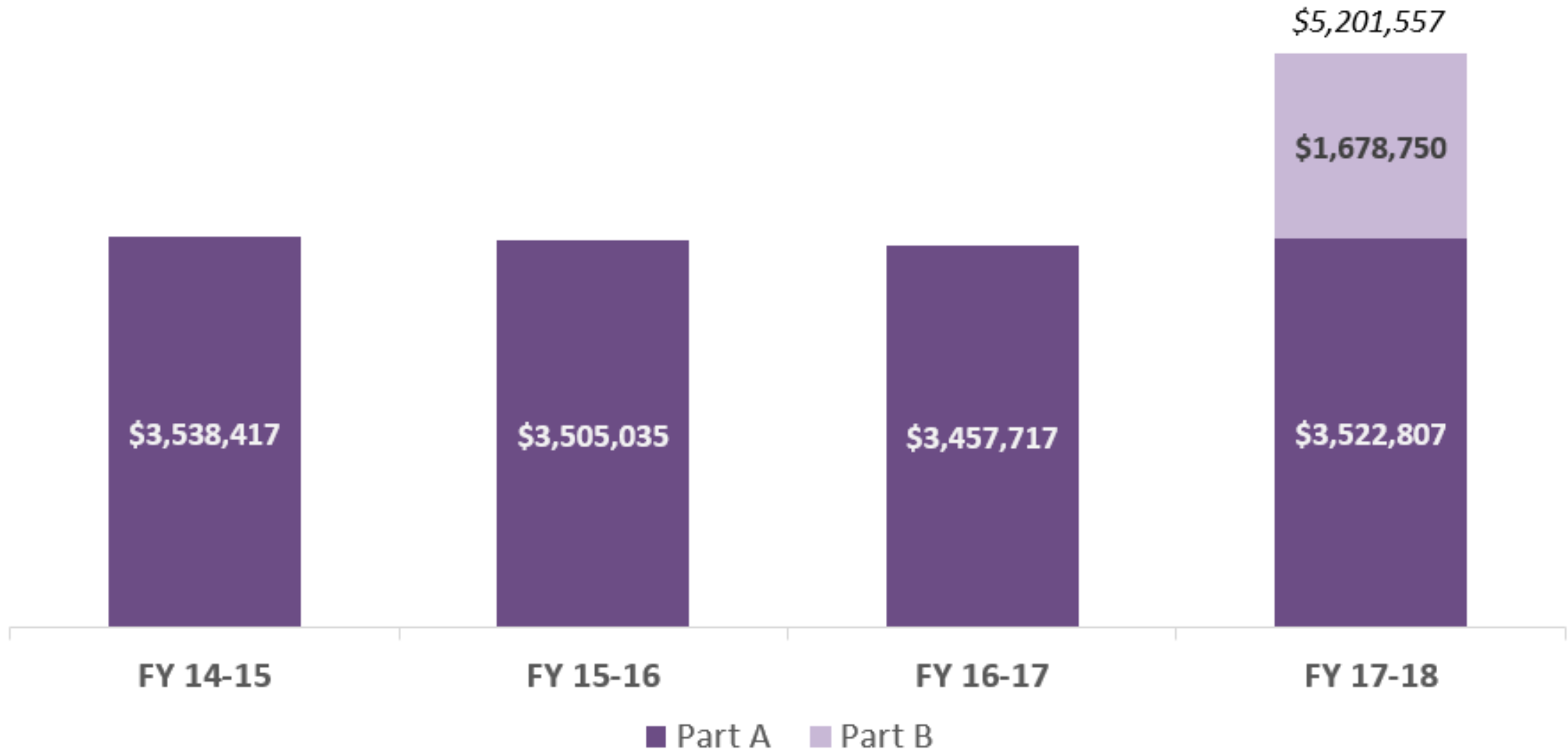
The meeting was adjourned at 7:30 p.m.

17-18 RYAN WHITE YEAR IN REVIEW

6/5/18 Planning Council Meeting

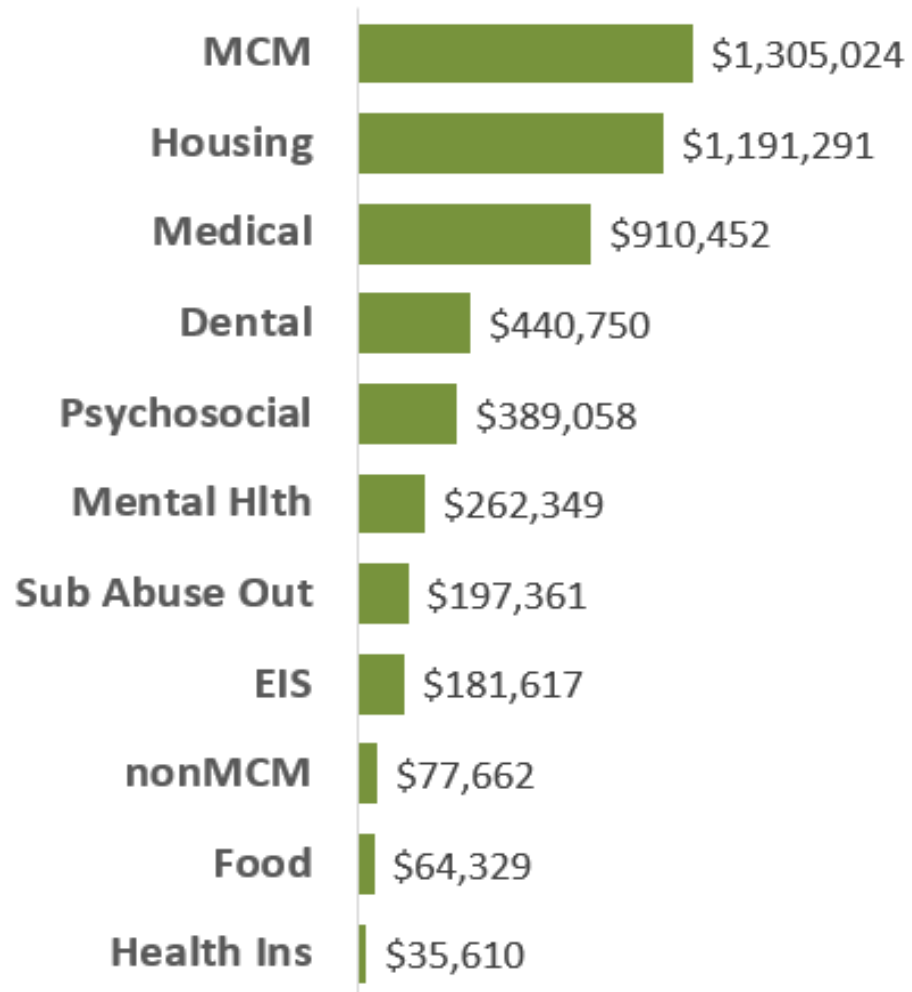


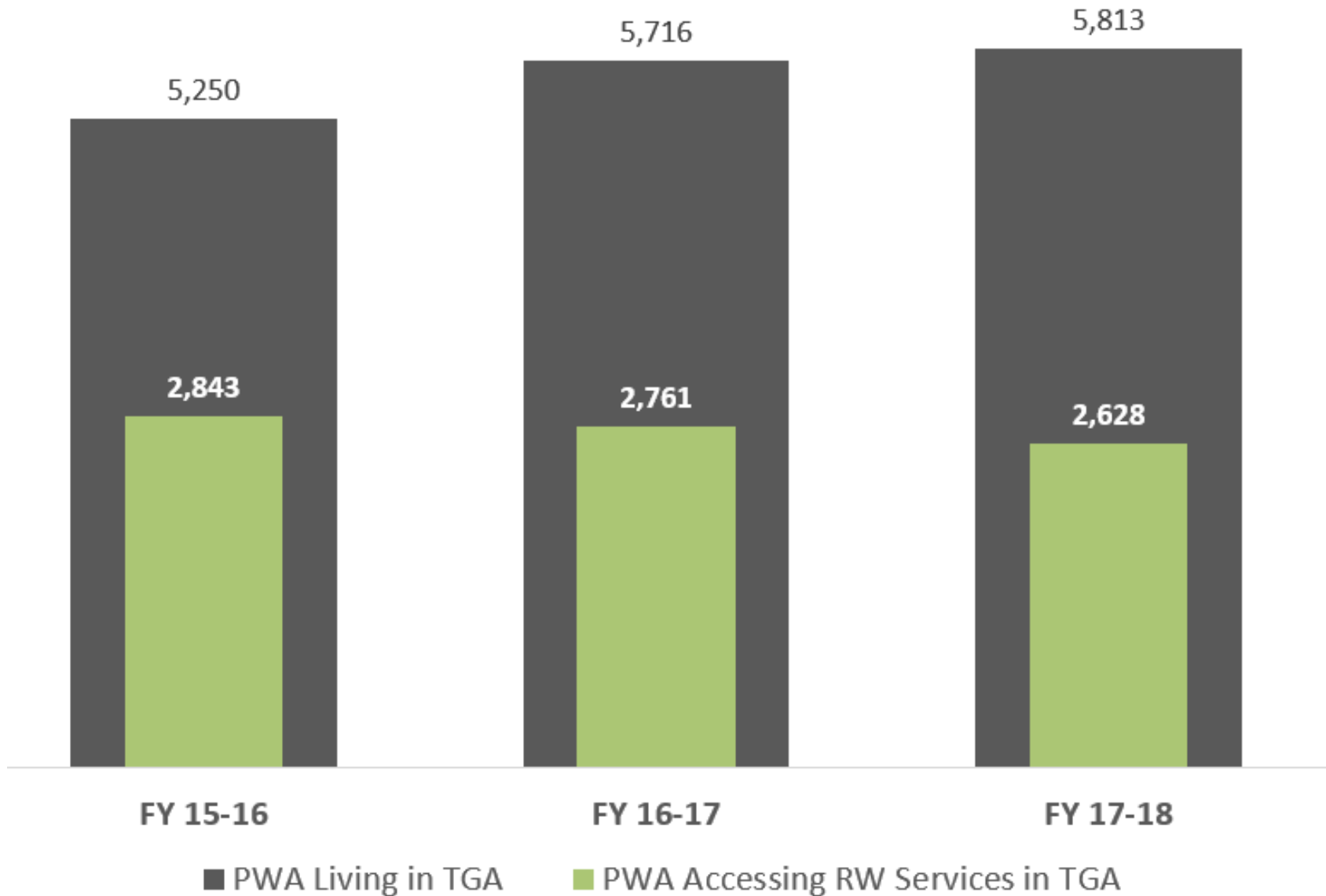
NOTICE OF AWARD



ALLOCATIONS BY SERVICE CATEGORY

(TOTAL AWARD: \$5,201,557)





TOTAL CLIENTS SERVED

In FY 17-18, 45% of the folks living with HIV in the TGA received RW A/B services.

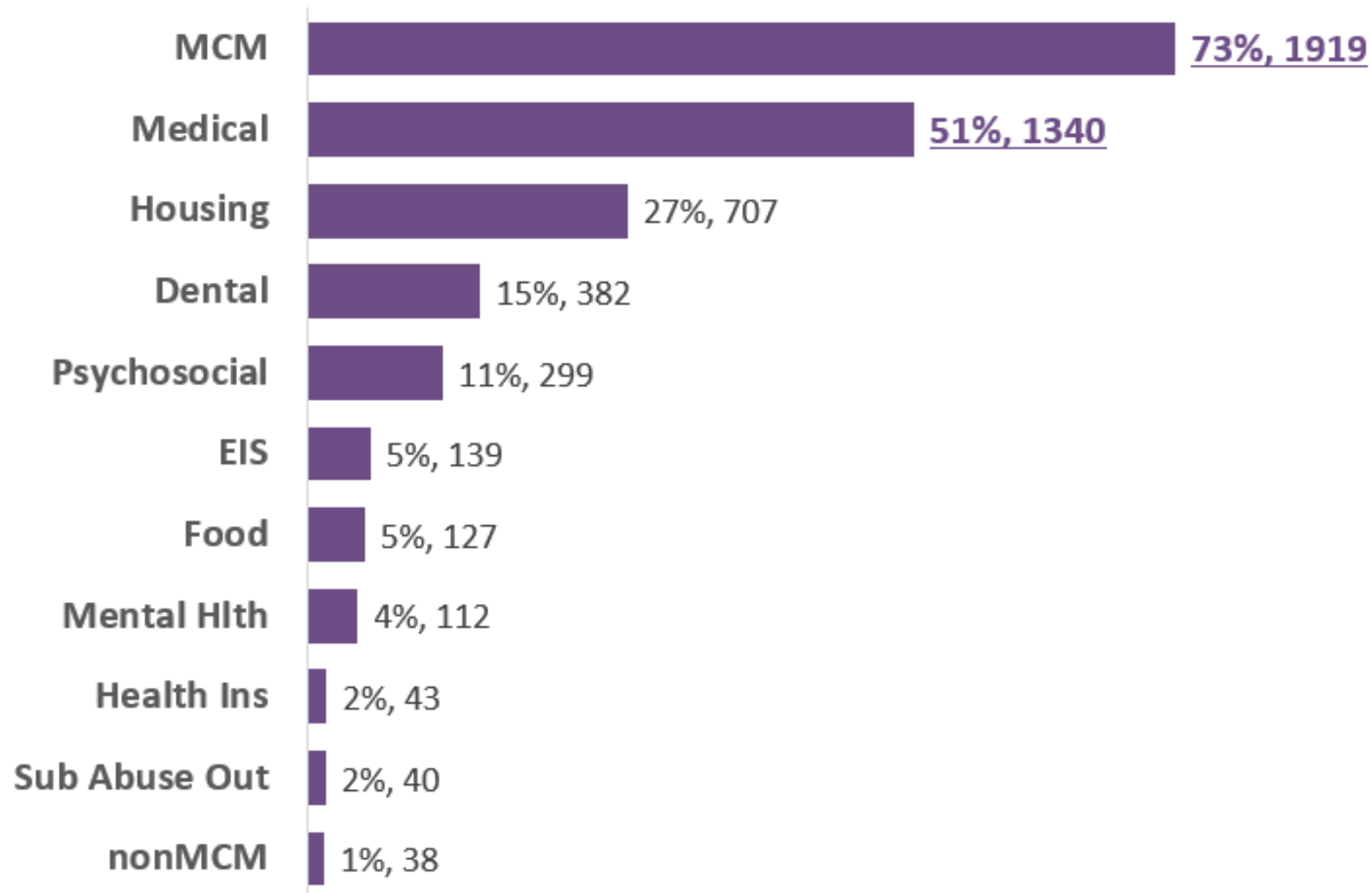
This percentage has decreased over the last 3 years. 54% in FY 15-16 and 48% in FY 16-17.

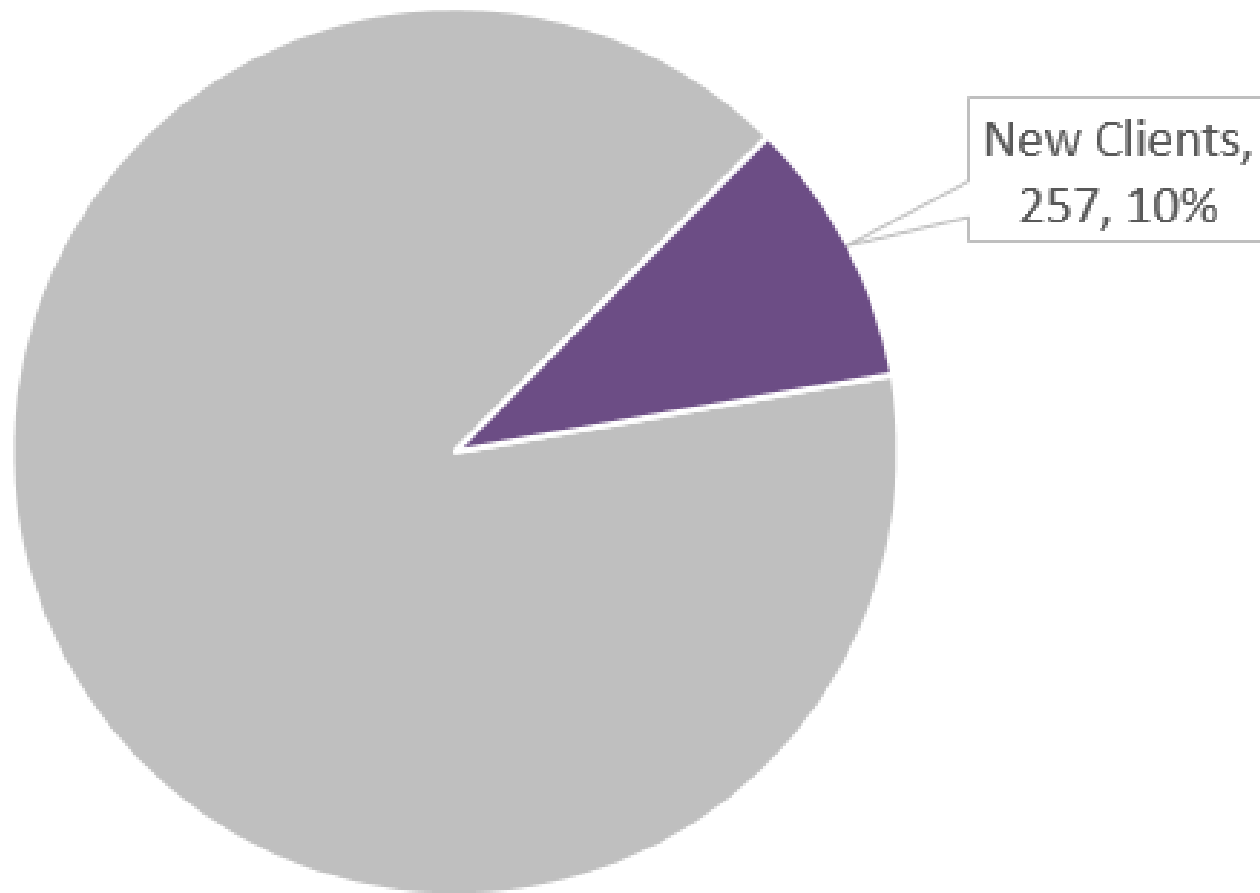
Why this decrease? Shift of MCM funding from State of Oregon Part A to State of Washington Part B for Clark County. No longer counting Russell Part F clients in our count.



CLIENTS SERVED BY SERVICE CATEGORY

(TOTAL CLIENTS: 2,628)





NEW CLIENTS TO THE SYSTEM

2,628 Total Clients

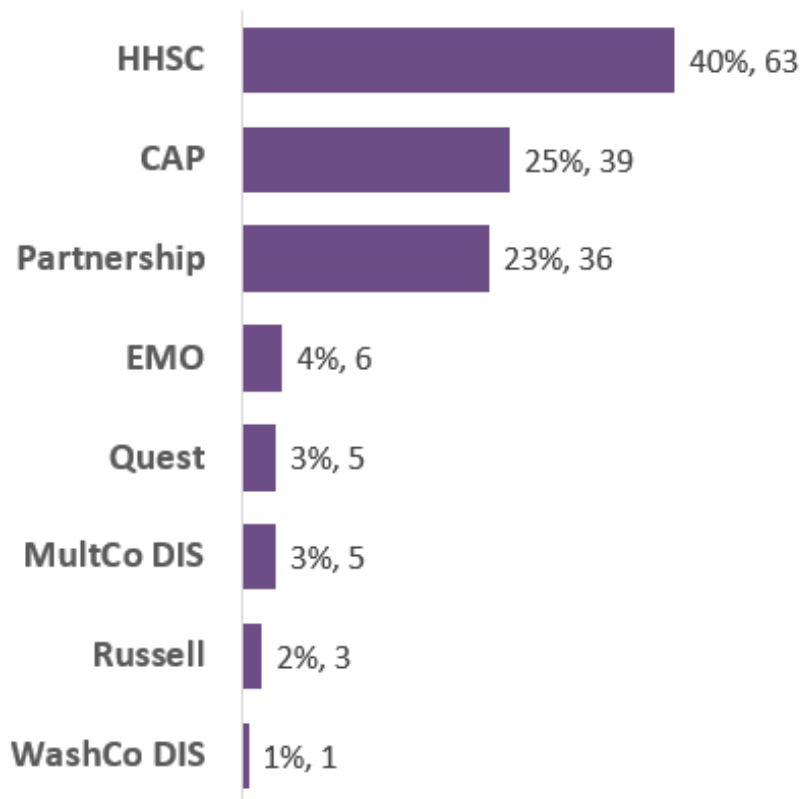
257 New Clients.

Of the new clients, 99 were newly diagnosed. This represents 37% of the new clients and 4% of the total clients served.

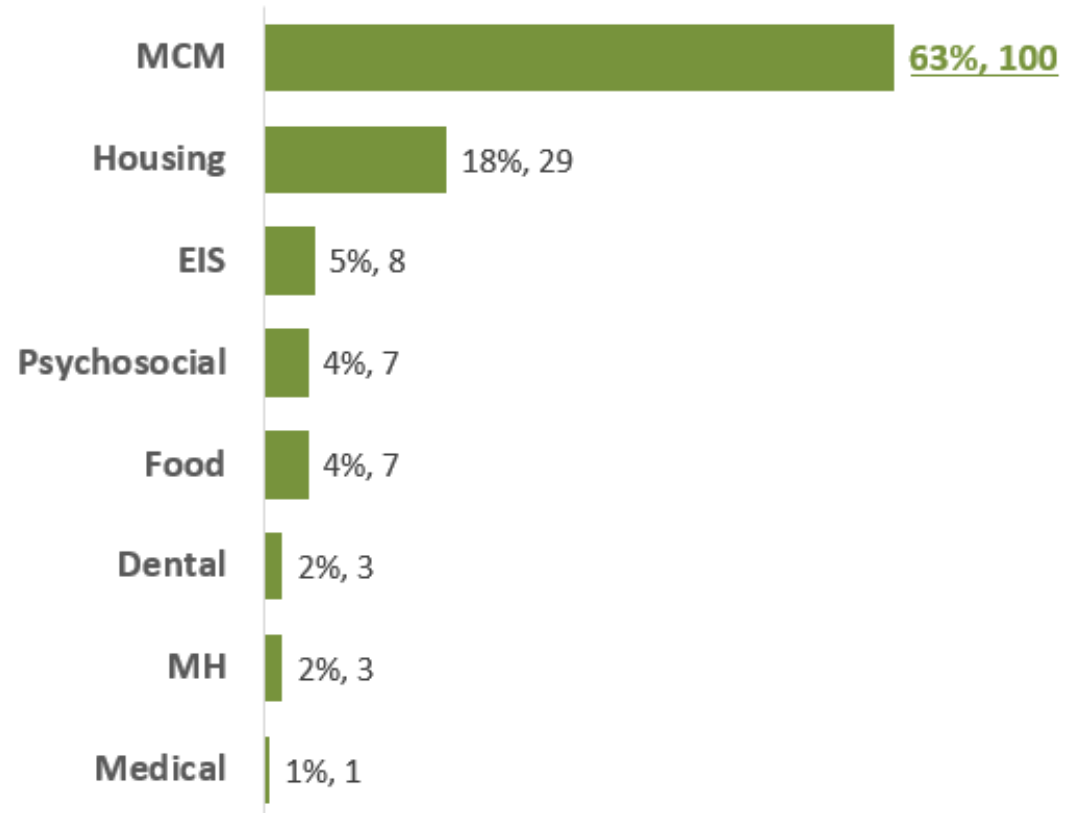


158 NEW CLIENTS (NOT NEWLY DIAGNOSED) — POINT OF ENTRY

By Provider

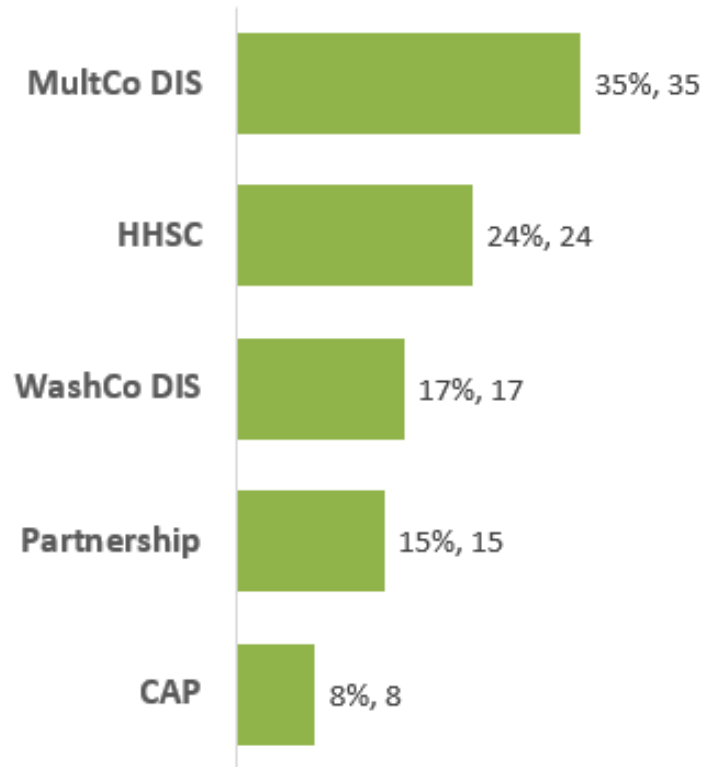


By Service Category

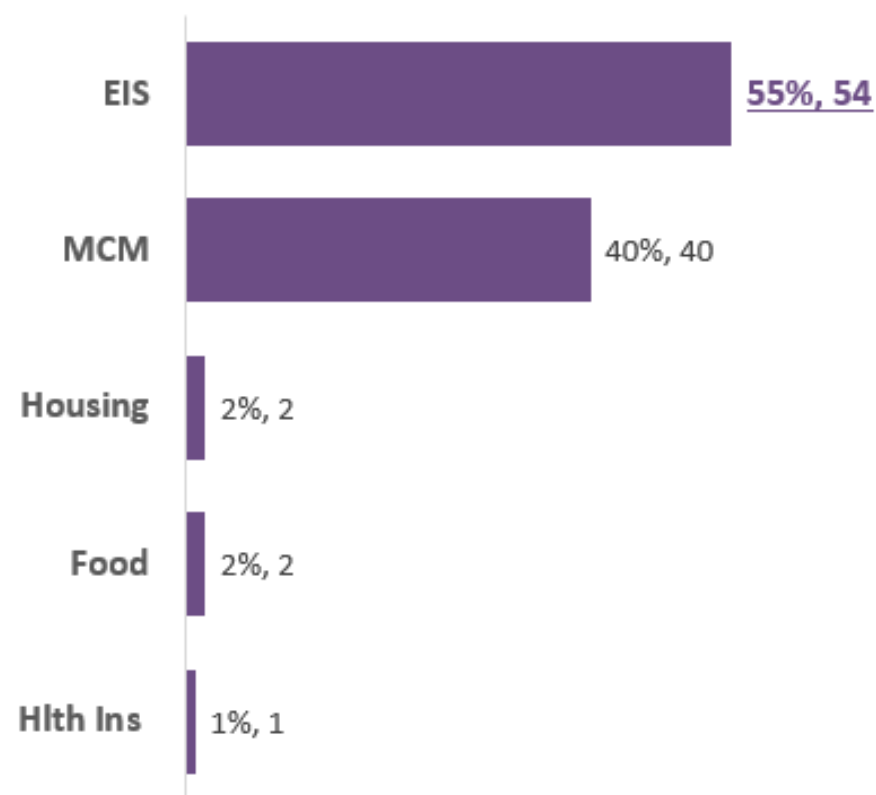


99 NEW CLIENTS (NEWLY DIAGNOSED) — POINT OF ENTRY

By Provider



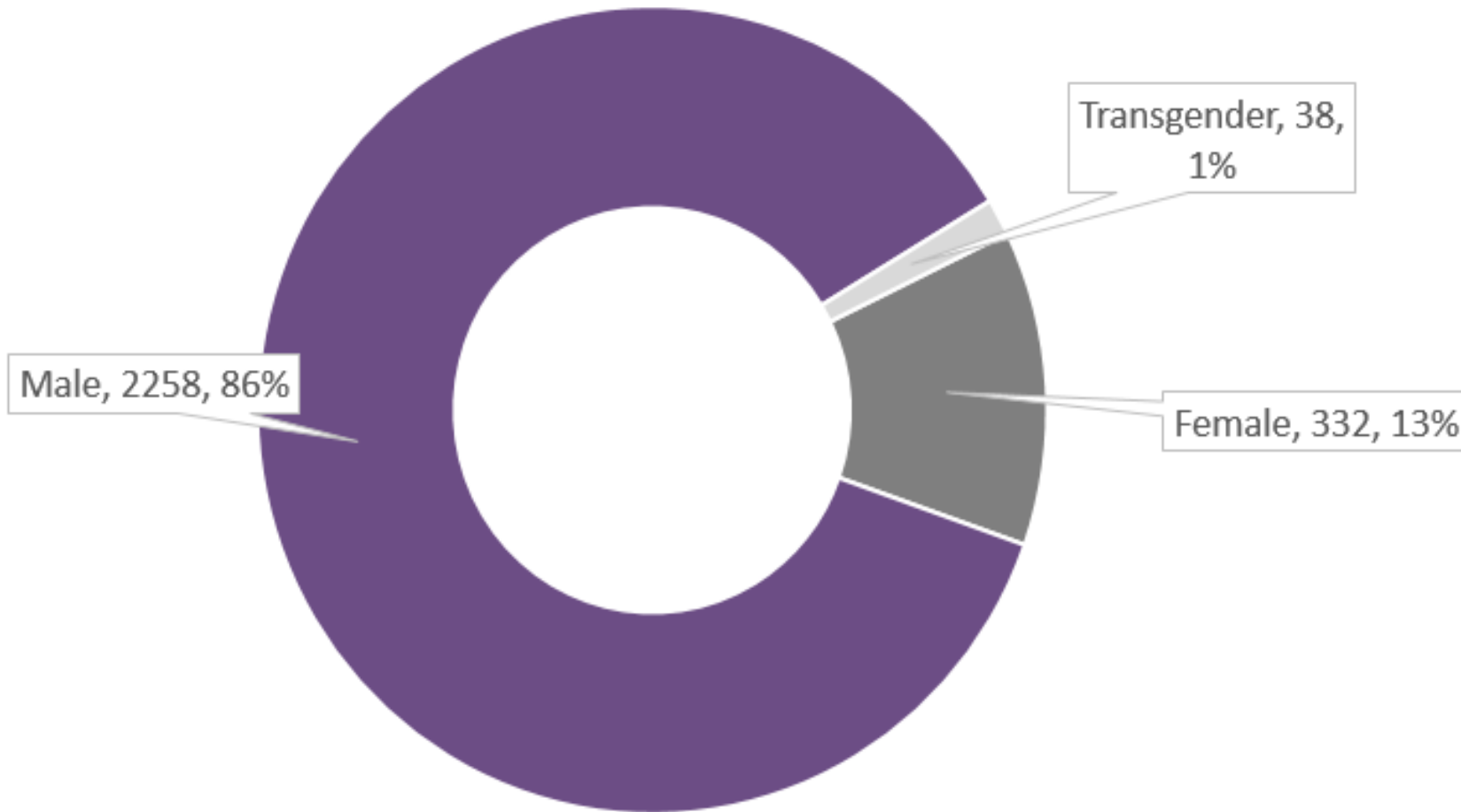
By Service Category





RYAN WHITE CLIENTS

FY17-18 Clients enrolled in RW services



DEMOGRAPHICS – GENDER (N=2,628)

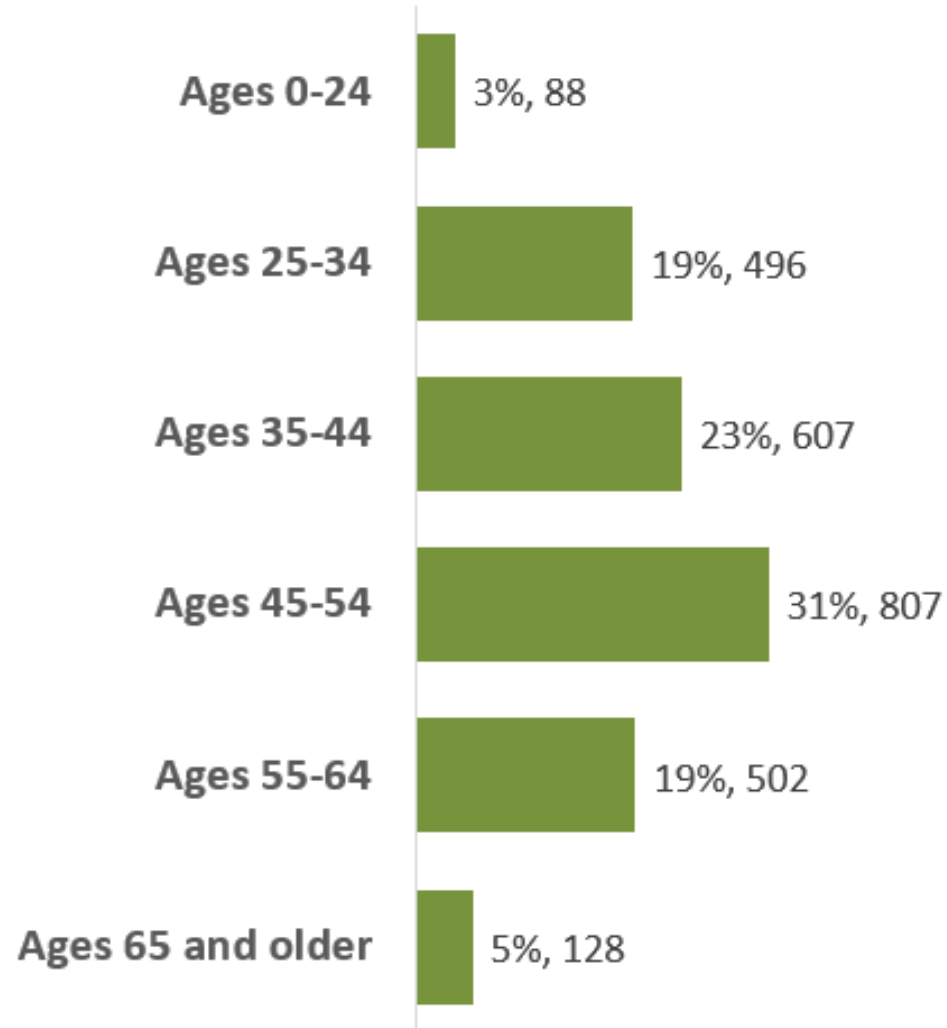
The number of Transgender individuals the RW Part A/B program serves has stayed stable over the past 2 years.

FY 16-17 = 39 Transgender

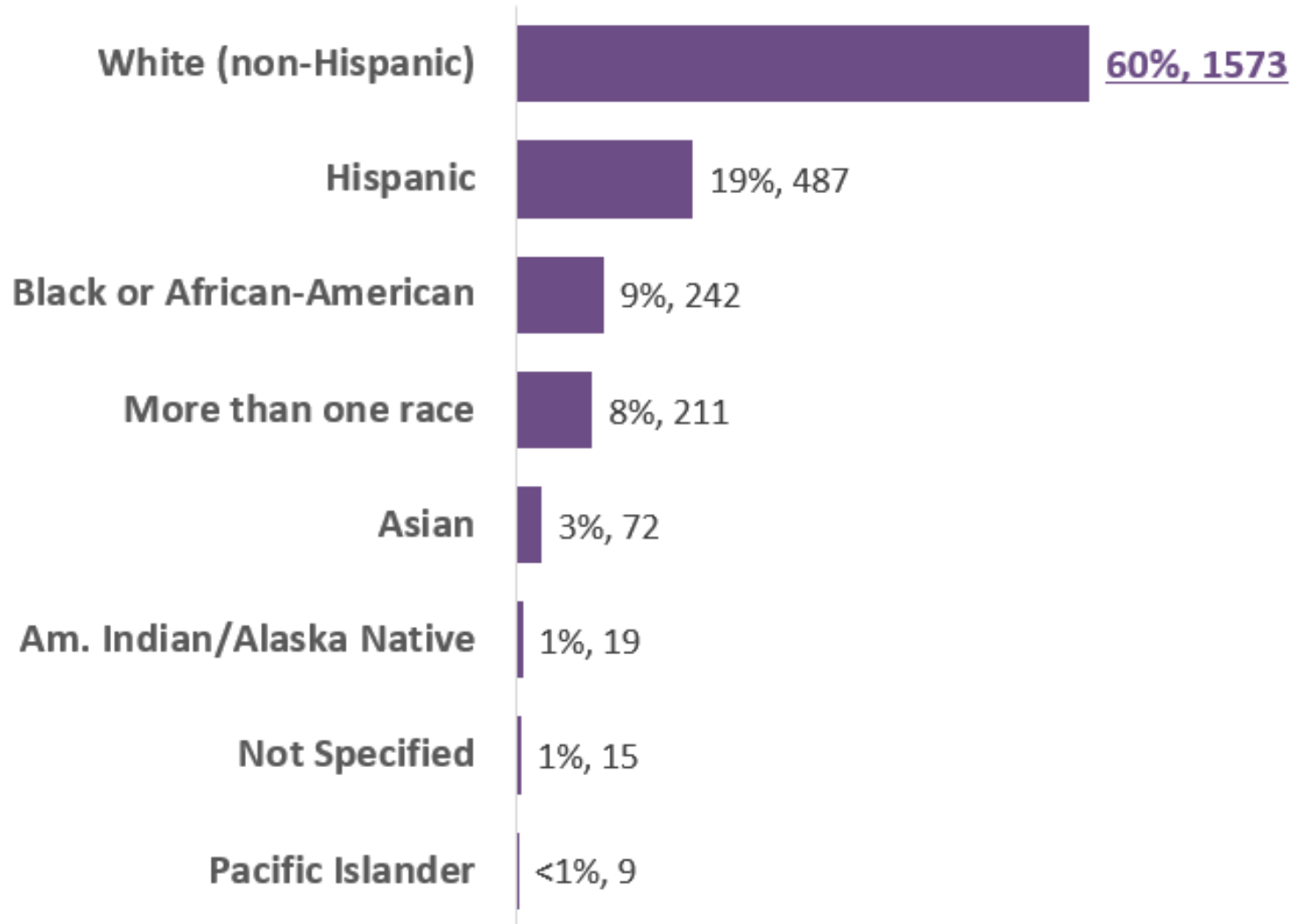
FY 15-16 = 30 Transgender

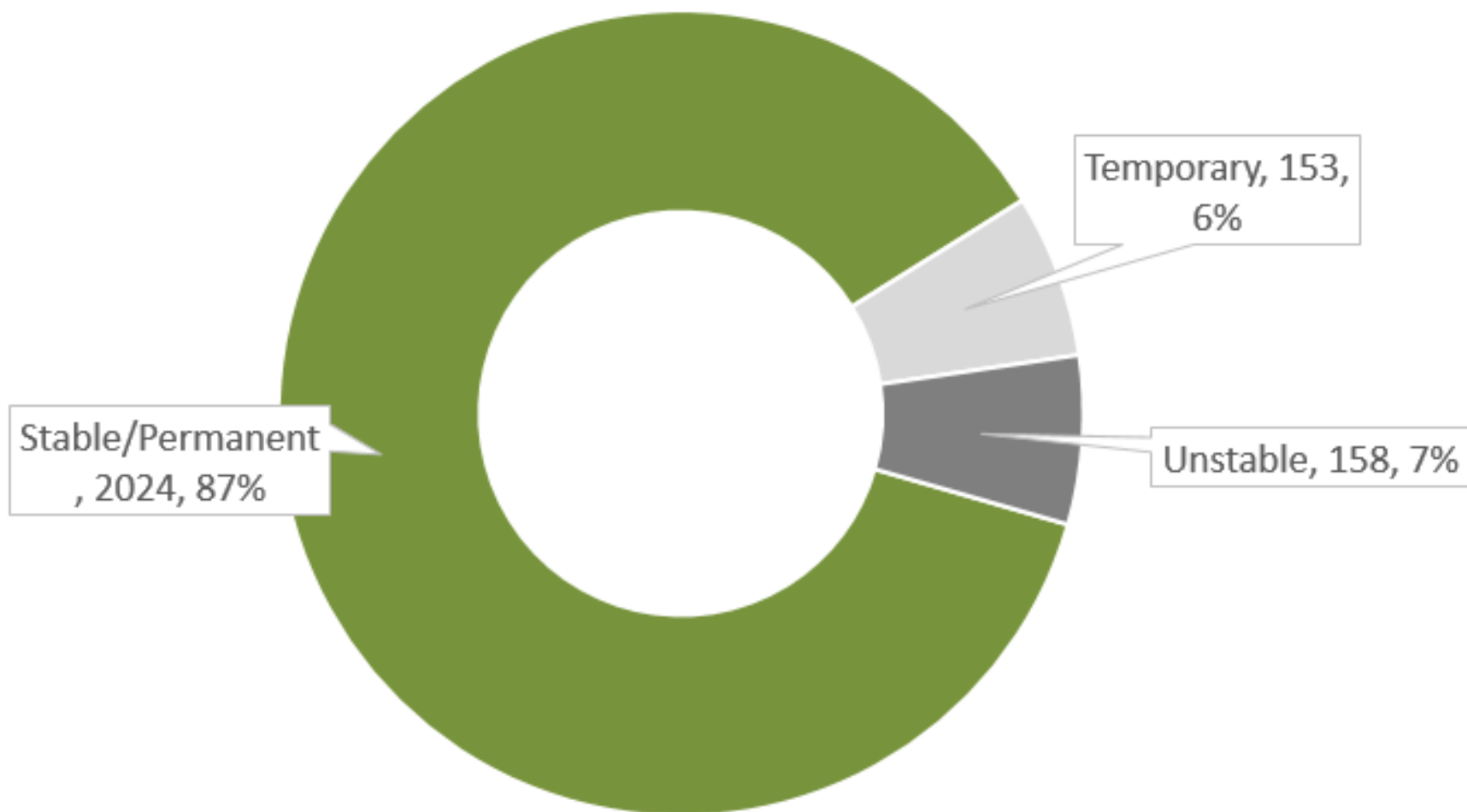


DEMOGRAPHICS — AGE (N=2,628)



DEMOGRAPHICS — RACE (N=2,628)



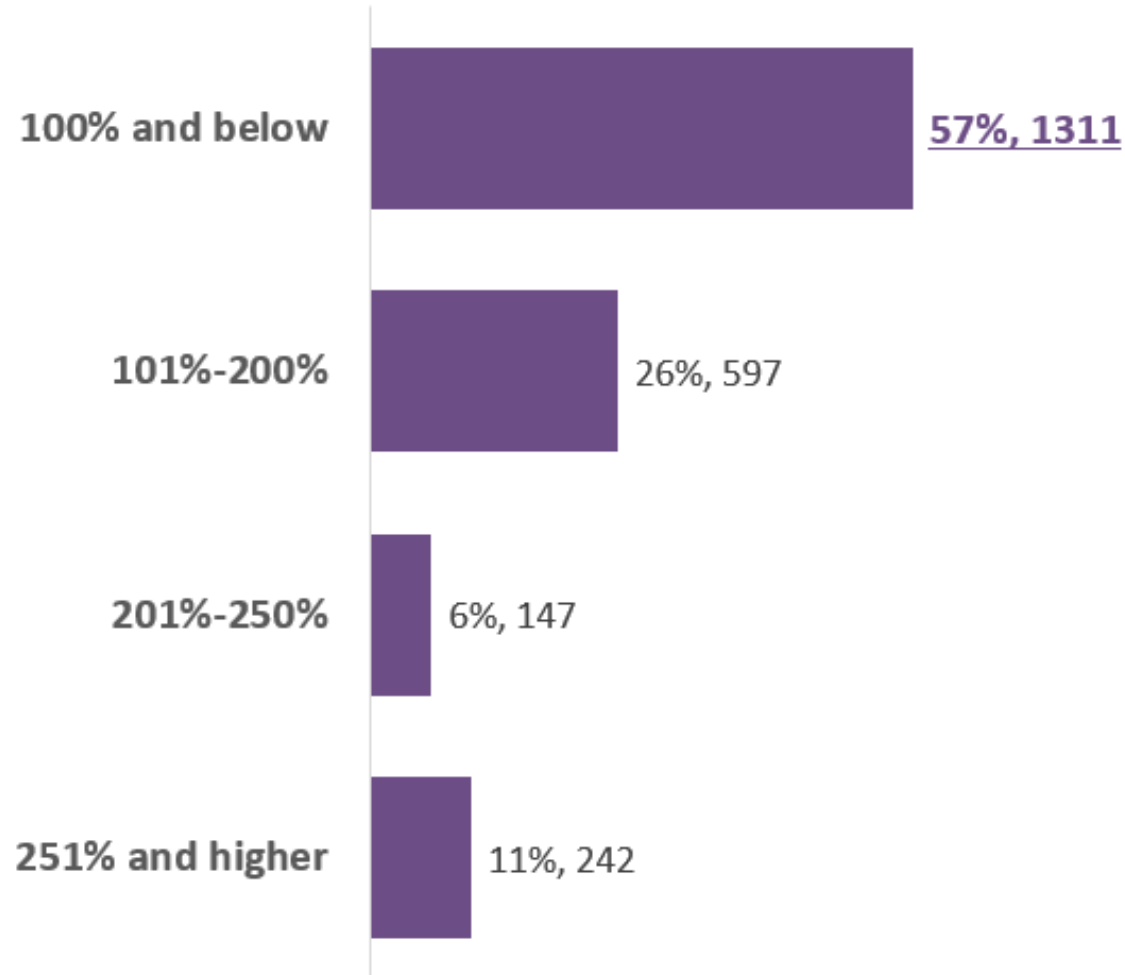


DEMOGRAPHICS – HOUSING STATUS (N=2,628)

N = 2,628



DEMOGRAPHICS — FEDERAL POVERTY LEVEL (N=2,628)

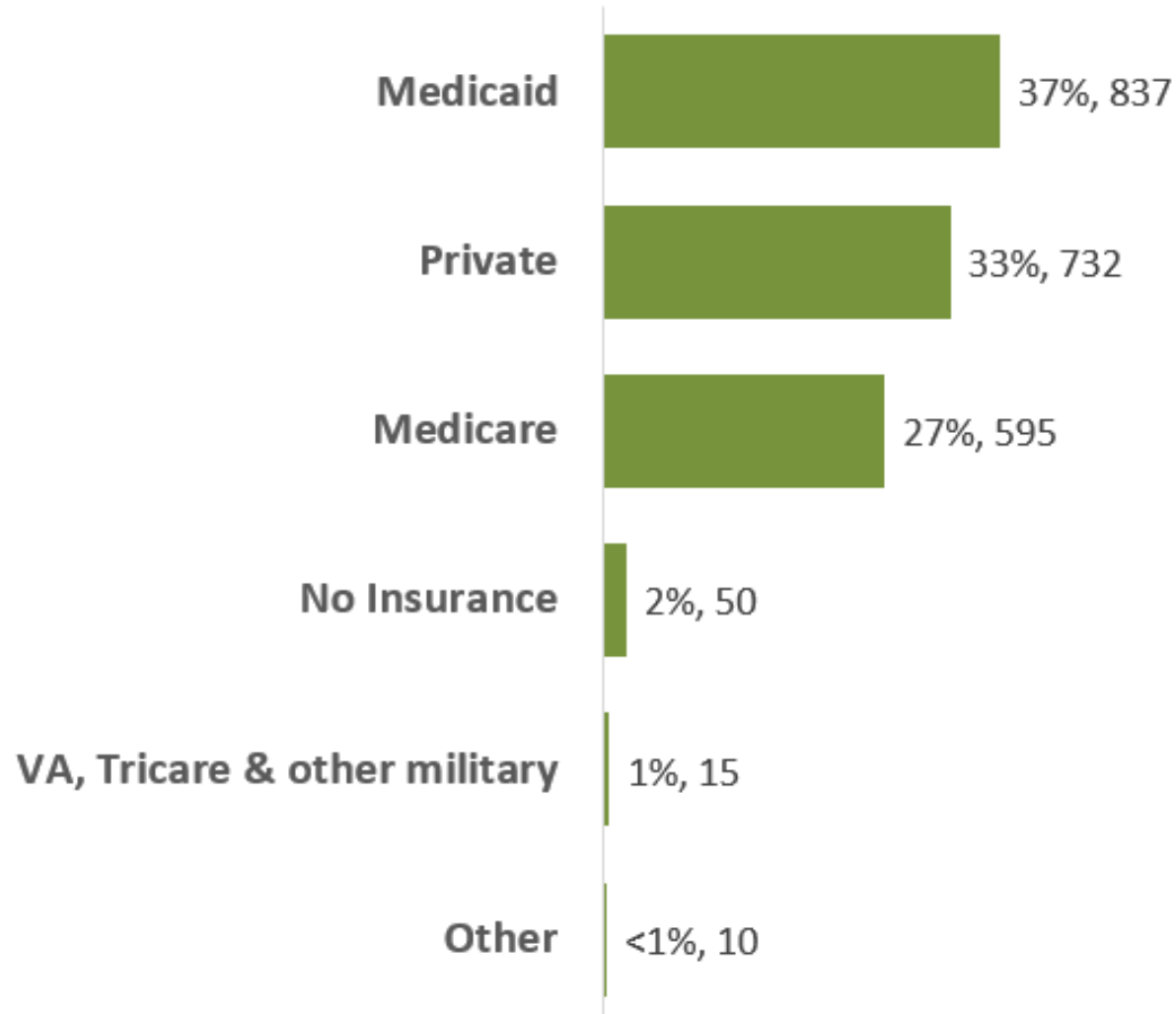


17-18 FPL (1 person)

- 100% \$1,005
- 200% \$2,010
- 250% \$2,513

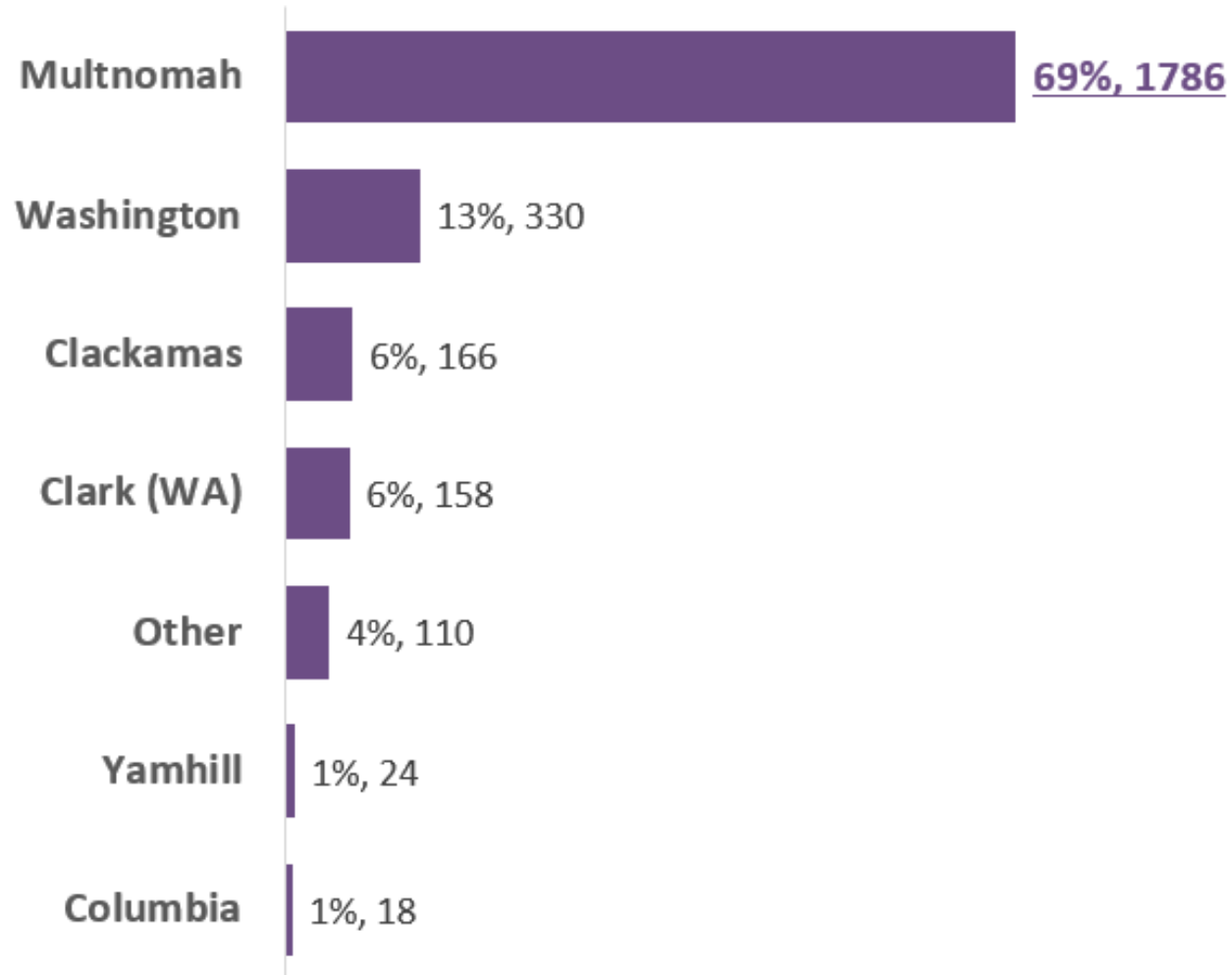


DEMOGRAPHICS — INSURANCE (N=2,628)

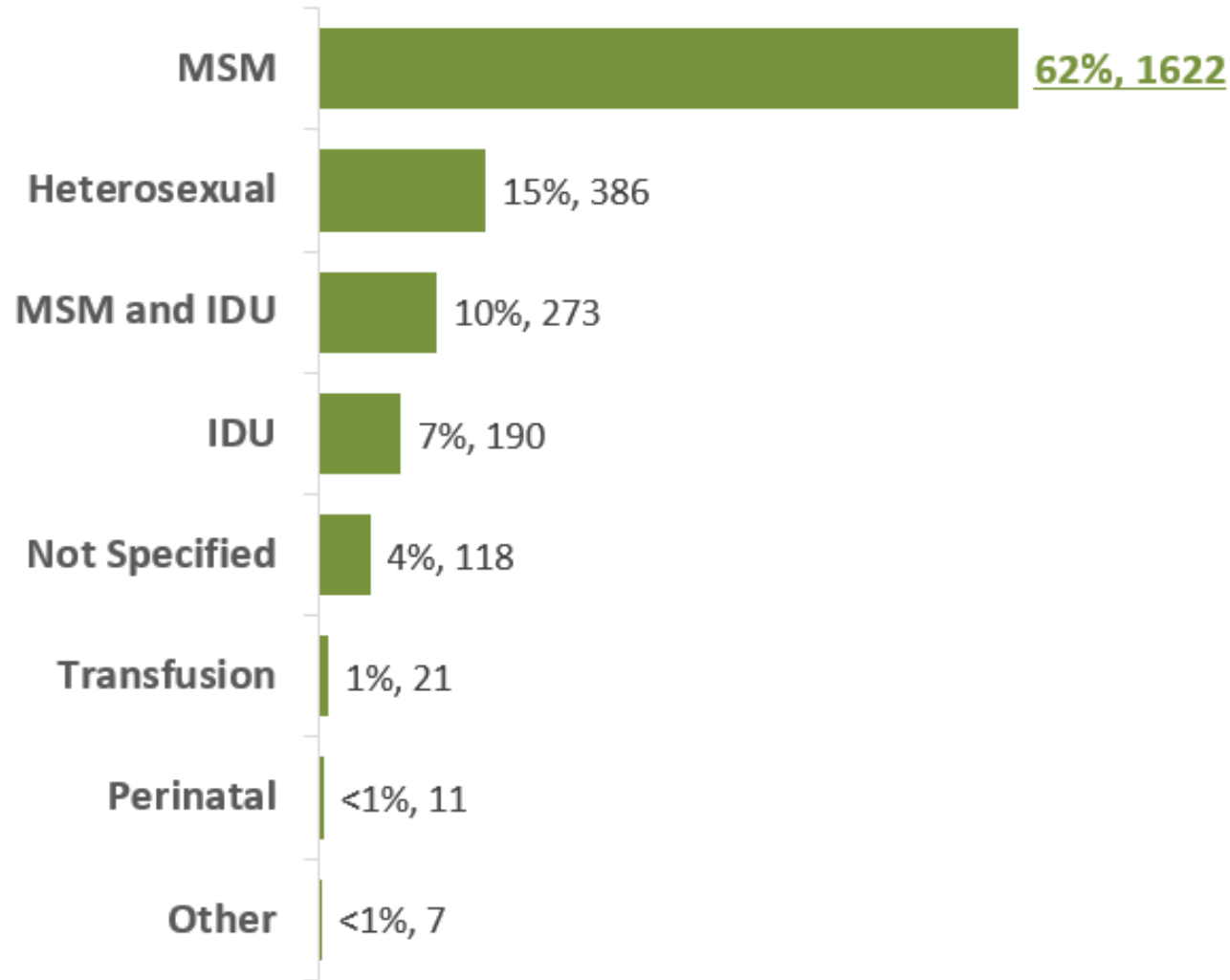


DEMOGRAPHICS — COUNTY OF RESIDENCE

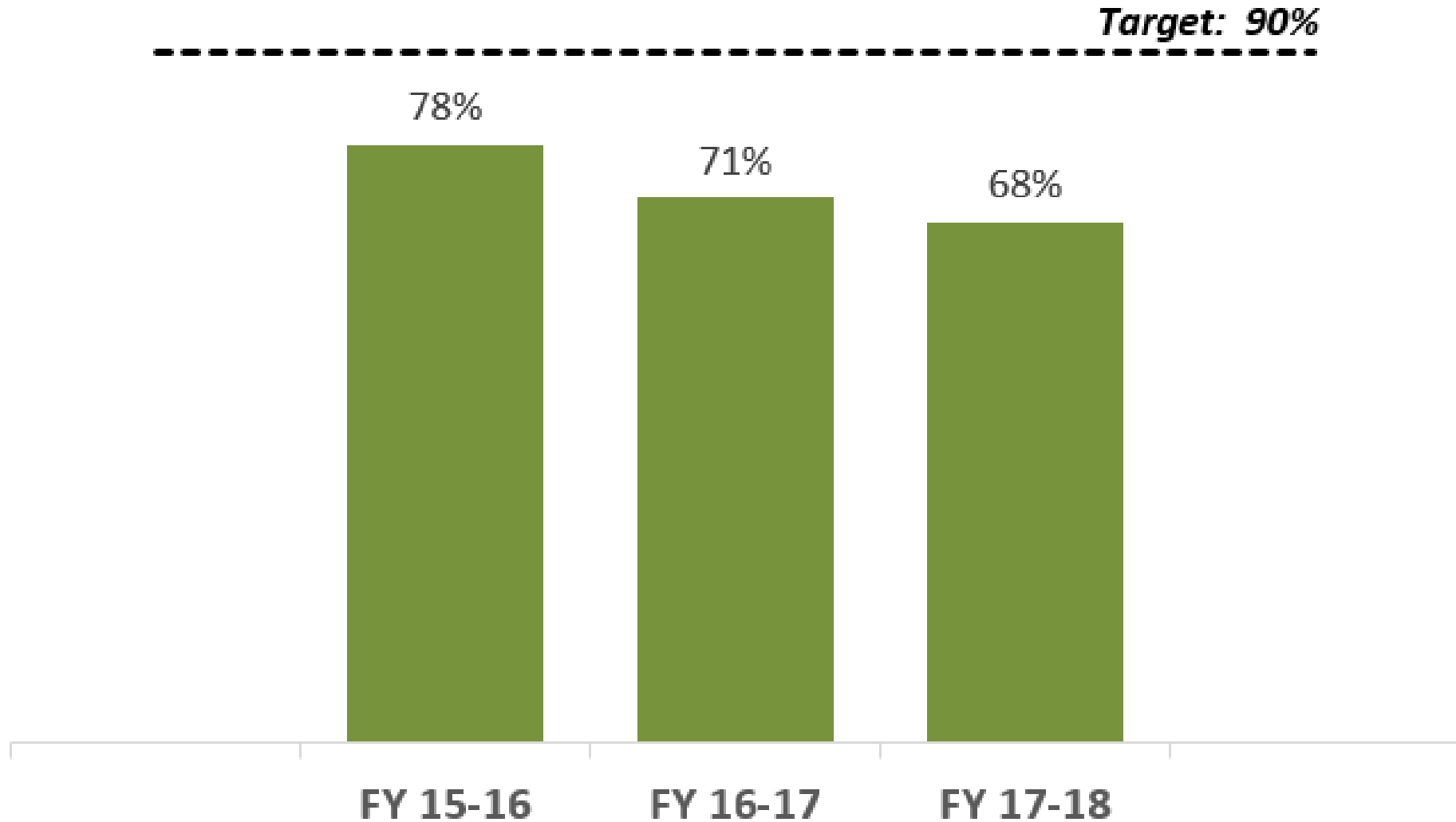
(N=2,628)



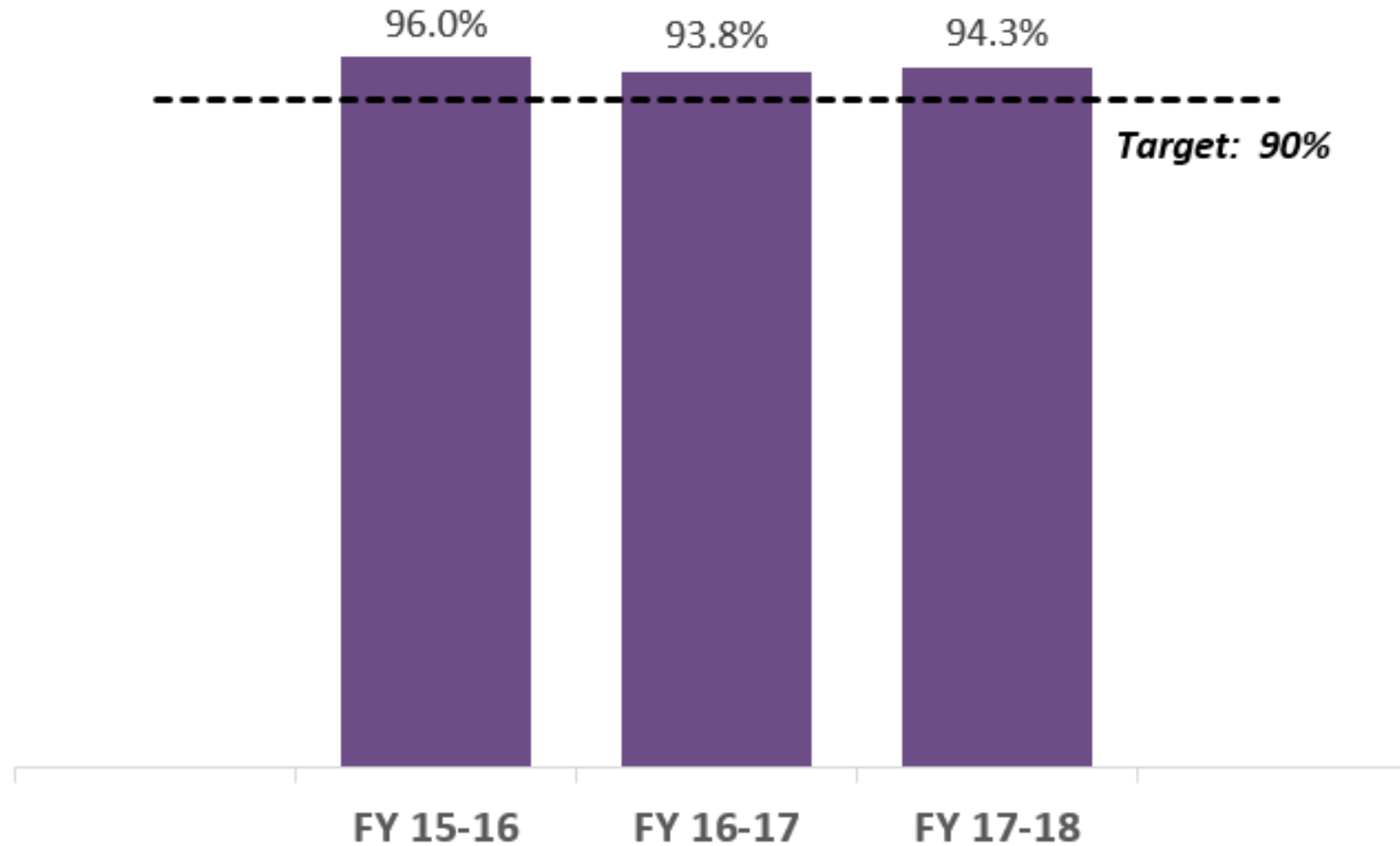
DEMOGRAPHICS — RISK FACTOR (N=2,628)



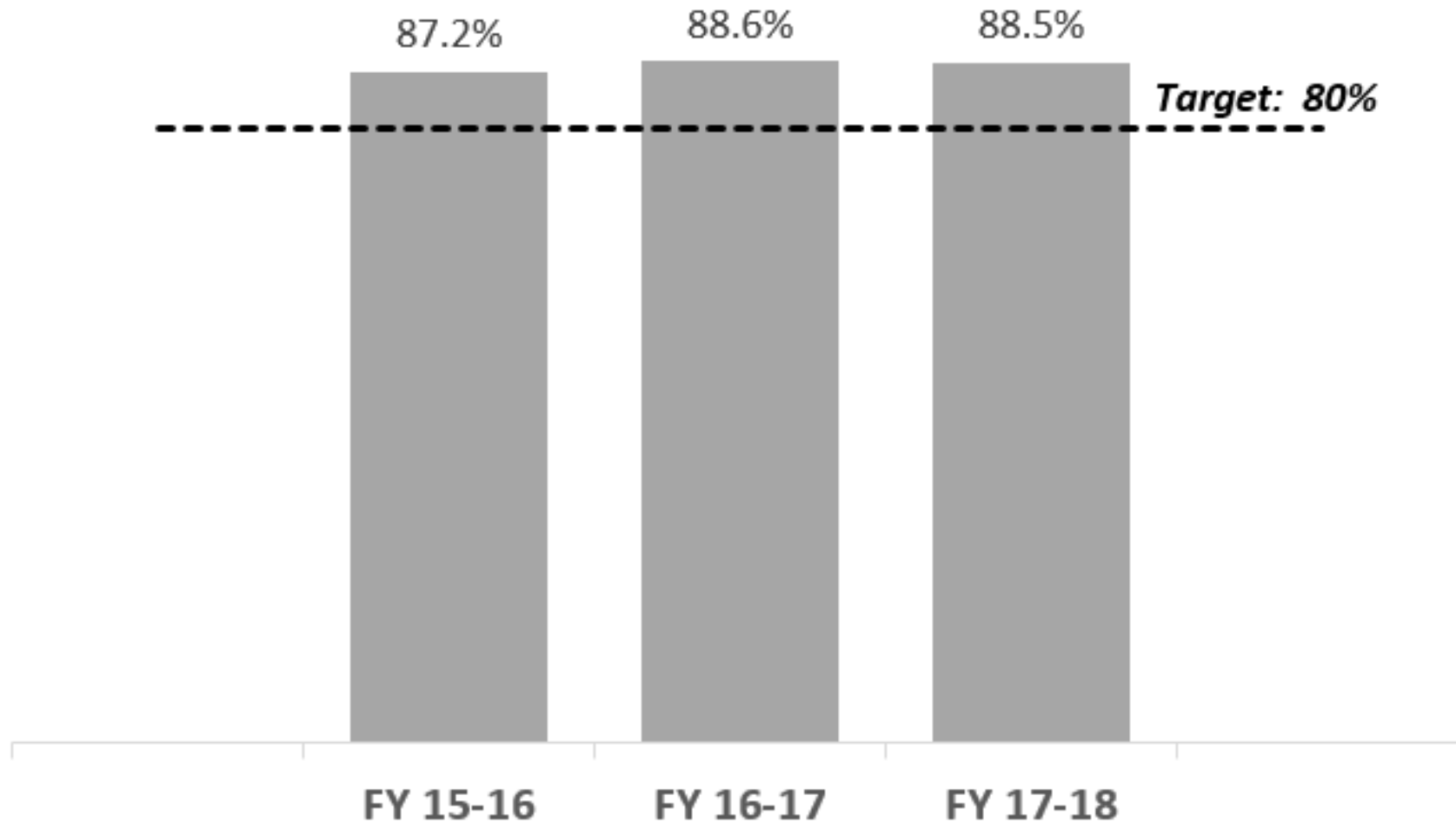
OUTCOMES — MEDICAL ENGAGEMENT (N=1,564)



OUTCOMES — ANNUAL LAB (N=2,440)



OUTCOMES — VIRAL LOAD SUPPRESSION (N=2,299)



TGA PROJECTS

- Viral Suppression Support Project
 - ORPHEUS Data Sharing
- Shared Eligibility
 - Evaluation
 - Automation of CAREAssist Data & Increase to 2X per Month



TGA PROJECTS

- TIC Organizational Learning Collaborative
 - Organizational Assessment
 - Restricting Clients Policies & Procedures
 - Staff Transitions & External Communication
- New services/contracts for:
 - Housing support
 - Home Based Recovery Beds
 - Substance Abuse Peers
 - Financial Assistance for Substance Abuse Treatment
 - Addictions Benefits Coordination



What additional
information would you like
to see at the July Retreat?

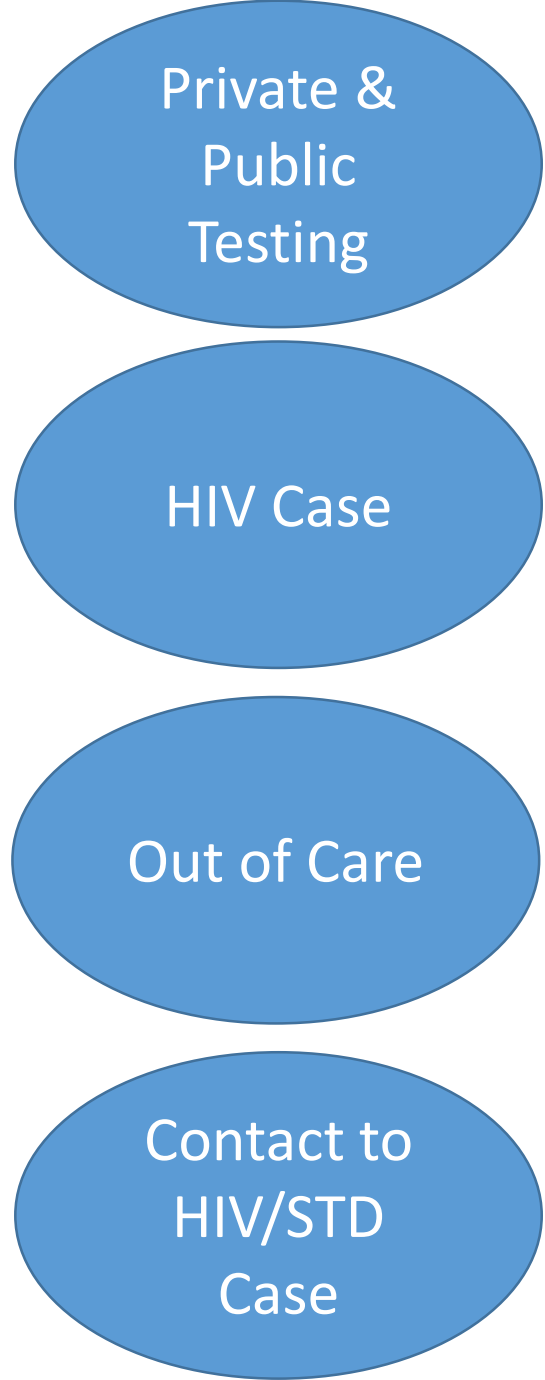


Carryover Request-HIV Care Services Proposal
Ryan White Council-June 2018 Meeting

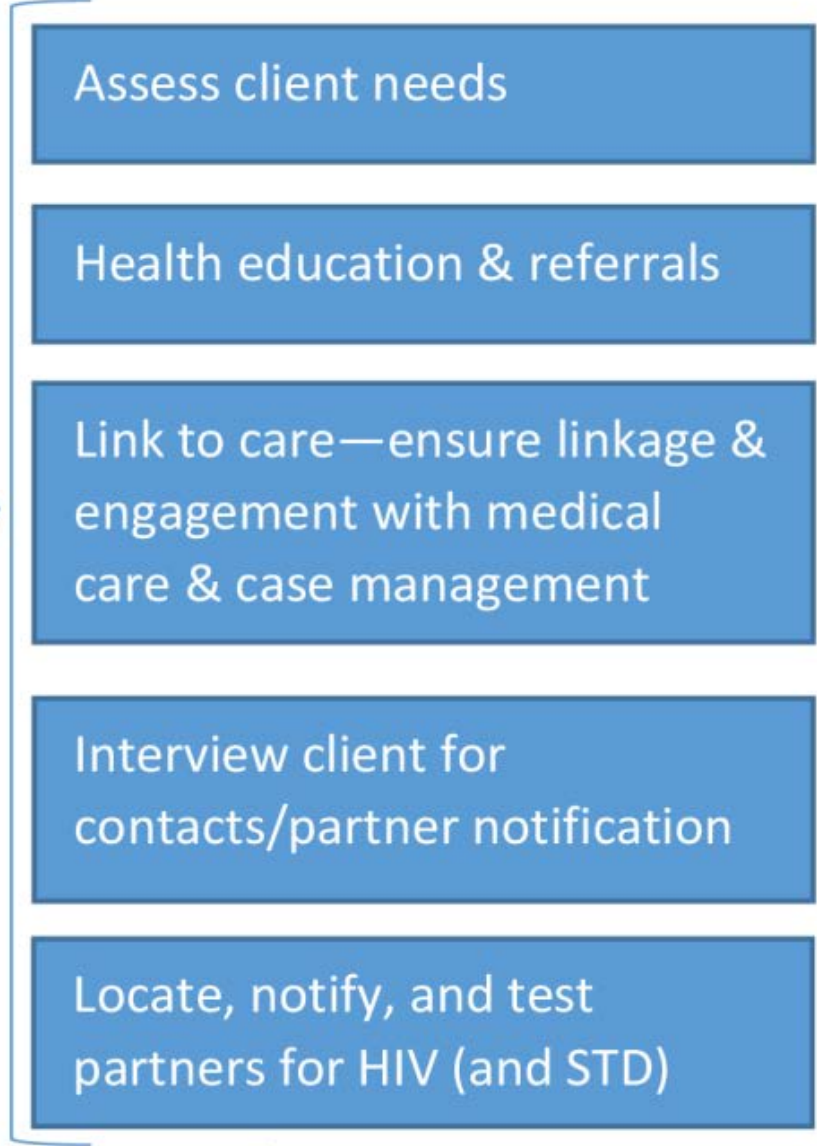
Approved 6/5/18 PC Meeting

Priority	Service Category	Requested Amount	Reason
1	Medical/Ambulatory Care	\$ 80,000	able to spend quickly, expenses always exceed allocation*
2	Health Insurance	\$ 4,000	received reduction and may need additional funds*
3	Mental Health	\$ -	
4	Dental Care	\$ -	
5	Medical Case Management	\$ 31,000	able to put towards MCM expenses, ongoing need*
6	Early Intervention Services	\$ 10,000	received reduction and may need additional funds*
7	Substance Abuse Treatment	\$ -	
8	Housing	\$ -	
9	Psychosocial	\$ -	
10	Food	\$ -	
11	Non-Medical Case Management	\$ -	
12	Residential Sub. Abuse Treatment	\$ -	
SERVICES TOTAL		\$ 125,000	\$ -

*Request flexibility to put towards approved service categories based on need when/if carryover is approved.



Referral & Linkage



Tri-county Regional Efforts

- Expanded harm reduction and testing at harm reduction services
- Downtown STD clinic access for Clackamas and Washington Counties
- Regional effort to reach health care system for routine and focused testing
- Shared training of all staff about continuum of care service providers
- New partners: communities of color, rural communities, enough staffing to engage other partners, new holistic partnering models
- Shared and expanded data systems
- Shared contracting with partner agencies