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3 Meeting Minutes
4 **INTEGRATION OF CARE COMMITTEE**
5 Lisa Zullig and Christopher Joseph, Co-Chairs
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7 McSilver Institute at NYU
8 41 East 11th Street in Room 741
9 December 2, 2015
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11 **Members Present:** Peter Campanelli, PsyD, Amber Casey (alt. for Graham
12 Harriman), Michael Ealy, Dorothy Farley, Janet Goldberg, Deborah Greene,
13 Daphne Hazel, Christopher Joseph, Peter Laqueur (by phone), Julie Lehane,
14 PhD, Jan Carl Park, Bobby Rallakis, Claire Simon, Brenda Starks-Ross
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16 **Members Absent:** Christopher Cunningham, Joan Edwards, Terry Hamilton,
17 Zach Hennessey, Maria Perez, David Price, Gina Quattrochi, Lisa Zullig
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19 **NYC DOHMH Staff Present:** Nasra Aidarus, Nina Rothschild, DrPH
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21 **Public Health Solutions Staff Present:** Bettina Carroll
22

23 **Others Present:** Randall Bruce, Billy Fields, Linda Hakim, Liz Hurley (by
24 phone), Rob Maher (by phone), David Martin, Scott Sullam
25

26 **Material Distributed:**
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- 28 • Agenda
- 29 • Minutes from the November 18, 2015 Meeting
- 30 • Tri-County Food and Nutrition Services Directive
- 31 • New York Times Article: CDC Director's Comments on War on AIDS
- 32 • Crain's Health Pulse: Announcement of Report from NYU's McSilver
33 Institute on Lessons for Health Homes from HIV Care
- 34 • Planning Council Calendar for December 2015
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36 **Welcome/Introductions/ Moment of Silence/Review of the Meeting**
37 **Packet/Review of the Minutes:** Committee Co-Chair Christopher Joseph
38 welcomed attendees and acknowledged World AIDS Day while leading the
39 moment of silence. Meeting participants introduced themselves. Nina
40 Rothschild reviewed the contents of the meeting packet. The minutes from the

1 November 18th meeting were accepted for posting on the Planning Council
2 website at www.nyhiv.org with one correction concerning attendance.

3
4 **Lessons from HIV Care for Health Homes:** Dr. Peter Campanelli distributed
5 a document from Crain's Health Pulse noting the release of a report from the
6 McSilver Institute at NYU on lessons for health homes to be learned from HIV
7 treatment and care in New York. Nina Rothschild will send a link to the report
8 to IOC Committee members.

9
10 **Tri-County Food and Nutrition Services Directive:** Dr. Julie Lehane
11 presented background information on food and nutrition services in the Tri-
12 County Region including goals of the service category; a description of the
13 two programs (one in Rockland and one based in Westchester and serving
14 Westchester and Putnam); funding allocation (\$795,381 in Year 24); and client
15 demographics (age, race, ethnicity). Participants are very ethnically diverse.

16
17 Committee members and guests discussed food and nutrition services:

- 18
19 • Food programs may provide services including home-delivered meals,
20 congregate meals, food banks/pantries, and/or vouchers for buying
21 food. Agencies may offer support and education and medical nutrition
22 therapy and have done cooking classes. If clients come in weekly for
23 food, agency staff members can briefly assess their health and arrange
24 for medical treatment if warranted. Home-delivered meals can be a
25 useful way for agency staff to see how clients are living – e.g., without
26 electricity – and take steps to rectify the situation.
- 27 • This program concerns a medical issue and is not about feeding hungry
28 people. The food program is designed to provide 40 meals per month
29 and is intended to be supplementary rather than a sole source of food.
30 Other food sources include soup kitchens and pantries and food
31 stamps.
- 32 • Both programs require a minimum of two assessments per year. One
33 program has a graduation with people assessed after 18 months for
34 food insecurity because so many PLWHA are on a wait list for services.
35 Placement on the wait list is based on need from a medical perspective.
36 For PLWHA on wait lists, other non-Ryan White food funding exists.
- 37 • The Planning Council should look at the issue of wait lists. A
38 preliminary observation is that the food allocation for the Tri-County
39 Region is insufficient to meet the need. Equity is lacking.
- 40 • During screening, staff review client medical histories and check for
41 food allergies and sensitivities. Staff members also work closely with a
42 nutritionist.
- 43 • Clients are assessed on food needs using a tool. Agency staff members
44 report that PLWHA have dropped out of the program because they
45 have to respond to too many questions. Grantee staff noted that

- 1 reassessment ensures that services are individually tailored if, for
2 example, a client is longer caring for a minor child or has a new
3 housing arrangement. Better systems may be needed for sharing
4 information without compromising privacy.
- 5 • Food program clients must receive case management services.
 - 6 • With HIV becoming more of a chronic illness, PLWHA are developing
7 conditions such as heart disease and diabetes. Nutritionists can
8 provide clients with recommendations about specific foods to consume
9 with their medications.
 - 10 • The programs team up with non-profit organic farms and offer good
11 quality fruits and vegetables.
 - 12 • Clients are instructed on what they may not buy – i.e., unhealthy food
13 with little or no nutritional value such as cookies. If they do not adhere,
14 they may be provided less choice – e.g., receiving pantry bags rather
15 than food vouchers.
 - 16 • Originally, Tri-County food programs served just index clients but will
17 be reshaped to conform to Ryan White food programs in New York City
18 and will offer food to children of PLWHA.
 - 19 • The CHAIN longitudinal cohort study demonstrates that food programs
20 reduce emergency room use.

21

22 Committee members made adjustments to the Tri-County food and nutrition
23 services directive and will have a formal vote at the next meeting on
24 December 16th before sending the revised directive to the Tri-County
25 Steering Committee for review.

26

27 **Public Comment:** No members of the public commented.

28

29 **Adjournment:** The meeting was adjourned.

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31 **Items for Follow Up:**

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- 33 • Jan Park noted that the directive should have a price tag to guide the
34 work of the Priority Setting and Resource Allocation Committee.
- 35 • Jan Park asked to see the tools used to do the assessments of food
36 program clients.