



EXECUTIVE OPERATIONS COMMITTEE (EOC) MEETING AGENDA

THURSDAY, MAY 30, 2019 – 5:00PM TO 6:00PM
JUDICIARY SQUARE – CITYWIDE CONFERENCE CENTER
441 4TH STREET, NW; 11TH FLOOR; WASHINGTON, DC 20001

Note: all times are approximate

5:00 pm	<ol style="list-style-type: none"> 1. Call To Order and Moment of Silence 2. Welcome and Introductions/Roll Call
5:10 pm	<ol style="list-style-type: none"> 3. Review and Adoption of the Meeting Agenda for May 30, 2019 4. Review and Approval of the Meeting Minutes from April 25, 2019
5:15 pm	<ol style="list-style-type: none"> 5. Ryan White HIV/AIDS Program (RWHAP) Recipient - Updates/Concerns
5:20 pm	<ol style="list-style-type: none"> 6. Commission Administrative Business <ul style="list-style-type: none"> • Review and adoption of COHAH Agenda for May 30, 2019 • Update on Commissioners whos Term Ends on 5-31-19 and Recruitment • Summary of COHAH Planning Cycle and Responsibilities • Elections for Community Vice-Chair at today's COHAH Meeting
5:35 pm	<ol style="list-style-type: none"> 7. Standing Committee Updates/Concerns <ul style="list-style-type: none"> • Research & Evaluation Committee (REC) {Next mtg.: Tue. May 14th @ 3pm} • Integrated Strategies Committee (ISC) {Next mtg.: Wed. May 15th @ 1pm} • Community Engagement & Education Committee (CEEC) {Next mtg.: Thu. June 20th @ 5pm} <ul style="list-style-type: none"> ○ "Speak Your Peace! Community Listening Session" - WHEN!? • Comprehensive Planning Committee (CPC) {Next mtg.: Wed. May 29th @11am}
5:45 pm	<ol style="list-style-type: none"> 8. Old Business 9. New Business
5:50 pm	<ol style="list-style-type: none"> 10. Announcements and Adjournment
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <p><u>NEXT EXECUTIVE OPERATIONS COMMITTEE (EOC) MEETING:</u></p> </div> <div style="background-color: yellow; padding: 10px; text-align: center;"> <p>THURSDAY JUNE 27, 2019 5PM-6PM JUDICIARY SQUARE – CITYWIDE CONFERENCE CENTER 441 4TH ST. NW; 11TH FLOOR WASHINGTON, DC 20001</p> </div> </div>	



PLANNING COMMISSION (COHAH) GENERAL BODY MEETING MINUTES

THURSDAY, MAY 30, 2019 – 6:00PM

**JUDICIARY SQUARE – CITYWIDE CONFERENCE CENTER
 441 4TH STREET, NW; 11TH FLOOR; WASHINGTON, DC 20001**

ATTENDEES/ROLL CALL

COMMISSIONERS	PRESENT	ABSENT	COMMISSIONERS	PRESENT	ABSENT
Adkins, Sarcia	X		Hickson, DeMarc	X	
Holley, Nathaniel		X	Hughes, David		X
Blocker, Lakisa	X		Hutton, Kenya		X
Bowman, Joshua		X	Keita, Ramatoulaye	X	
Camara, Farima	X		Kharfen, Michael (DOH)	X	
Carney, Misty	X		Massie, Jenne'		X
Cauthen, Melvin	X		McBride, Dennis	X	
Clay, Cyndee	X		McClain, Lenora	X	
Coker, Sharon	X		Mekonnen, Betelhem	X	
Cooper-Smith, Marjorie (DBH)		X	Morse, Kaleef	X	
Copley, Mackenzie	X		Padmore, Gerald	X	
Corbett, Wallace	X		Rakhmanina, Natella		X
Cox, Derrick	X		Rhodes, Stefanie	X	
Dean, Traci	X		Shaw-Richardson, Re'ginald		X
DeMartino, Peter	X		Shazor, Charles		X
Fogal, Doug	X		Simmons, Ron		X
Fonseca, Julio	X		Torre, Andrew	X	
Ford, Jasmine	X		Uyouko, Haris	X	
Forman, Lynn	X		Wallis, Jane	X	
Gomez, Ana		X	Washington, Antonio	X	
			Zoerkler, Jennifer	X	
HAHSTA STAFF	PRESENT	ABSENT	COMMISSION STAFF	PRESENT	ABSENT
Barnes, Clover	X		Bailey, Patrice	X	
Fortune, Ebony		X	Clark, Lamont	X	

HIGHLIGHTS

- Recipient Report
- Jurisdictional Reports



AGENDA	
Item	Discussion
Call to Order	The meeting was called to order by Kaleef M. at 6:09pm. He asked for a moment of silence then asked everyone to introduce themselves for the record.
Review and Approval of the Agenda	A motion was made to approve the May 30, 2019 Meeting Agenda. The motion was seconded and approved.
Review and Approval of the Minutes	A motion was made to approve the Meeting Minutes from April 25, 2019 with correction. The motion was seconded and approved.
Ryan White HIV/AIDS Program (RWHAP) – Financial Oversight Reports	<p>❖ Jurisdiction Reports – Clover Barnes provided the Jurisdiction Reports</p> <p>Clover B. noted that this was the first report for the new Grant Year which started on March 1, 2019. She stated that this report would have very little information in it because it is only the first month of reporting. She also stated that as the new year begins, there is usually a lag because of negotiations of contracts with providers, therefore the first month of invoices tend to come in late. She made particular note that contracts are signed and services are being provided, it is only invoices that get delayed.</p> <p>Clover noted that the new reports will discuss service categories, not jurisdictions, because the EMA operates as one region.</p> <p>At this point all underspending is due to late invoices, so there is no concern about any underspending. The only concern of note is that the RFA for the solicitation of MAI services in the Virginia jurisdiction has closed and there were no applicants. The recipient is pursuing other options to procure MAI services in this area of the EMA. They have met with the Virginia Department of Health to seek out what organizations work with youth or can provide capacity building for developing the program.</p> <p>❖ Recipient Report – Clover Barnes provided Recipient Report.</p> <p>Unit Based Costs are at 11% and they should be at 8%. There are no concerns with this.</p> <p>The DC EMA comprehensive site visit has been rescheduled for September 10-13, 2019.</p> <p>The RFA for Regional EIS has been completed and will be posted on Friday, April 26, 2019. Responses are due back June 7, 2019. There were 26 letters of intent submitted. Four of the letters were from organizations that were completely new to Ryan White. Three organizations submitted their letters after the deadline, therefore they were rejected.</p>



	<p>DeMarc H. asked if there was a cost savings now that there were no longer Administrative Agents? He also asked if there were cost savings, would they go to providing additional services? Clover B. stated that yes, there were some savings from the change, but the money comes from administrative dollars not service dollars. Those funds will likely be used for hiring additional staff that is needed to monitor the new programs.</p>
<p>Standing Committee Updates</p>	<p><u>Research and Evaluation Committee (REC)</u> – DeMarc H. reported. They have developed the research question which will be used to drive the Needs Assessment survey. That question is “What are the individual social, cultural, and structural factors associated with HIV prevention, treatment, and care outcomes among individuals living with and vulnerable for HIV in the Greater Washington DC area?” Members will fill in pieces related to the questions. They will make a list of factors, then vet them so to not make the survey too long.</p> <p><u>Integrated Strategies Committee (ISC)</u> – Kaleef M. reported. The ISC continues to work on a draft of the Early Intervention Services (EIS) standards. They reviewed the second draft of the new standard. They discussed how Trauma Informed Approaches should be incorporated in the standard. They may develop a Trauma Informed white paper. The other important area discussed with was ensuring that U = U is woven into service standards as well. The committee will also explore a white paper around U = U.</p> <p><u>Community Engagement and Education Committee (CEEC)</u> – Derrick C. reported. CEEC held their first community listening session on May 16th at the Benning Road Library. They had people from throughout the jurisdiction attend. Housing was a major point of discussion during the meeting. They will begin discussing their next listening sessions.</p> <p><u>Comprehensive Planning Committee (CPC)</u> – Gerald P. reported. In addition to the review of financial reports, the committee is discussing the Priority Setting and Resource Allocations (PSRA). They went through the Data Request that was submitted to Kaleef. The Data Request will be submitted to the Recipient. They are also working on training sessions for PSRA.</p> <p>Kaleef noted that he needed everyone to respond with their summer vacation schedules so that trainings, meetings, and data presentations can be scheduled when the majority of people can attend.</p> <p>Michael K. asked about how Prevention planning would be integrated into the process? Gerald noted that in the third quarter of the year there would be a greater focus on Prevention planning. Kaleef noted the COHAH is also waiting for the transition to be completed within HAHSTA so that the information flow can be set up to work with COHAH. He noted that all of the pieces (people) are not currently in place to have a true dialogue about how to merge both care and prevention planning as a whole EMA. Jennifer noted that when the Chicago EMA came to</p>



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.

	<p>advise the former Planning Council, they stated they were in their 5th year and they were still trying to figure things out when it comes to integration. She noted that it does take a little bit time to achieve integration.</p>
<p>Commission Administrative Business</p>	<p>One Year Anniversary Kaleef noted that the COHAH is now one year old. He praised them for the work that they have completed thus far.</p> <p>Open Nominations Kaleef noted there are open slots on the Commission. Please ask good candidates to apply.</p> <p>Nomination for Vice-Chair Jane Wallis, Haris Uyouko, Sarcia Adkins, and Kenya Hutton were nominated and accepted the nominations for Vice Chair. Each candidate present were afforded an opportunity to speak to the COHAH (Kaleef provided an overview of Kenya Hutton’s capabilities). After a secret ballot, Sarcia Adkins was voted in as Community Vice-Chair.</p>
<p>ANNOUNCEMENTS/OTHER DISCUSSION</p>	
<ul style="list-style-type: none"> - Derrick C. noted that the Reunion Project for long term survivors was taking place Saturday June 22nd at George Washington University. - Robert C. noted that the 11th Annual Housing Expo at the Washington Convention Center on Saturday June 15th. - On June 14th there would be a movie premier of ‘Ward 5B’ at the E. St Cinema. - Misty C. noted that on June 27th there would be free HIV testing at her CVS store in SE DC. - Cyndee C. noted that HIPS has a few positions open. - Michael K. noted that the House of Representatives passed a bill that would allow for the Presidents request for \$290,000,000 for “Ending the Epidemic”. He expects that in the fall they will have a better idea of how the additional resources will go toward the epidemic in the DC Metropolitan area. 	
<p>HANDOUTS</p>	
<p>Agenda dated May 30, 2019 Minutes dated April 25, 2019 Recipient Narrative Report Combined Jurisdictional Reports 2019 COHAH Meeting Calendar</p>	

MEETING ADJOURNED	7:41 PM
NEXT MEETING	June 27, 2019

<p>I, as Planning Commission Government Co-Chair, hereby certify the accuracy of the above minutes:</p>	
<p>_____ Signature of: Kaleef Stanton Morse, MHS Government Co-Chair</p>	
<p>Date the Minutes were approved by the Planning Commission:</p>	<p>_____ Date:</p>



**EXECUTIVE OPERATIONS COMMITTEE (EOC)
 MEETING MINUTES**

THURSDAY, APRIL 25, 2019 – 5:00PM TO 6:00PM

JUDICIARY SQUARE – CITYWIDE CONFERENCE CENTER

441 4TH STREET, NW; 11TH FLOOR; WASHINGTON, DC 20001

ATTENDEES/ROLL CALL

COMMISSIONERS	PRESENT	ABSENT	COMMISSIONERS	PRESENT	ABSENT
Clay, Cyndee	<i>Sabbatical</i>				
Hickson, DeMarc	X				
Holley, Nathaniel	X				
Hutton, Kenya		X			
Massie, Jenné	X				
Morse, Ka'leef	X				
Padmore, Gerald	X				
Zoerkler, Jennifer	X				
RECIPIENT	PRESENT	ABSENT			
Barnes, Clover	X				
HAHSTA STAFF	PRESENT	ABSENT	COMMISSION STAFF	PRESENT	ABSENT
			Bailey, Patrice	X	
			Clark, Lamont	X	

HIGHLIGHTS

AGENDA

Item	Discussion
<p>Call to Order Welcome and Introductions Roll/Call</p>	<p>Kaleef M. called the meeting to order at 5:20 pm, followed by a moment of silence and introductions.</p>



<p>Review and Adoption of the Agenda</p>	<p>Gerald P. motioned to approve the April 25, 2019 Agenda for the Executive Operations Committee (EOC). Jenné M. seconded the motion. The agenda was adopted.</p>
<p>Review and Approval of the Minutes</p>	<p>Jenné motioned to approve the March 28, 2019 EOC Meeting Minutes. Jennifer Z. seconded. The minutes were approved.</p>
<p>Ryan White HIV/AIDS Program (RWHAP) Recipient Updates/Concerns</p>	<p><u>Jurisdictional reports</u> No updates were presented on the Jurisdictional report; however, Kaleef reported that the HRSA site visit has been postponed until September.</p>
<p>Commission Administrative Business</p>	<p><u>Review and approval of the COHAH Agenda for April 25, 2019</u> Jennifer motioned to approve the COHAH Agenda. Gerald seconded the motion. The agenda was approved.</p> <p><u>Commissioner Recruitment</u> Kaleef indicated that the review of applications continues. DeMarc H. indicated that there was discussion at the last meeting about members that had not been attending the meetings and whose cycle will end in May. Two of the three members discussed, will not return to the commission leaving two more seats open. There are two (2) prospects from the Virginia Statewide Consumer Advisory Council. Logistics for proper placement will be determined.</p> <p><u>Authoring of the “Integrated Planning Cycle”</u> Jennifer led the discussion about the Integrated Planning Cycle. She reported that most of the responses indicated clear majorities, but asked, just because the majority agreed on something, does that mean it is the right thing to do. Is the cycle presented in the order in which a plan would be put together or is it arbitrary? Jenné indicated that she would prefer to have the cycle presented in the order of milestones or due dates. Jennifer asked if there is an existing written plan. Kaleef indicated that there is no written formal plan, however, there is a suggested plan provided by the HRSA T/A.</p> <p>There was a review of the Integrated Planning Cycle.</p> <p><u>Integrated plan review and update</u> is a planning document; a research based tool, which probably should be the primary responsibility of the REC. However, the primary responsibility has been the Recipient. Leah Varga sends out the schedule of reviews and updates. The document is reviewed annually and updated every five (5) years.</p> <p><u>Annual Work Plan.</u> Establishing a work plan has been not been possible due to the ever-changing dynamics of the volunteerism and learning curve of the commission.</p> <p><u>Epi profile</u> is created by the Recipient in June/July. It is then distributed to all committees for purposes of the PSRA process. The Recipient has primary responsibility for this task and the CPC has secondary.</p>



	<p><u>Needs Assessment</u> is the primary responsibility of the REC. Secondary responsibility is the Recipient. The timeframe depends on what is going on. Usually around winter/spring/early summer in order to feed into the summer PSRA.</p> <p><u>Review All Data</u> is a combination of all activities. The CPC has primary responsibility. The General body has secondary responsibility. August/September is the timeline.</p> <p><u>Data Presentation.</u> The Recipient has primary responsibility. June/July is the timeline.</p> <p><u>Priority Setting.</u> General body has primary responsibility. The CPC has secondary. July/August is the timeline.</p> <p><u>Risk allocation.</u> General body has primary responsibility. The CPC has secondary. July/August is the timeline.</p> <p><u>Directives.</u> Modifications and reprogrammings are a couple of examples of a directive. Any committee can have primary responsibility. The General Body has secondary. The timeline is ongoing.</p> <p><u>Review Expenditures and Service Utilization Data</u> is done multiple times. CPC has primary responsibility. General Body and Recipient has secondary. The timeline in ongoing.</p> <p><u>Reallocation</u> can be done any time of the year. Primary responsibility can be on the CPC or the EOC. The timeline is ongoing.</p> <p><u>Evaluation and Planning.</u> The REC shares primary responsibility with EOC. The timeline is ongoing.</p> <p>See attachment</p> <p><u>Interview Panel Volunteers Needed</u> Lamont C. will send out an email soon about coordinating a panel for interviews.</p> <p><u>Nominations and Elections for Community Vice-Chair</u> Nominations should have been solicited last month but were not. Therefore, nominations, and the vote cannot take place until next month.</p>
<p>Standing Committee Updates/Concerns</p>	<p><u>Research and Evaluation Committee (REC)</u> <u>No report given</u></p> <p><u>Integrated Strategies Committee (ISC)</u> No report given</p> <p><u>Community Education and Engagement Committee (CEEC)</u></p>



	<p>Kaleef directed everyone to get the word out and attend the Community Listening Session, at the Benning Road (Dorothy Height) Library on May 16, 2019, at 6:00 pm.</p> <p><u><i>Comprehensive Planning Committee (CPC)</i></u> No report given</p>
Old Business	
New Business	
Announcements and Adjournment	
HANDOUTS	
<ul style="list-style-type: none"> • Executive Operations Committee Agenda for April 25, 2019. • Executive Operations Committee Minutes for March 28, 2019. • Integrated Planning Cycle • Recipient Report Monthly Recipient Report • Planning Commission (COHAH) General Body Meeting Agenda, Thursday, April 25, 2019 • Motion – Citywide Expansion of Rapid Antiretroviral Therapy (ART) Initiation in the District of Columbia Project – Support Letter 	

MEETING ADJOURNED	5:59 PM
NEXT MEETING	<p>Thursday, May 30, 2019 5PM-6PM Judiciary Square – Citywide Conference Center 441 Fourth St. NW; 11th Floor Washington, DC 20001</p>

<p>I, as Planning Commission Government Co-Chair, hereby certify the accuracy of the above minutes:</p>	
<p>_____</p>	
<p>Signature of: <i>Kaleef Stanton Morse, MHS</i> Government Co-Chair</p>	<p>Date:</p>
<p>Date the Minutes were approved by the Executive Operations Committee:</p>	

RECIPIENT REPORT

May 29, 2019

To: Comprehensive Planning Committee (CPC)

From: Ryan White Recipient Staff

Re: Monthly Recipient Report

Attached are the monthly fiscal reports for Grant Year 29 (March 1, 2019 - February 29, 2020). This report is based on the allocations of funds by jurisdiction, sub-part (Part A and Part A MAI) and service categories developed by the Recipient from information provided by the former RW Planning Council.

Part A and Part A MAI. The Ryan White HIV/AIDS Program (RWHAP) Part A Grant Year 29 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 GY 29 award has been received in the amount \$31,293,011.**

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 Planning Council has requested an explanation of those service categories with a discrepancy greater than 30%.

Regional Services (Unit Based Costs). All vendors with unit based costs contracts in GY 28 have executed option year contracts for GY 29. Expenditures through March 2019 are reflected in the EMA wide fiscal roll up. Overall expenditures for UBC are at 11% through March 2019 and is expected to be 8%.

Note. The amounts in the current column reflect the amount of funds that are loaded to current vendor contracts. All funding available for unit-based costs will not be awarded at this time because a portion of those funds are earmarked for the new solicitation, additionally funds are added to contracts based on utilization and expenditure rates.

1. **HRSA Site Visit.** The DC EMA comprehensive site visit has been **RESCHEDULED to September 10-13, 2019**. HRSA made this change due to scheduling conflicts within their system.
2. **Narcan.** Please contact Jonjelyn Gamble to receive the Narcan kits (jonjelyn.gamble@dc.gov). As a reminder, providers/staff must attend a Narcan training (at DC Health or in the community) to receive the kits. Proof of training is required to receive 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>. Click the date of the training to register. The next scheduled training date is
 - **July 26, 2019**
3. **Virginia MAI Services.** No providers applied for the VA MAI funding opportunity. The Recipient is working with VDH to identify organizations whose focus population is youth to provide Youth Reach MAI services.

4. **Regional EIS.** The RFA for Regional EIS has been posted and responses are due back June 7, 2019. 26 organizations submitted letters of intent (LOI) to apply for funding; of which, 3 LOI were submitted after the due date and not accepted and 4 organizations are new to the Ryan White network.

The schedule for quarterly utilization reports

Quarter	Months	To be Reported
First	March – May	July 2018
Second	June -- August	October 2018
Third	September – November	January 2019
Fourth	December – February	April 2019

Date: May 29, 2019

To: Comprehensive Planning Committee (CPC)

From: Ryan White Part A District of Columbia Recipient Staff;

**Re: Fiscal Narrative Report (Part A and Part A MAI Funding)
Year 29 - Reporting Period: March 1 – 31, 2019**

Available Funding / Status of Contracts/Implementation Progress

DC: The District of Columbia and West Virginia will report expenses from March 2019. For DC (6) of (14) invoices have been received. For West Virginia, all invoices were received and processed.

MD: For organizations funded in Suburban Maryland this report represents expenses for March 2019, 2 of 5 invoices have been received and processed.

VA: N/A

Challenges to Service Delivery

DC: N/A

MD: N/A

VA: The RFA for the solicitation of MAI services in the Virginia jurisdiction has closed and there were no applicants. The recipient is pursuing other options to procure MAI services in this area of the EMA.

Fiscal Summary

District of Columbia

Service areas affected by unprocessed invoices

HIPCSALI
Outreach Services

Part A expenditures are 10% and should be 8%. (Overall Expenditure rates by funding source for the reporting period)

Services 30% below expected

N/A

Services 30% above expected

N/A

Part A MAI expenditures are 7% and should be 8%. (Overall Expenditure rates by funding source for the reporting period)

Services 30% below expected

N/A

Services 30% above expected

N/A

West Virginia

Part A expenditures are 7% and should be 8%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices

N/A

Services 30% below expected

N/A

Services 30% above expected

N/A

Suburban Maryland

Service areas affected by unprocessed invoices

EIS
Home and Community Based Health Services
Other Professional Services
Linguistic Services
Psychosocial Support Services

Part A expenditures are 1% and should be 8%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices

N/A

Services 30% below expected

N/A

*(Utilized as needed), however agencies have many different resources for linguistic services in the state.

Services 30% above expected

N/A

Part A MAI expenditures are 5% and should be 8%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices

N/A

Services 30% below expected

N/A

Services 30% above expected

N/A

Northern Virginia

Part A MAI Expenditures ended at 0% and should be 8%.

Service areas affected by unprocessed invoices

N/A

Services 30% below expected

N/A

Services 30% above expected

N/A



PLANNING COMMISSION (COHAH) GENERAL BODY MEETING AGENDA

THURSDAY, MAY 30, 2019 – 6:00PM TO 8:00PM
JUDICIARY SQUARE – CITYWIDE CONFERENCE CENTER
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Note: all times are approximate

6:00 pm	<ol style="list-style-type: none"> 1. Call To Order and Moment of Silence 2. Welcome and Introductions/Roll Call
6:05 pm	<ol style="list-style-type: none"> 3. Review and Adoption of the Meeting Agenda for May 30, 2019 4. Review and Approval of the Meeting Minutes from April 25, 2019
6:10 pm	5. Ryan White HIV/AIDS Program (RWHAP) Recipient Report/ Updates
6:30 pm	***PUBLIC COMMENT PERIOD***(SEE NEW RULES)*** <i>-Anyone interested, please complete the form with a COHAH staff member.</i>
6:45 pm	<ol style="list-style-type: none"> 6. Standing Committee Updates/Concerns <ul style="list-style-type: none"> • Research & Evaluation Committee (REC) {Next mtg.: Tue. June 18th @ 3pm} • Integrated Strategies Committee (ISC) {Next mtg.: Wed. June 19th @ 1pm} • Community Engagement & Education Committee (CEEC) {Next mtg.: Thu. June 20th @ 5pm} <ul style="list-style-type: none"> ○ “Speak Your Peace! Community Listening Session” Update • Comprehensive Planning Committee (CPC) {Next mtg.: Wed. June 26th @ 11am}
7:00 pm	<ol style="list-style-type: none"> 7. Commission Administrative Business – “Things to Do” <ul style="list-style-type: none"> • Commissioner Recognition • Nominations and Elections for Community Vice-Chair TODAY!
7:50 pm	8. New Business
7:55 pm	<ol style="list-style-type: none"> 9. Announcements <ul style="list-style-type: none"> • IMPORTANT DATES FOR JUNE, JULY and AUGUST 2019
8:00 pm	10. Adjournment
THURSDAY JUNE 27, 2019 6PM-8PM JUDICIARY SQUARE – CITYWIDE CONFERENCE CENTER 441 4TH ST. NW; 11TH FLOOR WASHINGTON, DC 20001	
NEXT PLANNING COMMISSION (COHAH) MEETING:	

IMPORTANT DATES – JUNE THRU AUGUST 2019

DATE	MEETING	TIME
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June	18	Research and Evaluation Committee (REC) Meeting	3p to 5p
June	19	Integrated Strategies Committee (ISC) Meeting	1p to 3p
June	20	Community Engagement & Education Committee (CEEC) Meeting	5p to 7p
June	26	Comprehensive Planning Committee (CPC) Meeting	11a to 1p
June	27	Executive Operations Committee (EOC) Meeting @ 441 4 th St. NW	5p to 6p
June	27	COHAH General Body Meeting @ 441 4 th Street, NW on the 11 th Floor	6p to 8p

July	16	Research and Evaluation Committee (REC) Meeting	3p to 5p
July	17	Integrated Strategies Committee (ISC) Meeting	1p to 3p
July	18	Community Engagement & Education Committee (CEEC) Meeting	5p to 7p
July	24	Comprehensive Planning Committee (CPC) Meeting	11a to 1p
July	25	Executive Operations Committee (EOC) Meeting @ 441 4 th St. NW	5p to 6p
July	25	COHAH General Body Meeting @ 441 4 th Street, NW on the 11 th Floor	6p to 8p

August	13	Research and Evaluation Committee (REC) Meeting	3p to 5p
August	14	Integrated Strategies Committee (ISC) Meeting	1p to 3p
August	15	Community Engagement & Education Committee (CEEC) Meeting	5p to 7p
August	21	Comprehensive Planning Committee (CPC) Meeting	11a to 1p
August	22	Executive Operations Committee (EOC) Meeting @ 441 4 th St. NW	5p to 6p
August	22	COHAH General Body Meeting @ 441 4 th Street, NW on the 11 th Floor	6p to 8p

Summary of COHAH Planning Cycle Timing and Responsibilities

May 2019

Integrated Plan Review/Update: Updates to the DC HAHSTA Integrated Plan is dependent on Leah Varga, HIV Services Planner. The Plan is *reviewed annually and updated every 5 years*.

Annual Work Plan - "Plan to Plan": An Annual Work Plan process doesn't currently exist, but would include all committees depending on their respective responsibilities. The annual timeline fluctuates by committee and would include all the following elements:

Epi Profile: The Recipient has primary responsibility for compiling the Epi Profile for the entire EMA in the June/July timeframe in collaboration with other jurisdictions. The CPC has secondary responsibility in requesting specific data annually for the profile in the May timeframe. Please see "Annual PSRA". The Epi Profile element feeds the Annual PSRA process.

Needs Assessment: The REC has primarily responsibility for developing and conducting the Needs Assessment, including all survey methodologies. The analysis of the survey results are conducted by a team depending on the subject area. This team can be comprised of the HIV Services Planning, COHAH staff, GWU, and HAHSTA/DC Health staff. This is an ongoing process but ideally the annual data is received and analyzed in winter/spring. The previous year's data can be used in the needs assessment if more current data is not yet available. Please see "Annual PSRA". The results of the Needs Assessment element feed the Annual PSRA process.

Annual PSRA – timeframe of the PSRA process is dependent on when the annual application is due from the Recipient to HRSA.

- ***Review of all Data: CPC has primary (first) responsibility for reviewing the data, however, all members of the General Body have secondary responsibility for reviewing and understanding all data. Generally, data review by the General Body occurs during and after the Data Presentation (Aug/Sept).***
- ***Data Presentation (Epi and Needs Assessment) for the EMA: The Data is presented to the General Body by HAHSTA with other State Health Departments and the REC in June/July.***
- ***Priority Setting: Each jurisdiction (DC/WV, MD, VA) sets their individual priorities by ranking all available Ryan White Services according to their own local jurisdictional needs.***
- ***Resource Allocation:***

Directives – During the course of each committee's or the General Body's work and responsibilities there may be a need to direct DC HAHSTA through motions and votes to modify/add/remove services and/or allocations as well as the manner in which information is provided to COHAH.

Review Expenditures and Service Utilization Data – The CPC is responsible for reviewing expenditures on a monthly basis and Service Utilization data on a quarterly basis. The data and associated information/explanations will be shared with the General Body on a quarterly basis during the COHAH General Body meetings or more frequently if needed.

Reallocation – Depending on changing needs for Ryan White clients during the grant year, there may be a reason to reallocate funding from one service to another, to add a service, or to move allocated money into or out of Unit Based Cost services into Grant-based services. The EOC has primary responsibility but may delegate to CPC. The General Body votes on reallocation of grant funds.

Evaluation and Planning Outcomes- The EOC has primary responsibility for reviewing/evaluating grant services outcomes for COHAH's ongoing planning cycle. The EOC may delegate portions of this responsibility to the REC. The continual review of outcomes during the year helps to improve the annual PSRA process but also makes the COHAH more nimble in responding to needs of Ryan White clients in the EMA throughout the year.

#	QUESTION	DATA DESIRED	YEAR/ TIME PERIOD	SOURCE	EMA	JURISDICTIONAL
Epidemiologic Data						
1	What is the size and characteristics of the local epidemic?	<p>People Living with HIV (PLWH) in the EMA.</p> <ul style="list-style-type: none"> ▪ Include breakdowns by age, race/ethnicity, gender identity, mode of transmission, and country of origin. ▪ Include EMA data and jurisdictional breakdowns and comparisons <p>**Please highlight important disparities & notable findings</p>	As of December 31, 2018, if available	Surveillance reports	X	X
2	How is the epidemic changing and where is it heading?	<p>Newly diagnosed cases of HIV and 3-year trends in newly diagnosed cases</p> <ul style="list-style-type: none"> ▪ Include breakdowns by age, race/ethnicity, gender identity, mode of transmission, and country of origin. ▪ Include EMA data and jurisdictional breakdowns and comparisons <p>**Please highlight important disparities & notable findings</p>	As of December 31, 2018, if available	Surveillance reports	X	X
3	How is the progression of HIV disease in the EMA?	<p>Newly diagnosed cases of Stage-3 HIV (AIDS) and 3-year trends in newly diagnosed cases of Stage-3 HIV</p> <ul style="list-style-type: none"> ▪ Include breakdowns by age, race/ethnicity, gender identity, mode of transmission, and country of origin. ▪ Include EMA data and jurisdictional breakdowns and comparisons <p>**Please highlight important disparities & notable findings</p>	As of December 31, 2018, if available	Surveillance reports	X	X
4	What is the unmet need for care among PLWH in the EMA?	<p>Estimates of unmet need.</p> <ul style="list-style-type: none"> ▪ Include breakdowns by age, race/ethnicity, gender identity, mode of transmission, and country of origin. ▪ Include EMA data and jurisdictional breakdowns and comparisons <p>**Please highlight important disparities & notable findings</p>	As of December 31, 2018, if available	Surveillance reports	X	X

2019 (GY'30) PRIORITY SETTING & RESOURCE ALLOCATION (PSRA) PROCESS
DATA REQUEST
 May 30, 2019

#	QUESTION	DATA DESIRED	YEAR/ TIME PERIOD	SOURCE	EMA	JURISDICTIONAL
5	How well are we doing in engaging and retaining people in care? How does this vary across jurisdictions and populations?	<p>Treatment Cascade/Continuum of Care</p> <ul style="list-style-type: none"> Include data for all RW clients in EMA and in each jurisdiction (show full cascade for each jurisdiction). Compare each step in the cascade by jurisdiction. Provide possible reasons for significant differences. Include breakdowns by age, race/ethnicity, gender identity, mode of transmission, and country of origin. Provide general data for all PLWHA in EMA. <p>**Please highlight important disparities & notable findings</p>	As of December 31, 2018, if available	RSR	X	X
6	What are the Hepatitis C infection rates among PLWH?	<p>Rates of Hepatitis C infection amongst People Living with HIV.</p> <ul style="list-style-type: none"> Include breakdowns by age, race/ethnicity, gender identity, and country of origin. Include EMA data and jurisdictional breakdowns and comparisons <p>**Please highlight important disparities & notable findings</p>	As of December 31, 2018, if available	Surveillance reports	X	
Service Utilization						
7	How many people are using RW services and what are their characteristics?	<p>RW clients</p> <ul style="list-style-type: none"> Include EMA and jurisdictional data Include breakdowns by age, race/ethnicity, gender identity, mode of transmission, country of origin, housing status, insurance status, and poverty level. 	CY'2018 (1/1/18-12/31/18)	RSR	X	X

DATA REQUEST

May 30, 2019

#	QUESTION	DATA DESIRED	YEAR/ TIME PERIOD	SOURCE	EMA	JURISDICTIONAL
8	How many clients are using each service and how many units of service are they using?	<p>Unduplicated number of people served by category and service units by category.</p> <ul style="list-style-type: none"> ▪ Include special populations service usage ▪ Include off-the-top service categories 	CY 2018 (1/1/17-12/31/17)	Service Stats/RSR	X	X
9	How well did our allocations match the need or the ability of providers to expend funds?	<p>Allocations and Reimbursements</p> <ul style="list-style-type: none"> ▪ Include initial allocations, adjusted allocations, and provider reimbursement ▪ Include data for EMA and for each jurisdiction 	Grant Year 28 (3/1/18 to 2/28/19)	Fiscal reports	X	X
10	Were large portions of some categories unspent? Are there ways to better project what service dollars can be spent efficiently?	<p>Underspending</p> <p>For service categories for which funds were returned to the recipient or more than 30% reprogrammed to another category.</p> <ul style="list-style-type: none"> ▪ Include amount and percentage of funds transferred ▪ Include reasons funds were underspent/unspent 	Grant Year 28 (3/1/18 to 2/28/19)	Fiscal reports/recipient and sub-recipient narratives	X	X
Additional Resources						
11	What other funds are available to support services for PLWH in the EMA?	<p>Resource Inventory (Update from Integrated Plan)</p> <ul style="list-style-type: none"> ▪ Include other sources funding core and support services ▪ Include other jurisdictional support for health insurance coverage, premiums, etc. 	As of December 31, 2018, if available	GWU/Recipient	X	X

2019 (GY'30) PRIORITY SETTING & RESOURCE ALLOCATION (PSRA) PROCESS
DATA REQUEST
 May 30, 2019

#	QUESTION	DATA DESIRED	YEAR/ TIME PERIOD	SOURCE	EMA	JURISDICTIONAL
Special Considerations						
12	<i>What are some focus populations that we should be looking at?</i>	The Council would like to work with the recipient and state health departments to determine appropriate focus populations. As a next step, the recipient will research best practices for selecting focus populations and examine the RSR data to see if there are specific trends or patterns that would denote focus populations.	2018, GY 28	RSR, Surveillance Data	X	X
13	<i>What immigrant populations are most impacted in the region and how does that vary by jurisdiction? Are they being well served by the RW system?</i>	Other than country of origin in the epi data, we need additional input and guidance on what data might be available.				
14	<i>What are the Part B Allocations and Expenditures?</i>	We would like to see the Ryan White services that Part B has been able to fund in each of the DC EMA jurisdictions in the past grant year as well as the allocations for the new grant year.	GY28, GY29	State Part B		X
Trends in the EMA						
15	<i>How does age impact PLWH's access to quality care in the region?</i>	5-year trends in RW client outcomes by age Data on engagement and retention in care and viral suppression	2014 – 2018	RSR	X	X