

Planning Council

Date of meeting: March 15, 2016

Time started: 5:34 p.m.

BCHD Staff: C. Carey
J. Carey
A. Ferrari
R. Hunt
N. Hussaini
S. Pelham

TWG Staff: D. Gorham
A. Onyeabo
J. Stenhouse
C. Sutherland
D. Taylor
C. Wright

Present: K. Arbaugh
L. Bank
D. Brewer
A. Brown
R. Buchanan-Gunthrop
A. Brown
J.P. Gomez
G. Jones-Childs
D. Kelly, Jr.
J. Keruly

Absent: L. Abrams
J. Bagley
P. Chaulk
J. Fleming
A. Fowlkes
J. Fleming

Visitors: L. Bonomo
S. Bosley
M. Cole
P. DeMartino

H. Lambert
T. Luft
E. Nicholson
D. Rivera
M. Scriber
J. Singletary
J. Simmons
B. Ward
K. Gray
V. Lathan
K. Rogers
S. Spriggs
E. Watson, Jr.
J. Furtado
L. Hairston
S. Lindsay
V. Woolums

Handouts:

- Planning Council Packet (TWG, March 2016).
- Baltimore EMA Strategic Planning Retreat Output (TWG, 2016)
- FY15 Expenditure March 1 2015- December 31, 2015 Summary (BCHD, 2016)
- Mental Health Data Presentation (F. Sullivan, 2016)
- PMC - Special Populations Data Presentation (J. Hailey, 2016)
- Oral Health Data Presentation (V. Meeks, 2016)

Introductions

Planning Council

- The meeting convened with quorum at 5:34 p.m. and introductions were made.
- D. Brewer called for a moment of silence.

Review of Minutes

Planning Council

- D. Brewer asked the Planning Council to review the minutes of the February meeting.

Motion: To accept the February meeting minutes as written.	Made by: C. Smith	Second: E. Nicholson
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Action: Passed	Opposed: 0	Abstained: 2
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**Frank Sullivan,
Chase Brexton
Health Services**

Mental Health Data Presentation

Planning Council

- F. Sullivan presented “Addressing Mental Disorders: The ‘Missing Link’ to Effective HIV Prevention, Care, Treatment, and Adherence Support” to the planning council.
- F. Sullivan listed the services provided at Chase Brexton Health Services.
- F. Sullivan stated that the new goal in HIV treatment is to stop transmission in order to extend life.
- F. Sullivan stated that the mortality risk rises significantly for patients with behavioral health risks.
- F. Sullivan stated that there have been many breakthroughs in HIV medicines and treatment, but there is now a need for expanded mental health and substance use programs.
- F. Sullivan stated that mental health is very important factor in achieving viral load suppression.
- F. Sullivan stated that according to an announcement made by the CDC, the recent outbreak of HIV in Indiana points to the need for expanded mental health and substance abuse treatment.
- F. Sullivan stated that fully integrated health systems such as Chase Brexton are very important in maintaining treatment adherence in patients.
- F. Sullivan stated that good management support is critical to a patient in recovering from behavioral health and substance abuse disorders.
- F. Sullivan stated that a March 2015 Chase Brexton research study showed a correlation between high viral load suppression rates and high level of engagement in mental health services.
- F. Sullivan stated that additional funding is needed to recruit mental health providers, but there is a national shortage of mental health providers, particularly psychiatrists.
- F. Sullivan stated that there is a lack of bilingual psychiatrists and therapists.
- F. Sullivan stated that there is a need to integrate HIV healthcare and mental health care, other support services, and HIV positive patients need to value and commit to mental health care.
- F. Sullivan stated that mental health is an important part of staying healthy when living with HIV, and recovering from mental health conditions will support both keeping up with medical care and an extended life.

Discussion:

- J. Simmons asked if the psychiatrist shortage is a local or national problem.
- F. Sullivan stated that the shortage is national.
- C. Smith asked what Chase Brexton Health Services does to treat long-term HIV positive populations.
- F. Sullivan stated that aging populations present different mental health problems and should be regarded as survivors with special needs.
- M. Scriber asked if another career discipline could fulfill the lack of psychiatrists.
- F. Sullivan replied yes, but psychiatrists are still very important.

Cyd Lacanienta Legacy Award

D. Brewer, Chair

- D. Brewer presented C. Lacanienta with the Cyd Lacanienta Legacy Award for devoting over twenty years to the Planning Council.
- D. Taylor stated that it was an honor to work with C. Lacanienta and every year an award would be presented to a planning council member who continues the legacy.
- C. Lacanienta thanked the planning council.
- C. Lacanienta stated that it was an honor to work with the community for the past twenty years.

PMC Special Populations Data Presentation

J. Hailey, STAR TRACK

- J. Hailey presented “Adolescent HIV Care and Services” to the planning council.
- J. Hailey listed HIV/STI screenings and referrals, primary care services, family planning services, and social work services as the clinical services offered at STAR TRACK.
- J. Hailey described STAR TRACK’s framework of care as sex positive, client centered, strengths based, harm reductionist, community driven, with an emphasis on social and racial justice.

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- J. Hailey stated that STAR TRACK provides services to high-risk populations including sexual minority and gender variant youth, young women of color, commercial sex workers, and homeless and transient youth.
- J. Hailey stated that women, infants, youth, and children (WICY) made up 42.9% of new HIV cases in the Baltimore EMA in 2013. Among new WICY infections in 2013, 59% of new cases were among women of childbearing age, and 40.8% new cases were among youth 13-24 years old.
- J. Hailey listed recent trends and statistics among HIV in youth.
- J. Hailey stated that unique clinical issues for youth perinatally infected with HIV included poor health during childhood, extended periods of sub-optimal HIV treatment, high likelihood of a multi-drug resistant virus, and a previously low expectation of survival.
- J. Hailey stated the unique clinical issues for youth behaviorally infected with HIV included a recent diagnosis, likelihood of being from a marginalized population, and a need for treatment in the absence of symptoms.
- J. Hailey stated that according to a study done by the CDC, only 40.5 % of youth ages 13-24 living with HIV had received a diagnosis, while only 30.6% were linked to care.
- J. Hailey stated that there remains a need for aggressive diagnosis and linkage to care among youth.
- J. Hailey stated that there is a disproportionate HIV impact among men who have sex with men.
- J. Hailey stated that young women tend to have the same risk for HIV as young MSM.
- J. Hailey stated that young women who determine health and safety by social network tend to have poor condom negotiation skills, and experience power imbalances in relationships.
- J. Hailey stated that there was a lack of information surrounding transgender and gender variant youth.
- J. Hailey stated that a barrier for transgender and gender variant youth is a lack of safety in medical care.

Discussion:

- C. Smith asked what the planning council could do that would be helpful for the populations discussed.
- J. Hailey answered that addressing stigma and ensuring that providers are comfortable discussing comprehensive sexual health and wellness would be helpful tactics.
- J. P. Gomez asked how STAR TRACK accomplished their framework of care.
- J. Hailey stated that STAR TRACK listened to Community Advisory Boards, performed evaluations and listened to feedback to create and implement their framework of care.
- J. Keruly asked how many clients are served by STAR TRACK.
- J. Hailey stated that STAR TRACK serves about 3000 clients, 126 of which are HIV positive.
- C. Smith asked which barriers exist for youth to receive housing.
- J. Hailey stated that there about two youth shelters, but many shelters will not accept youth because there are other systems in place for youth housing.

**L. Bank, DDS
and V. Meeks,
PLUS Clinic**

Oral Health Data Presentation

- L. Bank and V. Meeks presented “PLUS Program” to the planning council.
- V. Meeks presented data on unduplicated Ryan White Part B, Ryan White Part A –EMA, and Ryan White Part A-STSC clients.
- V. Meeks listed dental procedures provided from March 1 2015 - March 31, 2016 using Ryan White Part A dollars and the total funding expended per procedure.
- V. Meeks listed dental procedures provided from March 1 2015 - January 31, 2016 using Ryan White Part B dollars and the total funding expended per procedure.
- V. Meeks stated that clients received and requested more expensive procedures over the past year.
- L. Bank stated that every Ryan White oral health care client needs funding to continue in this category.
- L. Bank stated that oral health care was listed as an essential service needed by clients, which is not covered

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- L. Bank stated that inadequate oral health for HIV patients could undermine HIV treatment and diminish quality of life.
- C. Smith asked if there was a funding stream available for periodontal implants.
- V. Meeks replied no, and explained that periodontal implants are very expensive and take over two years to complete the procedure.

Discussion:

- J. Keruly stated that dental insurance does not cover all oral health needs.
- J. Keruly stated that oral health is important because there are some medical procedures that cannot be done if the client has poor oral health.
- J. Keruly stated that there would be no access to oral health for some clients if not for L. Bank and V. Meeks.

Ryan White Part A Update

S. Pelham, BCHD

- S. Pelham presented the Part A report to the council.
- S. Pelham stated that Lt. Worrell attended the planning council strategic planning meeting on March 9, 2016.
- S. Pelham stated that there is no update regarding the final FY2016 award.
- S. Pelham stated that the planning council grantee bi-weekly meeting was scheduled for March 10, 2016 at 2:30 p.m.
- S. Pelham stated that to reduce the FY15 unobligated expenses, funds were reallocated to various categories.
- S. Pelham stated that all adjustments were less than 5% of the category's total allocation and therefore did not require Planning Council approval.
- S. Pelham stated that the category of Medical Case Management was increased by \$8,000 to cover computer equipment costs.
- S. Pelham stated that the category of OAHS –PMC was decreased by \$67,200 to address unallocated funding.
- S. Pelham stated that the category of OAHS- OMC Co-morbidity was increased by \$2,000 to cover computer equipment costs.
- S. Pelham stated that the category of Mental Health Services was increased by \$3,000 to assist in CAREWare implementation.
- S. Pelham stated that the category of Substance Abuse Treatment Outpatient was increased by \$3,000 to

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- S. Pelham stated that January reimbursements were processing.
- S. Pelham stated that BCHD was working with Associated Black Charities and started the contract signing process for FY16.
- S. Pelham stated that as of February 29, 53% of all contracts were executed.
- S. Pelham stated that the Board of Estimates accepted the FY16 Notice of Grant Award (NGA) from HRSA, as well as a two-month advance for the Planning Council Support Office, the fiscal agent, and direct service providers.
- S. Pelham stated that all scheduled FY15 site visits and desk audits were completed.
- S. Pelham stated that BCHD would receive programmatic technical assistance on the site visit process from March 21-24, 2016.
- S. Pelham stated that BCHD was awaiting HRSA approval of the FY16 Core Medical Waiver.
- S. Pelham stated that the next provider meeting was scheduled for March 18, 2016.
- S. Pelham stated that providers submitted the fourth quarter reports on the successes and challenges of improvement projects.
- S. Pelham stated that the position for Deputy Director of CQM was closed. Interviews are anticipated to begin soon.

Part B Report

R. Buchanan-Gunthrop, DHMH

- A. Onyeabo asked the planning council to read the part B report and contact the support office with any questions.

Planning Council Updates

Planning Council

- Executive Committee**
- C. Smith presented the Executive Committee report.

Motion: To extend the April Planning Council meeting by one hour.	Made by: C. Smith	Second: J. Simmons
Action: Passed	Opposed: 0	Abstained: 0

- PLWH/A Committee**
- H. Lambert presented the PLWH/A Committee report.
 - The committee met on February 23, 2016.
 - The committee participated in an advocacy timeline interactive activity with committee guests.
 - The committee listened to a panel on the role of the consumer from the federal, state, and community perspective.
 - The committee listened to a panel on accessing care from speakers C. Maulsby, K. Markie, and H. Cassidy-Stewart.
 - The committee identified and prioritized issues for advocacy.
 - The committee discussed takeaways and best practice methods.

- PCSO Report**
- A. Onyeabo presented the Planning Council Support Office Report.
 - A. Onyeabo stated that the support office has resumed work after one week away from the office.
 - A. Onyeabo stated that the support office worked on logistics for data presentations and have held calls with council leadership.
 - A. Onyeabo stated that FY2015 came to a close on the last day of February, as did InterGroup Synergy and

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- Planning Collaborative’s management of the support office contract for the planning council.
- A. Onyeabo thanked D. Munro and C. Lacanienta for their leadership.
 - A. Onyeabo stated that due to the delay in the execution of the support office contract, meetings were cancelled during the first week of March.
 - A. Onyeabo stated that all cancelled meetings were rescheduled.
 - A. Onyeabo stated that on February 23, the PLWH/A committee held its retreat as the fourth meeting in a series of discussions to inform the integrated plan.
 - A. Onyeabo stated that about 40 consumers and providers attended the PLWH/A retreat.
 - A. Onyeabo stated that the next community discussion was scheduled for April 7, 2016 at the Johns Hopkins Bloomberg School of Public Health.
 - A. Onyeabo stated that the support office has begun planning for the FY17 PSRA conference.
 - A. Onyeabo asked the planning council to mark their calendars for June 16 and 17, 2016 at the University of Maryland School of Dentistry.
 - A. Onyeabo stated that the support office would hold priority setting training prior to the conference.

New Business

Planning Council

- C. Smith thanked all planning council members who attended AIDS Watch and encouraged members to vote in the Maryland primaries.

Motion: To adjourn the meeting	Made by: C. Smith	Second: D. Rivera
Action: Passed	Opposed: 0	Abstained: 0
Time adjourned: 7:58 p.m.	Date of approval:	
Signature:	Electronic signature of chair (PC Minutes only):	