



HIV PREVENTION COMMUNITY PLANNING GROUP
Tuesday, March 19, 2013
Indiana State Department of Health, Rice Auditorium
Indianapolis, Indiana 46204

Minutes

10:00 a.m. – 10:10 a.m.

Proxies:

Derwin Gary served as Angela Goode's proxy for the morning session

Welcome: Latorya Greene, Co-chair

Self-Introductions:

CPG members and TA introduced themselves and the Regions/seats they represent

Mission: Cena Bain, ISDH TA

Ground Rules: Cena Bain, ISDH TA

Review of Agenda:

Latorya Greene, Co-chair reviewed the agenda and discussed the new agenda item, Region and Seat Update. She explained the purpose and the questions to be answered when giving an update.

10:10 a.m. – 10:30 a.m.

January 15, 2013 CPG Minutes

Approved

Review of Group Assessment Form:

There were no comments from members but Latorya Greene, Co-chair made a comment about question number 3 related to the CBA request by the Membership Committee. Latorya stated that the request has been made and the Membership Chair agreed that the words mentioned in the comment did not accurately reflect the intent. A Category B update was requested on the Group Assessment form and Latorya said that it would be covered during the Division Update.

Review of Attendance Sheet:

There were no questions or changes

Review of Expenses:

There were no questions or changes

10:30 a.m. – 10:40 a.m.

Executive Committee Report

Latorya Greene, Community Co-Chair

The budget line items were discussed and explained

There was a question regarding the allotted amount to attend a conference. An amount has not been set. It was also asked if there was a backup plan if the conference funds were not used. The funds would then be used on other line items as needed. There was a consensus to accept the projected budget. There was a Co-chair call on March 12th by CDC: Andrea Perez, Susan Newton and Latorya Greene were on the call. CPG members were emailed and given an opportunity to give CPG suggestions in regard to the call; there was only one response to the email. Latorya Greene reviewed the four questions proposed by CDC that were asked:

1. What topics would you want the CDC to cover to help assist with HIV Planning Group activities?
2. What tools do you think are needed to be sure that the HIV Jurisdictional Plan is in line with HIV incidence and the National HIV AIDS Strategy?
3. How can the CDC better support HIV Planning Groups for successful HIV Planning efforts?

10:40 a.m. – 11:00 a.m.

Division Report/ISDH and Category B Update/Sequestration and How it Affects Indiana,

Andrea Perez, ISDH Co-Chair

Services:

- Services is beginning to write their contracts for next year.
- Services held a contractors meeting on Monday, March 18, 2013 on HIV related cancers and possible treatments.

Prevention:

- HIV and STD prevention our still experiencing delays in contracts being completed.
- Sequestration: We know that there will be cuts. There is information received from other national organizations available “Not CDC” that states there is an expected 9% cut across the board, we are looking at a 300,000.00 cut if this isn’t resolved by March 21st. We are waiting to hear from CDC. Some of the information that has been put out is not accurate; no real decisions have been made as to how the cuts will be handled.

There was a question asking whether someone from the state was looking at the ACA and figuring out how testing will look and how we will move forward? During the CPG 2012 fall retreat at IU Bloomington, John Peller explained that HIV testing would be covered under the ACA. What we don’t know is how often will testing be covered, so what does this really mean? Does this eliminate the funds that are received for testing? No, because you still have those in the medical field who don’t have a thorough understanding of testing. Until we can answer this question, we can’t answer any of the other questions.

- Category B: Prevention was awarded approximately \$300,000.00 from CDC to support the implementation of Routine Testing for disproportioned high risk populations. We chose to do health care organizations only because this is an area that is untapped in many ways. We already have a broad reach in the community settings. CDC wants to see a certain positivity rate; however CDC has not said what this rate is. We have two health organizations that were funded. Wishard is one of the organizations and Wishard has expanded into Blackburn Community Health Center. A staff person from Wishard was hired to go into Blackburn and do the testing. Methodist in Lake County is the other agency. They have two locations; Gary, Indiana and Merriville, Indiana. The Gary location began running in October 2012. The Merriville location just started running about two weeks ago. Staff from Methodist is used to do the testing. We are looking to move into the Vigo County area because there is no real coverage in this area at this time. The approximate amount of funding that ISDH received for Category B was \$300,000.00. Supplies take a good chunk of this money. the acceptance rate for testing at Wishard is 90%. We are unsure of the acceptance rate for Methodist. We are looking at the opportunity to help sites out that we may not be able to give actual funding to, but can help them out in other ways; supplies. This will allow the agencies to do testing. We have not been able to find any concrete evidence, but the CDC’s positivity rate expected in a health care setting is lower than the expectation of a non-health care setting.

A question was asked what is the role of the CPG/members? Tony Gillespie has information that will speak to this question and he will send it out to the CPG members.

11:00 a.m. – 12:00 p.m.

Region and Seat Update

Members have five (5) minutes to share what is going on in their Region and/or with the population they represent along with how they have disseminated information received from the CPG.

Name	Region	Barriers	Dissemination of CPG Information	Trends
Rico, Mike and Ramon	1	Scheduling can be a problem. Not having contracts signed affects the health department in regard to testing (STD). Without the contracts test can't be purchased and the city won't make purchases so the program might have to shut down.	Call or go to different agencies and give a briefing during staff meetings. Asking how CPG can help them.	Seeing younger men come in. There is a cluster of syphilis. We want to do safe testing; in Gary and East Chicago. We are partnering with Gary HD. We are going to start doing testing on Fridays and Mondays through the Health Center. There have been talks with Aliveness and other Health Centers to do collaboration.
Latorya	2	If a collaborative agency contact persons is on leave, it throws everything off. Refers STD testing to the Olive Street Health Center. Options for STD testing are limited. With the new funding it is hard to figure out how everything works. Questions in regard to stipends being provided for testing have been arising.	¼ meeting with prevention sites to come together. Try to collaborate with events throughout the year	The clients are getting infected at younger ages.
Rochelle	3	Because of limited funds there becomes competition, this is a struggle.	Have meetings with other organizations and share the information. Share information at testing sites. Collaborate at events with other agencies.	Seeing that MSM is the highest risk group, youth is the next highest group. See most clients in Allen County. Syphilis and Gonorrhea are both up. There is an increase due to electronic reporting.
Val, Tony G. and Derwin	5	Has emailed providers to help get the message out about the phone lines for National Get Tested Day. Not able to connect with some of the providers. Re-engaging with positives that are not being reached out to. The audience that I am speaking to listen the message but are not hearing it. Trying to get on the CHSPAC agenda to discuss the	Marion County is trying to get their mobile unit up so they can drive around the city and get people tested. Email information out. Disseminate information through email and through staff's distribution list. Working with the president of the NAACP working	

Name	Region	Barriers	Dissemination of CPG Information	Trends
		<p>CPG and how we can engage consumers.</p>	<p>with FBO to get involved with the whole movement. There is a Pastorial guide that is shared with pastors from various churches. Working with IMHC. Works with the Health and Wellness Coordinator at Urban League to learn the trends of the youth. Met with the Linkage to Care Coordinator at Damien Center to get her idea of how she will roll out here program. Give information out at Forest Manor. Did a radio show and talked about the CPG process. Talked about NBHAAD and other HIV related issues. Attended the AFC implementation symposium (info in advocacy report) Did a radio show around NWGHAAD. Talked about an event. Put together a press packet for the radio host; info was specific HIV and how it affects women and different regions. Info from the EPI profile was used. The public health conference will have sessions that focus on HIV. IMHC uses the EPI report and they disseminate it. Two ISDH staff went to the Damien Center and met with the Executive Director and the Prevention Manger and the Linkage to Care staff person to see what their Linkage to Care grant was going to look like. The Damien Center is still trying to figure out what</p>	

Name	Region	Barriers	Dissemination of CPG Information	Trends
			<p>the Linkage to Care person should be doing different than the Care coordination person. Re-engagement to care, there are challenges to this , how do we identify these people, whose been out of care, what do we say to them to find out what the barriers were that kept them out of care. It was also suggested that once the Damien Center figures out this process that they present during a CPG meeting.</p>	
Emily	Southern	Need a better way to collect information and to whom to distribute the information to.	<p>Information is shared with service and prevention providers at Positive Link and others in the community. The CAG is very functional. They are working on getting a CAG in the Terre Haute region, hopeful this will be a means to disseminate information. They are serving the Jackson and Seymour area which has been underserved. Go to the Masters in Pub Health class and talk about HIV prevention and also talk about the CPG. The class actually does a mock CPG. Positive Link just restarted a consumer advisory board.</p>	<p>Seeing an increase in testing; targeting MSM. Contributes this to a Social media campaign. There are very few resources for STD testing.</p>

12:00 p.m. – 1:00 p.m.

LUNCH

1:00 p.m. –2:00 p.m.

IMHC Update

Anita Ohmit, MPH, Director of Research

Indiana Minority Health Coalition

And

Tony Gillespie, Sr. Field Consultant
Indiana Minority Health Coalition

*The Presentation, “Partnership to strengthen CHC provision of sexual health services (HIV, STDs and Hepatitis C)” can be viewed on the Indiana HIV Prevention CPG website:

- <http://www.indianacpg.org>

Questions/Comments:

Members stated that they would like the CPG to be a part of the research. It was recommended that this project be moved to the NA with the CPG receiving updates. The Gap Analysis will be used to determine how to fix things.

2:00 p.m. – 2:30 p.m.

One Test Two Lives Assessment of Indiana Hospital HIV Preparation Presentation

Elaine Cox, M.D., FAAP,

Associate Professor, Director of Infection Prevention for Riley Hospital, Medical Director Pediatric Antimicrobial Stewardship Program

Ben Nti, MD and Ryan Doster, MD

***Presentation can be seen at: www.1test2lives.org**

Guest: ISDH Staff - Kristi Montgomery, Patrick Sweany, Michelle Fletcher and Linda Slinkard and Cathy Archey-Morgan

CPG members are encouraged to forward any feedback to the presentation to Amanda Witt, ISDH TA

2:30 p.m. –3:00 p.m.

Committee Reports

1. Evaluations
There was no report
2. Needs Assessment
See the committee conference call minutes
3. Membership
A CBA request has been made. The conference call with the CBA assignee is scheduled to take place this week on Thursday, March 21, 2013, the call information will be sent out to the Membership committee members. There will be a second request made for the engagement process piece.
4. Policy and Procedures
 - Town Hall Meeting Policy – Latorya is sending this out
 - Request for Funds Form – Susan has done a draft and will send it out to Latorya,
 - Attendance Policy – The committee felt that the issues are not the attendance policy but the appeal process.
5. EPI
See the committee conference call minutes and updated EPI profile. It was recommended that the EPI profile be accepted. The CPG membership accepted the EPI profile.
6. Advocacy
Emily Brinegar passed out information on, “Understanding the Indiana Medicaid Expansion, Healthy Indiana Plan (HIP) and the Affordable Care Act”. It is not clear on how the CPG should move forward in regard to the recommendations within the handout. CPG members have been asked to individually write a letter and send them out.
7. STD
Rico will be contacting Andrea Allen to do a presentation.

8. Interventions

There is no report. An email was sent out to the committee members whether the committee would disband. The members would like to meet before a formal decision has been made. Rico will contact Nate to decide on a date for a conference call.

3:00 p.m. – 3:30 p.m.

Old Business

- **Home Rapid OraQuick Test – Should CPG be involved?**
 - Does the CPG want to contact pharmacies to make sure they have referral information for those purchasing the home test? There is tons of information to provide talking points for the pharmacies. The NA committee discussed a fact sheet that can be used to provide information that would enable the CPG members to accurately respond and answer questions in a uniformed consistent manner. Would it be beneficial to have OraSure come in and answer questions? The CPG members agreed that this would be beneficial.
- **PrEP**
 - How do we as a CPG move forward? Is this a CPG issue or should the funded sites be looking in to this?

New Business

- **CBA Request for Cultural Sensitivity Training**
- This request has not been submitted. The CPG members were asked at the January 2013 CPG meeting to submit their suggestions on what this request should look like. No suggestions have been submitted. The perception that the decisions made by the CPG are race driven. We don't discuss cultural acknowledgement and inclusion.
- Membership form by Regions - updated
- New membership name tents - updated
- Conference calls and meeting request notifications
 1. Committee chairs have been asked to get meeting information submitted to Susan Newton in advance so that the meeting information can be sent out at least one week in advance.

3:30 p.m. – 3:45 p.m.

Public Comments – There were no public comments

Announcements –

- AIDS Ministries AIDS Walk will be held on April 27, 2013
- Cena Bain's brother finished 4th in the State Special Olympics Bowling and he will be competing in State Finals for Special Olympics Basketball as he placed 2nd in sectionals
- Bloomington AIDS Walk is Saturday, March 23, 2013
- Gary Community Health Center is having a Gala on June 21, 2013
- The Public Health Conference will be held on April 2, 2013 at IUPUI
- IMHC and its coalitions held its first IMHC Action Day on March 8, 2013.
- Marion County Public Health Department will have a phone bank for National Get Tested Day on June 27
- April 9th thru April 13th is Covering Kids Awareness Week. On April 9, 2013 there will be a youth town hall meeting at Warren Central from 6-8 pm
- ISDH along with its partners held an event for National Week of Prayer for the Healing of AIDS
- Dr. Cox and Andrea Perez spoke on Women and Girls HIV/AIDS Awareness Day and 1 test 2 Lives on WTHR6 News. Andrea Perez was also on the radio in Bloomington speaking on 1 test 2 Lives. There was also a tweet about 1 test 2 Lives

Adjourn at 3:57 pm

****Next Meeting – May 21, 2013 at 10 A.M. Promptly****

Action Items:

Update from agencies funded by the Indiana AIDS Fund

Have a conversation about compensating a stakeholder who may not be funded or be in the HIV prevention field (non-traditional stakeholders)