



HIV PREVENTION COMMUNITY PLANNING GROUP
Tuesday, September 17, 2013
Indiana State Department of Health, Rice Auditorium
Indianapolis, Indiana 46204

Members	Present	Absent
Emily Brinegar	X	
Rochelle Feldheiser-Keyes	X	
Derwin Gary	X	
Anthony (Tony) Gillespie	X	
Angela Goode	X	
Latorya Greene, Co-Chair	X	
Valjin Harvell	X	
Ramon Morton	X	
Andrea Perez, Co-Chair	X	
Nate Rush	X	
Christopher Simons	X	

TA	Present	Absent
Rupert Arceo, ISDH TA		X
Vivian Arnold, ISDH Support	X	
Cena Bain, ISDH TA	X	
Alicia Barnes, ISDH TA	X	
Amanda Copeland		X
Michael Exom		X
Darin Foltz, ISDH TA	X	
Brittany Gross, ISDH TA	X	
Dan Hillman, ISDH TA		X
John Hon, ISDH TA		X
Brenda Mason, ISDH TA		X
Anita Ohmit		

Name	Agency
Randy Buffington	OraSure
Keri Cross	The Bethlehem House
Larry Jimison	Brothers United

AGENDA

10:00 a.m. – 10:10 a.m.

Welcome: Andrea Perez, ISDH Co-Chair

Self-Introductions Each member and visitor introduced themselves and stated the organization, region and/or population they represent.



Mission: Emily Brinegar read the CPG mission.
Ground Rules: Rochelle Feldheiser read the Ground Rules.
Review of Agenda: Justin Wooley was unable to make the meeting, he will be scheduled to present at a later date.

10:10 a.m. – 10:30 a.m.

Approval of July 16, 2013 CPG Minutes – Grammatical changes were made. It was a consensus that the minutes be approved.

Review of Group Assessment Form

Question #6: CPG is focused on community planning outcomes.

Andrea Perez - In comments section a member asked; “Have we lost the community focus?”

Nate Rush - Sometimes we seem like that’s what drives us. Being a longtime member of CPG, we need to figure out what will make CPG happy and making sure we serve our citizens. It needed to be said out loud.

Rochelle Feldheiser-Keyes - Nothing we haven’t talked about before... what can we do to change that? How can we fix it?

Andrea Perez - A few meetings back, I mentioned that another state’s CPG was working with their pharmacies to develop a handout to be given with the OraSure over the counter at-home rapid HIV test. As a result of that, we asked for a presentation from OraSure about the test but it was never discussed with CPG afterwards. We ask for this information and present it and then nothing happens... that’s where we leave it. We meet to meet. There should be a part B to that... we should have discussed what we learned.

Nate Rush - We need to establish some sort of activities or tasks. There are a lot of great things of what we’re supposed to do but no one has made an effort to move forward. For each of us, we need to establish a task to discuss what we’ve done. Did we do it, what was the hold up, do we need to talk to legislators, what do we need to do? Ask about the membership policy but I don’t know if it changed or not. If we all agree to it then we need to do it.

Emily Brinegar - We need to start adding things into old business. The Executive Committee can follow up on what tasks needs to be done.

Andrea Perez - We talked about it. What we need to remember is that Old Business is the last thing on the agenda and people are packing up to leave or they have already left. If we agree to do it then people need to stay and be committed to this just as they are to the rest of the items on the agenda.

Nate Rush - Change the agenda. A lot of us have other responsibilities and things come up.

Tony Gillespie - Comments that have been made are dead on. We ask for the information to help us move forward but then it gets lost in our communities.



Rochelle Feldheiser-Keyes - Action items need to be assigned to an individual person; not to a committee in order for there to be any action taken.

This will be placed on the Executive Committee agenda to be discussed.

Question #9: What suggestions would you like to make to help implement the changes or correct any problem stated previously?

We need clarification on this question. The thought was there needs to be more commitment by members. Showing up is part of commitment and getting work done is also a part of commitment. It was suggested that a “core value statement” be developed. There are some things that we can possibly look at from other states; Iowa is one state. If we can find out what the members strengths are; do a survey, and let the members work in that area; what can the member contribute to CPG. It was suggested that committee chairs take the initiative to know their committee members and find out their committee members’ strengths and weaknesses. This will enable the chair to delegate and lead the committee more effectively. If the committee chairs are leading their committee successfully, then the overall effect will be a successful CPG.

Question #10: What would you like to see addressed at future planning meetings?

Dan Hillman is working on the HIV Cascade. There is no official update in regard to Category B. More clarification is wanted about what is meant by National AIDS Strategy Update and Category B update. It was stated that there was an update on the National AIDS Strategy; High Impact Prevention. Tony Gillespie will send this information to Susan Newton to distribute to the CPG members. The answer to where we are in regard to Category B was what was wanted. If there is room on the Retreat agenda, there will be some information available regarding Category B during the retreat.

Review of Attendance Sheet – There were no changes made. There was a question about the attendance policy; Policy and Procedures has looked at this. There seemed to be more of an issue with the appeal process rather than attendance. There have been changes made to this procedure. Latorya Greene will send this information to Susan Newton so she can forward it to CPG members.

Review of Expense – There were no changes made.

Review of Projected CPG Budget September – December 2013 – Susan Newton discussed the changes that were made/funds moved to cover conference attendance expenses.

Review of Projected Retreat Budget – The budget for the Retreat is \$7000.00

10:30 a.m. – 10:40 a.m.

Executive Committee Report -Latorya Greene, Community Co-Chair

Letter of Concurrence

An email was sent out to each CPG member regarding the, “Letter of Concurrence” along with the link to the 2012 HIV Prevention Jurisdictional Plan. This was to allow CPG members the opportunity to review the document and the opportunity to discuss them during the September CPG full body meeting. The letter was due to be submitted on September 12, 2012. The Executive Committee asked for an extension of one week; September 19, 2013. There was a question if High Impact Prevention (HIP)



impacts the plan? Were funds allotted for high impact prevention? The method of distribution of funds to funded agencies was not included in the plan. It was stated that nothing has changed since July 2012.

There was no consensus to approve and submit the Letter of Concurrence so a vote was taken with the following results: 9 members voting yes and 2 members voting no to submitting a letter of concurrence.

10:40 a.m. – 11:00 a.m.

Division Report/ISDH - Andrea Perez, ISDH Co-Chair

- Andrea Perez announced her acceptance of the State Director of the Division of HIV/STD and Viral Hepatitis.
- September 19, 2013 is the last CTR recertification class for 2013.
- October is the last CTR training course for the year.
- The Interim Progress Report (IPR) has been submitted to CDC.
- STD just submitted their application; there are some significant changes coming in regard to STD; testing will change with the focus being moved to not only focus on women but on MSM as well.
- Brittany Gross – is working on a resource guide that will be available by the end of the year. She is reaching out to providers and asking for assistance from them to put her in contact with providers they know to assist with this process. She also is working on a pilot to do rapid HCV testing with a small group of agencies. Testing began in August-appears to be going good; no analysis yet. The providers were asked to utilize 20 tests per month.
- Services – Very busy-busy as usual. There has not been any changes in regard to services for positive individuals we cover under services and ADAP
- Veronica McCants, Project Manager – She will be sending a formal written report, information will be shared once it is received. Veronica was pleased with a few concerns:
 1. Commitment – we didn't have a quorum. We had late arrivals and members leaving early.
 2. Some members talked quite a bit while others said nothing.

Getting to Speak – Robert's Rules of Order

1. When you have something to say, you have to be *recognized by the chair*.
2. As a common courtesy (and according to the Robert's Rules), you should never seek recognition while someone else is talking.
3. According to the Rules, each member can only speak twice on any given topic (note: the standing rules of the national convention actually allow each person to speak only once).
4. Members who have not yet spoken about the topic at hand always have priority over those who have.

The question was asked what would make members speak-out more during meetings. Should this be a question in the membership application? How can we help each other be stronger at what we do? It was stated that sometimes your voice may be your vote. What will we do as a body to rectify this based on Robert's Rules of Order? The self assessment form allows members to anonymously comment on the meeting or issues. However, many members have come to the CPG Liaison stating their concern of not being able to speak out due to their opinion being counter-acted by someone else making their opinion void. The question was asked, "Are we Broken?" The purpose of the retreat is to work on some of these issues.



The Retreat Committee will look at putting this on the retreat agenda. It was stated that if members are comfortable on the committees they sit on, they will become more comfortable speaking around the full body CPG committee meeting. Communication is the largest problem that the CPG has. If we stick to the agenda, we would get much more done.

1:00 p.m. – 1:30 p.m.

Committee Reports

1. Evaluations

No report

2. Engagement/Needs Assessment

The committee is planning two webinars; one in October with Beth Meyerson; Research Agenda and one in November to give an update on the status of the Pharmacy Project Beth Meyerson is working on. The information on the webinars will be sent out to CPG members.

3. Membership

A copy of the Indiana CPG Application Score Form was given to each CPG member. A presentation was also given regarding the waiver process; was the waiver for one year or a term; 2 years. If for a term 7 members would be affected. If the waiver was for one year 3 members would be affected. The waiver was put in place because there was no clear reason why new members were being added. It was suggested that a discussion take place whether to modify the application so that it would be in line with the matrix. It was stated that the form is based on the matrix along with Epi data.

- Article IV. Voting Membership, Section 2. Composition, #1

- At least one (1) representative from each region

Based on the new matrix, should this be looked at by the Policy and Procedures committee? A simple wording change, “CPG designated high-incidence region” and be presented to the body for approval.

- It was suggested that a recommendation be made to remove Article IV. Voting Membership, Section 2. Composition, #3;

- Two (2) representatives of the HIV services planning council (CHSPAC);....

It was stated that this policy has already been voted on to change.

- It was suggested that the CPG should work on tweaking and amending the Policies before new members are brought in. It was stated that at some point we have to bring new members in as we transition old members out and keep moving forward.

The membership committee recommended that the full CPG body accept the scoring tool.

Six (6) members voted yes, one (1) member voted no and there were two (2) abstentions. The motion passed.

There are seven people who need to reapply; Susan Newton will contact the members. It was suggested that the old application be used and then evaluated at a later date to determine if there were items that worked better or didn't work.

Ad-Hoc Committees

4. Policy and Procedures:

Latorya Greene will send out information to the CPG regarding Policy and Procedure updates

5. EPI

There was no report

6. Advocacy



The committee is collecting relevant information for the full body; the committee would like to know how the full body wants the information disseminated. It was suggested using the following methods:

- Facebook because most members might be friends with CPG on Facebook.
- Sending the information to Susan Newton and have her forward it to members.
- Handing the information out at the full body CPG.

It was decided that Facebook would be used as one method along with the CPG website to disseminate the information. It was suggested that a tool kit be developed to help members engage their legislators; the committee will begin working on this. If members know of things that the advocacy committee should be a part of/looking at, members were asked to forward it to Emily Brinegar, Chair. It was suggested that in addition to focusing on what ISDH is focusing on in regard to the ACA, the focus needs to be on assistance for those who do not qualify and helping them navigate the insurance market place.

7. STD

There was no report

USCA Conference Update

Tony Gillespie – A presentation was given – the presentation will be posted on the CPG website. Members were asked to give Tony Gillespie electronic copies of any information they would like to include in the packages that will be given to State Representatives during the Black Caucus Meeting in DC.

1:30 p.m. - 2:30 p.m.

Co-chair Stakeholder Identification Activity

Members were divided into two groups. Each group was asked to define traditional stake holders and non-traditional stakeholders. The groups were then asked to list traditional and non-traditional stakeholders. After the lists were compiled, CPG members came back together as one group and discussed the choices that were made. Next the CPG members compiled one list of stakeholders out of the two lists that the CPG would actually seek as stakeholders:

- ASOs/CBOs
- Substance Abuse treatment
- High Risk Populations
- Housing/Homelessness
- IDCs – Primary Care Physicians
- Care Coordinators
- Minority Coalitions
- Faith Based Organizations
- Community Health Centers
- Urgent Care Clinics
- Social Groups
- PLWH/A
- Universities/Colleges
- Policy Markers/Legislators
- Health Departments
- Mental Health Providers



It was a consensus that the list of stakeholders be accepted. The Needs Assessment committee will build an engagement plan around each of the stakeholders that have been identified.

3:30 p.m. – 3:45 p.m.

Q & A/

There were no questions.

Old Business

- CBA Request for Cultural Sensitivity Training – Once dates for the retreat have been solidified Susan Newton will contact Reggie Davis and Taharee Jackson to confirm their attendance. It will then be decided if the training will be one full day or ½ a day. The Retreat Committee will meet to finalize everything.
- CPG Retreat – Information for the two locations will be sent to CPG members along with the dates. Members were asked to submit the date that works best for them to Susan Newton.

New Business

The CPG will need to vote on a new CPG Co-chair in November 2013. The process was missed. It should have taken place in March 2013. It was suggested that the process be waived and that the current Co-chair, Latorya Greene remain in place. The current Co-chair will think about it and let the CPG know by the end of the week.

3:45 p.m. – 4:00 p.m.

Public Comments – There were no public comments.

Announcements

Derwin Gary – The NAACP will hold its National Conference in Indianapolis October 25th thru October 27th. The preconvention will take place at Light of the World Church in Indianapolis, Indiana on October 17th the theme is: Training FBO leaders on HIV in the Black Church.

MHC of Marion County will hold a Town-Hall meeting on the ACA September 30, 2013 at 5:30 pm at the Julia Carson Center

CHM will hold its Annual Breast Cancer Walk at 10:00 am on October 5, 2013 Marquette Park by the beach.

Adjourned at 3:40pm

***Next Meeting –**

**CPG Retreat, November 4, 2013 thru November 6, 2013
Spring Mill State Park, 3333 State Road 60 E. Mitchell, IN 47446**