

INTEGRATED STRATEGIES COMMITTEE (ISC) MEETING MINUTES

WEDNESDAY, MAY 27, 2020 1:00PM TO 3:00PM

ZOOM CONFERENCE AND VIDEO CALL

ELECTRONIC – ONLINE MEETING

ATTENDEES/ROLL CALL					
COMMISSIONERS	PRESENT	ABSENT	COMMITTEE MEMBERS	PRESENT	ABSENT
Sarcia Adkins	X		Phyllis Givens	X	
Farima Camara		X	Krista Hein	X	
Melvin Cauthen	X		Naomi Seiler	X	
Jasmine Ford		X	Dedra Spears-Johnson	X	
Ana Gomez	X		Roshaunda Ingram-Harvey	X	
Kenya Hutton	X				
Rama Keita		X			
Kaleef Morse	X				
Jane Wallis	X				
Jennifer Zoerkler	X				
RECIPIENT STAFF	PRESENT	ABSENT	GUESTS		
Ashley Coleman	X		Claire Heyison	X	
			Natoya Mitchell	X	
HAHSTA STAFF	PRESENT	ABSENT	COMMISSION STAFF	PRESENT	ABSENT
Ken Pettigrew	X		Bailey, Patrice	X	

HIGHLIGHTS

This is a draft version of the May 27, 2020 Integrated Strategies Committee (ISC) Meeting Minutes which is subject to change. The final version will be approved on June 24, 2020.

AGENDA

Item	Discussion
Call to Order	Meeting called to order at 1:06pm by Kaleef M. followed by a moment of silence. Attendees introduced themselves.
Review and Approval of the Minutes	Phyllis G. noted a correction needed to her first name (change from Phillis). Jennifer Z. moved to approve the April 22, 2020 Minutes with necessary corrections. Kenya H. seconded the motion. The motion was approved by unanimous vote.



<p>UPDATE: Ending the HIV Epidemic (EHE) Planning (19-1906)</p>	<p>Ken P. discussed progress on the Ending the HIV Epidemic Plan (EHE) through the lens of PS19-1906. The EHE is a plan to end the contraction and spread of HIV by year 2023 using three (3) pillars; prevent, prepare and respond. The plan is being developed from information received during community engagements. Ken described their effort as an opportunity to have conversations with over 600 people of different populations (African American women, HIV+ people in Maryland, young African American men, etc.), that was not restricted to HIV but rather about their quality of life and how the current COVID pandemic may have disrupted or changed their lives. Two big takeaways were that some people feel retraumatized because the stigma related to HIV is showing up around COVID and the isolation people are experiencing for lack of human connections. There was a lot of interest in being connected. Ken can share bullet points on the populations spoken to and the results of the engagement. The plan was due in September but has been extended to December.</p> <p>The conversations will also engage providers who render mental health, substance abuse, and HIV services. Six sessions have been set up for the month of June to be spearheaded by Public Health Analyst Ashley C. Invitations to participate have been sent to all Ryan White funded providers, the Re-Entry network connected with the Department of Justice, The Department of Corrections and the Department of Behavioral Health. The invitation was also extended to the Prevention Division and Harm Reduction Program and the HOPWA Program, in HAHSTA, to send to their providers. Ashley invited the committee to send her email addresses for any other providers, in the EMA, they think may be interested. The four (4) topics for the month will be mental health, substance use, re-entry and agencies that serve seniors. There are two (2) dates for each of those groups. Ashley will put all of the links in Basecamp.</p> <p>Ken will send a survey to the communities that were engaged pre COVID19, (trans and gay men) and ask if they are interested in continuing to engage, (pick up where we left off or engage in discussion groups on a long term basis). Ken will also ask if they want to do anything in this COVID environment (ex. meetings in the park).</p> <p>Ken indicated the information collected will be disseminated to everyone in the fall. Kaleef indicated that the COHAH has to do concurrence on the plan in October and have a month to review it.</p>
<p>UPDATE: New Federal CARES Act Funding for the Ryan White Program</p>	<p>HRSA removed all planning bodies from the process of determining the allocation of CARES Act Funding for the Ryan White Program. However, the suggestions that had begun in the COHAH reached the Recipient and they will be taking most of the suggestions. HAHSTA's Project Officers will be sending out information about awards shortly.</p>



	<p>Currently, CDC is not issuing any money for prevention, intervention or testing services. All CDC money is focused on COVID epidemiology work and lab capacity (i.e. antibody and virus testing).</p>
<p>Service Delivery AFTER COVID 19...Strategizing or 2021</p>	<p>There were several suggestions given as potential enhancements to services post COVID19. Most agreed that there will probably be a blend of what's being done during COVID19 and new determinants of service delivery. Some ideas were:</p> <ul style="list-style-type: none"> • A stronger focus on mental health • Assist customers with the capability of technology in their homes • Modify language. Words matter (ex. use the word “expand” instead of the word “new”) • Install plexiglass shields in the work place • Distribute Chromebooks to enable customers to engage regularly with groups and health care providers • Accommodate options and flexibility for the clients who want to be seen and for those who don't <p>Jennifer asked if HRSA was developing guidelines. Kaleef indicated that HRSA is creating guidelines for the CARES Act money but not for possible changes on the Ryan White programmatic side. The COHAH needs to be sure to allocate resources to the service categories at an appropriate level to ensure that agencies can get what they need.</p> <p>Kaleef asked how the ISC can support innovation and share best practices in the EMA during and post COVID pandemic. Melvin indicated that how and when they open will be determined by someone else, (the Department of Health, County Executives, etc.). His agency will evolve as needs are identified. How the customers want to interact is how services will be molded.</p> <p>Shifts in the workforce was also discussed. There are those who fear going back to their jobs where there was public interaction. There are those who cannot go back to their jobs because of the lack of childcare accommodations. Remote work is becoming a new emerging field and volunteerism may fall off.</p> <p>When considering what the ISC can work on moving forward, it was suggested to start thinking about service standards in the sense of how the world has changed. Ashley indicated that all of the service standards have now been developed and the old ones are now up for review. Additionally, the Ryan White CARE team has written a grant that included an allocation for phones and internet. It was suggested to also include a capacity building or training component.</p>

Other Business	None
ANNOUNCEMENTS/OTHER DISCUSSION	
<p>HRSA has announced several NOFAs.</p> <ol style="list-style-type: none"> 1. For reducing stigma at a system, organizational and individual client level, of the Ryan White program, to establish a training and T/A program, to reduce stigma for people with HIV on multiple levels. The application is due June 8, 2020 2. To build capacity to implement Rapid A.R.T. initiation for food and care engagement. One for provider and one for a T/A program 3. Improving care and treatment coordination focusing on Black Women 	
HANDOUTS	
<ul style="list-style-type: none"> • Integrated Strategies Committee Agenda for May 27, 2020 • Integrated Strategies Committee Minutes for April 22, 2020 	

MEETING ADJOURNED	2:09 PM	NEXT MEETING	WEDNESDAY, JUNE 24, 2020 5:00pm to 6:00pm 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 Integrated Strategies Committee (ISC):		<i>Ka'leef Stanton Morse, MHS, MBA</i> Government Co-Chair	