



Continuum of Care Committee MEETING SUMMARY

Thursday, September 9, 2021, from 10:00 AM to 11:50 AM Video conference via Zoom: <u>https://zoom.us/j/98086438103</u> Teleconference: (929) 205-6099 / Meeting ID: 980 8643 8103#

Pres	sent	Excused Absences	Unexcused Absences
 Ann Bagchi, F Dr. Lucy Efob Wanda Figue Vieshia Moral Nancy Scang Lauro Rocha War Talley (N Maisel Guzma 	i roa, MD les (Chair) arello lon-Voting)	9. Cezar Dumago	10. Kendall Clark 11. Dominga Padilla, MD

Guests: Roxanne Barker (St. Bridget's), Michelle Dalla Piazza (Rutgers), Jen Grimsich (Merck), Kathleen O'Brien (Merck), Aliya Roman (Recipient), Tanzila Salim

Support Staff: Tania Guaman

1. Welcome and Moment of Silence

Morales called the meeting to order at 10:00AM and welcomed all in attendance. All attendees introduced themselves.

2. Roll Call

Dr. Bagchi conducted the roll call. Quorum was established later during the meeting.

3. Public Testimony

There was no public testimony at this meeting.

4. Approval of Meeting Summary from July 8, 2021

At the last COC meeting, the June 10th meeting summary was approved as distributed.

The July 8th meeting summary was sent electronically in advance for committee review. Under the REC committee report, the Support Team made grammatical corrections for two sentences as requested by the committee.

Motion: Morales asked for a motion to approve the meeting summary as presented. Dr. Bagchi motioned to approve. Scangarello seconded. The vote passed unanimously.

5. Standing Committee Updates

• Comprehensive Planning Committee (CPC) – Guaman provided the following report:

- The Committee did not meet in August. In September, the committee will start conversations about the new HRSA guidance in preparation to develop a 2022-2026 Integrated Plan. The next CPC meeting will be held on September 10, 2021, via Zoom.

- Research and Evaluation Committee (REC) Dr. Bagchi provided the August 16th REC report:
 - At our last meeting, we had our final approval and presentation of the assessment of the administrative mechanism and the needs assessment. Both are done.
 - The committee is waiting on data from the state for the Epidemiological profile.
 - At the next meeting, the committee will start having discussions about next year's full needs assessment we're going to be discussing what topic we want to cover.

The next REC meeting will be held on Monday, September 20, 2021, at 10AM via Zoom.

- Community Involvement Activities Committee (CIA) Guaman provided the July 28th CIA report:
 - The committee received a presentation by Warren Talley on Ending the HIC Epidemic. There were several questions for attendees about how to address the four pillars of ending the epidemic diagnosing, treating, preventing and responding. The full summary is available on the meeting notes, which include recommendations providing HIV testing where people are, making the ADDP application easier and faster, building the comfort of people using telehealth, which is addressing a transportation barrier, or perhaps having nontraditional hours outside of 9 to 5.

The next CIA meeting will be held on Wednesday September 22, 2021, 5:00 to 7:00PM via Zoom.

6. Old Business

There was no old business.

7. New Business

• New Member and Co-Chair Election

Since the candidate for membership was not present, this item was tabled for the next meeting. Lauro, Nancy and Kendall were nominated for the Vice-Chair position. The committee recommends the review of attendance records against nominations. Then, the Support Team can reach out to the three nominees to ask whether or not each individual accepts this nomination.

• PRESENTATION: Best practices for providing culturally relevant and competent care for the LGBTQ+ community by Dr. Michelle Dalla Piazza

Dr. Dalla Piazza gave a presentation on how to provide gender affirming spaces and gender affirming treatments in conjunction with HIV services. She notes that everyone may have unconscious bias about gender norms and sexuality, which plays into stigma because typically anything outside of hetero normative is considered abnormal or marginalized. Therefore, Dr. Dalla Piazza underlines the importance of understanding the spectrum of gender identities without making assumptions that may ostracize and/or alienate patients that may prevent them from sharing their experiences openly. She also highlights the value of using language to celebrate gender identity which can enhance the communication and clinical care practices for the LGBTQI+ community. This presentation will be available on the NEMA website for public access.

Review/Update the Non-Medical Case Management Service Standard

The committee reviewed and recommended the following updates for these standards:

- Goals \rightarrow no change
- Description → HIV/AIDS PCN 16-02 (Additional Program Guidance was moved from the bottom to this section).
- Key Service Components and Activities → removed performance indicator measures to maintain consistency with other service standards.
- Service Limitations/Requirements → a general statement was added indicating that the Recipient has the flexibility to make changes and to communicate them to subrecipients as needed.
- Assessment of Service Plan → grammatical and clarifying edits were made. Under the documentation section, listed items were removed since those are included in the Universal Service Standard. Those specifically relevant to this service category stayed.
- Engagement and retention of clients \rightarrow no change
- Staff qualifications and training → Case Managers are encouraged to complete the Ryan White Medical Case Management Certification and to be knowledgeable of community resources. Followup activities may include telephone calls, text, and/or emails to clients who have missed appointments.

Motion: Morales asked for a motion to approve the Non-Medical Case Management Service Standard with the above edits. Scangarello motioned to approve. Guzman seconded. The vote passed unanimously.

Review/Update the Psychosocial Service Standard

The committee reviewed and recommended the following updates for these standards:

- Goals \rightarrow no changes
- Description → the committee questioned whether medical nutritional therapy should be included in the service description. Upon review of the HRSA's PCN 16-02, and confirmation that this item was listed there, the committee decided to leave the content as-is.
- Key Service Components and Activities \rightarrow no changes
- Service Limitations/Requirements → a general statement was added indicating that the Recipient has the flexibility to make changes and to communicate them to subrecipients as needed.
- Assessment of Service Plan → the word 'client' was changed to person living with HIV
- Engagement and retention of clients \rightarrow Refer to Universal Service Standards
- Staff qualifications and training → no changes

Motion: Morales asked for a motion to approve the Psychosocial Service Standard with the above edits. Dr. Bagchi motioned to approve. Scangarello seconded. The vote passed unanimously.

8. Administrative Issues— PC Support Staff

 Support Staff shared two updates posted on the HIV care news and treatment section of the website. (1) The CDC's campaign PrEP to increase awareness among women and their health care providers. (2) The revised opportunistic infections guidelines on several diseases and immunizations focused on people living with HIV. • The committee has been making strides with the revision of Service Standards, therefore the workload for the upcoming months is low. Morales and the Support Team will consult on priorities from the Recipient to then decide on next steps.

9. Announcements

No announcements were made during the meeting.

10. Next Meeting

The next COC meeting will be held on Thursday, October 14, 2021, at 10 AM via Zoom.

11. Adjournment

The meeting was adjourned at 11:50 AM.