

# Planning Council

**Date of meeting:** May 16, 2017  
**Time started:** 5:35 p.m.  
**BCHD Staff:** C. Carey  
 J. Carey  
 A. Ferrari  
 N. Flath  
 V. Graves  
 M. Muhammad  
 S. Pelham  
 R. Sumpster  
 L. Wagner

**TWG Staff:** M. Bhatia  
 D. Gorham  
 J. Stenhouse  
 C. White

**Present:** L. Bank\* J. Keruly  
 D. Brewer H. Lambert  
 R. Buchanan- J. Loken  
 Gunthrop T. Luft  
 P. Chaulk E. Nash\*  
 J. Fleming E. Nicholson  
 J. Furtado M. Poku  
 J.P. Gomez D. Rivera\*  
 C. Harvey M. Scriber  
 G. Jones-Childs C. Smith  
 B. Ward

*\* Participated via teleconference*

**Absent:** K. Arbaugh D. Kelly, Jr.  
 M. Cole V. Lathan  
 C. Foxx O. Njuhigu

**Visitors:** M. Baker M. McVicker-Weaver  
 M. Berg A. Patterson  
 P. DeMartino V. Woolums  
 D. Kelson-Albert J. Wright  
 K. King- Reynolds L. Vaughn  
 C. Lacanienta S. Zisow-McClean  
 D. Lohan

**Handouts:**

- Planning Council Packet (TWG, May 2017).
- Standards of Care (Hospice and Community Based Health Services)
- Monthly Expenditure Report (BCHD)
- Standards of Care (Child Care Services, Respite Care, Other Professional Services, Outreach, OAHS, Mental Health and Psychosocial Support Services)
- Administrative Mechanism Process
- HOPWA Data presentation (L. Vaughn, 2017)
- Linkage to Care for Incarcerated Populations Data presentation (R. Hunt, 2017)
- Youth Data presentation (C. Carey, 2017)

## Planning Council

- The meeting convened with quorum at 5:35 p.m. and introductions were made.
- D. Brewer asked for a moment of reflection.
- D. Brewer stated that this meeting was the last meeting for the Taylor-Wilks Group.
- The council thanked Taylor-Wilks Group for their service.

### Approval of Planning Council Agenda

Committee

- D. Brewer asked the planning council to review the May planning council agenda.

Motion: To accept the May agenda.

Made by: H.  
Lambert

Second: E.  
Nicholson

Action: Passed

Opposed: 0

Abstained: 0

### Approval of Minutes

Committee

- D. Brewer asked the planning council to review the minutes of the April council meeting.

Motion: To accept the April meeting minutes as written.

Made by: J.  
Furtado

Second: C.  
Harvey

Action: Passed

Opposed: 0

Abstained: 0

### Chair's Report

D. Brewer, Chair

- D. Brewer presented the chair report to the planning council.
- D. Brewer thanked everyone for attending.
- D. Brewer thanked all presenters for agreeing to attend the tonight's meeting.
- D. Brewer reminded the council that tonight's meeting would be extended an hour.
- D. Brewer asked that committee's without urgent action items hold their discussion points.
- D. Brewer stated that Priority Setting Resource Allocation Conference would be held Thursday and Friday, July 13<sup>th</sup>-14<sup>th</sup> at the University of Maryland Dental School.
- D. Brewer reminded the council to update their conflict of interest forms in time for PSRA.
- D. Brewer asked that members review the document carefully and ask any questions they may have.
- D. Brewer stated that in order to participate in PSRA members must: 1) attend PSRA training or review the training manual and turn in the waiver, 2) attend data presentations or review them online and fill out the waiver.
- D. Brewer stated that at tonight's meeting they would be recruiting members for the Administrative Mechanism Workgroup.

### HOPWA Data Presentation

L. Vaughn, HOPWA

## Planning Council

- D. Brewer introduced Lakeysha Vaughn as the HOPWA Program Administrator for the mayor's office of Human Resources.
- L. Vaughn stated that HOPWA in the Baltimore/ Towson Eligible Metropolitan statistical area is funded under the following two categories:
  - The formula funding- the mayor's office of human services is the grantee.
  - The competitive funding- Baltimore city is the grantee.
- L. Vaughn stated that there are 15 project sponsors that are contracted annually to provide services to persons living with HIV/AIDS in the eligible metropolitan area (EMA).
- L. Vaughn stated that the funding provides housing and support services for PLWH/A.
- L. Vaughn stated that HOPWA primarily funds the following services in the EMA: Housing assistance, tenant based rental assistance, and short-term rent/mortgage/utility assistance.
- L. Vaughn stated that funded support services are case management and housing placement services.
- L. Vaughn stated that that in the current fiscal year Anne Arundel County received \$484,913 and Baltimore County received 6,142,489, Baltimore County received \$1,212,283 for tenant based rental assistance and support services.
- L. Vaughn stated that Carroll County only receives support services funding and they received \$64,655. Harford County provides tenant based rental assistance and receives \$161,637 and their health department provides the case management services.
- L. Vaughn stated that Howard County only provides tenant based rental assistance and receives \$242,456. Queen Anne's County only receives enough funding to provide two households with tenant based rental assistance and they receive \$23,412.
- L. Vaughn stated that the primary uses of funding are to support tenant based rental assistance for PLWH/A and their families.
- L. Vaughn stated that all of the FY15 data came from the HOPWA Consolidated Annual Performance and Evaluation Report (CAPER.)
- L. Vaughn stated that in FY15, 653 households were supported in the EMA with tenant based rental assistance (TBRA.)
- L. Vaughn stated that Baltimore City currently provides TBRA for 441 households.
- L. Vaughn stated that short-term rent/mortgage/ and utility assistance are used in the EMA to prevent evictions.
- L. Vaughn stated that in FY15, 97 households were supported with eviction prevention services and 100 are expected in this current year (FY16).
- L. Vaughn stated that in FY15 support services were provided to the 15 individuals and families.
- L. Vaughn stated that \$1.8 million was awarded to provide support services in the city of Baltimore, done on a competitive basis.
- L. Vaughn stated that the services provided were case management, outreach, permanent housing placement, medical care, transportation assistance, and nutrition services.
- L. Vaughn stated that \$554,516.84 was used to support case management, outreach, and advocacy efforts for PLWH/A in Baltimore city in 2015.
- L. Vaughn stated that in 2016, \$418,368 would provide transportation and employment services in Baltimore City.
- L. Vaughn stated that a training program would be offered to 12 PLWH/A who are able to move back into the workforce through AIRS.
- L. Vaughn stated that the primary used of HOPWA funds in the county are to provide rental assistance including addiction prevention services.

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- L. Vaughn stated that in FY16, HOPWA plans to assist 200 households in the county with household assistance.
- L. Vaughn stated that approximately \$102,468 would support households of PLWHA with essential services.
- L. Vaughn stated that supportive service funding would provide medical case management, health education, nutrition, utility and security deposit assistance, and transportation services to 175 households.
- L. Vaughn stated that the following are the counties in the EMA and their wait lists: Anne Arundel- 105, Baltimore County-87, Harford-0 (they accept referrals from the health department, Howard County-0, Queen Anne's County-0.
- L. Vaughn stated that there are 500 people on the waiting list for Baltimore City.
- L. Vaughn stated that category 2 is competitive funding.
- L. Vaughn stated that HOPWA applies for special project of national significance funding every three years on a competitive basis.
- L. Vaughn stated that HOPWA has two projects- 1) At the door, 2) Housing and help.
- L. Vaughn stated that the projects target homeless and at risk of homeless.
- L. Vaughn stated that at the door is a program through AIRS that provides housing for ex-offenders.
- L. Vaughn stated that the program provides short-term housing for five individuals over three years.
- L. Vaughn stated the project connect is another grantee and that HOPWA administers tenant based rental assistance for their three participants.
- L. Vaughn stated that Baltimore City receives two three-year awards for competitive projects for a combined total of \$2.8 million.
- L. Vaughn stated that in FY15, housing and support services addressed the needs of 82 PLWH/A and their families.
- L. Vaughn stated that in the last two years Mayor's Office of Human Services has renewed funding to continue services offered through the competitive project.
- L. Vaughn stated that a \$4.5 million award would support short-term and long-term housing for ex-offenders.
- L. Vaughn stated that a \$3.9 million award would support long-term housing for PLWH/A at risk of being homeless.
- L. Vaughn stated that during FY16 long-term and short-term housing for 81 households are planned.
- L. Vaughn stated that support services would be provided for PLWH/A receiving services under the category.
- L. Vaughn stated that supportive services include employment development, substance abuse treatment, and case management.
- L. Vaughn stated that most HOPWA providers believe that the impact of the repeal of the ACA has not been determined but will impact those who rely on the expansion of Medicare for medical services.

### Discussion:

- C. Harvey asked how HOPWA decide who takes priority in receiving housing from the waiting list.
- L. Vaughn stated that waiting list will be done through mass mailing and HOPWA will go through waiting list dates through the health department to determine eligibility.

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- C. Harvey asked why consumers were waiting long periods for housing.
- L. Vaughn stated that the lack of funding makes it difficult to address the waiting lists.
- L. Vaughn stated that PLWH/A are living longer and it's harder to find substantial housing for them now.
- D. Brewer asked if HOPWA had been in touch with the waiting list to see if all of the consumers are still in need.
- L. Vaughn stated that there is a manager in charge of the housing program that is going through the list.
- L. Vaughn stated that with HOPWA rent is based off of income.
- M. Muhammad asked if the short-term assistance in the counties is a part of the TBRA in the FY16 allocations and services.
- L. Vaughn stated that the short-term utilities services are not a part of the 6BRA and are only through AIRS.
- L. Vaughn stated that the utilities assistance is listed under support services.
- J. Fleming asked if there is permanent housing.
- L. Vaughn stated that Baltimore city works to get individuals into coordinated access through shelters.
- L. Vaughn stated that consumers could try to get access to permanent housing through the shelters.
- M. Poku asked if there was metrics to determine the immediate dollar usage, how long HOPWA is supporting a household on average.
- L. Vaughn stated that she did not have any data to reflect it.

## Linkage to Care for Incarcerated Persons Data Presentation

R. Hunt, BCHD

- D. Brewer introduced R. Hunt, Policy Analyst at the Baltimore City Health Department.
- R. Hunt stated that in 2011 BCHD collaborated with the Department of Corrections to ensure the continuation of care for inmates for entry back into the community.
- R. Hunt stated that grant is funded by the part A Minority AIDS Initiative (MAI.)
- R. Hunt stated that the sub-recipients are Johns Hopkins, University of Maryland- Jacques Initiative, Total Healthcare and Park West.
- R. Hunt stated that the sub-recipients provide pre-release services to the inmates 180 days prior.
- R. Hunt stated that 180 days prior to their release the health department receives their names and allows them to assist the inmates with discharge planning.
- R. Hunt stated that any supportive service need is addressed.
- R. Hunt stated that the clients are assigned through her to a sub-recipient based on their needs.
- R. Hunt stated that the inmates receive at least two pre-release visits on discharge planning.
- R. Hunt stated that client is followed through at least two confirmed HIV related medical care visits.
- R. Hunt stated that each assigned client is closed out after six months.
- R. Hunt stated that six months after the primary care visit there is a retention process to ensure that clients are still receiving primary care.
- R. Hunt stated that the health department receives a referral from the Department of

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Corrections; R. Hunt assigns the inmate to a sub-recipient.

- R. Hunt stated that sub-recipient goes through discharge process with the inmate.
- R. Hunt stated that the inmate has the choice to go through care with any sub-recipient.
- R. Hunt stated that she still tracks client if they choose a sub-recipient outside of the program.
- R. Hunt stated that some clients are not able to complete their first or second visit due to being incarcerated.
- R. Hunt stated that clients receive health care while they are incarcerated and that this program is to continue it.
- R. Hunt stated that when inmates are released they are provided with 30 days of medication.
- R. Hunt stated that currently all of the sub-recipients are entering their 2016 data through CAREWare.
- R. Hunt stated that in 2014 there were 179 clients and now there are 370 clients.
- R. Hunt stated that there are 130 through 150 released and that the program has been successful in linking the clients to care.
- R. Hunt stated that 89 clients were released in 2015.
- J.P. Gomez asked what it means consumers are linked.
- R. Hunt stated that linked refers to the consumers seeing a provider at least once.
- J.P. Gomez asked what happens between the inmates being assigned and released.
- R. Hunt stated that the inmates received primary care while they are incarcerated.
- R. Buchanan-Gunthrop stated that the release dates continuously change and asked how the program would help them.
- R. Hunt stated that if the client's release date is still within the 90-day window, the clients are still monitored for the fiscal year.
- R. Hunt stated that clients that are resentenced for a longer period are kept on the active list but are not counted in their numbers.
- R. Hunt stated that there is a different spreadsheet tab for clients who are resentenced.
- J. Furtado asked what happens after the client attends their second visit.
- R. Hunt stated that the clients are monitored to make sure they are retained in care.
- R. Hunt stated that the program works with providers for clients who are lost to care.
- R. Hunt stated that the program has new initiatives and one is the 5-month multidisciplinary meeting.
- R. Hunt stated that they are requesting looking at 5-10 clients.
- R. Hunt stated that there is a FAQ and resource manual created to assist outreach workers looking for resources outside of Ryan White funding.
- R. Hunt stated that there is a prevention team through Baltimore City that goes out to find clients who have been lost to care.
- R. Hunt stated that Wexford Health provides services prior to the release of the inmate.
- R. Hunt stated that clients receive testing when they visit their probation officer.

### Discussion:

- E. Nicholson asked who tracks the clients between their last visit and their six-month follow up.
- R. Hunt stated that most of the sub-recipients team has an outreach team to locate clients who are lost to care.
- M. Scriber asked who the formerly incarcerated persons could seek to receive these services.
- R. Hunt stated that the prison has to be aware of the inmate's status in order for them to receive

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care.

- M. Scriber asked if the program is for all of the correctional facilities in the state of Maryland.
- R. Hunt replied yes.
- A. Patterson asked if the program is working to ensure that the providers are working to assist clients in achieving viral load suppression.
- R. Hunt stated that the data presented from Wexford Health stated that around 70% of released clients are virally suppressed.
- J. Fleming asked if the program works with the parole officer.
- R. Hunt stated that the parole officer might not be aware of their status.

## Youth Data Presentation

C. Carey, BCHD

- D. Brewer introduced C. Carey, policy analyst for BCHD.
- C. Carey stated that the most recent data is FY15.
- C. Carey stated that they are expecting to have more timely data with CAREWare in the future.
- C. Carey stated that 6% of the Ryan White Part A services are provided to youth between the ages of 13-24.
- C. Carey stated that the age group has a viral load suppression rate of 35%.
- C. Carey stated that 320 youth received one or more core medical or support service.
- C. Carey stated that 162 youth received one or more primary medical care visits.
- C. Carey stated that 73% of the clients were black, 68% were male, and 62% were at or below 100% of the federal poverty level.
- C. Carey stated that 45% are in stable housing.
- C. Carey stated that 39% had Medicaid or Medicare, 15% are uninsured, and 38% the insurance is unknown.
- C. Carey stated that the following data would focus on clients who received one or more primary medical care visit.
- C. Carey stated that the program starts with linked to primary care on the continuum of care.
- C. Carey stated that 44% of clients are retained in care.
- C. Carey stated that 40% of clients received antiretroviral therapy.
- C. Carey stated that 35% of the youth are virally suppressed.
- C. Carey stated that 7% of the virally suppressed are males and 23% are female.
- C. Carey stated that 70% are black, 14% white, 4% Asian, 11% Hispanic.
- C. Carey stated that a question came up about the differences between the older and younger of the youth group.
- C. Carey stated that in the sample only five of the clients that had one or more primary medical care visit funded by Part A were 13-17.
- C. Carey stated that it is difficult to see the difference with such small numbers.
- C. Carey stated that 38% of male youth are virally suppressed and 27% of female youth.
- C. Carey stated that 80% of the youth that receive psychosocial support services and received a primary care visit were virally suppressed.
- C. Carey stated that reviewed services that had clients with suppression rates higher than 35% such as medical transportation and health insurance premiums.
- C. Carey stated that there were 95 youth with viral load suppression who were receiving case

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management.

- C. Carey stated that youth with 6 or more visits were more likely to be virally suppressed.
- C. Carey stated that youth that are virally suppressed and receive transportation were more likely to be virally suppressed but were less likely if they had 6 or more visits.
- C. Carey stated that case managers identified that youth required 6 or more medical transportation trips tended to have more needs to be addressed.
- C. Carey stated that the youth were likely to have 2 or 3 additional co-morbidities to the HIV.
- C. Carey stated that out of the entire group of youth, 56 had viral load suppression.
- C. Carey stated that young men were  $\frac{3}{4}$  of the clients and used 70% of services.
- C. Carey stated that the number of virally suppressed youth that received primary medical care services is also 56.
- C. Carey stated that young women use more services on average than young men.
- C. Carey stated that there were 37 youth clients who received medical case management services.
- C. Carey stated that about 70% were young men and on average used a little more services on average than the young women.
- C. Carey thanked the providers who submitted the data.

Discussion:

- C. Harvey asked if the young men of the group included young men who have sex with men (msm.)
- C. Carey stated that the numbers were too small for the msm population to analyze the data.
- D. Brewer asked if the group received mentorship.
- C. Carey stated that only five youth received psychosocial support.
- C. Carey stated that for all young people with chronic diseases there is a large drop off of care.
- C. Carey stated that the FY15 data is incomplete due to a lack of eligible clients to analyze.

## Ryan White Part A Update

S. Pelham/ L.  
Wagner, BCHD

### HRSA Updates

- S. Pelham presented the Part A report to the council.
- S. Pelham stated that the next monthly HRSA call was scheduled for Friday, May 19<sup>th</sup>.
- S. Pelham stated that the integrated plan webinar is scheduled for May 18<sup>th</sup>.

### Program Updates

- S. Pelham stated that final FY16 invoices have been submitted. The expenditure rates for direct services including carryover is 99.20% for part A and 98.3% for MAI.
- S. Pelham stated that 50% of the FY17 Ryan White contracts are completed and signed.
- S. Pelham stated that BCHD and DHMH are collaborating with the DC EMA are coordinating to complete the needs assessment.
- S. Pelham stated that BCHD would be collaborating with the Comprehensive Planning Committee to coordinate a Ryan White needs assessment.
- S. Pelham stated that a location has been identified to conduct surveys on May 18<sup>th</sup>.
- S. Pelham stated that FY17 site visits are scheduled to begin in the week of June 5<sup>th</sup> and BCHD and ABC are finishing up notifications to the sub-recipients.



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- S. Pelham stated that the Ryan White program is preparing for priority setting.
- S. Pelham stated that he and C. Lacanienta met to discuss how PCSO will assist with PSRA preparations.
- S. Pelham stated that data presentations for June include mental health and substance abuse data, outreach, and support services impact on viral load suppression.

### PC Related Updates

- S. Pelham stated that BCHD reached out to Cyd Lacanienta to serve as director of the support office.
- S. Pelham stated that J. Stenhouse is scheduled to transition to BCHD as the Administrative Coordinator on May 31<sup>st</sup>.
- S. Pelham stated that Natalie Flath would be assuming the epidemiology duties.
- S. Pelham stated that Joan Carey would now be the MAI program officer.

### CQM Updates

#### Service Standards/ Standards of Care

- L. Wagner stated that the Standards of Care workgroup is continuing to develop and revise the Standards of Care.
- L. Wagner stated that the planning council has approved the categories of Early Intervention Services (EIS), Health Education Risk Reduction (HERR), Home Health Care, Oral Health, and Health Insurance Premium and Cost Sharing Assistance, Hospice and Home and Community Health.
- L. Wagner stated that the categories of OAHS, Mental Health Services, and Psychosocial Support, Other professional services, Child Care, and Respite Care are currently moving forward in the approval process.
- L. Wagner stated that the projected timeline for completion of the Standards of Care to be uploaded on the Planning Council website is June 2017.

#### Maryland Regional Group

- L. Wagner stated that the current cooperative agreement between HRSA and the National Quality Center is currently scheduled to end June 30, 2017.
- L. Wagner stated that the NQC is a sponsor for the Maryland Regional Group and other regional groups across the Ryan White network; the organization also provides quality management technical assistance to Ryan White grantees.
- L. Wagner stated that in the event that the cooperative agreement is not renewed, members of the Maryland Regional Group are dedicated to continuing the work set forth by the NQC.

#### Program Officer QI Committee

- L. Wagner stated that quality improvement initiative had begun in BCHD.
- L. Wagner stated that an internal QI had been formed to implement the culture of quality improvement.
- L. Wagner stated that the objectives of the QI subcommittee are: to provide a monthly forum for program officers to discuss QI activities, build QI capacity, to build teamwork, develop guidance for providing feedback to sub-recipients, and to report back to the Quality Management committee on a quarterly basis.
- L. Wagner stated that the committee had its first monthly meeting on April 27<sup>th</sup> and would meet again on May 25<sup>th</sup>.

#### CAREWare Updates

- L. Wagner stated that bimonthly CAREWare training with BCHD staff began on April 5<sup>th</sup>.
- L. Wagner stated that Part A program officers received CAREWare access to provider data on

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May 4<sup>th</sup> and 5<sup>th</sup>.

- L. Wagner stated that sub-recipients are actively using Maryland CAREWare through direct entry or electronic imports.
- L. Wagner stated that two sub-recipients CAREWare to CAREWare translation is in progress with varying deadlines.
- L. Wagner stated that on Thursday, May 18<sup>th</sup> a webinar on putting plans into action.
- L. Wagner stated that the target audience is Ryan White recipients, program managers and staff, CDC/HIV prevention program staff, HIV planning council and planning body members.
- L. Wagner stated that the link to register can be provided to those who are Interested.

### Discussion:

- C. Harvey asked if there would be a room provided for planning councils to listen to the webinar.
- D. Brewer stated that there would not be a room provided for this webinar and it could be listened to at home.
- L. Wagner stated that she would send the webinar information to J. Stenhouse to send it to the council.
- P. DeMartino stated that the state would have a viewing of the webinar at 500 North Calvert St. in their second floor conference room.

## Part B Update

P. DeMartino, DHMH

- P. DeMartino presented the Part B report.
- P. DeMartino stated that as of July 1<sup>st</sup>, the Department of Health and Mental Hygiene would change its name to the Department of Health.
- P. DeMartino stated that the statewide meeting is May 23<sup>rd</sup> at Martins West.
- P. DeMartino stated that the focus is making it easy to do the right thing.
- P. DeMartino stated that 2018 is seen as a continuation year and expect to see the same amount of dollars going out as they did the previous year of \$17 million.
- P. DeMartino stated that the state HIV Planning Group next meets Thursday, July 13<sup>th</sup>.
- P. DeMartino stated that the department would be closed on Memorial Day.

## Planning Council Updates

### Executive Committee:

- D. Brewer presented the executive committee report.
- The committee met on May 10<sup>th</sup>, 2017.
- The committee approved the administrative mechanism process and C. Smith was assigned as the lead.

Motion: To recommend that the Standards of Care for the category of Child Care Services be approved.

Made by: D. Brewer

Second: C. Harvey

Action: Passed

Opposed: 0

Abstain: 0

Motion: To recommend that the Standards of Care for the category of Respite Care be approved.

Made by: D. Brewer

Second: C. Harvey

Action: Passed

Opposed: 0

Abstain: 0

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Motion: To recommend that the Standards of Care for the category of Professional services be approved.

Action: Passed

Made by: D. Brewer

Opposed: 0

Second: M. Scriber

Abstain: 0

Motion: To recommend that the Standards of Care for the category of Outreach Services be approved.

Action: Passed

Made by: D. Brewer

Opposed: 0

Second: J. Furtado

Abstain: 0

Motion: To recommend that the Standards of Care for the category of OAHS be approved.

Action: Passed

Made by: D. Brewer

Opposed: 0

Second: B. Ward

Abstain: 0

Motion: To recommend that the Standards of Care for the category of Mental Health Services be approved.

Action: Passed

Made by: D. Brewer

Opposed: 0

Second: M. Scriber

Abstain: 0

Motion: To recommend that the Standards of Care for the category of Psychosocial Support Services be approved.

Action: Passed

Made by: D. Brewer

Opposed: 0

Second: E. Nicholson

Abstain: 0

Motion: To extend June's planning council meeting for an hour.

Action: Passed

Made by: D. Brewer

Opposed: 0

Second: C. Harvey

Abstain: 0

### Nominating Committee:

- C. Harvey presented the Nominating Committee report.
- The committee met on May 2<sup>nd</sup>, 2017.
- The committee reviewed the minutes of the April meeting.
- The committee reviewed the existing vacancies on the planning council and reviewed the membership tables.
- The committee reviewed the pool list and updated the buddy system.
- The committee reviewed two (2) screed applicants and distributed three (3) applications for screening.
- The committee reviewed primary committee attendance as requested by leadership.

Motion: Motion: To recommend that one (1) planning council member receive a removal letter based on attendance.

Action: Passed

Made by: C. Harvey

Opposed: 0

Second: M. Scriber

Abstain: 0

Motion: To recommend that one (1) planning council member receive a two (2) month warning letter based on attendance.

Action: Passed

Made by: C. Harvey

Opposed: 0

Second: E. Nicholson

Abstain: 0

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Motion: Motion: To recommend that a reappointment letter be sent to the mayor's office for B. Ward.

Made by: C. Harvey

Second: M. Scriber

Action: Passed

Opposed: 0

Abstain: 0

Motion: Motion: To recommend that D. Albert be moved to the pool list.

Made by: C. Harvey

Second: E. Nicholson

Action: Passed

Opposed: 0

Abstain: 0

## PCSO Report

J. Stenhouse, PCSO

- J. Stenhouse presented the support office report.
- J. Stenhouse stated that over the past month, the support office has facilitated committee meetings and has coordinated with BCHD throughout the support office transition.
- J. Stenhouse stated that the support office met with the grantee and leadership to discuss PSRA planning and transition plans.
- J. Stenhouse stated that the support office is planning for the FY18 Priority Setting Resource Allocation conference.
- J. Stenhouse stated that the conference would be held on Thursday and Friday, July 13-14<sup>th</sup> at the University of Maryland School of Dentistry.
- J. Stenhouse stated that PSRA training would be conducted in June.
- J. Stenhouse stated that a survey was sent out to planning council members
- J. Stenhouse stated that a survey would be sent out to all planning council members to determine which time works better for everyone.
- J. Stenhouse stated that all council members would be notified of the priority setting training dates as soon as dates are finalized.
- J. Stenhouse stated that PSRA training is mandatory for all members of the council.
- J. Stenhouse stated that members would be unable to attend PSRA if they have completed the training.
- J. Stenhouse stated that the support office is going through a transition process and asked that members contact C. Lacanienta for any support office questions after May 31<sup>st</sup>.
- J. Stenhouse reminded the council that members who affiliations have recently changed should see a member of the TWG team to update and complete new conflict of interest forms.

## New Business

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- No new business

Motion: To adjourn the meeting	Made by: J. Keruly	Second: C. Harvey
<b>Action: Passed</b>	<b>Opposed: 0</b>	
<b>Abstained: 0</b>		

Time adjourned: 7:35 p.m.	Date of approval:
<b>Signature:</b>	<b>Electronic signature of chair (PC Minutes only):</b>

Greater Baltimore HIV Health Services Planning  
Council

Planning Council

Minutes

Final