

WEST CENTRAL FLORIDA RYAN WHITE CARE COUNCIL

**RESOURCE PRIORITIZATION AND ALLOCATION RECOMMENDATIONS**

**SUNCOAST HOSPICE, CLEARWATER**

**THURSDAY, SEPTEMBER 12, 2019**

**11:00 A.M. – 12:30 P.M.**

 **MINUTES**

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| CALL TO ORDER | The meeting was called to order by the Chair, Dave Konnerth, at 11:00 a.m.  |
| ATTENDANCE | Members Present: Nolan Finn, Dave Konnerth, Elizabeth Rugg, Joy Winheim, Marylin Merida Members Absent: Charlie Hughes, Priya RajkumarGuests Present: Adrienne Emanuel, Jim RothRecipient Staff Present: Aubrey ArnoldLead Agency Staff Present: Darius LightseyHealth Council Staff Present: Naomi Ardjomand-Kermani, Lisa Nugent |
| CHANGES TO AGENDA | None. |
| ADOPTION OF MINUTES | The minutes for July 11, 2019 were approved by acclamation **(M: Rugg; S: Merida)**. |
| CARE COUNCIL REPORT | Co-Chair, Nolan Finn, reported that the last Care Council meeting was held on August 7, 2019. Recipient, Aubrey Arnold, told members that the $100,000 grant was received and will be used to enhance e2Hillsborough by combining all reporting systems to allow for ease of entering and retrieving data on the provider side. The funding year (FY) 2019-20 grant application is in the process of being reviewed internally as the grant application process was delayed due to the absence of data from the state. This year, Part A is requesting $10.8 million.The statewide anonymous needs assessment survey is closed and approximately 618 survey responses were received for the total service area (TSA). There will be a case management training held on September 20, 2019. Recipient, Aubrey Arnold, interjected and thanks Planning Council Staff, Naomi Ardjomand-Kermani, for all the work they did to garner survey responses from the TSA. The eligible metropolitan area (EMA) continues to wait for the written site visit report from Health Resources and Services Administration (HRSA).Part B is in the process of putting together an acuity assessment and the HIV/AIDS section has changed the case management and eligibility guidelines. The guideline revisions are due in October 2019. Pinellas Department of Health (DOH) has applied for $87,000, from the Center for Disease Control (CDC) for planning purposes. The date for the CareWare 6 training is still to be determined due to the travel ban. Part B monitoring is currently ongoing.The programming notice of funding opportunity (NOFO), from HRSA for the Ending the Epidemic initiative, is currently available and will be due in October. Members inquired as to how these two grants will influence one another and were told that this will be more clearly understood once, and if, the funding is received by Part A and Part B.The Community Advisory Committee (CAC) met in New Port Richey and attendees expressed the need for mental health, transportation, and peer navigator services for the area.A new member was voted in, representing Hillsborough. The election for Care Council Chair and Vice-Chair was held and Nolan Finn was elected for the former and Kamaria Laffrey for the latter.Revisions to the Integrated Plan, presented by the Planning and Evaluation Committee (P&E), were voted on and approved. RPARC presented Part A financial reports and reported that all spending is proceeding as expected. |
| RECIPIENT UPDATE | Recipient, Aubrey Arnold, reported that the $16,000 carryover request was awarded to the EMA and RPARC members will discuss how these funds will be allocated, in October 2019, upon receiving proposals from funded providers. These reallocation requests for FY 2019-20 will be reviewed along with the Part A quarterly expenditure report.A new grant application for Ending the Epidemic (EtE) is due October 15, 2019 and, if received, will offer an additional $4 million dollars for new and innovative patient care programs. Some considerations are funding for transportation through ride-sharing programs (Uber) and increased funding for Health Education and Risk Reduction (HERR). Input from network providers has been requested at this time. This grant will be a 5-year opportunity with a $4 million annual ceiling. This funding will only be used in Pinellas and Hillsborough, as they are the two EMA counties identified by EtE as areas of high risk, but funding for residents in the remaining EMA counties will be available if the clients receive their services in Pinellas or Hillsborough. The purpose of this funding is to link people with HIV to care as well as to increase the number of people who are aware of their sero-status. The goal is to increase viral suppression by 2025. This funding will run concurrently with Part A HRSA funding (March – February) and the Planning Council will play a role in the allocation of grant funding. Request for Applications (RFA) will be released for procurement of providers if funding is awarded.Member, Nolan Finn, asked Aubrey Arnold if the community will have their needs assessed in order to determine which services will be funded. Arnold replied that the internal HRSA details are being worked on at this time and hopes that Michael Carrigan will serve as project officer for this grant funding as well. Member, Elizabeth Rugg, then inquired if there would be a quality management (QM) component to the grant and Arnold responded that QM will be a part of this programming as an expanded database will be required to track and report in a standardized manner. Member, Marylin Merida, then asked where the clusters of new HIV cases are located and was told that the epidemiology report would need to be reviewed in order to answer this question as well as to locate where cases have increased in numbers. Merida went on to ask if telemedicine would be considered and Arnold agreed that this could very well be a component for plan implementation. He did note; however, that ceilings and floors for funding are different based on which tier HRSA has assigned each EtE county and our EMA is in the 2nd tier. What this means is still somewhat unclear.   |
| LEAD AGENCY UPDATE | Lead Agency staff, Darius Lightsey, informed members that Floyd Egner absence was because he is out of office to celebrate his birthday.New guidelines for Medical Case Management (MCM) were briefly mentioned. Member, Marylin Merida, inquired if MCM and Non-Medical Case Management (nMCM) would have the same agencies/case managers as they previously did and Lightsey answered that this would be a matter of splitting up time for funding. Case management and eligibility funding are being split in October, with MCM receiving the most dedicated funding.Lightsey then went on to review the Part B Expenditure Report with members. |
| PART B EXPENDITURE REPORT | Lightsey reported that Part B is now in their second quarter and that although some spending rates appear to be low due to staffing issue, they expect these numbers to increase as the year goes on. He noted that Emergency Financial Assistance (EFA) and Local Pharmacy Assistance Program usage is low for the local level; this is most likely due to the switch from central pharmacy to CVS for medication fills. Chair, Dave Konnerth, pointed out that there was a significant jump in spending from June to July. Co-Chair, Nolan Finn, asked if monitoring was currently taking place and Lightsey responded that increases and decreases in spending are being investigated to determine the needs and changes in funding. |
| COMMITTEE CHAIR & CO-CHAIR ELECTIONS | Members were guided through the election process by Planning Council Staff, Naomi Ardjomand-Kermani.Dave Konnerth was nominated for Chair **(M: Finn; S: Merida)** and the nomination was approved with acclamation, by the committee. Nolan Finn was nominated for Co-Chair **(M: Merida; S: Winheim)** and although the committee approved of this voted in acclamation, Finn accepted the position conditionally. Guest, Adrienne Emanuel, anticipates joining the committee soon at which time, the committee will vote on Co-Chair once more. |
| COMMITTEE WORK PLAN UPDATE | Members kept the work plan as is, with changes made to the dates sync with funding years. Chair, Dave Konnerth, noted that the committee must also work on recruiting new members for the committee. The acceptance of this work plan was adopted by acclamation **(M: Merida; S: Rugg)** |
| COMMITTEE MEETING TIME, DAY, LOCATION | Members decided that they would like to keep the committee meeting day, time, and location the same. Chair and Empath employee, Dave Konnerth, told members that he will request the room for the upcoming year and will wait to hear from Empath to determine if this will be possible. He mentioned that there are new security protocols in place and, as such, codes will be given to Planning Council Staff and Committee Members in order to enter the building.The decision to continue the status quo was accepted by acclamation **(M: Konnerth; S: Rugg)** |
| COMMUNITY INPUT/ ANNOUNCEMENTS  | Lead Agency staff, Darius Lightsey, informed members that Yashika Everhart has left the county and is now employed by the Lead Agency in district 8. This position is now being advertised to determine her replacement. It is also possible that a AIDS Drug Assistance Program (ADAP) position will be opening soon as well.Co-Chair, Nolan Finn, informed members that the Florida Patient Care Network (FCPN) has yet to determine how redistricting of Lead Agency areas will occur. This will continue to be discussed at FCPN meetings from now until 2021. Furthermore, there has been no news released in regards as to how data, for the Integrated Plan, will be reported to the state. |
| **ADJOURNMENT**  | There being no further business to come before the committee, the meeting was adjourned at 11:46 a.m.  |
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