

The Washington, D.C. Regional Planning Commission on Health and HIV (COHAH) will invigorate planning for HIV prevention and care programs that will demonstrate effectiveness, innovation, accountability, and responsiveness to our community.

INTEGRATED STRATEGIES COMMITTEE (ISC) MEETING MINUTES

WEDNESDAY - FEBRUARY 27, 2019 - 1:00PM TO 3:00PM

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

ATTENDEES/ROLL CALL						
COMMISSIONERS	PRESENT	ABSENT	GUESTS	PRESENT	ABSENT	
Sarcia Adkins	Сс		Naomi Seiler	Сс		
Farima Camara	Cc		Leslye Wooley	Х		
Melvin Cauthen		Х	Angel Brown	Х		
Ana Gomez		Х				
Kenya Hutton		Х				
Rama Keita	CC					
Dennis McBride		Х				
Kaleef Morse	Х					
Jane Wallis		Х				
Jennifer Zoerkler	X					
HAHSTA/ ADMINISTRATIVE AGENT REPRESENTATIVES	PRESENT	ABSENT	COMMISSION SUPPORT STAFF	PRESENT	ABSENT	
Leah Varga	Х		Patrice Bailey	Х		
Laura Whitaker	Х		Lamont Clark	Х		

AGENDA		
Item	Discussion	
Call to Order	Meeting called to order 1:20pm by Kaleef M. followed by a moment of silence. Attendees introduced themselves.	
Review and Approval of the Minutes	Jennifer Z. moved to approve the November 14, 2018 and January 16, 2019 minutes. The motion was seconded and approved.	



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Ending the HIV Epidemic: A Plan for America	Kaleef M. distributed a handout titled ' <i>Ending the HIV Epidemic: A Plan for</i> <i>America</i> '. He noted it was a plan from the new administration. He noted that is not in line with the Washington DCs 90-90-90-50 plan and would set the DC timeline off from the current plan. He noted that they have a five prong approach that goes along with their plan. The thing that stood out most was the 'HIV Health Force" because it wasn't clear what this health force would be. He noted that at the National HIV Prevention Conference the federal agencies would be there to answer many of the questions surrounding the new plan. The new plan could significantly affect what the COHAH is doing or expected to do. The committee expressed concerns over what funding may be available for the new plan and how does the Health Force impact Community Health Workers.
Regional Early Intervention Services (EIS) Proposal	Kaleef discussed the new proposal for Regional Early Intervention Services that was recently (at the COHAH Retreat) discussed by the Recipient and State Health Departments. He noted that there are four components in EIS and one of the exciting recent changes that HRSA has created within the EIS definition is that Outreach Services has been expanded to include things like community and public awareness activities such as posters, billboards, social media, television, and radio announcements. He also noted that services can now be provided to people who are not only diagnosed with HIV, but people who are undiagnosed. This now allows people who are of unknown status to be referred to appropriate services. He noted that another key piece is that people in the Southern United States have been listed as a 'vulnerable population', and the Washington DC EMA is considered as part of the Southern United States. Another key item to think about is that Health Education and Risk Reduction can be for people living with HIV as well as people who are not diagnosed with HIV.
	Now that Administrative Agents in Maryland and Virginia will no longer be providing Ryan White services, Part B will now cover those areas, which will free up some Part A money. With the expansion of EIS definitions, the Recipient is seeking to change the entire EIS model in the area making it innovative, focused, and appropriate to the population we serve. Maryland has already pushed the envelope on their EIS program and done some unique things with it. The proposal is to launch a region-wide EIS program, and the requirement is that providers make a difference with their clients and the providers must follow the 90-90-90-50 goals. The Recipient wants providers to do innovative projects. There will be about \$8,000,000 available and the hope is that the RFP will be put out in April.
	Kaleef asked what can be done to get the word out about EIS? Jennifer Z. suggested that a message should be sent out to the general population and not just a targeted population. Angel B. noted that they are looking at exploring how to use social media, particularly those that are known



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	about H places 'harm r wouldn around mentio 'approa make it Kaleef should	to be used for dating, sex and sex workers. The messages would not be just about HIV, but about total health. Jennifer also noted that reaching out to places that they haven't traditionally reached out to. Kaleef mentioned that 'harm reduction' should be playing a larger role. He noted that providers wouldn't just focus on preventing certain behaviors, but would frame services around how to make clients 'safer' while participating in those behaviors. Ange mentioned providers should be looking at the 'bar before the bar' or the 'approach before the approach' and dealing with the day to day disruptions that make it difficult to use a harm reduction approach. Kaleef stated that if anyone was interested in being on the EIS Taskforce they should send him an email.				
Service Standard for HIV Services Discussion	EMA. 1 Js - As the should	The questions that the What are some specific (U=U, Trauma-Inform) What would Service St EMA innovates, the	of the COHAH is to set service standards for the ne committee should think about include: areas that should be overarching in our Standards? ed Approaches, Cultural Awareness/Flexibility, hours, etc.) andards for "Prevention" Services look like? committee needs to consider how the standards new situations. The committee will talk about this g.			
ANNOUNCEMEN	TS/OTHER D	ISCUSSION				
Kaleef noted that there will be a meeting on Community Health Workers on March 13 th . Training for Foundations of HIV Service Delivery the March 6 th session is full the next trainings will be April 9, May 8, and June 5.						
HANDOUTS						
Agenda February 20, 2019 Minutes – November 14, 2019 and January 16, 2019 Ending the HIV Epidemic: A Plan for America						
MEETING	2:36 PM	NEXT MEETING	March 27, 2019 @ 1:00pm DC Health-HAHSTA			

NEXT MEETING

2:36 PM

ADJOURNED