

Meeting of the

Consumers Committee
&
Rules and Membership Committee

March 15, 2004
Ryan Health Center 645 10th Ave
3pm-5pm

Minutes

Members present: R. Abadia, C. Craig, B. H. Mateo, Anthony R., Bruce S., Robert J., Cameron C., Orbit C.

Members Absent: F. Carroll, B. Curry, L. Dolloway, R. Gonzalez, S Hemraj, J, Lopez, M. Gold, H. Hernandez, C Dzubilo, D. Woodard, M. Piacquadio, J. Miller

Guests Present: L. Holly, D. Chandler, M. Radder, P. Allen, and O. Martin

Staff Present: Clarissa Silva, Steve Bailous and Rafael Molina

Agenda Item #1 Welcome /Introductions

R. Abadia opened the meeting and had everyone introduce him or herself. New members received a special welcome. Rafael then led a moment of silence.

Agenda Item #2 New Member Recruitment Process and Strategies

Craig Cobb gave an overview of the council membership process. He shared the importance of consumer participation on every committee of the council. Craig explained the requirement for the council membership to reflect the epidemic. This is done by race, gender, and geographic representation. Craig proposed that we work with the Care Networks and CABs to recruit minority members. Clarissa shared that there is a particular need to increase Latin and African American male participation. Steve B. reviewed the membership application and the recruitment strategies included in the meeting packet. Clarissa added that the chairs and OAPC staff are developing recruitment tips and other tools including a new brochure. Rafael A. added that Rules and Membership would use the most recent gap analysis to ensure that representation requirements are met. Ms. Silva pointed out that the selection criterion specifies the council make-up. Rafael A. reviewed the recruitment time-line. It was pointed out that the committee forwards recommendations with alternates to the mayor who makes the final selections and appoints the council. The committee decided to endorse and approve the application and the recruitment strategies. The committee also requested that the application be distributed as much as possible.

Agenda Item #3 Consumer Training & Member Development Process

Rafael reviewed the trainings that have already taken place during the current planning cycle, the HRSA consumer training, computer training, Planning Council Orientation, HRSA TA training on the new council structure, and Data Day I. He shared a plan for additional trainings that include Consumer Training Part II and III, and Data Day II. Space is limited for these trainings so everyone must RSVP to attend. The next consumer training will focus on using needs assessment for priority setting and resource allocation. There is an advanced computer training being developed.

Agenda Item #4 Comprehensive Strategic Plan 2005-2008

Planning Reports completed to date. Rafael A. explained the Monitoring and Evaluation Report, the Needs Assessment Update and its' Addendum, as documents that support the development of a new Strategic Plan as background information. Then gave an overview of plan.

Understanding goals, Objectives and Measures. - Defined as follows:

Goal- Broad, overarching statement describing desired outcome

Objectives & Measures- targeted statement that is specific enough to be measured.

Multiple objectives may exist in a given goal. (1-3 per goal)

Principals of the Plan should be evidence based, realistic, rooted in the changing environment, and should inform the yearly allocation process. The plan should be adjusted as needed and focus on outcomes, not process.

Values of Planning-Consumer focus, fill gaps, define the continuum of care broadly, and focus on meeting the needs of all consumers (under-served sub-populations, those with severe need, and those not in care).

Vision Statement

It is the vision of the HIV Health and Human Services Planning Council of New York that people living with HIV and AIDS in the New York EMA will have access to and maintain appropriate, quality services across the continuum of care, resulting in the best possible health and quality of life.

Overarching Goals- Improve health outcomes and quality of life for people living with HIV disease
Increase the portion of people who know their status
Reduce the transmission of HIV

Action Goals-Increase the proportion of + individuals who enter timely care.
Increase the portion of people maintained in HIV care.
Reduce the number of people with HIV/AIDS lost to care.
Ensure that services are integrated, comprehensive, and high quality.

Process & Timeline. Rafael reviewed the key dates to build the plan including time for the AG to review a draft April 9, 2005. The plan will be published and distributed in July.

Consumers and AG members are encouraged to participate by attending meetings, making recommendations, and commenting on the draft plan.

Agenda Item #5 Other Business

Unmet need for HIV primary health care is defined by HRSA as a person who knows their status and has no evidence of receiving primary medical care during the last 12-month time frame. Unmet need in NY EMA is estimated at 38%.

Steve B. reminded the committee that the definition for Unmet Need is the floor, a minimum requirement to be considered in care. It is not to be confused as a standard of care, which we all hope is much higher. Rafael reminded the group that IOC is working on a Comprehensive Model of Care.

Severe Need is defined as co-morbid conditions (STD & TB), homelessness, mental illness and substance abuse, new & emerging populations, and relative costs of providing care.

Data Day II will focus on unmet need. Data Day I was about service categories and Data Day II will build on that. There are three sub-categories of persons not in care that will be focused on. The sub-categories of unmet need are: 1) late diagnosis, 2) HIV + who do not know their status and 3) HIV+ who know their status and not in care.

Rafael A. reminded everyone it is required by HRSA that all service categories be linked to primary medical care.

Announcements/ Close

Rafael announced the Community Forums and made special mention of the Spanish Language Forum April 4, 2005.

April 15th at GMHC there is a Medicare Forum.

The Policy Forum on Reauthorization will be April 22nd at the Schomburg Center on Malcolm X Blvd. @ 135th St.

The Consumer Training Pt II will be moved to April 29, 2005 at Bailey House. Space is limited so everyone should RSVP.

Steve B. reminded the committee to distribute the applications to consumers and invite them to apply. Consumer outreach is critical. Rafael A. added that the Consumer trainings we offer are good and need to be completely full.

Rafael A. shared AIDS Watch and the Campaign to End AIDS (C2EA) flyers.

Motion by Rafael A. and seconded by Robert J.: The Consumers Committee sign on and endorse C2EA. The motion was tabled until we can confirm that a committee of the council can do this. In the meantime individuals are encouraged to get involved on their own. Rafael also shared the minutes of the AIDS Housing Work group. This group has been meeting since the Housing/HOPWA workgroup no longer meets.

Derrick announced that the External committee would be meeting March 29th at 130 Crosby 3-5pm.

The meeting adjourned at 5pm.

