

COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING MINUTES

WEDNESDAY, NOVEMBER 20, 2019 – 11:00AM

DC HEALTH-HAHSTA – 899 N. CAPITOL ST. NE; 4TH FLOOR; WASHINGTON, DC 20002

ATTENDEES/ROLL CALL					
COMMISSIONERS	PRESENT	ABSENT	GUESTS	PRESENT	ABSENT
Holley, Nathaniel	CC				
Copley, Mackenzie, <i>Vice Chair</i>	X				
DeMartino, Peter	CC				
Morse, Kaleef	X				
Padmore, Gerald, <i>Chair</i>	X				
Shaw-Richardson, Re'ginald	CC				
Zoerkler, Jennifer	CC				
HAHSTA STAFF	PRESENT	ABSENT	COMMISSION STAFF	PRESENT	ABSENT
Mohram, Rony		X	Bailey, Patrice	X	
Barnes, Clover	X		Clark, Lamont	X	
Edmonds, Jason	X				
Fortune, Ebony		X			

HIGHLIGHTS

This is a draft version of the November 20, 2019 Comprehensive Planning Committee (CPC) Meeting Minutes which is subject to change. The final version will be approved on December 18, 2019.

AGENDA

Item	Discussion
Call to Order	Gerald P. called the meeting to order at 11:12 am, followed by a moment of silence and introductions.
Review and Approval of the Agenda	Jennifer Z. motioned to approve the Comprehensive Planning Committee Agenda for November 20, 2019. Mackenzie C. seconded. The motion was approved.
Review and Approval of the Minutes	Mackenzie C. motioned to approve the Comprehensive Planning Committee Minutes for October 23, 2019. Jennifer seconded. The motion was approved.



<p>Ryan White HIV/AIDS Program (RWHAP) Reports & Financial Oversight</p>	<p><u>Ryan White HIV/AIDS Program (RWHAP) Reports & Financial Oversight presented by Clover Barnes</u></p> <p>Part A expenditures are at 51% and should be at 58%.</p> <p>The service area affected by unprocessed invoices is Regional Early Intervention Services.</p> <p>Services spending 30% below expected are Other Professional Services because money was added to it and Outreach Services because of a terminated grant.</p> <p>Part A MAI expenditures are at 49% and should be at 58%.</p> <p>The are no Part A MAI service areas affected by unprocessed invoices, or services spending 30% below or above expected.</p> <p>Unit Based Cost (UBC) expenditures are at 91% and should be at 58%. The base of what was allocated was for the beginning fiscal year but there was an additional allocation that started October 1 that is not showing, making the category appear overspent... The next month's Roll Up Report will indicate the full allocation, which should put it at about 64%.</p> <p>Service areas affected by unprocessed invoices are Outpatient/Ambulatory Health Services, Oral Health Care Services, Mental Health Services, Substance Abuse Services – Outpatient, Non-Medical Case Management Services and, Housing Case Management and Referral.</p> <p>Services spending 30% above expected are Outpatient/Ambulatory Health Services, Non-Medical Case Management Services, and Food Bank/Home Delivered Meals.</p> <p>Services spending 30% below expected is Substance Abuse Services - Outpatient</p> <p>Narcan. Providers/staff must show proof of their attendance at a Narcan training to receive the Narcan kits. A list of free scheduled trainings, provided by DC Health can be found at https://dchealth.dc.gov/page/cme-ceu-webinars-and-trainings. The next scheduled training dates are January 28, 2020, March 24, 2020 and May 19, 2020. Jonjelyn Gamble (jonjelyn.gamble@dc.gov) is the contact person.</p> <p>The HRSA site visit report is past due. The Part B report was received yesterday but the Part A report has not been received. The delay is due to HRSA's review of the Part A grants and the Ending the epidemic grants that will be on the same cycle. As soon</p>
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	<p>as it is approved, Clover will notify Lamont C. to email the report to the Executive Committee.</p>
<p>Other Business</p>	<p>Reprogramming. Not all of the money taken from Regional EIS was awarded. Partially because some of the funds requested for services were not allowable and some applicants were not eligible based on the pre-decisional site visit. There is 1.7 million dollars unallocated. Some from EIS and some from the Maryland provider that was terminated.</p> <p>The Recipient is proposing to reallocate the funds to Emergency Financial Assistance (EFA) for both MD/DC, for staff and client cost, totaling \$774,000.</p> <p>One of the Home and Community Based Services providers has requested a \$75,000 increase their capacity to serve three (3) more customers. This request includes the necessary clinical and support staff required to provide optimal care in the community home setting.</p> <p>The Recipient is also requesting \$564,682 to purchase Rapid ART medication to be provided to any Ryan White provider participating in the Rapid ART workgroup. This would purchase about 300 bottles of medication.</p> <p>Finally, the Recipient is working with the current MAI providers to reallocate \$368,000 of MAI funds to increase some of their allocations and expand one of the DC providers into their site in Maryland.</p> <p>Gerald presented the motion to the committee. MacKenzie seconded it. The motioned was approved.</p> <p>Lamont suggested that the committee start thinking about PSRA 2020 and how the process should proceed or be reformatted. Something should be sent to the Recipient by April 2020.</p>
<p>Follow –up Items</p>	<p>None</p>
<p>ANNOUNCEMENTS/OTHER DISCUSSION</p>	
Empty space for announcements and other discussion	

HANDOUTS

- Comprehensive Planning Committee (CPC) Meeting Agenda, November 20 2019
- Comprehensive Planning Committee (CPC) Meeting Minutes, October 23, 2019
- Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 29 – Reporting Period: September 1- 31, 2019
- Jurisdictional Roll-up Report

MEETING ADJOURNED	11:49 PM
NEXT MEETING	Wednesday, December 18, 2019 11:00 pm – 1:00 pm DC Health-HAHSTA 899 N. Capitol St., NE, 4 th Floor Washington, DC 20002