



# Ryan White Planning Council

New Haven & Fairfield Counties

Leif Mitchell & Roberta Stewart, Co-Chairs

## Strategic Planning & Assessment Committee Meeting Summary - FINAL FAST FACT PAGE

**Meeting Date:** Thursday, September 4, 2008 scheduled from 2:00 to 4:00 pm  
**Start Time:** 2:20 pm  
**End Time:** 4:00 pm  
**Location:** Optimus Health Care, Bridgeport  
**Presiding Chair:** Roberta Stewart/Leif Mitchell  
**Recorder:** Sara Nichols, Planning Council Staff

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### Summary of Committee Business Votes

- Minutes Approved: 8/7/08
- Motion to present FY2009 Directives to the 9/12/08 Planning Council meeting for a vote.

### Council Member Assignments

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### Staff Assignments

- Post approved agenda and meeting minutes for 8/7/08 on website ([www.ryanwhitecare.org](http://www.ryanwhitecare.org))
- Prepare meeting minutes for 9/4/08.
- Prepare Feedback Summary from Planning Council Meeting on 9/12/08

### Attendance Record - 2008

	SPA Committee Members	1/15	2/19	3/26	4/15	4/24	5/1	5/15*	6/5	7/3	8/7	9/4	10/2	11/6	12/4
1.	Jerod Geter	●			●	●	●		●		●	●			
2.	Jennifer Loschiavo								●	●	●	●			
3.	Leif Mitchell	●	●	●	●	●	●	●	●	●	●	●			
4.	Roberta Stewart	●	●	●	●	●	●	●	●	●	●	●			
5.	Dennis Torres				●	●	●	●	●	●	●	●			
6.	Javier Velez	●	●	●	●		●	●	●	●		●			
7.	Thomas Kidder	●		●	●	●	●	●	●	●	●	●			
8.	Robert Sideleau	●	●	●	●	●	●	●	●	●	●	●			
	Ryan White Office	●	●	●	●	●		●	●		●	●			
	Planning Council Staff	●	●	●	●	●		●	●	●	●	●			
	PC Members & Public Participants	9/4/08 – (PC) Carlos Barbier, Ric Browne, Charlotte Burch, Awilda Gonzalez, (Public) Nick Boshnack, Charlene Lee, Karen Reckie, Joanne Montgomery,													

\* Meeting attendance policy does not apply for special meetings per By-Laws.



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### **(1.0) Welcome, Moment of Silence, and Introductions**

Roberta Stewart, Co-Chair of the Committee, called the meeting to order at 2:20 p.m. and welcomed members of the committee and the public. She asked that the participants silence their cell phones for the duration of the meeting and led the group in a moment of silence to remember and respect all individuals whose lives have been touched by HIV/AIDS. She reminded the attending members that all meetings are open to the public and advised that care should be used when sharing any personal or private information.

### **(2.0) Co-Chair Announcements**

Roberta Stewart announced that the goal of this meeting was to (1) to complete the list of Directives for the Ryan White Office; (2) Review Feedback from the 8/7/08 PC meeting.

(2.1) Jerod Geter stated that he was willing to accept the position of co-chair for the SPA committee alongside Roberta Stewart, however he was not comfortable with the process for his appointment.

(2.1a) Leif Mitchell stated that he would be happy to stay as co-chair for the committee to work with Jerod in the transition.

(2.1b) Robert Sideleau stated that the historical process for co-chair appointment was that once a person accepted the appointment, they would preside next to the other co-chair and learn along the way. There never was a shadow period where there were three co-chairs for one committee.

(2.1c) Jerod Geter stated he had was under the impression that he was going to go through a shadowing process before formally presiding as co-chair.

(2.1d) Members and public commented regarding their frustrations with the process of co-chair appointment and the current situation. Tom Butcher stated the feelings are valid, however there is council business that needs to be completed at this meeting, the Directives must be completed to present to the September 12<sup>th</sup> PC meeting and asked the committee to table the discussion of retreats for later.

(2.1e) Dennis Torres asked that this discussion is revisited under New Business if there is time at the end of the meeting.

(2.2) Ms. Stewart stated that going forward the Membership/Finance Committee will work on the Leadership Development process for transitioning new co-chairs into positions and the Executive Committee will work on the retreat/training for council members. She further stated that Leif Mitchell was scheduled to be the presiding co-chair for this meeting and had prepared to lead the discussion on the Directives.

### **(3.0) Approval of Meeting Summary**

(3.1) The Committee reviewed minutes from the August 7<sup>th</sup> meeting. A motion was made by Javier Valez to approve the meeting minutes. The motion was seconded by Ric Browne. One spelling correction noted on 4.3a. Motion p

Minutes were approved with the noted revision: 8 approved; 1 opposed; 3 abstained (see voting record).

### **(4.0) Old / New Business**

**Directives:** Leif Mitchell lead the discussion on the Directives. A handout was distributed of the FY2008 Directives and the typed notes from the 8/15/08 PC meeting discussion regarding the directives.

(4.1) Directive 1.1 – the percentages for the regions were to be updated, however staff had been notified that Ken Carely from the CT DPH, recently returned from an extended vacation and no longer has the program to calculate the regions as he did in the past. He had asked for a list of towns and would be able to complete the request before the Executive Committee meets on 9/11/08.

(4.1a) Leif Mitchell suggested there are two data points that could be used for this calculation, 12/31/07 or 6/30/08 and asked for the committee to respond on which data set to use.

(4.1b) Tom Butcher stated that the grant application for HRSA is based on 12/31/07 and suggested to stay in line with the application.



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(4.1c) Leif Mitchell stated that the current data set (6/30/08) is a better reflection of the epidemiology status as it accounts for the death records recently retrieved. Roberta Stewart stated that the committee has always used epi data currently available; Joanne Montgomery suggested to follow the current data.

(4.1d) Discussion regarding whether the committee could present a motion to the PC without knowing what the final result of the regional distribution would be. Due to the time limitation for moving the Directives to the PC, Leif Mitchell asked if the committee would allow for the SPA and PC co-chairs to review the data of both data sets from Ken Carely when it comes in, and make the decision insert the regional percentages based on epi data most appropriate.

(4.1e) Robert Sideleau posed the question regarding using 6/30 data verses 12/31. The committee stated that this directive (1.1) has used 6/30 in the past, as that was the data that was currently available at the time of writing the directive. Tom Butcher stated that the grant guidance from HRSA requires using 12/31 data tables throughout the application.

(4.1f) Joanne Montgomery stated that HRSA does not focus on the regional percentages as that is unique to our TGA, so her suggestion would be to use the 6/30 data as that is what is currently available and what was done historically. Ms. Montgomery also stated that if the co-chairs choose to insert percentages that are different from what Ken Carely provides, than that would need to go back to committee.

(4.1g) The committee had consensus to allow the SPA and PC co-chairs to review and insert the regional data of people currently living with HIV/AIDS as of 6/30/08 as received from Ken Carley.

(4.2) Directive 1.2: Committee reviewed the FY2008 directive and there was discussion at the 8/15 PC meeting about changing the language to reflect a single fiduciary model.

(4.2a) Tom Kidder stated that he and Bob Sideleau met with Harold Phillips, HRSA, at the All Parts Conference (August, Washington DC) to discuss other models that may be available. Mr. Kidder stated that they were told that Planning Councils are not allowed to give directives to the grantee as it relates to procurement of funds. The role of the PC is to ensure that services are provided. He stated that there are three models that include one that we are currently using, a fee for service, and one used by Westchester County (single fiduciary, all services contracted to one provider).

(4.2b) Robert Sideleau stated that Harold provided guidance on language to consider for this directive and the committee could use or change: "The Ryan White Office must ensure that prioritized and funded services are available to all people living with HIV/AIDS in all regions of the TGA."

(4.2c) Mr. Sideleau stated that the intent to including the single fiduciary model in each region was in response to some regions not applying for all the services that are available, and the PC should ensure that every service that was available by priority and funding, is available to the consumers in every region.

(4.2d) Leif Mitchell stated that this language sounds vague and asked how did that related to the allocation formula in Directive 1.1.

(4.2e) Roberta Stewart asked if a region had resources available, another funding source, for services that are otherwise available to be funded by Ryan White, would they be required to apply for the RW dollars. Tom Butcher responded that given that the TGA has 30% unmet need, there will always be a need that exceeds the supply and that we should expand those services so that everyone who needs the services can receive them.

(4.2f) Roberta Stewart asked about other funding sources for services that may be available. Tom Butcher responded that the other funding sources data was taken into account during the priority setting and resource allocation process and once the PC votes on them, they are set and should be applied to all regions.

(4.2g) Ric Browne stated that each region may have different resources available to them. He stated that his region [Waterbury] has been tracking inpatient substance abuse treatment and to see if there was a barrier for consumers to get admitted as soon as they needed treatment. Mr. Browne stated that all clients have been able to



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access services immediately therefore not indicating a need to apply for RW inpatient substance abuse money. He stated that the PC should listen to what the regions need.

4.2h) Roberta Stewart acknowledged Mr. Browne's comments and stated that as the PC has completed the PSRA this year, that maybe next year the committee could examine other ways to evaluate the needs of consumers in the different regions.

(4.2i) Joanne Montgomery asked for clarification on what HRSA actually said for guidance regarding the procurement issue.

(4.2j) Robert Sideleau responded that the procurement of funds is a grantee responsibility.

(4.2k) Dennis Torres stated that discussing allocations is not a procurement issue, separate issues to contractors applying for services or not.

(4.2l) Joanne Montgomery stated that there should be a back-up plan outlined for the Ryan White office in the case of a service was not applied for. Dennis Torres stated maybe the language should include all core services are applied for, or some flexibility for the Ryan White office to administer contracts and not delay getting funds for services for unrequested funds.

(4.2m) Tom Butcher responded that either the PC provides instruction or they don't, and what kind of proof would be needed to ensure that the priorities and allocations were administered appropriately. Or if the PC wants the administration to be different than what was stated in the PSRA for the TGA, the instruction needs to be clear, on how & what evidence is sufficient to prove whether services are or are not available in the region, what is the evidence of this proof in the region. The allocations are for the TGA needs, not for regions. This year the PC did population-based planning, not regional planning. Concept is that services are available to everyone no matter where they live in the TGA. What matters, the regional needs or TGA needs. The plan was based on the TGA overall.

(4.2n) Joanne Montgomery suggested if the Ryan White office could ask that all regions must ensure all services are applied for, with or without the single fiduciary. And ask the consortium to work together to make sure all services are applied for. This used to be a competitive grant and because everyone is working together to take out the competitiveness to make sure all services are getting to consumers.

(4.2o) Nick Boshnack stated that it is important to follow the guidance from the PC regarding the priorities and allocations, and suggested to the Ryan White Office that it may be helpful to include language in the RFP for providers to better understand that all service categories must be applied for in each region.

(4.2p) Leif Mitchell stated that the theme from the discussions is that the current 1.2 language regarding the regional request for funds is important.

(4.2q) Roberta Stewart stated that based on the information from Harold (HRSA), that this could be an 'add on', whereas all the services have to be available but maybe all the services don't have to be funded, providers could demonstrate that every service is available in the applications.

(4.2r) Robert Sideleau responded that the demonstration of available services in the past has not been verifiable and that puts the Ryan White Office in a difficult position when giving guidance to the grant reviewers. Mr. Sideleau stated that he does not agree with the fact that agencies get to choose what services are applied for or not, all services should be applied for and available to consumers. Solutions should be found to address the gaps in services as identified by the consumer needs assessment, all needs are not being met.

(4.2s) Dennis Torres stated that Ryan White Office in the past has asked the PC to empower the office to move dollars as appropriate, and there may have been abuses in the past where regions were trumping the PC plan for the TGA. He suggested if we agree that all services must be available in all regions, then the committee to move forward with the direction provided by HRSA.



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(4.2t) The committee discussed further suggestions for the Ryan White Office to ensure all services are available for the RPF/procurement process. There was concern over a potential gap in regions, as well as the process of moving funds to other service categories, to other regions, or going to re-bid.

(4.2u) Committee agreed on the following for Directive 1.2:

*The Ryan White Office must ensure that prioritized funded services are available to all people living with HIV/AIDS in all regions of the TGA.*

*The Ryan White Office will utilize service categories and percentages as approved by the Planning Council.*

*The Ryan White Office shall produce a report to the Council. The report will show the final allocations. ~~And explain any re-allocation across service categories.~~*

*The Ryan White Office shall produce no less than a quarterly report, and submit the report to the Membership/Finance Committee.*

- *Inserted first sentence per HRSA guidance;*
- *Per HRSA, Council is not to direct procurement processes thus committee developed second sentence to replace the following: “During the grant review process, under or un-requested funds may exist in a service category. In such instances, the Planning Council authorizes the Ryan White Office to shift funds into service categories that can absorb the additional funding. The Ryan White Office must keep under or un-requested funds within each respective region. Service categories shall receive additional funding according to the ranking established during the priority setting process.”*
- *Third sentence of Directive 1.2 stayed, with the striking of the procurement language.*
- *Fourth sentence inserted, originally part of Directive 1.4 that stated “to facilitate contractor accountability”.*

(4.3) Directive 1.3 – there were no changes

(4.4) Directive 1.4 – this directive was removed, it no longer an issue for contractors reporting on a timely manner.

(4.5) Directive 1.5 – the directive number was changed to 1.4

(4.6) Directive 2.1 – there were no changes

(4.7) Directive 3.1 – There was draft language presented at the PC meeting on 8/15 regarding a consumer advisory board to replace the concept of the regional planning group requirement.

(4.7a) The committee suggested leaving the directive as it was written for FY2008. Tom Butcher responded that he wants to make sure services are available to people living with HIV/AIDS, he wants to make sure contractors spend all the money allocated, however this directive to monitor if contractors are attending regional planning meetings is not something the Ryan White office has the capacity to do. The office must review all minutes for all regions for all contractors to ensure compliance, and with the cut in funding and limited staff, this is not a task that can be achieved.

(4.7b) Ric Browne added that some contractors in regions do not comply with this requirement.

(4.7c) Joanne Montgomery stated that the regions should self monitor to ensure compliance. The meetings are very important for providers to discuss the issues relative to the consumers. Ms. Montgomery stated that people need to be required to get together and discuss these issues.

(4.7d) Robert Sideleau suggested if the Ryan White Office cannot monitor this, then we should consider removing that requirement from the directive.



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(4.7e) Leif Mitchell suggested that we keep the current language. Tom Butcher responded that he will always have an incomplete report for this directive.

(4.7f) Ric Browne suggested there may be ways that the providers and regions could take ownership of this directive to assist the Ryan White Office in monitor.

(4.7g) The committee decided to keep the directive as is, no changes.

(4.8) Directive 3.2 – there were no changes

(4.9) Directive 3.3 – the only change was to replace Uniform Reporting System to Care Ware system

(4.10) The motion to move the directives with all changes as discussed, including empowering the SPA and PC co-chairs to insert the regional epi percentages as received by Ken Carely prior to the Executive Committee. Motion made by Javier Valez, seconded by Ric Browne, motion passed 8-yes; 3-absentions.

(4.11) Feedback Summary: Leif Mitchell referred to handout of the feedback summary from August 15<sup>th</sup> Planning Council meeting. He stated that there was 95% response rate and there were a lot of comments noted. He asked if the committee would make a recommendation that the comments are reviewed at the Executive Committee for further discussions regarding a team building retreat. Dennis Torres stated that yes this would be good and the committee had consensus to present the complete feedback summary to the EC on 9/11/08.

(4.12) Leif Mitchell revisited the issue of the co-chair transition process. He stated that we will work together and communicate to move forward and offer the shadowing.

(4.12a) Joanne Montgomery stated that Leif is dedicated and long term member of this council.

(4.12b) Robert Sideleau stated that transitioning a person out of the co-chair position wasn't for a penalty, however there has not been a process to develop new leaders and the attempt was to start this. He stated we need to start at some point to develop new leadership and maybe what was done to start this process wasn't the right way but the PC co-chairs are trying to start a process.

### (5.0) Announcements

**Next Meetings:** Thursday, October 2, 2-4pm in New Haven at Hill Health Center

### (6.0) Adjournment

Leif Mitchell adjourned the meeting at 4:00 pm.

#### Voting Record

	PC Committee Members	8/708 Meeting Minutes	Motion for to move Directives to PC
1.	Jerod Geter	Y	Y
2.	Jennifer Loschiavo	Y	Y
3.	Leif Mitchell	O	AB
4.	Roberta Stewart	AB	Y
5.	Dennis Torres	Y	AB
6.	Javier Velez	Y	Y
7.	Thomas Kidder	Y	Y
8.	Robert Sideleau	Y	Y
9.	Ric Browne	Y	Y
10.	Charlotte Burch	Y	Y
11.	Awilda Gonzalez	AB	AB
12.	Carlos Barbier	AB	NP

Y = yes; O = opposed; AB = abstention; NP = not present at time of vote; NV = no vote