CY 2016

Evaluation

Coordination

Planning

# Ryan White Planning Council of the Dallas Planning Area Year-End Report

Ryan White Planning Council of the Dallas Area

2377 N. Stemmons Freeway, Suite 200 Dallas, Texas 75214 Office of Support (214)-819-1840

# **Table of Contents**

MISSION & VISION:	2
EPIDEMIOLOGICAL DATA:	2
All PLWHA in DPA	2
Ryan White Clients:	3
ARIES Utilization Data	4
RWPC STAFF REPORT:	6
RYAN WHITE PLANNING COUNCIL REPORT	8
EXECUTIVE COMMITTEE REPORT:	9
Nominations Committee Report:	10
ALLOCATIONS COMMITTEE REPORT:	11
CONSUMER COUNCIL COMMITTEE REPORT:	18
PLANNING & PRIORITIES COMMITTEE REPORT:	26

**Mission & Vision:** 



Mission: To optimize the health and well-being of people living with HIV/AIDS, through coordination, evaluation, and continuous planning, to improve the North Texas regional system of medical, supportive, and prevention services

<u>Vision</u>: The Dallas Planning Area will become a community that will provide the best integrated health care available to people currently living with HIV/AIDS in a community where new HIV infections are rare.

# **Epidemiological Data:**

## All PLWHA in DPA

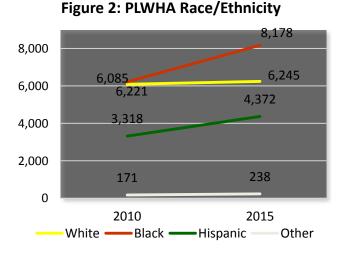
The number of PLWHA residing in the Dallas Planning Area (DPA) is steadily increasing. Prevalence has increased by 3,857 cases since 2010 up to a total of 19,793<sup>1</sup> PLWHA (Figure 1). That is close to a 24.20% growth of population in the past 5 years.

22,000 20,000 18,000 16,000 14,000 12,000 10,000

# **Figure 1: PLWHA Prevalence**

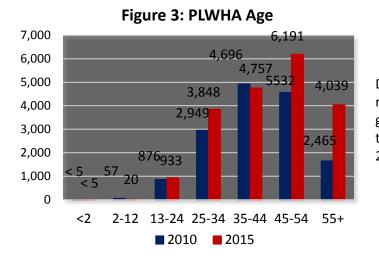
CY 2016





There is a disproportionate impact on the Black community when compared to other racial or ethnic groups (Figure 2). Blacks made up of 41% of all PLWHA, with whites making up 32% and 22% of the population being Hispanic. The black population has surpassed whites in the number of cases since 2010.

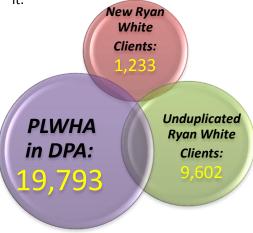
<sup>&</sup>lt;sup>1</sup> Texas Department of State Health Services 2016 Epidemiological Data for the Dallas EMA



The PLWHA age distribution in the DPA is currently prominent in the 45-54 age range. According to this data, PLWHA are getting older with the number of PLWHA in the 45+ range significantly increasing since 2010 (Figure 3).

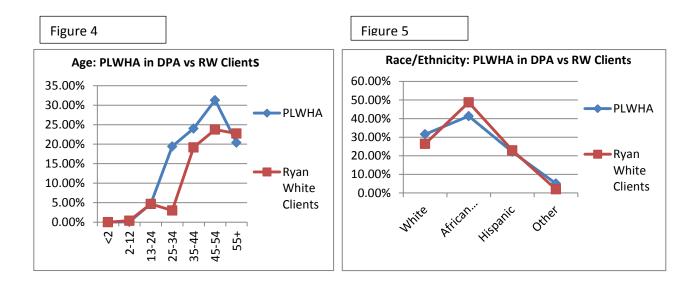
## **Ryan White Clients:**

The number of unduplicated clients served in CY 2016 (9,509) in comparison to those served in CY 2015 (9,602) has decrease. The numbers reflect the unwavering efforts within the Dallas Planning Area (DPA) to provide care. Service providers within the DPA are committed to providing the best integrated health care available to people currently living with HIV/AIDS. Through planning, coordination, and evaluation, the Ryan White Planning Council strives to improve the quality of life for people living with HIV/AIDS (PLWHA). During January 1, 2016 – December 31, 2016, approximately **9,509** unduplicated clients were served in the DPA through Ryan White funding. As a payer of last resort, the program serves people who have no other means to afford their care and would otherwise go without it.



Of the total PLWHA population (19,793), approximately 48.51% are receiving one or more of the provided Medical and/or Support Services through Ryan White funding. Of these 9,602 unduplicated clients served in the Dallas Planning Area, 1,233 were new to receiving Ryan White services. These new clients make up 12.84% of Ryan White clients.

CY 2016



The African American population is more disproportionately infected with HIV/AIDS than any other population in the Dallas Planning Area. African Americans also have the highest usage rate of Ryan White Services, with almost half (41%) of the clients who utilize Ryan White services being African American during CY 2015. During this calendar year, 32% of Ryan White clients were white and 22% of its clients were Hispanic. People are living with HIV/AIDS longer. People in the 45-54 age range represented the highest percentage of PLWHA (31%). The biggest gap in percentage of the population infected with HIV/AIDS (11%) and percentage of population utilizing Ryan White Clients (45.50%) appears to be among the 25-34 age group, indicating this age group is the most likely to receive Ryan White services.

## ARIES Utilization Data (01/01/2016 to 12/31/2016)

FY15 Priority			
<u>Rank</u>	<u>Service Category</u>	<u>Units Served</u>	<u>Clients Served</u>
	<u>Core Services</u>		
1	Ambulatory/Outpatient Medical Care	34,800	5,327
2	Oral Health Care	12,548	1,816
3	Mental Health	1,802	349
4	AIDS Pharmaceutical Assistance	16,921	1,562
5	Substance Abuse	1,611	98
6	Medical Case Management	37,792	4431
7	Early Intervention Services	2,449	178
8	Health Insurance & Cost Sharing	3,491	448
	Assistance		
9	Home Health Care	-	•
10	Home & Community Based Health Care	-	-
	Support Services		
1	Food Bank	104,850	2556
2	Non-Medical Case Management	68,515	5,271
3	Outreach – Lost to Care	7,480	1,985
4	Medical Transportation	25,959	1,856
5	Housing-Based Case Management	10,629	172
6	Home Delivered Meals	104,850	2,556
7	Transportation – State Services	1,125	99
8	Congregate Housing	-	-
9	Respite Care for Adults	5,321.20	139
10	Day Respite Care for	-	-
11	Children/Youth/Adults	2 424	220
11	Legal Services	2,421	236
12	Child Care Services	4,463.03	13
13	Child Care – State Services	-	-
14	Linguistic Services	2,878	164

This ARIES data was pulled for service dates 1/1/16 - 12/31/16 to reflect the impact of the Ryan White Planning Council's (RWPC) prioritization and allocations decisions. The RWPC, Administrative Agency (AA), and Ryan White sub-recipients are closely connected to the entire continuum of services available to address the HIV/AIDS epidemic through strong, collaborative efforts with primary and secondary prevention, public health awareness, and treatment programs. Dallas uses Ryan White funds to create a continuum that eliminates gaps in the system, improves delivery of HIV medical care, and promotes services that support access and retention in care.

The RWPC places the highest priority on the core medical services by funding eight of the 10 possible services. These core services comprise approximately 71.01% of 2015 Ryan White Part A and MAI allocations, while Supportive Services utilized approximately 24.99% of funds. The majority of Ryan White funded services are located in Dallas County where the majority (82%) of PLWHA reside.

# **RWPC Staff Report:**

The Ryan White Planning Council of the Dallas EMA is dedicated to improving the quality of life for those infected and/or affected by HIV/AIDS, and ensuring that members of its community play lead roles in assessing and planning for HIV resources. The Planning Council has served the DPA'S 12 counties for nearly 25 years, while focusing on the enhancement of primary medical care and the provision of widely needed support services. These programs are for those who do not have sufficient health care coverage or financial resources for treating HIV. Ryan White fills the gaps in care not covered by other resources. Over \$20.2 million annually are entrusted to the Planning Council's authority.

The Planning Council's membership is comprised of community volunteers appointed by the Chief Elected Official (CEO), Judge Clay Jenkins. Over the past year, the Planning Council has welcomed 2 returning and 7 new members.

New Member Name	Committee's Appointed to
Lori Davidson	RWPC & P&P
Karin Petties	RPWC & CCC
Robert Lynn	RWPC & P&P
Nikita Dera	RWPC & P&P
Darius Ahmadi	RWPC & Evaluation
Reymundo Anthony	RWPC & Allocations
Robert McGee	RWPC & CCC
Jonathan Thorne	RWPC & Evaluation
Del Wilson	RWPC



CY 2016

There were officially 26 members serving on the Planning Council, of which 27% were non-aligned consumers (not employed at a funded agency). Also, 13 out of the 17 HRSA mandated seats were occupied. The RWPC & staff are striving to actively recruit and fill those remaining seats. During the course of the year, there were changes to the RWPC staff. Justin Henry joined the team as the RWPC Health Planner.



# Letter from the Chair:

#### **Greetings Everyone!**



Helen Turner Goldenberg,

RWPC Chair

I would like to thank all the leaders of 2016 for a successful year: RWPC Vice Chairs Sonny Muniz-Blake, also Chair of Planning & Priorities with Stacie McNulty as the Vice Chair; RWPC Vice Chair Lionel Hillard also Chair of Allocations with Barbara Neal as Vice Chair; Bryant Porter, Evaluation Committee Chair; Gary Benecke Vice Chair, Evaluation Committee Vice Chair; and Auntjuan Wiley, Consumer Council Committee Vice Chair (the committee I also chair). Additionally, I want to thank the RWPC Office of Support Staff, Andrew Wilson, RWPC Manager, Annie Sawyer-Williams, RWPC Coordinator, and Justin Henry, RWPC Planner as well as the Administrative Agency, Dallas County Health and Human Services Director Zachary Thompson, and Dallas County staff for their efforts in ensuring quality care for those in need in our service delivery area.

We are ALL collectively charged with unique tasks that by design should work together to support systems of care. These tasks, when enacted through open and honest communications coupled with true collaboration, can ensure that those most affected and in need of our services may access quality care. This is a serious charge to us all, and we must ensure that our work results in improving good systems, policies & procedures that support getting funds for services in the field for PLWHA as fast and as effectively as possible. Furthermore, we need to be willing to regroup and strategize if we miss that goal. I challenge us all to embrace our responsibility and the impact we can make together through not only celebrating our many achievements, but also being willing to acknowledge our opportunities for improvement as well as recognize and handle challenges when they arise to achieve the greatest benefit: the best possible care for people living with HIV and AIDS.

I encourage everyone in our HIV community to read this report and distribute it through your agencies. As always, if you have any questions or concerns regarding the Ryan White Planning Council, please do not hesitate to contact me at helenetwg@gmail.com.

Cheers!

Helen Turner Goldenberg, Chairperson

Ryan White Planning Council

# CY 2016

# **Ryan White Planning Council Report**

## Meets 2<sup>nd</sup> Wednesday of each month at 9AM. PLANNING COUNCIL MEMBERS

Auntjuan Wiley	Robert Baxter
Bryant Porter	Robert McGee
Cipriano Gomez III	Sonny Blake, Vice-Chair
Del Wilson	Stacie McNulty
Gary Benecke	Tom Emanuele
Helen Turner Goldenberg, Chair	Yolanda Jones
John Dornheim	*Karin Petties
Kirk Myers	* Robert Lynn
Leonardo Zea	* Nikita Dera
Lionel Hillard, Vice-Chair	* Darius Ahmadi
Lori Davidson	* Elyse Malanowski
Louvenia Freeman	* Reymundo Anthony
Meera Rao-Bette	* Jonathan Thorne
Phillip Scheldt	

Demetria Bryan Kendal Richardson Ronald W. Stinson Joycelyn Caesar

\*New Member Member Resigned or reached term limit

The 2016 Ryan White Planning Council of the Dallas Area started with 21 members and ended the year with 27. The mission of the Planning Council is to optimize the health and well-being of people living with HIV/AIDS in the 12-county area. The council coordinates, evaluates, allocates government funds, and is continuously planning to improve the North Texas region by monitoring and improving medical and supportive services. The Planning Council held 11 meetings during the CY2016. An announcement period is held at the beginning of each meeting, allowing the RWPC members and the audience members to announce any upcoming events pertaining to their agency or concerning the local HIV/AIDS community. This general meeting also allows for interaction between council members and representatives from our local AIDS Service Organizations (ASO's).

At each RWPC meeting, the Grant's Management Officer, or an Administrative Agency representative provides a report of their ongoing activities. This may include information on HRSA awards, allocations, and request for proposal (RFP) activities. At each council meeting, chairs or vicechairs report on the monthly activities of their respective standing committees. Any official recommendation from a standing committee, which has passed through the Executive Committee, is also voted on during these general Planning Council meetings. At the end of the Planning Council meetings, the current chair or a representative of the HIV Provider's Council reports on their current activities and discussions.



# **Executive Committee Report:**

# **Charge:** Ensures the orderly and integrated and progression of work of the committees of the Ryan White Planning Council. The Executive & Nominations Committees plan future activities. **Meets 1**<sup>st</sup> **Wednesday of each month at 2:00PM**

COMMITTEE MEMBERS							
Helen Turner Goldenberg, CHAIR, CCC VC	Gary Benecke, Eval VICE CHAIR						
Lionel Hillard, Allocations VICE CHAIR	Auntjuan Wiley, CCC CHAIR						
Sonny Muniz-Blake, P&P VICE CHAIR	Stacie McNulty, P&P CHAIR						
Bryant Porter, Eval Chair							

\*New Member Member Resigned or reached term limit

The Executive Committee met 14 times in CY 2016, which include having 2 emergency meetings. This committee is comprised of chairs and vice-chairs of each standing committee and oversees the work of those standing committees. The work of each committee is taken written charge in the bylaws. The committee reviews the monthly attendance of all members per committee. When a member became in danger of forfeiting their seat, The Planning Council chair would ask the respective standing committee chair to attempt to contact that member with a letter and phone call. If that member's seat was forfeited, the member was notified via a certified letter/email.

At each Executive Committee meeting, the Planning Council Manager gave the RWPC Administrative report. This report detailed any ongoing business of the AA and the Planning Council. When any committee had an official recommendation, this was presented to the Executive Committee for discussion, voted on, and then sent to the full Planning Council for approval. This included the allocation of funds, updates to the Continuum of Care, and any other business and necessary documents.

## **Nominations Committee Report:**

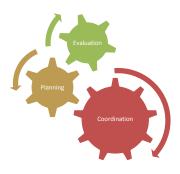
**Charge:** Ensures the orderly and integrated and progression of work of the committees of the Ryan White Planning Council. The Executive & Nominations Committees plan future activities.

## Meets 1st Wednesday of each month at 3:00PM

COMMITTEE MEMBERS						
Lionel Hillard, RWPC CHAIR, Allocations CHAIR	Gary Benecke, Eval VC					
Helen Turner Goldenberg, CCC CHAIR	Kyle Talkington, Judges Rep					
Sonny Muniz-Blake, P&P CHAIR	Lynette Smith-Clay, AA Rep					
Auntjuan Wiley, CCC VC	Bryant Porter, Eval CHAIR					
Stacie McNulty, P&P VC						

The 2016 Ryan White Planning Council Nominations Committee met eight times in CY 2016. The committee forwarded the 2016 RWPC Leadership and Standing Committee applications for appointment by Judge Clay Jenkins as follows:

Darius Ahmadi	Ryan White Planning Council and Evaluation Committee
Karin Petties	Ryan White Planning Council and Consumer Council Committee
Jonathan Thorne	Ryan White Planning Council and Evaluation Committee
Reymundo Anthony	Ryan White Planning Council and Allocation Committee
Robert Lynn	Ryan White Planning Council and Planning & Priorities
Nikita Carlene Toppin Dera	Ryan White Planning Council and Planning & Priorities
Helen Turner Goldenberg	Ryan White Planning Council Chair and Consumer Council Committee Vice Chair
Lionel Hillard	Ryan White Planning Council Vice Chair and Allocations Committee Vice Chair
Sonny Muniz-Blake	Ryan White Planning Council Vice Chair and Planning & Priorities Committee Vice Chair
Gary Benecke	Ryan White Planning Council and Evaluation Committee Chair
Stacie McNulty	Ryan White Planning Council and Planning Priorities Chair
Auntjuan Wiley	Ryan White Planning Council and Consumer Council Committee Chair
Del Wilson	Ryan White Planning Council and Evaluation Committee Vice Chair



# **Allocations Committee Report:**

**<u>Charge:</u>** Develop recommendations for distribution of funds among priority goals using all available information regarding community and agency needs, current funding for HIV services, and trend data; develop recommendations for service category allocations. Recommendations for service category allocations will include how best to meet each established priority.

Meets 4 <sup>th</sup> Monday of each month at 5:15PM							
	COMMITTEE MEMBERS						
Lionel Hillard, CHAIR	James Kleitches	Emily Marks					
Cipriano Gomez III Yolanda Jones Barbara Neal VC							
Buffie Bogue *Reymundo Anthony Odus Ogleby							
Phillip Scheldt	*Kirk Myers						

\*New Member Member resigned or reached term limit

Although this year-end report is a reflection of calendar year 2016, this specific committee report will encompass some financial data from calendar year 2015-2016 in that the 2017 fiscal year for the Part A grant is February 2017-March 2018.

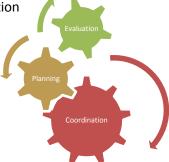
#### **COMMITTEE MEMBERSHIP CHANGES:**

There were three members that left the committee at various times throughout the year and two new recruit. We closed out the year with an eight person committee. Active recruiting for new membership will always be a priority for the Allocations Committee.

## TRAINING:

On July 25<sup>th</sup>, 2016 the committee received training on the "Allocations Process" during a special meeting. The purpose of this presentation was to train committee members on how Ryan White federal and state funds are allocated and reallocated into service categories during fiscal years. Andrew Wilson, RWPC Manager, gave the presentation, which consisted of the following subjects:

- A. Roles of Health Resource and Services Administration (HRSA), Chief Elected Official (CEO), Grantee, and Planning Council
- B. Fiscal Year Timeline
- C. The three Segments of the Allocation Process: Planning, Allocation, & Reallocation
- D. Review of the Planning Council's Role in the Allocations Process
- E. Bidding for Funds
- F. Roles of the Internal and External Review Committees
- G. Causes for Reallocating Funds
- H. Bidding for Increase in Funds
- I. Request for Proposal (RFP) vs. Request for Increase( RFI)



**<u>REALLOCATIONS</u>**: Develop recommendations for distribution of funds among priority goals using all available information regarding community and agency needs, current funding for HIV services, and trend data. Develop recommendations for service category allocations. Recommendations for service category allocations will include how best to meet each established priority.

The only reallocation of the year occurred during an emergency meeting held on December 16<sup>th</sup>, 2016. There was \$1,455,951 in **FY 2016** Part A funds available to reallocate. After careful discussion and review of the documentation, as well as audience input, the committee recommended the following:

Part A (\$1,455,951); A total of \$1,455,951 was returned from several service categories (see below). The committee decided to fulfill the amount requested for Medical Case Management, Outpatient/Ambulatory Medical Care, Substance Abuse, Case Management (non-medical), Case Management (Housing-Based), Home Delivered Meals, Respite Care, Legal Services and Child Care Services and Legal Services totaling \$1,067,420. The rest of the available funds were distributed at the discretion of the Administrative Agency of up to \$400,000 of FY 2016 Part A and MAI funds.



	Core Medical Services									
17 Rank			014 #	FY2014 %	FY20	)15 #	FY2015 %	FY2016 %		FY 2017 PLAN (%)
1	Oral Health Care	\$	1,323,177.91	10.79%	\$	1,238,100.64	9.81%	11.00%		10.50%
	Outpatient/Ambulatory									
2	Medical Care	\$	3,852,131.71	31.41%	\$	3,899,045.64	30.88%	31.21%		31.00%
3	Medical Case Management	\$	1,352,501.62	11.03%	\$	1,635,861.80	12.96%	11.00%		11.21%
4(t)	AIDS Pharmaceutical Assistance	\$	1,381,017.98	11.26%	\$	1,317,152.97	10.43%	10.76%		10.43%
4(t)	Mental Health Services	\$	142,459.75	1.16%	\$	86,868.80	0.69%	1.25%		1.25%
6(t)	Early Intervention Services	\$	210,446.42	1.72%	\$	129,998.00	1.03%	1.67%		1.42%
6(t)	Substance Abuse Services	\$	74,138.42	0.60%	\$	59,237.32	0.47%	0.60%		0.60%
	Health Insurance Premium and									
	Cost Sharing Assistance for Low-									
8	Income Individuals	\$	1,042,095.89	8.50%	\$	1,113,966.12	8.82%	9.10%		8.60%
	Home and Community-Based									
9	Health Services	\$	10,403.00	0.08%	\$	-	0.00%	0.00%		0.00%
10	Home Health Care	\$	22,346.00	0.18%	\$	-	0.00%	0.00%		0.00%
11	Medical Nutrition Therapy									
12	Hospice Services									
	Total Core Medical	\$	9,410,718.70	76.73%	\$	9,480,231.29	75.09%	76.59%		75.01%
	Support Services									
17 Rank										
1	Food Bank	\$	293,786.00	2.40%	\$	369,102.00	2.92%	2.45%		2.45%
	Non-medical Case Management									
2	Services	\$	1,144,791.13	9.34%	\$	1,271,561.87	10.07%	9.39%		9.39%
3	Outreach Services	\$	32,477.10	0.26%	\$	35,977.00	0.28%	0.28%	_	0.28%
4	Medical Transportation	\$	788,689.13	6.43%	\$	738,174.00	5.85%	6.43%	_	6.43%
	Housing-Based Case									
5	Management	\$	129,270.00	1.05%	\$	196,250.00	1.55%	1.10%		1.10%
6	Home Delivered Meals	\$	276,885.14	2.26%	\$	317,812.98	2.52%	2.25%		2.25%
7	Transportation-State Services								_	
8	Housing									
_										
9	Emergency Financial Assistance									1.58%
	Other Professional Services									
10(t)	(Legal Services)	\$	70,910.00	0.58%	\$	90,159.00	0.71%	0.60%		0.60%
10(t)	Respite Care for Adults	\$	26,223.60	0.21%	\$	50,633.00	0.40%	0.20%	-	0.20%
	Dev Develle Con C									
	Day Respite Care for		20.004.05	0.470/			0.000/	0.4004		0.400/
12	Children/Youth/Adolescents	\$	20,891.65	0.17%	\$	-	0.00%	0.18%	-	0.18%
10	Health Education/Risk									
13	Reduction	ć	1 425 44	0.049/	ć	2,005,00	0.000/	0.018/	+	0.049/
14	Child Care Services	\$	1,435.41	0.01%	\$	2,665.00	0.02%	0.01%	+	0.01%
15	Chid Care - State Services	ć	67.047.00	0.559/	ć	74.052.00	0.530	0.5284	+	0.539/
16	Linguistic Services	\$	67,047.00	0.55% 23.26%	\$	71,952.00	0.57%	0.52%	-	0.52%
	Total Support Services	\$	2,852,406.16		\$	3,144,286.85	24.91%	23.41%	-	24.99%
	Total Services	\$	12,263,124.86	100.00%	\$	12,624,518.14	100.00%	100.00%		100.00%

Recommendation Justification: Emergency Financial Assistance as a service category will be used for a bridge to get clients medication while they wait for eligibility to ADAP services. This plan has a contingency that more money can be moved from AIDS Pharmaceutical Assistance to Emergency Financial Assistance if a higher percentage of funds from AIDS Pharmaceutical Assistance was used to bridge consumers during the eligibility process to ADAP medications based on FY15 LPAP expenditure percentages.

	Core Medical Services						
L6' Rank		FY2014 #	FY2014 %	FY2015 #	FY2015 %	FY2016 %	FY2017 PLAN (%)
	Outpatient/Ambulatory						
1	Medical Care	\$ 516,229.00	43.99%	\$ 469,350.00	48.41%	45.80%	48.41
	AIDS Pharmaceutical						
2(t)	Assistance	\$ 213,788.00	18.22%	\$ 97,952.00	10.10%	17.50%	10.10
2(t)	Oral Health Care	\$ 110,234.50	9.39%	\$ 113,779.17	11.74%	9.20%	11.74
4	Medical Case Management	\$ 33,369.00	2.84%	\$ 97,684.00	10.08%	3.20%	10.08
5	Substance Abuse Services						
	Total Core Medical	\$ 873,620.50	74.44%	\$ 778,765.17	80.33%	75.70%	80.33
	Support Services						
16' Rank							
1	Food Bank						
2	Medical Transportation						
	Non-medical Case						
3	Management Services	\$ 299,907.99	25.56%	\$ 190,706.00	19.67%	24.30%	19.67
	Total Support Services	\$ 299,907.99	25.56%	\$ 190,706.00	19.67%	24.30%	19.67
	Total Services	\$ 1,173,528.49	100.00%	\$ 969,471.17	100.00%	100.00%	100.00

Service Category (Core Services)	Reallocated Funds
Outpatient/Ambulatory Medical Care	\$674,733
Substance Abuse	\$20,000
Medical Case Management	\$90,000

Service Category (Supportive Services)	Reallocated Funds
Case Management (non-medical)	\$195,000
Case Management- Housing Based	\$36,000
Home Delivered Meals	\$30,000
Respite Care for Adults	\$10,000
Legal Services	\$9,700
Child Care Services	\$1,987

Part A Total Reallocated	\$1,067,420

MAI Service Category (Core Services)	Reallocated Funds
Outpatient/Ambulatory Medical Care	\$60,000
AIDS Pharmaceutical Assistance	\$183,000
Medical Case Management	\$65,000

MAI Service Category (Supportive Service)	Reallocated Funds
Case Management (non-medical)	\$75,000
MAI Total Reallocated	\$383,000

### NOTABLE EVENTS AND CHANGES:

During the December 16<sup>th</sup>, 2016 meeting, the committee voted to accept a motion that recommends the Administrative Agency have discretion to utilize future unexpended FY 2016 Part A funds up to the amount of \$ 400,000 among any of the core medical services, and under non-core services, non-medical case management only. This recommendation would primarily allow the AA to move whatever leftover/unspent funds into the state AIDS Drug Assistance Program (ADAP) program. Lynn Smith-Clay, Grants Management Officer, spoke briefly to clarify any confusion and expressed the importance of the Allocations Committee, the Program Monitors, and the providers to determine ways to allocate within the appropriate time frame while remaining compliant to the policy process.

This will help the Dallas EMA in the future because funds will be able to be applied to more service categories instead of sending the leftover money to ADAP. Please note that this only happens when there is not enough time for the AA to send out RFI's and have the Allocations Committee make recommendations for reallocations.

**FISCAL YEAR (FY) 2016 ALLOCATIONS PLANNING GUIDE**: (Develop recommendations for distribution of funds among priority goals using all available information regarding community, consumer, agency needs, current funding for HIV services from all identifiable sources, priority rankings, and trend data in making recommendation)

In August 2016 the support staff provided the Allocations Committee with the FY 2016 Allocations Planning Guide for Part A and Minority AIDS Initiative (MAI). This is an important document in the decision making process for this committee. The committee also utilized the Service Category Dashboards. The purpose of these dashboards is to extrapolate financial, demographic, and utilization data from the AIDS Regional Information and Evaluation System (ARIES), & The Department of State Health Services (DSHS) epidemiological data, into a more simple presentation that will be displayed onto one page. This will result in better organization and a better overall understanding for each funded category.

In the September 26<sup>th</sup>, 2016, the committee approved a motion to use the <u>FY 2015</u> <u>Part A</u> final <u>expenditure percentages</u> as the <u>FY 2017</u> <u>Part A</u> <u>allocation percentages</u> for the Dallas EMA, valid with a  $\pm$ 7% range of the FY 2015 Part A funding level. Any additional funding above of the 7% range will be held until the need for reallocations. The recommendation also includes that the Allocations Committee will conduct reallocations at the 6 & 9 month marks of the fiscal year if needed. The same motion was made for the <u>FY 2017</u> <u>MAI</u> grant. At the conclusion of the meeting all parts of the 2017 Allocations Planning Guide were complete.

**<u>CONCLUSION</u>**: (Develop recommendations for service category prioritization approved by the Ryan White Planning Council of the Dallas Area. Consideration of the available community resources as well as their coordinating capacities will also be given.)

The Allocations Committee had a very busy year. They held 12 meetings, including two emergency meetings. Emergency meetings occur when unspent money has been returned and needs to be reallocated as quickly as possible. Each month during 2015, the committee continued to monitor all expenditures and unspent funds in all categories. The committee received input from audience members for explanations as to why funds may be unspent and made recommendations using all information available. In all, the Allocations Committee made recommendations for approximately \$1,421,001 to be reallocated to various parts of the grant.

The committee also approved the FY2015 Allocations Planning Guide for Part A and Minority AIDS Initiative (MAI). The committee also learned that unspent funds can now be carried forward if the AA applies to HRSA. This will help next year when timing does not allow for the reallocation process and will reduce the amount of funds that are currently being sent to ADAP. Finally, the new dashboard method of reporting data to the committee will help greatly in next year's allocation and re-allocation decision making.

# **Consumer Council Committee Report:**

**Charge:** Empowering consumers through education by providing the tools and knowledge to interact with those individuals and committees that affect categorical service delivery of the Ryan White Treatment Extension Act, including the Texas Department of State Health Services (DSHS).

COMMITTEE MEMBERS			
Auntjuan Wiley, VC Helen Turner Goldenberg, CHAIR Donna Wilson John Dornheim Cipriano Gomez III Meera Rao Bette Lionel Hillard	Linda Freeman Ricky Tyler *Karin Petties *Robert L. McGee II *Marques J. Elder *Lawrence Stallworth II	Kendal Richardson Judith Dillion J. Raheem Harris	

\*New Member Member Resigned or reached term limit



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The Ryan White Consumer Council Committee (CCC) is a passionate, diverse and dedicated community consisting of people living with HIV and AIDS (PLWHA), and advocates who lend their voice to help ensure optimum survival of PLWHA via education and empowerment of consumers, providers, as well as the entire community. The CCC began the 2016 year with great enthusiasm as we continue our collaborations with Community Organizations, Ryan White Standing committees, e.g., Planning and Priorities Committee and Evaluation Committee on Priority Setting Sessions, Interim Work Plan goals i.e. research and communication of tools/flyers (including social media) for clients to speak to case managers, doctors, and reminder systems to better manage their health, including Google Voice, MediGuard, My Chart etc. This year we plan to continue Consumer Satisfaction Surveys regarding the intake process, the case management system, successful linkage and barriers to care, needs Assessments, Ryan White 101 and RW recruitment at community events e.g. AIDS Walk South Dallas, Afiya Center annual Get Tested Grab a Plate Event, Grace Project HIV+ Women's National Conference, Strength Conference for Men living with HIV or AIDS.

In the past CCC produced 4 forums each year; however, demand has been great that we challenged ourselves and produce 8 Educational CCC Forums in 2015.

The Consumer Council Committee began 2016 with review of more than 60 suggestions of potential Educational CCC Forum Topics for 2016 from consumers, Forum attendees, providers, and other members of the community. After combining some of the topics, then with one topic selection per CCC member followed by a voted ranking, the top 10 requested Forums resulted in the following Educational CCC FORUMS PLANNED FOR 2016:

FORUM 1: HIV & FAITH BASED COMMUNITY, "A CONVERSTION FROM MULTIPLE PERSPECTIVES AROUND HIV & AIDS" PART 2 on March 17, 2016: This FORUM was a follow-up and continuation of CCC Forum held last year in October which was widely requested by attendees and promised by the Consumer Council.

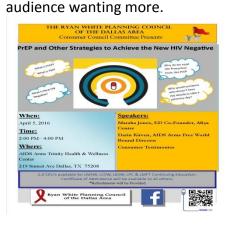
The event chairs Elder Auntjuan Wiley and CCC Chair Helen Turner Goldenberg also acted as moderators. It was a great discussion held at Cosmopolitan Congregation of Dallas showing that we are stronger together, Faith and community. "My greatest reward was when one Pastor who shared in October that he would never preach a sermon about HIV, this time said he has preached two sermons on the subject and now has a group dealing with youth" says Chair Goldenberg. So buy-in from the faith community is not only possible it is happening... with one per at a time, we continue the work

**FORUMS**: Topics for the eight forums produced in 2015 were chosen by vote of CCC members from suggestions received from consumers, providers, and other attendees at past forum and other interested parties. 2.0 CEU's Continuing Education Credits were available for LMSW, LCSW, LBSW, LPC & LMFT at 7 out of 8 Forums in 2015 Certificate of Attendance was available to all others

**FORUM 1: HIV & FAITH BASED COMMUNITY, "A CONVERSTION FROM MULTIPLE PERSPECTIVES AROUND HIV & AIDS"** (PART 2 on March 17, 2016) This FORUM was a follow-up and continuation of CCC Forum held last year in October which was widely requested by attendees and promised by the Consumer Council. The event chairs Elder Auntjuan Wiley and CCC Chair Helen Turner Goldenberg also acted as moderators. It was a great discussion held at Cosmopolitan Congregation of Dallas showing that we are stronger together, Faith and community. "My greatest reward was when one Pastor who shared in October that he would never preach a sermon about HIV, this time said he has preached two sermons on the subject and now has a group dealing with youth" says Chair Goldenberg. So buy-in from the faith community is not only possible it is happening... with one per at a time, we continue the work.



**FORUM 2 PrEP AND OTHER STRATEGIES TO ACHIEVE THE NEW HIV NEGATIVE** (APRIL 5, 2016): CCC Chair Helen Turner Goldenberg acted Moderator in collaborations in with Justin Vander Community Resource/Social Media Specialist of AIDS Arms, Inc. who obtained AIDS Arms as the venue including speaker Daron Kirven FWB Director who works with PrEP for high risk populations primarily via his prison reentry program. What is PrEP and how do you get it were frequently asked questions. Marsha Jones, ED of the other biomedical preventions, HIV Vaccine/Microbicide research. One take away concerning "Undetectable: The new HIV Negative" is that while it provides a more positive outlook, since viral suppression is our goal, we must not lull folk into a false sense of security because HIV is still present in the body and we must also stress medication adherence as key to staying virally suppressed. This was a very informative Forum leaving the



**FORUM 3: THE CRIMINALIZATION OF HIV AND OTHER LEGAL ISSUES** (April 21, 2016): This much needed Forum moderated by CCC Chair Helen Turner Goldenberg covered stigma, discrimination, and criminalization/decriminalization of HIV, including how this state which does not have HIV specific laws yet still manages to use general laws to criminalize the disease rather than the crime committed.

We had a great panel with attorney Stacie McNulty RWPC and P&P Vice Chair who gave a revealing presentation about criminal cases in Texas with examples of people who received jail sentences for 15, 20 or 30 years for things like spitting, or cases where it was clear that much education is needed on science, transmission of HIV.

Another attorney, Joel Lazarine of Texas Legal Hospice did a great job discussing the rights of individuals and how to handle legal issues that come up for people living with HIV. Cora Giddens Program Manager of UT Southwestern Advisor covered disclosure as a process and the Healthy Relationships program that she provides to assist HIV+ individuals make disclosure decisions. We also had consumer testimonies, CCC member Ricky Tyler whose sentence exceeded the standard once the court found out he was HIV positive. CCC Chair Helen Turner Goldenberg who was intentionally infected and did not seek prosecution, and Diane Reaves who wrote a book about being intentionally infected and her work to insure prosecution on general assault charges resulting in Mr. Padieu, currently in prison for possibly the rest of his life. Texas now has a state decriminalization group with McNulty, and Goldenberg as members. If anyone is interested in learning more they can contact stacie@hopecapetownusa.com.





**FORUM 4: SUCCESSFUL LINKAGE AND BARRIERS TO CARE, "Roundtable Consumer Testimonies"** (May 11, 2016):\_This forum was developed around Linkage and Barriers to Care to complete the Interim Work Plan assisting RW Planning and Priorities Committee regarding ways to increase linkage from 78% to 85% of PLWHA in the Dallas EMA. CCC Vice Chair Auntjuan Wiley and Chair Helen Turner Goldenberg were event chairs for this event with Louis Henry, Linkage-to-Care Coordinator of UT Southwestern School of Health Professions as the Key Note Speaker. The intent is for the Office of Support to compile comments made and provide the information to the P&P Committee for disposition. This was a roundtable discussion with clients, providers, and community sharing problems regarding linkage as well as successful linkage stories. Most clients

expressed their hopes for improvement including reduction of the mountains of paper and time



necessary for being.

**FORUM 5: HIV & HOUSING** (July 7, 2016): RWPC Vice Chair and CCC member Lionel Hillard was the event chair with Chair Helen Turner Goldenberg as Moderator for this event covering housing opportunities, consumer protection and economic benefits, including Dallas Housing and City of Dallas information for PLWHA. This is a FORUM that is frequently requested as housing is prevention and very essential for achieving viral suppression including retention in care. Speakers/Panelists were Kris Dance Housing Opportunities for People with AIDS Supervisor at Dallas County Health & Human Services; Maryann D'Aniello Attorney at Dallas Housing, Consumer Protection, and Economic Benefits Division; Moche Earls Senior Public Information Representative City of Dallas- Housing/Community Services; Consumer Testimony CCC member Cipriano Gomez.





**FORUM 6: MENTAL HEALTH AND SELF ESTEEM: (July 14, 2016)** This is also a Forum that is requested every year as mental health is a key to self-esteem. Speaker Melissa Groves, M.S., LPC-Executive Director of Legacy Counseling Center & Founders Cottage is also frequently requested as speaker on this subject. Additionally Mildred L. Delozia, Ph. D, LCSY Associate Professor/Director of Field Education, University of Mary Hardin-Baylor/ED Human Services Network, Inc. Dallas comes highly recommended to focus on Cultural Competency in the Provision of Mental Health Counseling to African American HIV+ Clients and their families.



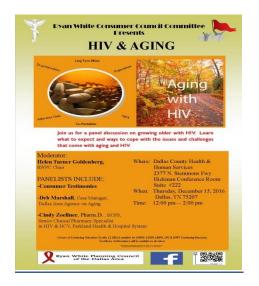
**FORUM 7: ACCESSING COMMUNITY RESORUCES:** (August 11, 2016): This forum has become a tradition, a "going concern" with CCC Vice Chair Auntjuan Wiley as Event Chair and Presenter of this interactive event covering the resources available in the community as well as how to access them. This show has gone-on-road because of need and popularity as AIDS Service Organizations have also requested this presentation because it covers not only the resources included in the current Parkland Handbook.

8	The Ryan White Planning Council Consumer Council Committee Presents
	Accessing community resources
	Forum Facilitator: Auntjuan Wiley Date: May 18, 2016 Discurres hit Available to he Public" Where: Meadows Conference Center, 2900 Live Oak Street, Dallas 75204
	B CRUP available for LABW, LCBW, LDBW, LDC & LABT Continuing Education. Certificate of Alendance will be available to all others. *Referencements will be Provided*
	Certificate of Attendance will be available to all others. *Refreshments will be Provided *

**FORUM 8: WOMEN LIVING with HIV:** (September 8, 2016): This forum was in the top 10 topics. The speakers included: Dr. Kim Parker, Associate Professor at Texas Women's University, Mukamtagara Jendayi, Research Study Project Coordinator, Alma Garcia, LCSW, Therapist at Legacy Counseling Center. The Consumer Testimonies consisted of powerful women from the community who shared their story.



**FORUM 8: HIV & AGING:** (December 15, 2016): This is also a forum that is requested every year as people are living longer with HIV. The speakers included: Deb Marshall, Case Manager, Dallas Area Agency on Aging, Cindy Zoellner, Pharm. D. BCPS, Senior Clinical Pharmacy Specialist in HIV & HCV, Parkland Health & Hospital System. This forum was held in conjunction with the CCC regular monthly meeting and end of the year luncheon.



# **Evaluation Committee Report:**

**Charge:** Evaluates whether provider services coincide with set service priorities and evaluates the performance of the Administrative Agency and the Planning Council according to the goals of the Council.

<u>Typically meets 4<sup>th</sup> Tuesday of each month at 3:00PM</u>			
COMMITTEE MEMBERS			
Bryant Porter, CHAIR	Leonardo Zea	Ron Stinson	
Del Wilson	Robert Baxter	Lori Davidson	
Gary Benecke, VICE CHAIR	Yolanda Jones	Helen Turner Goldenberg	
LaShaun Shaw	*Darius Ahmadi	Melania Marin	
Louvenia Freeman	*Elyse Malanowski		
Phillip Scheldt	*Jonathan Thorne		
Tom Emanuele	*Melania Marin		
Louise Weston Ferrill			

\*New Member Member Resigned or reached term limit

The Evaluation Committee held regular meetings during calendar year 2016 and the members' efforts are very much appreciated and valued. The committee was fortunate to have a set of dedicated members - each striving to have a positive impact on the health of residents of the north central Texas area.

The committee is scheduled to meet monthly and did, in fact, hold its scheduled meeting ten of the months during 2016.

The Evaluation Committee worked on the standards of care for the first couple of months, but were informed that they were off schedule with the state in March They also had a back and forth with the AA to get helpful responses for the Evaluation of the Administrative Mechanism for 2014.

With the Standards shelved, the committee approved the surveys for the 2015 EAM as well as revisited the surveys for the consumer satisfaction done for the Interim Work Plan. With this survey finalized, the CCC was able to survey consumers again. The surveys from 2015 and 2016 developed by the Evaluation Committee showed an increase in consumer satisfaction with the intake process, though the sample sizes may not have been big enough to jump to any conclusions.

Finally, the Evaluation approved the 2015 EAM Recommendations to the AA and support staff, and began working on the 2016 EAM Surveys.

# Planning & Priorities Committee Report:

**Charge:** To oversee development and implementation of a process to identify needs and barriers, keep the assessment of needs current and develop a comprehensive plan to implement the priority goals of the Planning Council

COMMITTEE MEMBERS			
Sonny Muniz-Blake, CHAIR	*Nikita Carlene Toppin Dera	Demetria Bryan	
John Dornheim	*Robert Lynn	Marques J. Elder	
Stacie Greskowiak McNulty, VC	*Lori Davidson	Joycelyn Caesar	
Woldu Ameneshoa	* Robert McGee III	Kirk Myers	

# Meets 2<sup>nd</sup> Tuesday of each month at 9:00AM

\*New Member Member Resigned or reached term limit

2016 was a very interesting year for the Planning & Priorities Committee.

The Planning and Priorities Committee started off 2016 reviewing the Comprehensive Needs Assessment which would become an integral part of the 2017 Priority Setting Process. The Ryan White support staff provided the committee with information including but not limited to the Dallas EMA Counties, descriptions of Part A, Part B, State Services, and MAI funding. Also available were past rankings, and additional information requested by the committee. Additional training was conducted as needed to help the committee through the process.

The committee also addressed the FY2015 "How to Best Meet the Priority" document and made changes as deemed necessary. Training and review was conducted by support staff who answered questions and guided the committee through this process. The majority of changes made to the document were in the form of language and specific targeted populations.

The Planning & Priorities committee began reviewing the interim work plan, looking at questions for the comprehensive needs assessment. The committee discussed ways to improve the process to ensure that the Council was reaching all relevant populations and that the assessment reflected the actual barriers and needs of the epidemic. This was an ongoing project for the committee prior to the kick off of the needs assessment process.

The Committee then began the FY2017 Continuum of Care Review. Training was conducted regarding the Continuum of Care and Standards of Care. The committee wrapped up the year addressing issues surrounding the Continuum of Care document and changes were made while other areas of concern were addressed by the support staff and Administrative Agency.

## Separate Roles and Mutual Goals: Ryan White Planning Council and Administrative Agency

The Ryan White Planning Council (RWPC) and the Administrative Agency (AA) have separate roles. The RWPC and the AA work together identifying the needs of People Living with HIV/AIDS (PLWHA) by conducting a Needs Assessment and preparing a Comprehensive Plan. The Plan is a long-term guide designed to meet those needs.

In addition, both works together to ensure other funding sources are identified and available as payers therefore, making certain Ryan White funding meets the legislative requirement as "payer of last resort." This means that other available funding should be used for services before Ryan White funding is used as payer.

The RWPC set priorities for funding and how funding should be provided for each service category. The AA is responsible for managing Ryan White funds and awarding these funds to Sub Recipients to provide services. The process for awarding funds is through an Request for Proposal (RFP) process.

The RWPC cannot do its job without the help of the AA and the AA cannot do its job without the help of the PC. Some of the responsibilities are identified clearly in the Ryan White legislation. Others must be decided locally. It is important that the PC and the AA work together and come to an agreement about their duties. This agreement should be written in PC bylaws and in a Memorandum of Understanding (MOU) between RWPC and the AA.

## Accomplishment made through the collaboration with the AA and RWPC:

- 1. Added a new service category: Emergency Financial Assistance (EFA)
  - Support for Emergency Financial Assistance (EFA) for essential services including utilities, housing, food (including groceries and food vouchers), or prescriptions provided to clients with limited frequency and for a limited period of time. The intent of these funds are to support a client for a short duration.
- New Sub-recipient: AIDS Health Care Foundation Healthcare Center- Dallas at Medical City Hospital 7777 Forest Lane B-122, Dallas, TX 75230
  AIDS Health Care Foundation is a Comprehensive Patient-Centered Care facility that provides complete HIV medical care. They provide clients with accessing additional specialists, medications and services they need to be as healthy as possible.
- 3. Standard of Care (SOC): Revising and adopting the Department of State Health Services (DSHS) Part B SOC. In collaboration with DSHS and the AA, there has been a smooth mythology for reviewing the SOC. The Evaluation Committee receives two standards a month for review. Upon completion of the SOC Dallas Eligible Metropolitan (EMA) adopts the SOC drafted by DSHS.
- 4. Contract Process: The contract renewal process has improved.
- 5. Collaboration: One of the recommendations in the latest Evaluation of the Administrative Mechanism was for the AA to give a report at Executive Committee meetings, which would then be included with the meeting materials when the Ryan White Office of Support polls for quorum for the RWPC meeting. This will allow an increase in communication with the RWPC.
- 6. Training: The RWPC along with the AA will host RWPC training. A Consultant has been contracted to provide this training. The training will include several agenda items including but not limited to Bylaws and Memorandum of Understanding.