

Community Health Planning & Strategies Committee



Cheri Tomlinson, Chair

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Wednesday, April 6, 2016

5:00 pm to 7:00 pm

Public Health

4041 North Central Avenue, Phoenix

14th Floor, Training Room

Meeting Minutes

Committee Members *AT: Attended AB: Absent EX: Excused ALT: Alternate Present*

In Attendance

AT	Cheri Tomlinson	AT	Cynthia Trottier	AB	Dan Lindell
AT	John Sapero	AT	Randall Furrow	AB	Bruce Weiss
AT	Debby Elliott	AB	Edward Tisdale	AB	Tim Jeralds
AB	Gil Velez				

Part A Program Staff

AT Rose Conner
AT Jeremy Hyvarinen

Guests

Nicole Turcotte

Support Staff: EX Claire Tyrpak

Welcome, introductions and declarations of any conflicts-of-interest

Cheri Tomlinson called the meeting to order and welcomed the attendees. Everyone introduced him/herself and declared any conflicts-of-interest.

Determination of Quorum

Cheri Tomlinson determined that quorum was not established with 5 of 10 members present at approximately 5:05 p.m. so it continued as a workgroup.

Review of the minutes and action items from prior meetings

Participants silently reviewed the summary minutes for the previous meeting. No comments were voiced.

Funding is provided by the United States Department of Health and Human Services, the Ryan White Treatment Extension Act of 2009 and the Maricopa County Department of Public Health.

All of the documents discussed may be requested from Planning Council Support.

MEETING MINUTES *continued*

Chair and Administrative Agent update

Rose Conner stated that HRSA said the grant will be released in mid-June with a due date of mid-August. PSRA will be proposed at Executive Committee for July 23 and Data Session on July 21.

Cheri Tomlinson stated the Part C was supposed to do a competitive application but it has changed and instead there is a year extension with changes coming next year. Also, their Project Officer Monica Farmer is leaving, so they will be getting new PO.

Oral Health Discussion

Rose Conner stated that an Oral Health Workgroup met last Wednesday to discuss possible changes in services. She then discussed the dental survey recently done. A total of 61 responses, or 20% of identified clients, were collected. Demographics, method of exposure, type of insurance, and barriers to care were discussed.

Rose stated that the Oral Health Workgroup recommends that the Planning Council approve a change in the current maximum cap on Oral Health benefits from a maximum of \$2500 to a maximum of \$3500 for grant year 2016. Any client requiring treatment plans with costs above \$3500 will have the first \$3500 paid through the RWPA Delta Dental Insurance or Direct Dental Services programs. Any RWPA client would be eligible for additional oral health benefits through the Ryan White Part B Program's Delta Dental Insurance program for the remainder of the RWPB 2016 grant year (March 31, 2017) by disenrolling from the RWPA Oral Health program and reapplying for the RWPB Oral Health Program. The RWPB program will review and approve treatment plan costs over \$3500 per the RWPB current protocols.

Rose stated that funding for this year will be level or slight increases for some EMAs based on HRSA information received yesterday, since Puerto Rico will not be eligible for Part A funding.

Cheri asked for any questions on the survey. She asked if it was correct that 61 respondents had not received dental services in the past year. Rose affirmed. Cheri also asked per the survey, if fifty percent scheduled an appointment but didn't go to the appointment. Rose confirmed. Cheri said that MIHS is talking with ADHS legal to see if a data agreement will work in place of a Business Associate's Agreement. This is an important issue that must be resolved before MIHS could accept Part B's funding for above \$3500 treatment plans. Rose stated that the workgroup may need to meet again later in the year to address other dental issues.

Integrated HIV Prevention and Care Plan

Cheri Tomlinson discussed the spreadsheet of goals, objectives and strategies for the plan. She stated that Claire Tyrpak put together some suggestions of activities to complete the plan. Rose Conner discussed the Leadership Group and the work that it has done so far on the plan including data collection, financial and HR inventories, Leadership training and the HIV symposium. The committee will work on Goal 1 activities at tonight's meeting. The process will take some time but hopefully can be completed by June 1.

MEETING MINUTES *continued*

Cheri discussed that there will be extra meetings in April and May to work on the Plan, on April 20 and May 4 regularly scheduled CHPS meeting and May 18th. John asked if Allocations Committee could move directly to Planning Council and not have the committee meet during May and June, which would provide additional time for CHPS Committee to meet and work on the Integrated Plan. Discussion followed on the topic. The Committee decided to meet twice in April, once in May and once in June and reevaluate as it progresses. Discussion will occur at the Planning Council meeting to decide whether allocations can be discussed at the Planning Council and decisions made at the Planning Council level, which would eliminate the need for the Allocations Committee meetings, unless there was a specific item that needed committee review.

The Committee discussed the process to use to proceed and John Sapero gave background on how the goals, strategies and objectives were determined. Jeremy Hyvarinen presented Continuum of Care data from the State Surveillance team and RWPA data, and the committee discussed the data collected.

The Committee discussed possible options for activities. Ideas for Goal 1, Strategy 1 Prevention, testing and linkage to care activities included:

- AETC could be engaged to identify the activities on clinic-level engagement programs for testing.
- Increase testing for partners by adding one testing site in Maricopa County per year for five years.

Goal 1, Strategy 2 Education activities could include:

- AETC to educate providers on importance of routine testing.
- Incorporate health literacy at first visit.

Strategy 3 Community engagement activities could include:

- Conduct one needs assessment priority populations each year with one of those years including prevention and testing.
- RWPC/D to explore the use technology to reach clients.

Post Meeting Assignments

- Part A and Prevention offices will work on developing Strategies 1 and 2 before the next meeting.
- Part A will contact AETC to ask for their input into prevention action steps related to Goal 1
- Claire Tyrpak will work on Goal 2 suggested activities.
- Cheri requested that all information that the Committee is expected to review and work on during meetings be provided to the Committee members at least 48 hours in advance.

Determination of agenda items for the next meeting

It was discussed that the next meeting will be on the continuation of work on activities for Goal 1 and continuing onto Goal 2 activities.

MEETING MINUTES *continued*

Current events summaries

No comments were voiced.

Call to the public

No comments were voiced.

Adjourn

The meeting adjourned at 7:03 p.m.