

HIV Prevention Community Planning Group Meeting Minutes
Tuesday, October 17, 2006
Indiana State Department of Health
Rice Auditorium
Indianapolis, IN 46204

Member Attendees

Anna Urias Hail
Cydrisse Dooley
Debra Stanley
Delbert Harmon
Diana Bowden
Dolly Lozano
Jeff Lane

Kelly Armstrong
Larry Pasco
Laura Prado Reyna
Lois Carnicom
Mark Hughes
Nicolas Foreman
Paula French

Ramon Morton
Rev. Donald Archey
Richard Nash
Ronald Haas
Tony Gillespie
Wendy Woods

Who Had a Proxy

Jesus Vesga
James Holzman
Brian Fisher

Actual Proxy

Delbert Harmon
Dolly Lozano
Mark Hughes

Non-Attending Members

Adriana Torres
Gregory Scott
James Holzman
James Howard

Jean Gifford
Shola Ajiboye
Ryan Nix
Ramona Gilmore

Regina Lowery
Jesus Vesga

Staff Attendees and Technical Advisors

Andrea Perez, ISDH Staff
Larry Harris, ISDH Staff
Erika Chapman, ISDH Staff

Robin Henry, CPG Staff
Cindy Clark, ISDH Staff

Candace Mitchell, ISDH Staff

State Staff Not In Attendance

Jerry Burkman
Cathy Archey Morgan

Dan Hillman, ISDH Staff
Dawne DiOrio Rekas, ISDH
Staff

Cheryl Percy, ISDH Staff

General Information

1. The meeting began at 10:18 a.m. once quorum was reached. Ron Haas, community co-chair, announced that Community Planning Group staff requested that he announce that reimbursement checks may be sent out at the end of the week. The meeting then moved on to member, visitor, and technical advisors introductions.

2. Ron Haas reviewed the purpose of community planning and the ground rules.

Minutes

3. The minutes were reviewed and Tony Gillespie commented on his comment regarding trainings not being provided by the Indiana State Department of Health. Mr. Gillespie said that he was suggesting that there be a way for the department of health to document those trainings.
4. Lois Carnicom suggested that training information be included in quarterly reports and mentioned during site visits.
5. Tony Gillespie agreed and said that he would think of a way to re-word his suggestion to bring across his point.
6. There were no more corrections to the minutes and there was consensus to accept them with the suggested correction.

Self Assessment

7. Larry Pasco asked for clarification regarding the comment made after question number seven on the self assessment form. Mr. Pasco added that there is ample evidence regarding needle exchange.
8. Ron Haas stated that though the data is out there, it has not been presented to the Community Planning Group. Mr. Haas went on to say that beyond that, the comment is someone's opinion which they are entitled to.
9. Debra Stanley asked if the comment in number thirty-two B was addressed during Executive Committee conference call and Ron Haas stated that the comment was discussed. Mr. Haas went on to add that he and Community Planning Group staff searched for a policy and they have been unable to locate it so a new conflict resolution policy will be developed. The Executive Committee will start the process and the Policy and Procedures Committee will take it over.
10. Tony Gillespie asked whether other comments made on the Self Assessment form will be addressed by the Executive Committee.
11. Ron Haas stated that they have been covered.
12. There were no further comments on the self assessment form and it was accepted through the consensus method.

Attendance Form

13. Ron Haas stated that there are now 31 members on the planning body since Doug Parks is no longer a member due to his dismissal from the Comprehensive HIV Services Planning and Advisory Council.
14. Cydrisse Dooley informed the group that she had a proxy in June, Richard Nash, but she was marked absent.
15. The attendance form was approved through the consensus method.

Executive Committee Attendance

16. The Executive Committee attendance was accepted with no corrections.

General Information

17. Larry Pasco stated that he has been emailing information to the group and that it is sometimes explicit and he has received comments about it and would like to know if anyone would prefer to not receive his correspondence.

Executive Committee Minutes

18. Ron Haas stated that the Community Planning Group staff has been working with The Damien Center to determine whether there are funds for a November meeting. Since the planning group is so far behind in the process and there are not enough funds to conduct a meeting the Division has agreed to pay for the meeting. Mr. Haas went on to add that the committee is very behind and he knows this is short notice however the meeting needs to transpire.
19. Donald Archey enquired about specifically where the funding was coming from.
20. Lois Carnicom, state co-chair, informed him that the money is coming from carry over dollars.
21. Donald Archey went on to ask was money going to be taken away from outreach.
22. Mrs. Carnicom informed him that it would not.
23. Ronald Haas went on to discuss the comment on the self assessment that disussed the number of presentations on last months agenda that were not needed

Self-Assessment Form Re-visited

24. Ron Haas went on to discuss the comment on the self-assessment form that asked about committee minutes. Mr. Haas went on to add that committee minutes are to be submitted to Community Planning Group staff and she will compile them and mail them out in the monthly mailings. Chairs have not been submitting their committee minutes. It was requested during the committee call that chairs submit any minutes they have in their possession that have not been previously turned in.
25. Mr. Haas went on to discuss the comment regarding how committees will meet next year for committee time when the group begins to meet possibly every other month. Mr. Haas went on to discuss the fact that attendance policies need to be re-worked and voted on so that they can take effect in January of 2007.
26. Ramon Morton discussed the comment in number seven regarding needle exchange and how the committee will address the issue.
27. Ron Haas opened the discussion up to the floor.
28. Tony Gillespie asked if a presentation on needle exchange was able to transpire would it be able to happen as a part of the work useful to the Cooperative Agreement Committees or better yet I think it is very important to the process at this time and should be a part of the cooperative agreement committee's work.
29. Ron Haas agreed with Mr. Gillespie.
30. Larry Pasco discussed the fact that his organization cannot pay to bring the Harry Simpson here to Indianapolis to present at a monthly meeting.
31. Tony Gillespie informed the group that Harry Simpson will be in Indianapolis for other things and we can see if it is possible to piggyback on that.
32. Diana Bowden asked that since the CPG body has been provided needle exchange data and research is it then necessary to Harry Simpson here.

33. Dawn DiOrio Rekas discussed the fact that she use to work in Chicago, Illinois and may be able to assist.
34. Larry Pasco discussed the fact that the needle exchange population should not have to go through all this to make the population a valid one.
35. Ron Haas apologized to Diana Bowden because he feels that the Community Planning Group has not completely taken a stand on the issue.
36. Tony Gillespie added that no population has been pulled onto the carpet continuously to prove their population is valid. Actually the planning group has voted on needle exchange we put it in the plan we don't have to worry about how to pay for interventions for this population that is not our concern. It is the Community Planning Groups job to take a stand and let the state worry about were the funds will come from.
37. Mark Hughes feels the group is once again not moving on the issue so he poses the question what are the next steps to making this happen.
38. Debra Stanley is in agreement with Tony Gillespie. Mrs. Stanley feels the final thing is to recommend it as a respected intervention and then we can bring it before legislature.
39. Anna Urias Hail feels it is the way that it has been worded. Mrs. Hail added that the planning group should be careful of how they word the information and it needs to be put differently showing the numbers and recent statistics will assist in validating the point not that they have to prove anything. The planning group has to be able to back up their recommendations with the appropriate data when applicable.
40. Tony Gillespie added that harm reduction and needle exchange makes a great a position paper but the reality of a legislator reading a voluminous document to understand what is going on is not going to happen the paper needs to be direct this is the issue and here is what we want you to do.
41. Larry Pasco added that the Centers for Disease Control supports needle exchange. Jerry Burkman said that she needed consensus from the Community Planning Group in order to go to the pharmacy board. Larry said if she does not want to go then she needs to say that. Mr. Pasco went on to discuss the issue.
42. Wendy Woods added that she is not speaking out of disrespect but it was stated that a recommendation needs to be made so that we can moved forward.
43. Larry Pasco said that he will discuss needle exchange in at every meeting when and where appropriate.
44. Ron Haas added that a formal recommendation does not need to be made the Community Planning Group needs to get on the ball.
45. Diana Bowden wanted Mr. Haas to repeat what he just stated.
46. Ron Haas is not sure of the how to completely resolve the issue, he would like to give the Advocacy Committee the opportunity to move forward on this issue first.
47. Larry Pasco feels that this is not a legislative issue.
48. Tony Gillespie stated that the committee needs an action plan.
49. Diana Bowden added that the percentage in her area regarding this issue is something like 25% of cases. In Vigo County this is a growing problem that is not going away. If there was a needle exchange program you can at least educate the people and teach them self care and self respect.
50. Tony Gillespie feels that the Community Planning Group needs to look at the whole state and not just the state of Indianapolis. Looking at the entire state adds more power to the process
51. Larry Pasco feels the larger AIDS community has failed. There are only two projects distributing bleach kits and it is legal to distribute sharps kits but no one does that either. He continued on.
52. Jeff Lane asked if there was any resolution to the Community Planning Group requesting site visit updates from the Division.
53. Lois Carnicom stated the information that the planning group requested is gathered through the Luther Reporting System and that a presentation can be done annually for the Community Planning Group.
54. Lois Carnicom began the discussion
55. Ron Haas discussed what a report from The Division should encompass.
56. Jeff Lane went on to discussing the issue.
57. Lois Carnicom discussed a report that would provide information on issues out of the ordinary as well.
58. Donald Archey asked who determines what is out of the ordinary and should be reported to the Centers for the Disease Control.
59. Community Planning Group staff informed him that The Division makes that determination.
60. Ron Haas added that The Division has informed the group of issues that have transpired with the different agencies.
61. Lois Carnicom added that the agency that was discussed previously is not a funded project and they were not aware of what transpired surrounding the issues.

Committee Recommendations

1. Per the recommendation from Debra Stanley at the September monthly meeting, Paula French, as chair of the Policy and Procedure Committee, made a formal recommendation that community co-chairs cannot serve a consecutive term they can certainly be elected at another time but not consecutively.
2. **The group gave consensus to add this line to the community co-chair policies and procedures.**
3. Mrs. French went on to discuss the Recommendation Form from the community planning group (internal) or the planning group to the Indiana State Department of Health. Mrs. French went on to explain the form.
4. Paula French went on to add that the next form is the recommendation form for internal recommendations. She went on to describe the form and its purpose.
5. Tony Gillespie asked if any one on the planning group can use the form.
6. Ron Haas informed the group that any one can use the form but generally the form will probably be used by the community co-chair.
7. Tony Gillespie, the Advocacy Committee chair, discussed how the charge of the Advocacy Committee and the Public Policy and Procedure Committee have some of the same charge so he is recommending that the responsibilities of advocacy be moved over to the Advocacy Committee.
8. Ron Haas added that this is a bylaws change and the recommendation will go into next month's mailing and the planning group will vote on it in November.

Interventions Committee Presentation

1. Ramon Morton, Interventions Committee Co-Chair, disseminated hand-outs regarding the Interventions Committee's frame work presentation.
2. Dolly Lozano asked if the committee will recommend a DEBI Interventions for each population.
3. The group discussed the pros and cons of the DEBI Interventions.
4. Debra Stanley informed the group that there were two agencies that were charged with modifying DEBI Interventions and those are the two entities she would like to hear from. The other request she has is that the group be supplied with the materials and conduct a training themselves.
5. Ron Haas answered that when the question was posed to the Centers for Disease Control they said no they would not be disseminating the materials for trainings on the DEBI Interventions. An individual cannot receive the training information until they go through the training.
6. Larry Pasco asked if the state will be requiring programs to conduct the DEBI Interventions in order to apply for funding.
7. He was informed that "no" they will not be making that a requirement.
8. Tony Gillespie added that Cathy Archey-Morgan has been working with the national trainers to bring trainings here. Mr. Gillespie then recommended Dr. Pardasani speak on the trainings his organization can provide.
9. Dr. Pardasani discussed Behavioral and Social Science Volunteer Program is conducting trainings on line and that might be the future of trainings. The first training is going to be a VOICES training.
10. Laura T. Prado-Reyna asked if the cost to take the training will be expensive.
11. Lois Carnicom informed her that the cost of the training varies.
12. Dr. Pardasani informed her that the cost of the materials varies and the initial cost does not include the trainer's fees.
13. Ron Haas called for the group to vote on the Interventions Committee's frame work.

Division Update

1. Tony Gillespie asked about the information that Kristi Montgomery provided during her presentation last month. Mr. Gillespie went on to ask if an individual is penalized if they do not have contact with their case manager yet they see their primary care physician.
2. Lois Carnicom answered his question.
3. Further discussion ensued.
4. Debra Stanley added that a patient only needs to see your care coordinator once a year in order to remain in good standing and have your services and benefits recertified.
5. Ron Haas added that he has a couple of friends that re-certify at the end of every year when they make that yearly visit to their care coordinator.
6. Tony Gillespie interjected that he is only referring to individuals that do not recertify. He went on to add again that if he goes to see his physician every three months and did not recertify can someone call the doctors office and see if the individual has been seeing the doctor and do they have to wait to become recertified.
7. Debra Stanley informed him that there is no dialogue between the care coordinator and the physician so they would just not be certified until they meet with their care coordinator.
8. Donald Archey asked the question of how to assist those that fall through the cracks.
9. Ron Haas added that he will take the concerns to the Comprehensive HIV Services Planning and Advisory Council.
10. Debra Stanley added that is a CAB responsibility they are the advocacy portion of the body and that is where the power lies.
11. Tony Gillespie asked if there was a prevention presence in the statement of needs.
12. Ron Haas informed the group that there has not been.
13. Tony Gillespie responded by asking can there be a statement.
14. Ron Haas informed him that there can be a prevention component to the statement. Mr. Haas added that he will take that back tot the services planning group.
15. Tony Gillespie asked if the Damien Center will be the only organization to take place in the Neveren Care Project.
16. Lois Carnicom informed him that no, they will not be the only organization.
17. Diana Bowden requested that everyone receive a copy of the position paper that she submitted to CPG staff because she had sent it out but did not receive committee feed back.

Question and Answer

1. Diana Bowden requested that the Advocacy Committee information be placed on the recommendation sheet just approved at this months meeting.
2. Ron Haas agreed and informed the group that he would get on that.
3. Debra Stanley asked what the Request for Proposal process is from beginning to end.
4. Lois Carnicom added that she is not familiar with previous processes and has not decided what this process will be.
5. Debra Stanley asked for the state's intention for the process.
6. Lois Carnicom informed the group that currently there is no timeline and once there is one she will present it.
7. Debra Stanley asked who will review the proposals.
8. Lois Carnicom informed the group proposals will be reviewed in-house.
9. Ron Haas suggested the group be pro-active and submit the groups thoughts to the Division.
10. Debra Stanley suggested one person be responsible for putting the information from the group input together into one document.
11. Ron Haas requested Mrs. Stanley carry out that task and requested her deadline.
12. Debra Stanley gave a cut off date of December 31, 2006
13. Jeff Lane asked what the reciprocation date is for recommendation forms submitted by membership.

14. Ron Haas informed him that it is thirty days.
15. Ron Haas added that he wanted to bring up an issue on the Self-Assessment form regarding the individual not understanding the planning process according to what Indiana is doing. Mr. Haas went on to explain that the group is in the process of writing the prevention plan and he then expounded on that process. He then went on to request that if he has not answered the individuals question could they please get with him at a later date

Prioritization Training (given by Dr. Minoj Pardisani)

1. Tony Gillespie gave the background of the reason for the presentation and why it was requested.
2. Dr. Pardasani disseminated the hand-outs for the presentation and he began reading and expounding on each slide.
3. Dr. Pardasani then asked the group why priority setting is important to the membership's process.
4. Mark Hughes answered by stating that it is important in order to serve your community.
5. Dr. Pardassani discussed the fact that resources are limited and you have to figure out the best way to disseminate the finite funding. He then asked how populations are ranked within the state of Indiana.
6. Mark Hughes answered by informing the group that the group used the Epi Profile, assessing the needs and barriers and any other information that can determine the needs of a population.
7. Dr. Pardasani went on discussing his presentation slides.
8. Ron Haas asked about the size of population, do they do some sort of formula.
9. Dr. Pardasani informed him that yes there is a formula developed from Epi data.
10. Mr. Haas informed him that currently they do not know how many Men who have Sex with Men are in Indiana therefore we do not do that.
11. Dr. Pardasani went on to inform him that if it does not work for one population you cannot apply it to any because it must work for all the populations. He then moved onto a slide that provided an example.
12. Jeff Lane asked if you exclude a factor from one group you have to exclude it from all groups correct.
13. Dr. Pardasani informed the group that you would have to come up with your uniform factors ahead of time to use with every population.
14. Ron Haas asked how does this tie into the form from the Centers for Disease Control do we use this form first and then tie into the CDC form.
15. Dr. Pardasani answered that yes you would because this process takes all the factors into account and gives you one hard number to deal with and if you break it down it makes it more objective and the group will not loose information
16. Larry Pasco asked if you use this process can you spread this out and have too many populations.
17. Dr. Pardasani answered that maybe you can collapse some populations into another the CPG will have to look and see what is more relative to Indiana.
18. Ramon Morton added that it keeps going back and forth because at one point it was broken out.
19. Dr. Pardasani suggested collapsing the populations in the prioritization and then when you write the plan you can break them out.
20. Larry Pasco discussed the fact that IDU data is number three in the state he wanted to know how they fall to the bottom of the list.
21. Dr. Pardasani discussed how you could go about discussing the needs of a population that have not been met.
22. Mark Hughes requested that he speak more about collapsing population.
23. Dr. Pardassani read the populations and discussed collapsing populations two, three and four into one population.
24. Ron Haas asked how you collapse the populations and the CDC not say that the group is to general.
25. He went on to add that he is just providing an example and discussed Latino Men Who Have Sex With Men and if it is a population that is to small if you wish to keep them within the populations you may want to collapse them into a population and break it out in a prevention plan.
26. Ron Haas asked what the first set up for populations in his slide is based on.

27. Dr. Pardasani informed him that it is based on community services assessment, epidemiologic data, and gap analysis information.
28. Tony Gillespie informed the group that Dr. Pardasani will be assisting in further aspects of the process.
29. Shola Ajiboyes proxy asked what are the disadvantages, advantages, and is there another model.
30. Dr. Pardasani answered that in this case you could not just use epidemiologic data in Indiana the other disadvantage and maybe advantage is that you may have to collapse some populations into another. This model is the one that has been standardized across the nation. This is the one that is a best practice that the Centers for Disease Control seem to like.

General Information

1. Ron Haas broke the group into committees and discussed what committees the group would be going to.

Committee Process Updates

2. Tony Gillespie discussed the Epi/Populations Committee tweaking their frame work. He went on to discuss the idea of the CDC suggesting there were too many populations for the state of Indiana, and the Division providing recent epi data. Mr. Gillespie discussed contacting Luther Consulting for data and information and the committee will check with the Needs Assessment Committee and there will be a short survey from the membership to answer to provide the Epi/Populations Committee with information. The plan is to make recommendations by January.
3. Debra Stanley discussed the fact that the needs assessment needs to be completed by December 31st
4. Ramon Morton discussed the need for technical advising for the Interventions Committee.
5. Tony Gillespie discussed the needs of the Advocacy Committee. The committee developed a slate for position papers and the harm reduction position paper needs an executive summary. He went on to list the position papers that will be developed.

Public Comment

1. A visitor discussed teenagers and risky behavior. He asked if the committee is addressing this issue.
2. Ron Haas discussed the fact that they are addressing these issues during the Epi/Populations Committee and Interventions Committee process as well as attempting to get some kind of youth participation on the group as a whole.
3. Lois Carnicom discussed her meeting with Indiana Youth Group and asked them to ask some of their teens if they are willing to participate.
4. Debra Stanley discussed having regional youth Community Planning Groups and that never happened.

Old Business

1. Ron Haas discussed the submission of the letter of concurrence with reservations to the Division and the fact that the CPG has not received a response from the state and does the group want to provide them with an official recommendation form.
2. The group agreed that he should submit a formal recommendation for a response to the State.

3. Debra Stanley reminded the group to have their information and suggestions regarding the Request for Funding to her by November 30th instead of December 30th.
4. Donald Archey requested an email be sent out so that they can have a conversation regarding the ideas.
5. Debra Stanley requested that CPG staff send her an email with everyone's email address in it.
6. CPG staff agreed.

New Business

1. Larry Pasco discussed Levi Strauss assisting in AIDS research so if anyone gets a chance go online and thank Levi Strauss please do so.

Announcements

2. Dolly Lozano discussed a World AIDS Day program in Elkhart Indiana.
3. Anna Hail made an announcement as well.
4. Dolly Lozano announced that Laura Prado-Reyna participated in a health fair where over seventy Latinos were tested.
5. Jeff Lane announced that in thirteen days he celebrates living with HIV A symptomatic. He went on to announce that he is proud to announce that there will be an AIDS Rally in the African American Church Community. New Joshua Missionary, Urban League and etc.
6. Rev. Archey further discussed the march in Fort Wayne and wanted to give the proper credit to Wendy Woods for laying the ground work in years prior to make this happen. He went on to discuss how happy he is regarding the matter.
7. Delbert Harmon discussed also made an announcement.

The meeting adjourned at approximately 3:42 pm