

**Greater Baltimore HIV Health Services Planning Council**  
**Minutes of the Meeting of April 20, 2010**

Vol. VII, No. 1

Final • April 21, 2010

**Meeting Attendance**

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Present	S. Alston M. Becketts K. Bellesky R. Bradley C. Brown V. Burrell-Gibson D. Clark R. Disharoon C. Edmonds J. Fleming C. Gibson R. Gore-Simmons M. Graves R. Haden P. Hall C. Harvey Sr	T. Hawkins M. Hitch R. Johnson D. Kelson C. Massey R. Matens A. Middleton* M. Moaney* M. Reese D. Rivera (proxy for J.Keruly) R. Rubino W. Samuel D. Shamer L. Sowah B. Thomas-El
Absent	V. Clark R. Green D. Henson T. James J.Keruly	A. Leverrette L. Servance D. Smith J. Winslow
BCHD	R. Brisueno A. Ferrari	M. Rucker J. Ungard
Staff	D. Gorham R. Kleinberg D. Munro J. Reed	N. Slaughter E. Saber S. Stewert
Visitors	M. Carroll, Sr. V. Febres R. Gray S.Jenkins H. Johnson	A. Newton G. Ramus D. Rivera C. Smith
Handouts	Meeting agenda (March 16, 2010). Planning council packet (April 20, 2010). Final action items (April 20, 2010). Biographical sketch V. Geffrard. FY 2010 MAI priority setting data binders. Grantee recommendations for FY 2010 MAI priority setting. Draft Part A grantee questionnaire for the assessment. Draft Part A provider questionnaire for the assessment.	

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**Executive Summary**

The meeting convened with quorum at 6:00 p.m.<sup>1</sup>

The planning council voted to move V. Geffrard onto the pool list.

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<sup>1</sup> Quorum is defined as attendance of at least 51 percent of membership.

Drafts of the second grantee and provider questionnaires used in the annual assessment of the Part A administrative mechanism were reviewed and approved.

The council began its emergency resource allocation exercises for the FY 2010 Minority AIDS Initiative (MAI) award received March 1, 2010 but did not complete its exercises. The council voted to complete MAI resource allocation the following week upon solidifying space and polling of council members to verify quorum.

The council approved recommendations for reallocation of Part A FY 2010.

The meeting adjourned at 8:45 p.m.

**Proceedings**

***Introductions/Review of Minutes***

The chair convened the meeting at 6:00 p.m. M. Reese served as vice chair and conducted the roll call.

***Chair Report***

The chair welcomed everyone to the FY 2010 MAI priority setting and resource allocation (PSRA). In the interest of time, the chair requested the council amend its agenda to review only committee action items (motions) so that the council could proceed with its emergency MAI PRSA.

Motion	To suspend the rules to review committee action items only before starting its MAI PSRA.
Proposed by	R.Rubino
Seconded by	M.Reese
Action	Passed, 0 abstentions, 0 objections

***Part A Report***

R. Brisueno of the Baltimore City Health Department suspended his presentation of the Part A monthly report to the council in the interest of time.

***Part B and D Report***

M. Hitch of the Maryland Infectious Diseases and Environmental Health Administrations suspended her presentation of the Ryan White Parts B and D reports to the council, in the interest of time.

***Committee Reports***

Comprehensive Planning Committee (CPC):

The committee co-chair reported the following:

- The CPC finalized its list of presenters for the upcoming data, informational presentations and summary slides in preparation for Part A FY 2011 PSRA.

Motion	To accept the data and information presentation list and send formal letters to the speakers requesting a presentation to the council.
Proposed by	D. Shamer
Seconded by	M. Reese
Action	Passed, 0 abstentions, 0 objections

- Requirements of the new legislation were reviewed along with the goals and strategies of the current comprehensive plan. The committee made initial recommendations for strategies within the three main goals outlined in the comprehensive plan in consideration of new legislative requirements.

**Evaluation Committee:**

The committee co-chair reported the following:

- The Evaluation Committee finalized the first grantee and provider questionnaires for the assessment of the administrative mechanism and approved their release to providers and the grantee after the notice of grant award for FY 2010 Part A is released. In addition, the committee began its review of the second provider and grantee questionnaires for the assessment of the administrative mechanism. The committee made several comments that will be included in discussion when finalizing the questionnaires at the May Evaluation Committee meeting.

Motion	To approve the drafts of the first grantee and provider questionnaires and release them to the appropriate contact person one week after the FY 2010 Notice of Grant award is distributed.
Proposed by	D. Shamer
Seconded by	M.Reese
Action	Passed, 0 abstentions, 0 objections

**Nominating Committee:**

The committee co-chair reported the following:

- The interviews of two applicants were reviewed and recommendations for placement onto the pool list were made. The committee recommended V. Geffrard and S. Jenkins to be added to the pool list. S. Jenkins’s bio was not available at the time of vote and his name will be brought forward to the council at May planning council meeting.

Motion	To place V. Geffrard onto the pool list awaiting planning council appointment
Proposed by	M. Reese
Seconded by	D. Kelson

Action	Passed, 1 abstentions, 0 objections
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- Seven applicants will be reviewed and screened this month by the committee.
- The committee continued its review of council members' attendance as requested by the council chair.
  - A letter was sent to the chair recommending the removal of four planning council members in violation of the attendance provision in the planning council bylaws.
  - The committee sent letters to all planning council members who are in danger of violating the attendance provision in the bylaws within the next two scheduled planning council meetings.
  - Committee attendance and primary committee membership were also reviewed and the committee's ability to conduct their business was discussed.

The planning council adjourned its council meeting and convened its scheduled emergency MAI PSRA for FY 2010.

***Fiscal Year 2009 Minority AIDS Initiative Priority Setting and Resource Allocation***

N Slaughter of InterGroup Services, Inc. (IGS) provided an overview of the legislative changes of the 2009 Ryan White Act that led to the council's emergency MAI PSRA.

- The Ryan White Treatment Extension Act of 2009, (effective September 30, 2009), realigned both Ryan White Parts A and Part A MAI fiscal cycles to run March 1 through February 28 beginning with FY 2010.<sup>2</sup>
- MAI FY 2009 will continue until July 31, 2010 and MAI FY 2010 officially began March 1, 2010. As a result,
  - There is an overlap of MAI fiscal years 2009 and 2010 and MAI funds for which the council must plan. Capacity-building initiatives for this one-time overlap of MAI funding have been put forth by the Executive Committee for council review and would be discussed during the PSRA.
  - Allocations for MAI FY 2010 must be set to ensure continuation of services beyond July 31, 2010 when MAI FY 2009 services are scheduled to end.

N Slaughter recommended the council begin its PSRA exercises for MAI FY 2010 with the current MAI FY 2009 allocation levels.

D Munro, of IGS served as facilitator and reviewed housekeeping items, the council's processes for PSRA and the spreadsheet of service priorities for MAI FY 2010 which the council had previously ranked through the electronic voting system following the June planning council's data presentations. He explained that once the council voted on its starting point for conducting its allocation exercises, the next step would be to review

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<sup>2</sup> The Ryan White HIV/AIDS Reauthorization Act of 2006 mandated the Ryan White Part A fiscal year to run March 1 through February 28 and the MAI fiscal year to run August 1 through July 28. This is effective through the end of MAI FY 2009 on July 31, 2010.

and vote on the capacity-building initiatives recommended by the Executive Committee. Subsequently, a round three would be needed to make adjustments to service categories.

The services listed are in order of how they were prioritized by the council. Categories that not prioritized are included because they are activities of the HRSA-funded categories. Rounding error issue: everything on spreadsheet is rounded up to two decimal places, while excel does not do this automatically. These rounding's must be done afterward to balance. If 0.1 percent were needed to balance the total percentage to 100 percent, it could be taken from services that have the highest allocation percentages.

Motion	To bump-up lowest finance category by .01% or .02% to round off or take away from highest-funded categories to round off
Proposed by	K.Bellesky
Seconded by	D. Shamer
Action	Passed, 1 abstentions, 0 objections

Motion	To extend MAI FY 2009's per category percentage allocations as a starting point, for this MAI FY 2010 discussion.
Proposed by	K.Bellesky
Seconded by	D. Kelson
Action	Passed, 0 abstentions, 0 objections

### **Round one: Capacity Building Initiatives recommended by the Executive Committee.**

The council began the Priority setting and resource allocation with the one-time MAI capacity building recommendations from the Executive Committee starting with the core medical services.

#### Medical Case Management:

Executive Committee recommended to allocate \$50,000 to design and publish resource guide and allocation \$32,000 to facilitate issuance if housing vouchers to support access to PMC services to newly diagnosed.

Conflicts read.

Motion	Consider all Exec. Recommendations for case management in one motion.
Proposed by	C. Harvey
Seconded by	D. Kelson
Action	Passed, 0 abstentions, 0 objections

The council discussed the following:

- Concerns regarding the terminology of “newly diagnosed” and advises changing to “newly into care”. It is difficult to determine a newly diagnosed.
- If there should be any restriction at all. Should the housing vouchers be made available to any Ryan White eligible HIV-positive client?
- Concerns regarding those who were previously diagnosed and just never entered care until that point.
- Motion speaks to giving a client immediate support and then working with Case Management to get them into stable housing.

Motion	To put a total of \$82,000 into Medical Case Management and accept Executive Committee’s recommendations to give \$50,000 for passport to care and \$32,000 for housing vouchers.
Proposed by	C.Massey
Seconded by	C.Harvey
Amendment	To put a total of \$82,000 into Medical Case Management and accept Executive Committee’s recommendations to give \$50,000 for a resource guide to care and \$32,000 for housing vouchers for the newly into care.
Proposed by	C.Massey
Accepted	Yes
Action	Passed

### OAHS Co-Morbidity

Executive Committee recommendations for purchase of: (1)General med supplies: \$40,000,(2) STI testing kits: \$10,000,(3)Over the counter meds not covered in RW program: \$24,000(4)Blood pressure monitoring devices for PLWH/As: \$10,000, (5) Medical devices needed to measure glucose levels in patients: \$20,000.

Conflicts read.

Motion	Vote on all Exec. Recommendations for OAHS Co-morbidity in one motion.
Proposed by	D.Shamer
Seconded by	W.Samuel
Action	Passed, 0 abstentions, 0 objections

The council discussed the following:

- How the exact numbers were calculated. It was clarified by the grantee that it was based on the request of four providers
- The recommendations were introduced months ago and each committee brought recommendations forward. These are the products of those recommendations.

Motion	Accept Exec. Committee’s recommendation to add \$104,000 total into OAHS-co-morbidity for one-time capacity building.
Proposed by	D. Kelson
Seconded by	B.Thomas-El.
Action	Passed, 0 abstentions, 0 objections

**Mental Health**

Executive Committee Recommended to add \$30,000 to category to add additional hours of psychologist/psychiatrist FTE.

Conflicts read.

The council discussed the following:

- If the category was being restricted to newly diagnosed clients. The grantee clarified that it was not.
- It was stated by the grantee that two providers exist for this service.

Motion	<b>To add 200 additional hours of psychologist/psychiatrist FTE at \$150 per hour for a total of \$30,000.</b>
Proposed by	C.Massey
Seconded by	D. Kelson
Action	Passed, 0 abstentions, 0 objections

The council at this point ended the recommendations for the core medical services and began allocations for the support category one-time MAI capacity building recommendations from the Executive Committee.

### Counties Medical Transportation

The Executive Committee recommended the allocation of \$20,000 to counties medical transportation to target four counties not currently receiving medical transportation funding.

Conflicts read.

Motion	To allocate \$20,000 to counties medical transp. to target four counties not currently receiving medical transportation funding.
Proposed by	D. Kelson
Seconded by	W. Samuel
# Abstentions	2
Opposed	0
Action	Passed

### Outreach

The Executive Committee recommends (1)\$6,000 for the purchase of mini laptops or PDAs to enter client data when off-site as clients are encountered,(2)\$18,000 for purchase of testing kits for outreach workers,(3)\$55,000 to fund outreach program targeting youth that can be sustained after the one-time funding runs out.

Conflicts read.

Motion	To accept all Exec. Committee's recommendations for Outreach at one time, in one motion.
Proposed by	D. Kelson
Seconded by	B.Thomas-El
# Abstentions	3
Opposed	0
Action	Passed

The council discussed the following:

- If there was a vendor identified to conduct outreach for \$55,000? Grantee sated that they would need to RFP this out. This would support one FTE that would support seven-months of service-it is start-up.
- If Ryan White Part A allows testing kits since HRSA states that Part A Outreach workers cannot test. The grantee stated that it does allow if it isn't CTR.

Motion	Accept Exec. Committee’s recommendation to add \$79,000 total into Outreach Services for one-time capacity building
Proposed by	R.Disharoon
Seconded by	W.Samuel
Amendment	Accept Exec. Committee’s recommendation to add \$79,000 total into Outreach Services for one-time capacity building with the condition that HRSA allows the HIV-testing kits.
Proposed by	R. Matens
Accepted	R. Disharoon.
Action	Passed

Facilitator D. Munro stated that the planning council still has to plan for \$300,000 from which the Executive Committee has no recommendation

**Round Two: Grantee Recommendations**

**Medical Case Management**

The grantee recommended that the planning council allocate \$80,000 into Medical Case Management.

Conflicts read.

The council discussed the following:

- What happens next year if the council is creating new FTE at the 7-month mark.
- The grantee assured the council that the recommendation is in alignment with the comprehensive plan of the planning council and if needed adjustments will be made the FY 2011 PRSA.

Motion	Accept grantee recommendation to add \$80,000 into the Medical Case Management.
Proposed by	C. Massey
Seconded by	B.Thomas-El
Action	Passed

**OAHS co-morbidity.**

Grantee recommended adding \$51,125 into OAHS co-morbidity.

Conflicts read.

The council discussed the following:

- What will \$51,125 get the EMA in terms of co-morbidity treatment?

Motion	To accept <b>grantee recommendation to add \$51,125 into OAHS co-morbidity.</b>
Proposed by	D. Kelson
Seconded by	R.Disharoon
# Abstentions	
Opposed	
Action	Passed

**Category: Mental health**

Grantee recommends reducing the Mental Health category by \$27,929.

Conflicts read.

The facilitator asked the grantee for confirmation that this recommendation would reduce the category from \$111,100 to \$83,171, or do they mean to leave it as it was. The grantee concurred that the recommendation is a reduction of \$27,929.

The council discussed the following:

- If the figures should indicate a \$0 reduction. The grantee stated a reduction of \$27,929 was the intent
- Understanding the rationale behind the recommendation. The grantee stated that sufficient funding was given to it plus the additional funding made by PC to put \$30,000 into it for the one-time capacity projects. The decision to add money was done before the Part A award was received. Once the award was received, the grantee met with providers and have received no requests from providers. The \$27,929 is excess funding in this category after the PC voted to put \$30,000. There is no additional need in the category.
- How the clients were impacted? Programs would have sufficient funding for the seven months and they would still get the 200 hours that Executive Committee recommended.

Motion	Accept grantee recommendation to remove #27,929 from the category.
Proposed by	C. Edmonds
Seconded by	L. Sowah
Action	Passed

The planning council chair noted that time was running out for the meeting and noted that the council may need to extend the meeting.

Motion	To extend the meeting by 20 minutes to end at 8:45 p.m.
Proposed by	B. Thomas-El
Seconded by	C. Massey
Action	Passed

### **Category: Substance Abuse –outpatient**

Grantee recommended adding \$71, 333 to expand treatment programs for three programs.

Conflicts read.

The council discussed the following:

- Difficulties within the category. The grantee noted that one program had difficulty starting up. The grantee provided significant TA to program but it continued to struggle.
- The grantee identified programs that were not funded in FY09 due to lack of funds and the programs will be funded in FY2010. The grantee wants to fund three programs in the upcoming year. The programs that were not expanded have been dealt with.

### **Medical Nutrition Therapy**

Grantee recommended adding \$11,000 to category to fund nutritional supplements.

Conflicts read.

The council discussed the following:

- If there be outcome measures. The grantee believed that there would be.
- If the program would be dispersed by a dietitian? The grantee stated that a dietitian would disperse the program.

Motion	Accept grantee recommendation to ad \$11,000 into Medical Nutritional Therapy
Proposed by	C. Massey
Seconded by	C. Edmonds
Action	Passed

At this point, at approximately 8:25 p.m., the council decided to stop and continue the MAI PRSA at next week on a date that quorum could be verified and a location identified as it was running out of time.

The chair noted that they still needed to approve the minutes.

Motion	Approve March 16, 2010 minutes
Proposed by	K.Bellesky
Seconded by	M.Reese
Action	Passed

The chair announced that the grantee had an announcement to make on recommendations for reallocation of Part A FY 2010.

Grantee noted that they needed the full council's approval of the re-allocations from the Executive Committee in order to execute contracts. If another month passes without approving the re-allocations they could not initiate contracts.

Motion	To extend meeting an extra 5-10 minutes
Proposed by	D.Shamer
Seconded by	M.Reese
Action	Passed

The grantee explained the process of how the Executive committee approved the recommendations at its last meeting and asked PCSO to direct the planning council to the grantee report with the reallocation recommendations.

N Slaughter of the IGS PCSO explained the council's process of making recommendations/motions to the planning council and provided clarification on reallocation recommendations.

- Per council bylaws, recommendations/motions are reviewed by Executive Committee prior to the planning council's monthly meeting; the Executive Committee sets the agenda of the planning council (Section 5.2.2). In the event of an emergency, the planning council may enact the Executive Committee to act on its behalf if a regularly scheduled planning council meeting cannot be convened.
- Given the emergency request of the grantee with Part A contracts, Part A FY 2010 reallocation recommendations from the grantee were presented to the Executive Committee, per the chair's request. Recommendations did not go through the Evaluation Committee, as is the normal process for reallocation.
- Last week, the Executive Committee reviewed grantee recommendation for reallocation and voted to move each to the council for review and vote. In this case, no motion was made by the Executive Committee or planning council for the Executive Committee to act on the council's behalf.

The planning council discussed whether or not the Executive Committee properly reviewed the grantee recommendation before bringing them before the council.

The planning council, in the interest of time, voted to accept all recommendations for reallocation of Part A FY 2010.

Motion	To accept the grantee recommendations from the Executive Committee.
Proposed by	D.Kelson
Seconded by	M.Reese
# Abstentions	6
Opposed	1
Action	Passed

Motion	Adjourn
Proposed by	D.Kelson
Seconded by	M.Reese
# Abstentions	
Opposed	
Action	Passed

Meeting adjourned at 8:45 p.m.

*Walter Samuel*

Walter Samuel  
Chair  
Planning Council

May 18, 2010