

## **PLANNING COMMISSION (COHAH) GENERAL BODY MEETING AGENDA**

**THURSDAY, JANUARY 27, 2022 – 6:00PM TO 8:00PM**

**ZOOM CONFERENCE AND VIDEO CALL**

**Note: all times are approximate**

6:05 pm	1. Call To Order and Moment of Silence for HIV and COVID-19
6:10 pm	2. Review and Adoption of the Meeting Agenda for January 27, 2022 3. Review and Approval of the Meeting Minutes for December 16, 2021
6:15 pm	4. Ryan White HIV/AIDS Program (RWHP) Recipient Report/ Updates
6:25 pm	5. Standing Committee Updates <ul style="list-style-type: none"> <li>Research &amp; Evaluation Committee (REC)</li> <li>Community Engagement &amp; Education Committee (CEEC)</li> <li>Comprehensive Planning Committee (CPC)</li> <li>Integrated Strategies Committee (ISC)</li> </ul>
6:45 pm	6. Commission Administrative Business – “Things to Do” <ul style="list-style-type: none"> <li>Integrated Planning – Leah Varga, PhD HAHSTA</li> <li>Robert’s Rules Training – BEGA</li> </ul>
7:15 pm	7. New Business
7:30 pm	8. Announcements/Adjournment
<b><u>NEXT PLANNING COMMISSION (COHAH) MEETING:</u></b>	
<b>THURSDAY FEBRUARY 24, 2022 6PM-8PM ZOOM</b>	

### **FEBRUARY 2022 MEETINGS AT A GLANCE**

February	15	Research and Evaluation Committee (REC) Meeting <b>Online</b>	3p to 5p
February	17	Community-Engagement & Education Committee (CEEC) Meeting <b>Online</b>	5p to 7p
February	23	Comprehensive Planning Committee (CPC) Meeting <b>Online</b>	11a to 1p
February	23	Integrated Strategies Committee (ISC) Meeting <b>Online</b>	1p to 3p
February	24	Executive Operations Committee (EOC) Meeting <b>Online</b>	5p to 6p
February	24	COHAH General Body Meeting <b>Online</b>	6p to 8p

# PLANNING COMMISSION (COHAH) GENERAL BODY MEETING MINUTES

**THURSDAY, DECEMBER 16, 2021 - 6:00PM**

**ZOOM CONFERENCE AND VIDEO CALL**

**ELECTRONIC – ONLINE MEETING**

<b>ATTENDEES/ROLL CALL</b>					
<b>COMMISSIONERS</b>	<b>PRESENT</b>	<b>ABSENT</b>	<b>COMMISSIONERS</b>	<b>PRESENT</b>	<b>ABSENT</b>
Adkins, Sarcia (Comm. Co-Chair)	X		Gomez, Ana		X
Barnes, Clover (Ex-Officio)		X	Guitierrez, Anthony		X
Blocker, Lakisa		X	Hickson, DeMarc		X
Brown, Charles		X	Hutton, Kenya	X	
Bryant, Larry		X	Keita, Ramatoulaye		X
Camara, Farima		X	Massie, Jenné	X	
Carney, Misty	X		McClain, Lenora	X	
Cauthen, Melvin	X		Mekonnen, Betelhem (Comm. Vice-Chair)		X
Clark, Lamont (Gov. Co-Chair)	X		Murdaugh, Henry	X	
Coker, Sharon	X		Palmer, Kentrell		X
Cooper-Smith, Marjorie	X		Padmore, Gerald	X	
Copley, Mackenzie	X		Pettigrew, Kenneth	X	
Corbett, Wallace		X	Rakhmanina, Natella	X	
Cox, Derrick		X	Rhodes, Stefanie		X
Dean, Traci		X	Sain, Philip		X
DeMartino, Peter	X		Shaw-Richardson, Re'ginald	X	
Fogal, Doug	X		Torre, Andrew	X	
Ford, Jasmine	X		Wallis, Jane	X	
Forman, Lynn	X		Washington, Antonio	X	
			Yocum, Ashley	X	
<b>RECIPIENT STAFF</b>	<b>PRESENT</b>	<b>ABSENT</b>		<b>PRESENT</b>	<b>ABSENT</b>
Lago, Lena	X				
<b>HAHSTA STAFF</b>	<b>PRESENT</b>	<b>ABSENT</b>	<b>COMMISSION STAFF</b>	<b>PRESENT</b>	<b>ABSENT</b>
Cooper, Stacey	X		Bailey, Patrice		
Fox, Anthony	X				
Johnson, Alan	X				

## HIGHLIGHTS

*This is a draft version of the December 16, 2021 COHAH General Body Meeting Minutes which is subject to change. The final version will be approved on January 27, 2022.*

## AGENDA

Item	Discussion
Call to Order	The meeting was called to order by Lamont C. at 6:10 pm, followed by a moment of silence.
Welcome and Introductions/Roll Call	Attendance of Commissioners was taken by Roll Call. With 23 commissioners present for roll call, quorum was established.
Review and Adoption of the Agenda	Gerald P. motioned to adopt the agenda for December 16, 2021. Doug F. seconded the motion. The agenda was adopted unanimously.
Review and Approval of the Minutes	Doug motioned to adopt the November 18, 2021 meeting minutes. Melvin C. seconded the motion. The minutes were approved unanimously.
Ryan white HIV/AIDS Program (RWHAP) Recipient Report/Updates	<p><b>Lena Lago reported for the Recipient.</b></p> <p>The Part A and Part A MAI Funding Monthly Fiscal and Recipient report is for the period of October 1 – 30, 2021. The GY 31 award has been received in the amount \$31,479,527.</p> <p><b>FISCAL STATUS</b>          For Part A and Part A MAI in October 2021, (32) of (39) invoices have been received.</p> <p>There are no service delivery challenges for DC, Maryland or Virginia.</p> <p><b>PART A FISCAL SUMMARY</b>          Part A expenditures are at 43% and should be at 67%.</p> <p>Service areas affected by unprocessed invoices are Early Intervention Services (EIS), Regional Early Intervention Services (REIS), Health Insurance Premium and Cost Sharing Assistance (HIPCSA), Medical Case Management (MCM), Linguistic Services (LS), Medical Transportation (MT), Outreach Services (OS), and Psychosocial Support Services (PSS). Services spending 30% below expected are Early Intervention Services (EIS), Regional Early Intervention Services (EIS), Home and Community-Based Health Services (HCBS), and Medical Nutrition Therapy (MNT).</p> <p>There are no services spending 30% above expected.</p> <p><b>PART A MAI FISCAL SUMMARY</b>          Part A MAI expenditures are at 46% and should be at 67%.</p>

	<p>Service areas affected by unprocessed invoices are Outpatient/Ambulatory Health Services (OAHS), Mental Health Services (MH), and Substance Abuse Services –Outpatient (SASO).</p> <p>Services spending 30% below expected are Early Intervention Services (EIS), Substance Abuse Services – Outpatient (SASO), and Psychosocial Support Services (PSS).</p> <p>There are no services spending 30% above expected.</p> <p><b>UBC FISCAL SUMMARY</b>          UBC expenditures are at 62% and should be at 67%.</p> <p>There are no service areas affected by unprocessed invoices.</p> <p>Services spending 30% below expected are Oral Health Care (OH), and Substance Abuse Services – Outpatient (SASO).</p> <p>There are no services spending 30% above expected.</p> <p><b><u>RECIPIENT REPORT</u></b>          GY 31 Closeout. The Recipient and her team are working diligently to ensure funds are spent down as much as possible and notifications of any reprogrammings will be noted in next month’s report. HRSA anticipates significant underspending from Ryan White grants due to the COVID-19 pandemic. HRSA has waived the underspending penalties for Parts A and B for FY 20 and FY 21. Carryover will be requested.</p>
<p><b>Standing Committee Updates</b></p>	<p><b><u>Research and Evaluation Committee (REC) reported by Lamont C.</u></b>          The REC met in December and continued to work on the Needs Assessment tool. The next steps for the committee will be to input to tool into RedCap. Once in RedCap, the committee will need to test the survey. Additionally, after the survey is in RedCap, Leah will submit it to the DC Health IRB for approval.</p> <p><b><u>Community Education and Engagement Committee (CEEC) reported by Jenne M.</u></b>          CEEC did not meet in December, but will have updates in January.</p> <p><b><u>Comprehensive Planning Committee (CPC) reported by Gerald P.</u></b>          The CPC report mirrored the Recipient’s report. There was also a discussion around the Priority Setting and Resource Allocation process for 2022.</p> <p><b><u>Integrated Strategies Committee (ISC) reported by Jane W.</u></b>          The ISC continued to work with George Washington University on the Health Equity position paper. This month they focused on Housing. Sarcia A., along with a colleague from Housing Counseling Services provided input on the Housing section. They will discuss Medical Care next month. They also will</p>

	reach out to HRSA to get clarity around the Child Care Service Standards. The Committee has also created an EHE Advisory Group charter that outlines what the roles, responsibilities, and expectations of both the Advisory Group and HAHSTA are. In January they may get EHE updates from HAHSTA and Jane invited people to attend that meeting.		
<b>Commission Administrative Business – Things to Do</b>	Lamont noted that MOTA hired a new person who will work with COHAH. The hope is by early 2022 they will be able to take care of the outstanding membership issues that COHAH has.		
<b>Old Business</b>	N/A		
<b>New Business</b>	N/A		
<b>ANNOUNCEMENTS/OTHER DISCUSSION</b>			
Root W. from Maryland Department of Health announced they released a statewide LEAP RFA to increase community engagement. The RFA Conference is tomorrow (December 17) at 1 PM			
<b>HANDOUTS</b>			
<ul style="list-style-type: none"><li>• Planning Commission (COHAH) Meeting Agenda, December 16, 2021</li><li>• Planning Commission (COHAH) Meeting Minutes, November 18, 2021</li><li>• Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 30 – Reporting Period: March 2021 – October 2021</li></ul>			
<b>MEETING ADJOURNED</b>	<b>6:32 PM</b>	<b>NEXT MEETING</b>	<b>THURSDAY, JANUARY 27, 2022 6:00pm to 8:00pm ZOOM CONFERENCE AND VIDEO CALL</b>

**Date: January 27, 2022**

**To: Comprehensive Planning Committee (CPC)**

**From: Ryan White HIV/AIDS Program (RWHAP) Recipient Staff**

**Re: Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding)  
Year 31 - Reporting Period: November 1 – 30, 2021**

**Part A and Part A MAI.** The Ryan White HIV/AIDS Program (RWHAP) Part A Grant Year 31 includes two components: Part A and Part A Minority AIDS Initiative (MAI). These reports are designed to report distinctly on the associated program activities. **The partial GY 32 award has been received in the amount \$10,168,601 (Formula \$9,237,003 and MAI \$931,598).**

**Notes on Overview.** The fiscal spreadsheets list the service categories by Part and jurisdiction and identifies the reported expenditure as a proportion of expected-to-date. The COHAH has requested an explanation of those service categories with a 30% variance from the target percentage.

## FISCAL STATUS

For Part A and Part A MAI in November 2021, (26) of (39) invoices have been received.

## SERVICE DELIVERY CHALLENGES

DC: N/A

MD: N/A

VA: N/A

## PART A FISCAL SUMMARY

**Part A expenditures are 49% and should be 75%.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices:**

Early Intervention Services (EIS)
Regional Early Intervention Services (REIS)

Health Insurance Premium and Cost Sharing Assistance (HIPCSA)
Medical Case Management (MCM)
Linguistic Services (LS)
Medical Transportation (MT)
Outreach Services (OS)
Psychosocial Support Services (PSS)

**Services 30% below expected:**

Early Intervention Services (EIS)
Regional Early Intervention Services (EIS)
Health Insurance Premium and Cost Sharing Assistance (HIPCSA)
Home and Community-Based Health Services (HCBS)
Medical Nutrition Therapy (MNT)
Psychosocial Support Services (PSS)

**Services 30% above expected:**

N/A
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## PART A MAI FISCAL SUMMARY

**Part A MAI expenditures are 51% and should be 75%.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices:**

Outpatient/Ambulatory Health Services (OAHS)
Mental Health Services (MH)
Substance Abuse Services –Outpatient (SASO)

**Services 30% below expected:**

Early Intervention Services (EIS)
Medical Case Management (MCM)
Substance Abuse Services – Outpatient (SASO)
Psychosocial Support Services (PSS)

**Services 30% above expected:**

N/A

## UBC FISCAL SUMMARY

**UBC expenditures are 69% and should be 75%.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices:**

N/A

**Services 30% below expected:**

Oral Health Care (OH)

Substance Abuse Services –Outpatient (SASO)

**Services 30% above expected:**

N/A

## RECIPIENT REPORT

1. **GY 31 Closeout.** The Recipient and her team are still working diligently to ensure funds are spent down as much as possible and notifications of any reprogramming's will be noted in next month's report. HRSA anticipates significant underspending from Ryan White grants due to the COVID-19 pandemic. HRSA has waived the underspending penalties for Parts A and B for FY 20 and FY 21. Carryover will be requested.



## APPROVAL OF MINUTES

The approval of minutes is a routine, necessary item of business. The process is quite simple.

The Chair can assume the motion to adopt the minutes, as no other motion can legitimately be made. Even if the minutes are to be sent back to the Secretary for a revision, that is a secondary motion and can only be made after the motion to approve has been presented. No second is required if the Chair assumes the motion.

The Chair assumes the motion, places the minutes before the assembly, and asks if there are any corrections. If there are, those are included in the minutes. Then the minutes can be approved without a vote, as the only action taken at that point is approve.

### SAMPLE SCRIPT

**PO:** *The next business is the approval of the minutes of [date]. Are there any corrections?*

(If there are, incorporate them, if there is an objection to one, put it to vote, majority to approve the correction)

**PO** *If there are no corrections (or no more corrections), the minutes are approved as [presented or corrected]*

**PO** *The next business is (go to agenda)*

**Note:** If there are multiple sets of minutes to approve, start with the oldest and move forward in time.