

PLANNING COMMISSION (COHAH) GENERAL BODY MEETING MINUTES

THURSDAY, JUNE 25, 2020 - 6:00PM

ZOOM CONFERENCE AND VIDEO CALL

ELECTRONIC – ONLINE MEETING

ATTENDEES/ROLL CALL

COMMISSIONERS	PRESENT	ABSENT	COMMISSIONERS	PRESENT	ABSENT
Adkins, Sarcia	X		Keita, Ramatoulaye	X	
Askins, Sylvester	X		Kharfen, Michael (DOH)	X	
Blocker, Lakisa	X		Massie, Jenné	X	
Brown, Charles		X	McBride, Dennis	X	
Camara, Farima		X	McClain, Lenora	X	
Carney, Misty	X		Mekonnen, Betelhem	X	
Cauthen, Melvin	X		Morse, Ka'leef	X	
Coker, Sharon	X		Murdaugh, Henry	X	
Cooper-Smith, Marjorie (DBH)		X	Padmore, Gerald	X	
Copley, Mackenzie	X		Rakhmanina, Natella	X	
Corbett, Wallace		X	Rhodes, Stefanie		X
Cox, Derrick	X		Sain, Philip	X	
Dean, Traci		X	Shaw-Richardson, Re'ginald	X	
DeMartino, Peter	X		Shazor, Charles		X
Fogal, Doug	X		Torre, Andrew	X	
Ford, Jasmine	X		Uyouko, Haris	X	
Forman, Lynn	X		Wallis, Jane	X	
Gomez, Ana		X	Washington, Antonio	X	
Hickson, DeMarc	X		Yocum, Ashley		X
Holley, Nathaniel	X		Zoerkler, Jennifer	X	
Hughes, David	X				
Hutton, Kenya	X				
RYAN WHITE RECIPIENT STAFF	PRESENT	ABSENT	HAHSTA STAFF	PRESENT	ABSENT
Barnes, Clover		X			
Fortune, Ebony		X			
Lago, Lena	X		COMMISSION SUPPORT STAFF	PRESENT	ABSENT
Varga, Leah	X		Bailey, Patrice	X	
			Clark, Lamont		X

HIGHLIGHTS

NOTE: This is a draft version of the June 25, 2020 COHAH General Body Meeting Minutes which is subject to change. The final version will be approved on July 23, 2020.

AGENDA

ITEM	DISCUSSION
<p>Call to Order</p>	<p>The meeting was called to order by Ka’leef M. at 6:15 pm, followed by a moment of silence.</p>
<p>Welcome and Introductions/Roll Call</p>	<p>Ka’leef reported that the meeting is governed by the Open Meetings Act: D.C. Official Code §§ 2-571 to 2-580. Please address any questions or complaints arising under this meeting to the Office of Open Government at opengovoffice@dc.gov.</p> <p>Ka’leef indicated that under the Open Meetings Act, electronic voting should be conducted via the zoom polling feature to create a record. Some people are signing into the meetings as guests. Consequently, the votes with no name become invalid. Therefore, moving forward, you will be required to enter your name and/or email address to enter the meeting.</p> <p>Attendees introduced themselves. Attendance of Commissioners was taken by Roll Call. Quorum is 20 members of the 39 voting eligible members. With 29 commissioners present for roll call, quorum was established.</p>
<p>Review and Adoption of the Agenda</p>	<p>Ka’leef motioned to adopt the June 25, 2020 COHAH Agenda. The voting was conducted via zoom polling. The agenda was adopted unanimously.</p>
<p>Review and Approval of the Minutes</p>	<p>Ka’leef motioned to approve May 28, 2020 Meeting Minutes. The voting was conducted via zoom polling. The minutes were approved unanimously.</p>
<p>Ryan white HIV/AIDS Program (RWHAP) Recipient Report/Updates</p>	<p><u>Lena Lago presented for the Recipient</u></p> <p>FINANCIAL REPORT</p> <p>The award has been received in the amount on \$31,303,676.</p> <ul style="list-style-type: none"> • For Part A and Part A MAI in April 2020, (35) of (41) invoices have been received. • For DC: Due to COVID-19, Unit Based Cost (UBC) Purchase Orders were not available for billing thus causing a surplus of unprocessed invoices. The office is trying to resolve the issue as quickly as possible. • Part A expenditures are at 11% and should be at 17%. • Service areas affected by unprocessed invoices are Linguistic Services, Medical Transportation Services, Regional Early Intervention Services, Health Insurance Premium and Cost-Sharing Assistance, Medical Case Management, Emergency Financial Assistance, and Outreach Services. • Services spending 30% below expected are Early Intervention Services (EIS), Regional Early Intervention Services (EIS), Health Insurance Premium and Cost Sharing Assistance (HIPCSA), Medical Nutrition Therapy (MNT), Other Professional Services (OPS),



	<p>Linguistic Services, (LS), Medical Transportation (MT), Outreach Services (OS), and Psychosocial Support Services (PSS).</p> <ul style="list-style-type: none"> • The service spending 30% above expected is Emergency Financial Assistance (EFA). • Part A MAI expenditures are at 12% and should be at 17%. • Service areas affected by unprocessed invoices are Outpatient/Ambulatory Health Services, and Psychosocial Support Services (PSS). • There were no services spending at 30% above or below expected. • UBC expenditures are at 9% and should be at 17%. • Service areas affected by unprocessed invoices are Outpatient/Ambulatory Health Services, Oral Health Care, Mental Health Services, Substance Abuse Services - Outpatient Non-Medical Case Management Services, Food Bank/Home Delivered Meals, and Housing Case Management and Referral. • Service areas spending 30% below expected are Oral Health Services, Mental Health Services, Substance Abuse Services, Non-medical Case Management, and Housing Case Management and Referral. <p>RECIPIENT REPORT <u>NARCAN</u></p> <p>Please contact Shea Davis at shea.davis@dc.gov to receive the Narcan kits. Providers/staff must show proof of attending and completing a training at DC Health or in the community to receive the kits. A list of free scheduled webinar trainings provided by DC Health can be found at http://dchealth.dc.gov/page/cme-ceu-webinars-and-trainings.</p> <p><u>GY'29 CLOSEOUT</u> The GY'29 closeout extension was not granted. Therefore, the reports were submitted on May 29, 2020. The HRSA Project Officer sent the reports back to the recipient for revisions. Once the reports are resubmitted and approved, they will be forwarded to the COHAH.</p>
<p>Update on the New Federal CARES Act Funding for the Ryan White Program</p>	<p><u>Emergency Funding</u> On April 15, 2020, the Recipient received new funding from HRSA for Ryan White recipients to prevent, prepare and respond to COVID-19. HRSA made a last-minute change to remove the requirement of Planning Body allocation. However, the Recipient accepted the recommendations they had already received from the commission.</p> <p>The Recipient requested information from providers who were opting into receiving the funding and the information has been processed. There will be a follow up discussion internally. The recipient is still waiting on two (2) pieces of information in order to move forward in getting the funds in the system and out to sub-recipients. The process is about 60% complete.</p>
<p>Standing Committee Updates</p>	



Community Education and Engagement Committee (CEEC) reported by Jenné M.

The Community Listening Session (CLS) scheduled for June 18, 2020 at 6:00pm was cancelled due to lack of advertising. The committee is working on rescheduling.

Research and Evaluation Committee (REC) reported by DeMarc H.

The Recipient and Provider Surveys, that are part of the Assessment of the Efficiency of the Administrative Mechanism (AEAM), have been finalized. They are being programmed and beta tested in RedCap with the team at HAHSTA. The initial launch is scheduled for July 6, 2020.

There were conversations around the available data and resources that will inform the Needs Assessment, including data collected from providers who are providing services through the CARES Act money.

Comprehensive Planning Committee (CPC) reported by Gerald P.
REPROGRAMMING REQUEST

The recipient is requesting to reprogram the initial Ryan White Part A allocations for GY'30. There is an additional request to move funds from Part A to Part A MAI to cover the awards that are deficient due to level funding awards that are higher than the available MAI program funding. The request is to move funds from Mental Health Services, Substance Abuse Services, Medical Nutrition Therapy, Early Intervention Services, Health Insurance Premium Cost Sharing Assistance, Medical Transportation, Linguistic Services, and Psychosocial Services, and Other Professional Services and into Outpatient Ambulatory Health Services (A and MAI), Oral Health Care, Medical Case Management (A and MAI), Home and Community Based Care, Emergency Financial Assistance, Foodbank/Home Delivered Meals, Outreach Services and Part A MAI service categories: Mental Health Services, Substance Abuse Services, Early Intervention Services and Psychosocial Support Services.

Purpose

The reprogramming is necessary to allow for the recipient to make awards that are aligned with the three year grant awards from the Part A RFA that was made in GY'27 and to reprogram un-awarded funds into areas of need.

Research completed prior to formulating recommended action

The recipient searched for opportunities that could be widely implemented and fulfill unmet needs for eligible clients. Without this reprogramming the recipient would have to reduce current GY'30 awards and create new funding solicitations and agreements which would delay putting the funds to use.

Alternative strategies

In an effort to fully expend the Part A funds, the recipient proposes this option as the best method to ensure that GY'30 continuation awards to sub-recipients are fulfilled. Without this reprogramming the recipient would have to reduce current GY'30 awards and create new funding solicitations and agreements, thereby increasing the likelihood that 95% of the funding would not be expended by February 28, 2021.

There were questions about service areas who's funding is being decreased (i.e. Nutritional Services, Mental Health, Linguistics and EIS) and other areas of concern. The decision to decrease funding was based on utilization and/or record of spending. All funding can be adjusted as changes in need arise. The attached spreadsheet gave an illustration of how money will be moved.

Ka'leef launched the zoom polling to approve the reprogram request of the initial Ryan White Part A allocations for the GY'30 grant year and the additional request to move funds from Part A to Part A MAI to cover the awards that are deficient due to level funding awards that are higher than the available MAI program funding. The motion passed by a vote of 27 yes and 1 no.

MODIFIED PSRA PROCESS FOR GY'31/FY'21 DUE TO COVID-19

PROCESS PROPOSED DATES

- Submit Modified GY'30/FY'20 PSRA Decisions for Part A and MAI to Recipient for GY'31/FY'21 Part A Application (HRSA-21-055) **Including any reprogramming*** August 27, 2020
- EMA-Wide Data Presentation (from Data Request) September 24, 2020
- PSRA Overview Presentation for COHAH (Refresher) October 29, 2020
- CARES Act/COVID-19 Impact on Part A Data Presentation November 19, 2020
- MD PSRA Meeting December 2020- January 2021
- DC PSRA Meeting December 2020- January 2021
- VA PSRA Meeting December 2020- January 2021
- COHAH Review of PSRA Decisions for Part A and MAI December 2020- January 2021
- Submit Revised PSRA Decisions (if any) to Recipient for GY'31/FY'21 Awards Preparation January 2021

Purpose

The Recipient must submit an application in response to the FY'2021 Part A NOFO (HRSA-21-055) by October 7, 2020. Due to the complex nature of PSRA, the benefits that come along with the process being conducted in-person, the shifting needs of our customers, and the influx of additional resources (CARES Act) to respond to COVID-19; the COHAH would not have sufficiently stable information to make an informed calculation of allocations for FY'2021 by September 2020 that would consider a post-COVID or "new normal" service delivery system.

Research completed prior to formulating recommended action

Baltimore EMA is doing their PSRA process virtually with pre-recorded presentations and virtual meetings to vote. However, the timeline is quick, and they also agree that they will probably have to review and change all of the priorities and allocations next year.

	<p>Alternative Strategies</p> <p>Despite being in Phase 2, everyone is still dealing with the impact of COVID-19 in some way. Our customers' needs have drastically shifted this grant year to ensure that they have the services they need to stay engaged in care and have their important needs met. To rush through PSRA fully at this time would be inconsiderate to those who are in unstable environments at work and home. With Reprogramming and Reallocation as an option, we can utilize this grant year's PSRA decisions from our comprehensive process last year as a starting point to engage in a more informed process in December 2020-January 2021, hopefully post COVID-19.</p> <p>Kaleef launched the zoom polling to approve the motion to have a modified PSRA process for GY'30/FY'20. The motion passed by a vote of 26 yes and 0 no.</p> <p><u>Integrated Strategies Committee (ISC) reported by Kaleef M.</u></p> <p>There was a robust conversation led by Ken Pettigrew, Community Engagement Coordinator for the CDC PS19-1906 Project about the social justice movement, and how racism and systematic racism impacts service delivery. The purpose was to help inform how we look at planning for Ending the HIV Epidemic (EHE) and systems going forward. There was also conversation about including questions about racism in the Needs Assessment surveys.</p> <p>Moving forward, in the absence of the previously tasked service standards, the ISC will consider Michael K's suggestion to focus on the principals that guide HAHSTA's work that incorporates anti-racism, health equity and black lives matter, into how planning and positions are framed. Some anti-racism principles have been put in some of the service standards centering racism as an element of what every provider should be considering as they are providing services. Additionally, think about what empowerment means for people living with HIV in the context of services.</p>
<p>Commission Administrative Business – Things to Do</p>	<p>Commissioners' terms that were due to expire in May are in an emergency hold-over status until 45 days after the declaration that the COVID-19 State of Emergency is over. In the interim, commissioners should think about electing the next Community Vice Co-chair and who the next Vice-chair for their committees will be. The mayor's office currently has four (4) appointments pending.</p>
<p>Old Business</p>	<p>None</p>
<p>New Business</p>	<p>None</p>
<p>ANNOUNCEMENTS/OTHER DISCUSSION</p>	
<p>Michael K. announced that HAHSTA is starting several new projects.</p> <ul style="list-style-type: none"> • A home-based HIV test kit program for DC residents • STD home-based test kits that will include tests for chlamydia and gonorrhea. (Hopefully, available next month) • Implement the ability to give HIV and Hepatitis testing at any LabCorp office in the area. • In the process of launching a Tele-PrEP health suite through the DCHealth/HAHSTA Health and Wellness Center. The program will start with the people who are currently on PrEP through the Health and Wellness Center and expand throughout the metropolitan area. 202-741-7692 	

- In the process of developing a 24/7 service to provide PEP.

The following agencies are also providing similar services:

- Children’s Hospital - provides PEP and PrEP for adolescents and young people
- Whitman-Walker – provides PrEP and PEP for people with or without insurance. Call (202)-745-7000
- INOVA in Virginia is issuing test kits via curbside pick-up.
- Community Walgreens in SW and NW Washington DC - provide delivery service, adherence counseling, monitoring side effects etc. for those who have started on PrEP and/or Rapid ART and needs to continue.
- Us Helping Us (UHU) – provides all of the same service and have senior care kits for those over age 50. The kits contain crossword puzzles, word finds, etc.
- Neighborhood Health providing COVID testing for anyone who needs it.

Henry M. announced the passing of Ashley Yocum’s mother.

HANDOUTS

- June 25, 2020 Planning Commission (COHAH) Meeting Agenda
- May 28, 2020 Planning Commission (COHAH) Meeting Minutes
- April 2020 Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 30

MEETING ADJOURNED	7:50 PM	NEXT MEETING	THURSDAY, July 23, 2020 6:00pm to 8:00pm ZOOM CONFERENCE AND VIDEO CALL
I, as Planning Commission Government Co-Chair, hereby certify the accuracy of the above minutes:		Signature of: _____ Date: _____	
Date the Minutes were approved by the Planning Commission (COHAH):		Ka’leef Stanton Morse, MHS, MBA Government Co-Chair	