

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 - JANUARY 22, 2020 - 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	Х		Phyllis Givens	Х		
Farima Camara	Х		Krista Hein	Х		
Melvin Cauthen	Х		Claire Heyison	CC		
Jasmine Ford		Х	David Moody	Х		
Ana Gomez		Х	Naomi Seiler	CC		
Kenya Hutton	CC		Dedra Spears Johnson	Х		
Rama Keita	CC		Ines Tamajong	Х		
Kaleef Morse	Х					
Jane Wallis	Х					
Jennifer Zoerkler	Х					
HAHSTA/ ADMINISTRATIVE AGENT REPRESENTATIVES	PRESENT	ABSENT	COMMISSION SUPPORT STAFF	PRESENT	ABSENT	
Khalil Hassam	Х		Patrice Bailey	Х		
			Lamont Clark	Х		

Highlights				
This is a draft version of the January 22, 2020 Integrated Strategies Committee (ISC) Meeting Minutes which is subject to change. The final version will be approved on February 26, 2020.				
AGENDA				
Item	Discussion			
Call to Order	Meeting called to order at 1:16 pm 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 13, 2019 Minutes. Melvin C. seconded the motion. The motion was unanimously approved without further discussion.			
Review Revised Draft Position Papers on U=U &	ft Position documents)			



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.

	/
Trauma-Informed Approaches	Naomi S. first went through the latest draft of $U = U$ position paper. She asked if there were any comments or questions in regard to the paper. Jennifer motioned to move the position paper draft to the Executive Operations Committee for review. Melvin 2 nd the motion. The motion passed unanimously.
	Naomi next went through the Trauma Informed Approaches paper. She noted that they made the adjustments that were requested. Jennifer asked to have both a track changes version that could be distributed to the EOC, and then a clean version that could be distributed to the General Body. Jennifer made a motion to accept the changes discussed. Melvin 2 nd the motion. Motion was approved unanimously.
Review Draft Outline of Immigration Position Paper	Naomi discussed the outline for the position paper on Immigration. She discussed how broad or narrow the topic could be so they created an outline for the committee to review and provide their input. Dedra S. noted that since the committee is starting from the beginning, it is probably a good idea to become better educated on different things such as what does Immigration status look like across the EMA, what people are able to apply for, how they can navigate the system, what are the demographics across the EMA, etc. Naomi noted that the GW team is working on a policy landscape for two separate planning grants. Within what they are working on includes a look at what insurance coverage looks like across the EMA. She noted that once they finish that they could share it with the ISC. Kaleef noted that there was a lot to consider and noted that what GW found in their research could help inform ISC what to prioritize.
2020 ISC Work Plan Discussion	Kaleef noted that since there is a lot of Substance Abuse (Opiod) money that has been provided recently, he is interested is what services are actually being provided and what gaps may exist that Ryan White funds can help fill. Dedra suggested that there may be a need for some capacity building for organizations so that they are able to better utilize funds as well. Kaleef proposed asking GW to help do some research into what the landscape actually looks like. He asked the committee to send him some questions around the issue and he could then provide them to GW to begin to look into. Kaleef noted that historically the committee would work on Service Standards, however the HRSA report came back and stated that Service Standards should be a Recipient responsibility and the COHAH would provide assistance in the creation of standards. He noted that he met with the Recipient and it was stated that they would form a workgroup for the creation of the Service Standards. They will also create a policy around how the standards will be created. Upon completion of the policy they will share it with the COHAH for feedback and/or collaboration. Sarcia A. suggested talking with Providers to get their feedback on Service Standards. Kaleef said that is possible and it is also possible to hold Provider Roundtables to get their feedback. Jane W.



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.

suggested looking at information from Human Care Agreements and how effective it is.

Kaleef stated that everyone should put their ideas in BaseCamp so everyone's ideas can be captured and be used to create a plan. He also stated that the committee needs a permanent Chair so people should think about leadership.

ANNOUNCEMENTS/OTHER DISCUSSION

Kaleef noted that the Grantee meeting would take place on Wednesday February 26th and our COHAH meetings will be moved to accommodate that meeting.

HANDOUTS

Agenda – January 22, 2020 Minutes – November 13, 2019 U=U Position Paper Trauma Informed Position Paper Immigration Position Paper Outline

MEETING ADJOURNED	2:52 PM	NEXT MEETING	April 22, 2020 @ 1:00pm DC Health-HAHSTA 899 N. Capitol St. NE; 4 th Floor Washington, DC 20002
----------------------	---------	--------------	---