

**Washington Syndemic Planning Group Meeting
Notes/Minutes
Date/Time: May 28, 2024 6:00pm – 7:30pm (PDT)**



**Washington Syndemic Planning Group General Meeting
Notes/Minutes
Tuesday May 28, 2024
Virtual Meeting Via Zoom Conference Call**

WSPG Members Attendance:

Name	Present	Away
Ann Mumford	✓	<input type="checkbox"/>
Brigette Young	✓	<input type="checkbox"/>
Christina Jackson	✓	<input type="checkbox"/>
Ella Deverse	✓	<input type="checkbox"/>
Ernest Walker	✓	<input type="checkbox"/>
Howard Russell	✓	<input type="checkbox"/>
James Sammuels	<input type="checkbox"/>	✓
James Tillett	✓	<input type="checkbox"/>
Jsani Henry	✓	<input type="checkbox"/>
Kathleen Wilcox	<input type="checkbox"/>	✓
Lara West	<input type="checkbox"/>	✓
Lisa Al-Hakim	✓	<input type="checkbox"/>

Name	Present	Away
Mario Banuelos	✓	<input type="checkbox"/>
Nia Sipili (Fania)	✓	<input type="checkbox"/>
Monte Levine	✓	<input type="checkbox"/>
Omero Perez	✓	<input type="checkbox"/>
Remy Styrkowicz	✓	<input type="checkbox"/>
Tamara Foreman	✓	<input type="checkbox"/>
Tyrell Jackson	✓	<input type="checkbox"/>
Tanaya Davis	✓	<input type="checkbox"/>
Victor Loo	✓	<input type="checkbox"/>
Walter McKenzie	<input type="checkbox"/>	✓
William Harrison	✓	<input type="checkbox"/>
Yob Benami	✓	<input type="checkbox"/>
Elizabeth Crutsinger-Perry	✓	<input type="checkbox"/>

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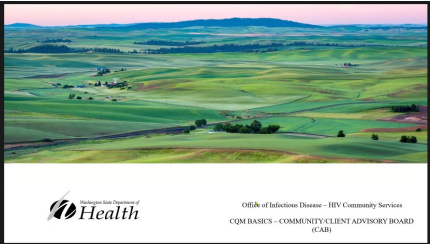

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MEMBERS of the PUBLIC PRESENT: Peter Cleary, Tom McBride, Sara Magnusson, Laurie Sylla,

DOH SUPPORT STAFF PRESENT: Starleen Maharaj-Lewis, Summer Wurst, Genee Grimmett, Elizabeth (Beth) Crutsinger-Perry, Karlos Johnson, Claire Mocha

TOPIC	FINDINGS, CONCLUSIONS & RECOMMENDATIONS	ACTIONS & DUE DATES	PERSON RESPONSIBLE
I. Call to Order/ Welcome by Tri-Chairs and member check and connect (10 mins)	<ul style="list-style-type: none"> • James Tillet led the welcome and call to order and called for the approval of the agenda. • Omero Perez shared the WSPG Community Agreements and how they relate to the work of the WSPG. • Beth shared about the Coastal Community Action Program, (CCAP) will be providing HIV case management services to clients in Thurston, Lewis and Mason counties. • Starleen shared about the caucuses that met last year, and invited new participants that might interested in joining the following caucuses and how we can implement the 13 goals into our conversations with community. <ul style="list-style-type: none"> ○ Transgender/ Gender Expansive: A caucus for all along the gender spectrum to share experiences accessing prevention and care services related to HIV, STIs, and hepatitis C and to provide recommendations for how these services could be more responsive to the needs and interests of their community. ○ HIV Long-Term Survivors (pre-1996) Caucus: We invite those of all ethnicities who acquired HIV prior to HAART (1996) to join to share experiences accessing prevention and care services related to HIV, STIs, and hepatitis C and to provide recommendations for how these services could be more responsive to the needs and interests of their community. ○ People who use or have used drugs: a space for people with current and/or past experiences with drugs to share experiences accessing prevention and care services related to HIV, STIs, and hepatitis C and to provide recommendations for 		James, Omero, Beth, and Starleen

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	<p>how these services could be more responsive to the needs and interests of their community.</p> <ul style="list-style-type: none"> ○ People impacted by mental health diagnosis or cognitive disabilities: for people living with mental health diagnosis to share experiences accessing prevention and care services related to HIV, STIs, and hepatitis C and to provide recommendations for how these services could be more responsive to the needs of their community. 		
<p>II. DOH Program and member updates (25 mins)</p>	<ul style="list-style-type: none"> ● James Tillet opened introductions to our 11 New Members and the Steering Committee Members: <ul style="list-style-type: none"> ○ Christina Jackson-New WSPG Member ○ Remy Styrkowicz-New WSPG Member ○ Ernest Walker- New WSPG Member ○ Tyrell Jackson- New WSPG Member ○ Tanaya Jackson- New WSPG Member ○ Mario Banuelos- New WSPG Member and Steering Committee Member ○ Victor Loo-New WSPG Member and Steering Committee Member ○ Ella Deverse- New WSPG Member and Steering Committee Member ○ Tamara Lester- New WSPG Member and Steering Committee Member ○ Ann Mumford-New Steering Committee Member ○ Fania Sipili- New WSPG Member and Steering Committee Member 		<p>Starleen and Tri-Chairs</p>
<p>III. WSPG member updates (15 mins)</p>	<ul style="list-style-type: none"> ● A presentation was shared by Karlos Johnson entitled: <u>Clinical Quality Management, (CQM) Basics-Community/Client Advisory Board, (CAB)</u> <div style="display: flex; justify-content: space-around;"> <div data-bbox="552 1143 978 1385">  </div> <div data-bbox="982 1143 1524 1385"> <p style="text-align: center;"><u>Learning Objectives:</u></p>  <ul style="list-style-type: none"> Provide a basic understanding of the purpose of Community/Client Advisory Boards (CAB)s Identify benefits or intended outcomes of Community/Client Advisory Boards (CAB) meetings Discuss QM/QI Resources for sustaining (CAB)s <p style="text-align: right; font-size: small;">Washington State Department of Health 2</p> </div> </div>		<p>Karlos</p>

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CQM Policy Clarification Notice 15-02


Purpose:
This policy clarification notice (PCN) is to clarify the Health Resources and Services Administration Ryan White HIV/AIDS Program expectations for clinical quality management programs. It is the responsibility of the RWIAMP recipient to work directly with their subrecipients to provide overall direction and to implement, monitor and exchange any needed data for performance measure data and/or quality improvement activities.

Scope of Coverage:
RWIAMP Parts A, B, C, and D
Recipients and Subrecipients
<https://hub.hrsa.gov/sites/default/files/hub/Global/CQM/PCN-15-02.pdf>

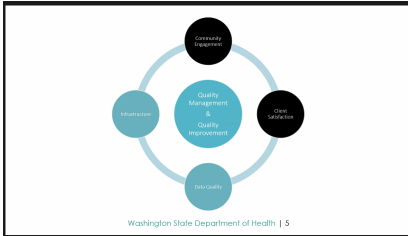
Clinical Quality Management (CQM) Program – Summary

The CQM Program is established to work collaboratively with Ryan White Part B HIV Community Services Programs to support the implementation of services. As a result, utilizing CQM principles can lead to increased patient care, healthy outcomes, and patient satisfaction.

As a Ryan White Part B Recipient, DOH oversees the implementation of Quality Improvement activities for all agencies receiving Part B funding for HIV treatment, care, and supportive services.




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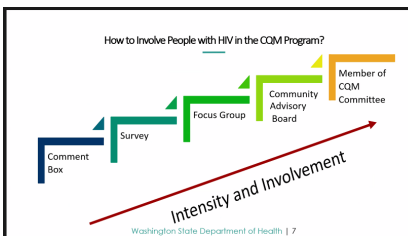
Community Engagement & Client Satisfaction

Examples:

- Client centered Quarterly Meeting
 - a) Community Advisory Board
 - b) Focus Group
 - c) Steering Committee
 - d) Planning Council
 - e) Lunch & Learn
- Client specific Client Satisfaction Survey's
 - a) Semi-annual or Annual
 - b) Evaluation or Feedback
 - c) Needs Assessment




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Community Advisory Boards - Defined

Community Advisory Board (CAB) - A client-centered advisory board specifically created to increase the involvement of people with HIV. This board reflects the population being served to help ensure that the needs of people with HIV are being addressed by clinical quality management activities.

Also referred as:
Client Advisory Boards
Consumer Advisory Boards
Patient Advisory Boards




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Community Advisory Boards - Benefits

The benefits of patient involvement in quality improvement activities:

- Insight into Patient Experience
- Identify Emerging Issues
- Support
- Transparency
- Link to Community Focus
- Needs Assessments
- Demonstrate Commitment to Patient Voices




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Frequently Asked Questions

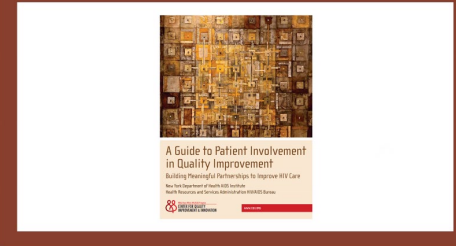


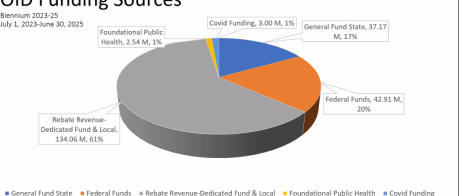
Q: Community Advisory Boards are specifically Persons Living with HIV?
A: Yes. CABs ensure people with HIV are involved in a meaningful way that utilizes their input and guidance to have a measurable impact on patient care. Agencies may have an internal CAB (RW Providers) or external (client centered/diversity).

Q: How can I get involved with a Community Advisory Boards?
A: Clients engaged or receiving Medical Case Management services can receive information from the agency or request information at HLI.QualityImprovement@doh.wa.gov



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	 <p align="center"> Karlos Johnson Clinical Quality Management Coordinator P: (360) 628-1004 Email: Karlos.Johnson@doh.wa.gov ~HIVQualityImprovement@doh.wa.gov~ </p> <p>Questions?</p>	 <p align="center"> Karlos.Johnson@doh.wa.gov </p>		
<p>IV. DOH Budget presentation (30 Minutes)</p>	<ul style="list-style-type: none"> A presentation of the Office of Infectious Disease Funding was shared.  <p align="center"> Washington State Budget Process Washington enacts budgets on a two-year cycle, beginning July 1 of each odd numbered year. <ul style="list-style-type: none"> The budget approved for the 2023–25 biennium remains in effect from July 1, 2023, through June 30, 2025, and encompasses State Fiscal Years 2024 and 2025. By law, the Governor must propose a biennial budget in December, the month before the Legislature convenes in regular session. The biennial budget enacted by the Legislature can be modified in any legislative session through changes to the original appropriations. Since the inception of annual legislative sessions in 1979, it has become common for the Legislature to enact annual revisions to the state's biennial budget. These revisions are referred to as supplemental budgets. </p>	<p align="center">Common Terms</p> <ul style="list-style-type: none"> Biennium – A two-year fiscal period. The biennium in Washington runs from July 1 of an odd-numbered year to June 30 of the next odd numbered year. We are currently in the 2023-25 biennium. Fiscal year – A 12-month period used for budget and accounting purposes. The state fiscal year runs from July 1 through June 30 of the following year and is named for the calendar year in which it ends (e.g., July 1, 2023, through June 30, 2024, is fiscal year 2024). The federal fiscal year runs Oct. 1 through Sept. 30. General Fund-State – GF-S refers to the basic account that receives revenue from Washington's sales, property, business and occupation, and other general taxes, and is spent for operations such as public schools, social services and corrections. Control Numbers – At the end of each legislative session an EA (Expenditure Authority) Schedule comes from OFM with total allocation for the Agency for EVERY funding source that Department of Health gets. This is our spending authority. Full-time Equivalent (FTE) – As a unit of measure of state employees; refers to the equivalent of one person working full-time for one year. Rebate Revenue – Revenue generated from EIP Medication purchases that receive pharmaceutical rebates. Non-appropriated funds – Moneys that can be expended without legislative appropriation. Only funds in accounts specifically established in state law as being exempt from appropriation fall into this category. <p align="center">OID Funding Sources</p>  <p align="center"> OID Biennium 23-25 Total Funding \$219.68M </p>		<p align="center">Summer</p>

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	<ul style="list-style-type: none"> • Howard asked about the COVID Funding, and would that decrease going forward--Beth shared that the final funding would end at the end of July, but at the height of the pandemic funding would have been as much as \$5 million. • How concerned are you about proposed changes to 340B and how that might impact on your funding? --Beth shared that we will always be watching 340B dollars, especially in the face of changing drug prices 		
<p>V. Public Comment and other additional updates (5 mins)</p>	<p style="text-align: center;">Five-minute Public Comment Portion of the meeting:</p> <p>Starleen asked what the impressions of the following groups were about the WSPG.</p> <ul style="list-style-type: none"> • Seattle Public Health King County is new to this meeting. <ul style="list-style-type: none"> • Mark Baker shared that he was impressed with the 12 new members and that the meeting was well-organized, very different from the Ryan White Part A perspective. • Laurie Sylla of the AETC is new to this meeting. <ul style="list-style-type: none"> • Shared that the AETC is the training arm of the healthcare workforce and is funded under Ryan White Part E, and that it was a well-run meeting and that it was interesting to hear about the process. • To improve clarity for the group, Starleen posed the question: What are the different categories of Ryan White Funding? <ul style="list-style-type: none"> ○ Part A - Hard Hit Urban Areas. ○ Part A - Planning Councils. ○ Part B - States/Territories. ○ Part B - AIDS Drug Assistance Program (ADAP) ○ Part C - Community-Based Early Intervention. ○ Part D - Women, Infants, Children, Youth. ○ Part F - Dental Programs. ○ Part F - HIV/AIDS Clinical Training. 		

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VI. Closing Thoughts/
Adjourn

Opportunity to share about training and community events. James shared about the 6th Annual Peers Empower Peers Conference:

IT TAKES A VILLAGE

PEERS EMPOWER PEERS

6TH ANNUAL CONFERENCE

ATTN IN PERSON
IN PARTNERSHIP WITH SPOKANE PUBLIC LIBRARY

JUNE 1ST, 2024
10AM- 3:30PM

FEATURING

- ☑ Resource Fair
- ☑ Self-Care Room
- ☑ Makeover Room
- ☑ Workshops
- ☑ Lunch Included

Free to the General Public Register Online

ORGANIZATIONS REGISTER ONLINE **DEADLINE MAY 20TH**

Peersempowerpeers.com/events

FB: @peersempowerpeers

IG: @peersempowerpeers

KEYNOTE
Officer Plunkett

SPOKANE PUBLIC LIBRARY PEERS Empower Peers

Spokane Central Library, WA 906 W Main Ave, Spokane, WA 99201

- Christina Jackson shared about the Substance Use Training for Washington Community Connectors
 - 16-hour training 9-1 pm; <https://wscsupport.org/family-navigator-training/>
 - This training is for parents and family members AND presented by parents and family members of a person with a substance use disorder (SUD). This is a Healthcare Authority (HCA) approved curriculum created to assist parents, caregivers, and other family members in unde

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Minutes prepared by: Genee Grimmett

Minutes respectfully submitted by: Starleen Maharaj-Lewis

Minutes reviewed and approved by Tri-Chairs: James Tillett, Omero Perez, Beth Crutsinger-Perry