



Meeting of the
EXECUTIVE COMMITTEE
Thursday, December 12, 2013, 3:00-5:00pm
DOHMH, 2 Gotham Center, 42-09 28th Street, Conference Room 22-12,
Long Island City, NY

MINUTES

Members Present: Robert Cordero (Community Co-Chair, by conference), Victor Alvarez, Randall Bruce (Consumer At Large), H. Daniel Castellanos, Billy Fields, Adrian Guzman, Graham Harriman, Lee Hildebrand, DSW, Christopher Joseph, David Martin, Tom Petro, Daniel Pichinson

Members Not Present: Jan Carl Park (Governmental Co-Chair), Felicia Carroll, Nancy Cataldi, Sharen Duke, Joan Edwards, Sam Rivera

Staff Present: David Klotz, Rafael Molina, Nina Rothschild, DrPH, Darryl Wong, Bettina Carroll (Public Health Solutions),

Agenda Item #1: Welcome & Introductions

In the absence of Robert Cordero, Community Co-Chair and Jan Carl Park, Governmental Co-Chair, Dan Pichinson, Finance Officer called the meeting to order. Following member introductions, a moment of silence was held in honor of those struggling with HIV/AIDS and the meeting agenda and materials were reviewed.

Agenda Item #2: Review of Minutes

The minutes were distributed to members electronically for review and comments. The minutes were approved as presented.

Agenda Item #3: Committee Updates

The Needs Assessment Committee met on December 12. The Committee listened and responded to a presentation on 2011 and 2012 progress to date on the implementation of the Comprehensive Plan for HIV/AIDS Services in the NY EMA and is working with the Research and Evaluation Unit and Planning Council staff to draft the formal needs assessment, the final version of which will be brought to the Executive Committee and the full Planning Council for a vote prior to sending the document to HRSA. The major focus of the NAC this year will be on the collection of data about New Yorkers living with HIV.

The Integration of Care Committee met on December 4. The Committee held a brief orientation to the work ahead, listened and responded to the annual update by staff from the Bureau of HIV/AIDS Prevention and Control's Research and Evaluation Unit on the Comprehensive Strategic Plan for HIV/AIDS Services in the NY EMA: 2011 and 2012 progress to date. IOC Will meet again on January 15th and will begin to examine the mental health service category.

The Policy Committee met on November 18th and agreed on several projects. Policy Committee Chair Adrian Guzman attended a forum of mayoral candidates during the summer and realized that most of them were unfamiliar with the Planning Council, didn't know about the Consumers Committee, and were

unaware of the federal requirement that 33% of Planning Council members must be consumers. Policy Committee members will draft a two-page fact sheet about the Planning Council to disseminate to Mayor-Elect de Blasio and his staff and build a relationship with him. Policy Committee members will design a quick survey to query Planning Council members about policy issues in which they are interested. Going forward, each Planning Council meeting will include a five-minute update on hot button policy issues. The Policy Committee will continue to track and report on the impact of sequestration and of the repeal of Hold Harmless on the Planning Council's award. The Policy Committee will review ACT UP's list of concerns sent to the Planning Council in 2013, specifically alleging insufficient attention to PrEP and PEP.

Committee members were informed that DOHMH is working on provider education as well as on public education through social media. Chair Guzman is reaching out to build a relationship with other EMAs that have Policy Committees and to learn more about other EMAs' handling of policy issues in the absence of committees specifically dedicated to policy issues.

The Policy Committee will follow up on past work on organ transplantation, blood donation by MSM, and criminalization of HIV transmission. The Policy Committee will examine undue reporting requirements. The Committee will meet again on Monday, December 16th.

The Finance Committee met on November 19. The items for discussion focused on the FY 2013 2nd Quarter Planning Council Support Budget Expenditure Report and the FY 2013 Base and MAI 2nd Quarter Commitment and Expenditure Reports. With regard to the Planning Council support budget, overall spending is at 53%, just slightly over the 50% target. Some items were paid in full for the entire year in the first or second quarter (e.g., website maintenance). Areas with above-target spending are related to meeting expenses. During the first and second quarters (before the award was known), there were a large number of meetings, and the Council spent on items such as audio and food based on the previous year's award. There were virtually no meetings in the third quarter, and meeting-related expenses for the rest of the year have been cut back drastically (e.g., no food or audio at most meetings).

Looking forward to negotiating the FY 2014 budget, the only leeway is in OTPS costs, which are relatively small (\$121,896 in FY 2013). In FY 2014, the fringe rate for staff will go up to 51%, and there may be increases in salaries, depending on contract negotiations between unions and the new mayor. Given the likelihood of additional reductions in the award, this will present challenges when negotiating the FY 2014 Council support budget.

The Priority Setting & Resource Allocation Committee met on December 9. The FY 2013 carry-over request to HRSA was approved. This formality is required by the conditions of award. HRSA requires all EMAs to submit an estimate of the carry-over from the current fiscal year and what it will be used for in the following year. The EMA always gives an estimate of the highest amount allowable (5% of the formula award), saying that it will be used for ADAP. When the actual carry-over amount is known next spring after the FY 2013 close-out, PSRA and the Council will approve a final carry-over plan, which is expected to be much less.

The main item on the agenda was to begin scenario planning for a possible reduction in the FY 2014 grant award. Given sequestration and the end of hold harmless, PSRA is planning for a significant cut to the grant award – possibly up to 11%. While no decisions have been made, the committee identified additional information that will be needed to consider the following options:

- A reduction to ADAP (rather than an upfront reduction that would be restored through reprogramming, as we expect little under-spending this year)
- Other targeted reductions, such as the a \$3M reduction to EIS recommended in the FY 2014 application spending plan.

In addition, PSRA drafted a letter referencing how the grantee will implement reductions within a service category. While this is solely within the purview of the grantee, it was the sense of PSRA members that the grantee use the strategy of termination of contracts that reach the lowest target numbers in a category,

rather than merely spreading the reduction evenly across all programs in the category. The letter was reviewed and approved by the Committee. A formal recommendation will be considered at the January PSRA meeting.

Agenda Item #4: Community Advisory Board (CAB) Best Practices & Recommendations

David Martin, Co-Chair of the Consumer Committee and Randall Bruce, Consumer At Large, presented the 2013 CAB Best Practices & Recommendations to the Committee for review. Best practices for CAB recruitment, engagement, input and feedback processes were identified by assessing CAB members' and CAB leadership's perceptions of Board effectiveness, communication, leadership, coordination, cohesion and conflict management.

The results from the October 2011 pilot survey indicated that of 88 CABS that were asked to participate, 40 agencies' CAB leadership completed the survey (45% response rate) and 31 (35% response rate) CABS completed member surveys. In total, 205 surveys were completed, of which 148 (73%) were member surveys and 57 (27%) were CAB leader surveys. 83% of categorical survey responses confirmed pre-survey assumptions, culled from a literature search of consumer involvement initiatives. The three most often cited barriers to client participation in CABS were 1) consumers' lack of interest, 2) lack of incentives and compensation and 3) lack of funding for CABS.

The recommendations were developed from statements in the survey where there was a high degree of concordance, indicated by an "agree or strongly agree" response, with a statement indicative of a high degree of board coordination, handling of conflict of interest and issue resolution, effectiveness, communication or leadership. For detailed recommendations, please refer to the handout "Community Advisory Board Best Practices & Recommendations 2013", which was presented to the Consumer Committee in July 2013 by the Bureau of HIV Prevention & Control's Research & Evaluation Staff and H RTP interns who were assigned to this project. Feedback from Executive Committee members indicated that enhanced consumer involvement in quality improvement issues, through input into a high functioning CAB process, should be the underlying contextual justification for this project and for presentation to the full Planning Council for its review. If these non-binding recommendations are approved by the Planning Council, the Planning Council could recommend to Public Health Solutions, the master contractor for the NY EMA, that the recommendations and guidelines for enhancing the CAB process be included during contract negotiations and discussions.

ACTION: *A motion was made, and seconded, that the Executive Committee approve these recommendations, as presented, for consideration at the next Planning Council meeting. The motion passed unanimously.*

Agenda Item #5: Grantee Report

A draft letter from the Governmental & Community Co-Chairs to Graham Harriman of NYCDOHMH was reviewed and approved by the Committee (see above PSRA).

Agenda Item #10: Public Comment

There was no public comment.

Agenda Item #11: Adjournment

There being no further business, the meeting was adjourned at 5:00PM.