

HUMAN SERVICES ADVISORY COUNCIL MEETING
1 Executive Drive, Morris Plains
Sept. 25, 2018 Minutes

I. Call to Order: The meeting opened at 5:17 p.m. by Mr. Ken Oexle.

Members Present:

Robert Armstrong, HIV/AIDS Advisory Liaison
Jeff Bashe, CoC Exec. Com. Liaison
Linda Csengeto, OTA Liaison
David Hollowell, WIB Liaison
Kenneth Oexle, Chair, Citizen Representative
Joseph Pawelczyk, Citizen Representative
Tom Pepe, Citizen Representative
Michelle Roers, United Way of Northern New Jersey

Also Attending:

Elaine Mico, NJ Division of Child Protection & Permanency
Jane Shivas, Project Self Sufficiency

Staff in Attendance:

Laurie Becker, MCDHS
Shelia Carter, MCDHS
Pat Mocariski, MCDHS
Melissa Maney, MCOTA

II. Welcome and Introductions

All were welcomed and introductions made.

III. Approval of May 22 Minutes –

Motion to approve the May 22 minutes made by Mr. Joseph Pawelczyk and seconded by Ms. Linda Csengeto. All were in favor with no opposition and one abstentions. Motion carried.

IV. Morris County Department of Human Services –

Ms. Becker stated that the RFP for Ruth Davis Drive went out and is due Nov. 2. With fidelity to human services, Morris County is making available nine residences on Ruth Davis Drive in the Township of Parsippany, for lease to established non-profit human services providers, or non-profit providers located outside of Morris County that contractually serve Morris residents.

On Sept. 18, there was a Question and Answer session for the Ruth Davis Drive RFP. Quite a few agencies attended and seemed interested. Mr. Bashe stated that after the Q & A session Mr. Pepe, a group of providers and himself took a tour of the houses.

It seemed some agencies were somewhat put off by the amount of repair work needed. Mr. Bashe wonders if there will be many applications because of their condition. Ms. Becker said she believes most agencies knew the houses were unoccupied and needed renovations. The agency leasing the houses will need to do the inside work and the county will do most of the outside work. This is a nice opportunity for the county to lease with an agency or agencies. The agency will have to find funding for renovations, services, staffing, etc. The houses are in a great location.

The Morris Advisory Leadership group will review all applications received and provide recommendations to the Freeholders. The Leadership group consists of Chairs of all the Human Services Advisory Boards and the CoC Executive Committee Chair. With the Unified Funding approach, this Leadership group can make decisions to maximize county resources. This can be a collaborative proposal or not. The county is looking for a strong partner that has a history of successfully serving Morris County.

V. New Jersey Department of Human Services – See attached report

New Jersey Division of Developmental Disabilities (DDD) – No Report

VI. New Jersey Department of Children & Families – Division of Child Protection & Permanency (DCP&P) - Ms. Elaine Mico

The summer was slow and there was an increase in cases in October due to school openings. In October there were 189 referrals compared to the average of 130. They are working on tools to help families. They are also looking at including fathers in case management.

VII. Staff Reports – Ms. Becker

Navigating Hope had its soft start. Family Promise staff member Ms. Maria Fadali will join Hope One and shadow them. She will work with Hope One until the Navigating Hope vehicle is ready. OTA staff person is also on board as well as Family Promise Social Worker, Ms. Ashley Reid. Navigating Hope will compliment Hope One and offer more OTA type services. There has been a lot of discussion and there are still many things to be determined. They would like to get a retired cop to be the van driver. They have some funding for emergency shelter nights for the winter. Once Navigating Hope is out on the road its roll out will be promoted.

Ms. Carter –

The State HSAC meeting was Friday. Due to recent hurricanes, there was a presentation and big push on emergency preparedness. Morris County has a good system established. Each of us need to be prepared and have a plan. Morris County is fortunate to have the Mennen Arena, a large facility, where people can go. The Office of Emergency Management has a registry ready for those in the county and for those with special needs. If you register, you can get calls and alerts. If you are interested in registering for “Alert Morris” emergency notification system, go to

<https://oem.morriscountynj.gov/alerts/>.

Perhaps the Office of Emergency Management can come to present on this.

Discussion and updates on the Medicaid system. There is additional funding to assist those with diabetes. They are expanding family planning benefits and removing some restrictions. Medicaid is offering packages that are more complete and they have added new services. Restrictions on some drugs have been lifted. Individuals will not have to wait for Medicaid enrollment and there is a push to get enrollment in Family Care. Applications can be submitted on line. Those that are not eligible can apply for low cost insurance. Open enrollment is Nov. 1 – Dec. 15. Enroll at www.healthcare.gov or call 1-800-318-2596.

Push to encourage individuals to apply, at any times, for low cost health coverage at NJ Family Care (www.njFamilyCare.org or call 1-800-701-0710). For people not eligible for NJ Family Care due to income they can go to the Health Insurance Marketplace, open enrollment is November 1 to December 15, 2018. May apply online at www.healthcare.gov or call 1-800-318-2596.

Consider if you want to remain on the board for next year or not and notify Ms. Carter. Anyone that has been on the board for six years needs to take a year off. Most currently on the board can continue to serve. We need you and value your service.

VIII. Status of Immigrant Children in Morris County – Presentation Postponed

IX. Subcommittee Reports – Program Review Committee

Mr. Oexle asked anyone in conflict with CAP or Social Services for the Homeless funding leave the room. Ms. Csengeto, Ms. Maney and Ms. Shivas excused themselves. Mr. Tom Pepe made a motion to begin the closed session of the meeting and Mr. Joe Pawelczyk seconded the motion with no opposition and no abstentions. The meeting closed at 5:26 p.m.

Mr. Bashe made a motion to return to open session at 5:45 p.m. There was no opposition and no abstentions. Ms. Csengeto and Ms. Maney returned to the room. Mr. Oexle asked anyone in conflict with GIA funding leave the room. Mr. Tom Pepe and Ms. Michelle Roers left the room. Mr. Bashe made a motion to begin the closed session of the meeting and Mr. Joe Pawelczyk seconded the motion with no opposition and no abstentions. The meeting closed at 5:48 p.m.

Mr. Jeff Bashe made a motion to return to open session at 6:00 p.m. with no opposition and no abstentions. Mr. Tom Pepe, Ms. Michelle Roers and Ms. Shivas returned to the meeting. Mr. Bashe left the meeting.

Mr. Oexle stated that 2019 funding recommendations for CAP, Social Services for the Homeless (SSH) were approved in the closed session. In addition, an OTA SSH subgrant modification and an OTA ESG subgrant modification were approved in closed session.

X. Planning – Child Care (Voucher System Update) – Submitted by Rebecca Sherrod

- There is no waiting list for childcare subsidies. Serving all eligible applicants and receive approximately 30+ new applications a week.
- We currently do not have any openings at any dedicated voucher centers.
- The following centers are centers that have Dedicated Voucher Spots throughout Morris County:

Dover Child Care – 50 North Morris Street, Dover NJ 973-366-0277

Early Years – 52 Cooper Road, Denville NJ 973-328-4011

El Primer Paso – 29 Segur Street, Dover NJ 973-361-0880

Flanders Valley Country Day – 6 Bartley Chester Rd, Flanders NJ 973-252-9696

F.M. Kirby Center – 54 East Street, Madison NJ 973-377-4945

Jefferson Child Care– Nolan’s Point Road, Lake Hopatcong NJ 973-663-2704

Little Learner Academy – 30 Old Budd Lake Road, Budd Lake NJ 973-691-9430

Little Learner Academy – 89 Route 46 East, Denville, NJ 973-625-2800

Little Learner Academy – 25 Green Pond Road, Suite 2, Rockaway NJ 973-983-0600

Mt. Olive Child Care – 150 Wolfe Road, Budd Lake NJ 973-426-1525

Neighborhood House – 12 Flagler Street, Morristown NJ 973-538-1229

Parsippany Child Day Care – 300 Baldwin Road, Parsippany NJ 973-334-7286

Roxbury Day Care – 25 Righter Road, Succasunna NJ 973-584-3030

Salvation Army – 95 Spring Street, Morristown NJ 973-539-0543

The Magic Garden – 113 Fern Avenue, Wharton NJ 973-361-4167

These centers hold 350 dedicated voucher spots cumulatively.

There was also a rate increase for the reimbursement rate and the tiered reimbursement went into effect during the first pay period of June. The rate is now tied to Grow NJ Kids ratings.

XI. Youth Homelessness – No Report

**XII. Advisory Committee Reports –
Workforce Development Board – Dave Hollowell
MC Juvenile Detention Center (JDC)**

- Bi-weekly visits by ETS to discuss HSE training, if warranted; work readiness and job training with residents via group presentations and one/one consultations.

MC Youth Shelter (YS)

- Bi-weekly visits by ETS to discuss training/career options with residents, inclusive of HSE certification if warranted.

Alumni Association of the Morris County Drug Court

- On August 29, ETS and staff from the Randolph One-Stop Career Center and Division of Vocational Rehabilitation (DVR), met with Mr. Charles Johnson,

Executive Director to discuss job training/career services for current and past Drug Court participants.

- A resume writing class and mock interview workshop has been proposed for January/February. Follow-up planning meeting scheduled for October 24 and will be attended by a NJ DOL Re-Entry Supervisor from Trenton, NJ.
- NJ DOL Re-Entry and Employment and Training Services will present “*Challenges Facing Ex-Offenders Seeking Employment*” at the Associations’ November 21 meeting.

Job Seeker Services in Morris County Jail

- Discussions are ongoing with MC Department of Human Services to determine integrate work readiness and job search guidance into the jail’s pre-release programming.

Atlantic Health System / Family Health Center of Morristown Presentation

- On September 18, ETS presented an overview on One-Stop Career Center and Employment and Training Services to the Morris, Sussex, Warren HIV/AIDS Advisory Committee and their invited guests.

Free Forklift Certification Training

- A one-day “*Coaching the Lift Truck Operator*” safety training, a nationally recognized certification program, is being offered by the NJ Department of Labor and Workforce Development on Thursday, October 11, 2018 at the Morris County One-Stop Career Center located in Randolph, NJ. To register, please call (862) 397-5600 for additional information. NOTE: Walk-ins will not be accepted and individual must have one (1) year of forklift experience.

Ms. Becker stated that it is very difficult for the folks coming out of the correctional facility to get jobs. OTA workers have been talking about the challenges they are facing. The employee piece is huge. They have discussed working more closely with programs that engage employers to hire individuals with criminal backgrounds. Mr. Hollowell will bring this up at the next Executive Committee meeting. They can provide training and work with Drug Court to help these folks. Those that graduate from Drug Court may be able to have their entire record expunged (related to addictions).

Morris, Sussex, Warren HIV Advisory – Mr. Armstrong

On Tuesday, September 18, the Morris-Sussex-Warren HIV Advisory Committee (Tri-County) met concurrently with the Early Intervention and Retention Collaborative (EIRC) at 435 South St, Morristown.

Kelly Martins was elected Vice Chair and will be servicing as the Acting Chair while Allison Decalzo-Berens, Chair, will be on maternity leave.

Ms. Martins reported that Eric Johnson House, which provides transitional housing to people living with HIV/AIDS, is closing this fall after twenty-five years of service. New Jersey AIDS Services is moving toward a permanent housing model and is looking for a new building to accommodate all their programs and services, which will include the

newly implemented LBGTQ program, which is currently offering training on LBGTQ cultural competence.

The Newark EMA HIV Health Services Planning Council has completed their Priority Setting and Resource Allocation process. The application for the 2019 Ryan White Part A grant is due October 19 by the City of Newark. This includes Ryan White funding for Morris County.

Albert Shurdom provided a presentation about programs at the Mental Health Association of Essex and Morris.

Following the meeting a Lunch and Learn about Career Development was held with a presentation by Donna Buchanan, Director of Employment and Training Services, Morris County.

The next Morris, Sussex, Warren HIV Advisory Committee meeting is scheduled for 11:00 a.m. on November 13 at New Jersey AIDS Services, 3 Executive Drive, Morris Plains, followed by a Lunch and Learn.

The annual Global Conference on HIV/AIDS was held in Amsterdam, Netherlands, in July. Below is HIV data (Morris County, State of New Jersey, National, and Global) included with this report.

New Jersey County and Municipal HIV/AIDS Statistics, 2016

Morris County - 2016

- Persons living with HIV/AIDS: 862 (2012: 775)
- Prevalence rate (per 100,000): 172.6

Essex County – 2016 (*for comparison*)

- Persons living with HIV/AIDS: 9,578
- Prevalence rate (per 100,000): 1201.1

Morris County Public Health Profile Report

Rate of death due to HIV Disease (per 100,000) during 2011-2015

- | | |
|------------------------|-----|
| • Morris County: | 1.0 |
| • State of New Jersey: | 2.9 |
| • United States | 2.1 |

State of New Jersey HIV Data

- Prevalence (number of people living with HIV) in 2015: 35,636
- Number of people living with HIV in 2015, by Race:
45.3% Black | 27.9% Hispanic/Latino | 19.4% White
- Number of people living with HIV in 2015, by Sex:
67.1% male; 32.9% female
- Rate of people living with HIV in 2015 per 100,000 people: 473

New diagnosis

- Number of new HIV diagnoses in 2016: 1,143
- Rate of new HIV diagnoses in 2016 per 100,000 people: 15

Mortality

- Number of deaths of people with diagnosed HIV in 2015: 661

- Rate of deaths of people with diagnosed HIV in 2015 per 100,000 people: 9

Estimated HIV Prevalence Rate Ratios by Race/Ethnicity, 2015

- The rate of Black males living with an HIV diagnosis is 8.5 times that of White males
- The rate of Hispanic/Latino males living with HIV is 4.0 times that of White males
- The rate of Black females living with HIV is 18.5 times that of White females
- The rate of Hispanic/Latina females living with HIV is 6.2 times that of White females

Estimated Percent of Persons Living with Diagnosed HIV, by Transmission Category, 2015

- Male Transmission Categories: Injection Drug Use (23.3%); Heterosexual Contact (14.9%); Male-to-Male Sexual Contact (54.9%); Male-to-Male Sexual Contact & Injection Drug Use (5.3%); Other (1.6%)
- Female Transmission Categories: Injection Drug Use (31.1%); Heterosexual Contact (65.8%); Other (3.1%)

New Diagnoses

- Male Transmission Categories: Injection Drug Use (7.4%); Heterosexual Contact (16.8%); Male-to-Male Sexual Contact (73.7%); Male-to-Male Sexual Contact & Injection Drug Use (1.9%); Other (0.2%)
- Female Transmission Categories: Injection Drug Use (11.9%); Heterosexual Contact (87.3%); Other (0.8%)

Rate of death due to HIV disease 2013-2015 is on the decline

- National rate (per 100,00) 2013: 2.1
- National rate (per 100,00) 2015: 1.9

National HIV data reported by CDC

- Annual HIV infections and diagnoses are declining in the United States. The declines may be due to targeted HIV prevention efforts. However, progress has been uneven, and annual infections and diagnoses have increased among some groups.
- There were an estimated 38,500 new HIV infections in 2015. Among all populations in the United States, the estimated number of annual infections declined 8% from 2010 (41,800) to 2015 (38,500).

Estimated New HIV Infections in the United States by Transmission Category, 2015

- 68% among gay and bisexual men
- 23% among heterosexuals
- 9% among people who inject drugs

HIV/AIDS Diagnoses in the United States, 2016

- 39,782 people received an HIV diagnosis
- 18,160 people received an AIDS diagnosis (Since the epidemic began in the early 1980s, 1,232,346 people have received an AIDS diagnosis)
- Gay and bisexual men are the population most affected by HIV
- Gay and bisexual men accounted for 67% of all HIV diagnoses and 83% of diagnoses among males

- Black/African American gay and bisexual men accounted for the largest number of HIV diagnoses (10,223), followed by Hispanic/Latino (7,425) and white (7,390) gay and bisexual men
- Heterosexual contact accounted for 24% (9,578) of HIV diagnoses
- Women accounted for 19% (7,529) of HIV diagnoses primarily attributed to heterosexual contact (87%, or 6,541) or injection drug use (12%, or 939)
- People who inject drugs (PWID) accounted for 9% (3,425) of HIV diagnoses (includes 1,201 diagnoses among gay and bisexual men who inject drugs)
- By race/ethnicity African Americans & Hispanics/Latinos are disproportionately affected by HIV
- African Americans have the highest rate of HIV diagnoses compared to other races and ethnicities
- African Americans represented 12% of the population, but accounted for 44% (17,528) of HIV diagnoses
- Hispanics/Latinos represented 18% of the population, but accounted for 25% (9,766) of HIV diagnoses
- The population rates (per 100,000 people) of people who received an HIV diagnosis were highest in the South (16.8), followed by the Northeast (11.2), the West (10.2), and the Midwest (7.5)

HIV Diagnoses – United States, from 2011 to 2015

- The annual number of HIV diagnoses declined 5%
- Among white gay and bisexual men, diagnoses decreased 10%
- Among African American gay and bisexual men, diagnoses increased 4%
- After years of sharp increases, diagnoses among young African American gay and bisexual men (aged 13 to 24) stayed about the same
- Among Hispanic/Latino gay and bisexual men, diagnoses increased 14%
- Diagnoses among all women declined 16%
- Among all heterosexuals, diagnoses declined 15%, and among people who inject drugs (PWID), diagnoses declined 17%

Living With HIV and Deaths in the United States

- An estimated 1,122,900 adults and adolescents were living with HIV at the end of 2015. Of those, 162,500 (15%) had not received a diagnosis.
- Young people were the most likely to be unaware of their infection. Among people aged 13-24 with HIV, an estimated 51% didn't know.
- In 2014, among all adults and adolescents with HIV (diagnosed or undiagnosed): 62% received some HIV medical care; 48% were retained in continuous HIV care; 49% had achieved viral suppression (having a very low level of the virus)
- A person with HIV who takes HIV medicine as prescribed and gets and stays virally suppressed can stay healthy and has effectively no risk of sexually transmitting HIV to HIV negative partners.
- From 1987 (the first year HIV was listed as a cause of death on death certificates) through 2015, 507,351 people died from HIV disease. In 2015, 6,465 people died from HIV disease.

Global fact sheet, UNAIDS (United Nations Program on HIV/AIDS)

- 36.9 million people globally were living with HIV in 2017
- 21.7 million people were accessing antiretroviral therapy in 2017

- 940,000 people died from AIDS-related illnesses in 2017
- 77.3 million people have become infected with HIV since the start of the epidemic
- 35.4 million people have died from AIDS-related illnesses since the start of the epidemic

People living with HIV accessing antiretroviral therapy - Global

- In 2017, 21.7 million people living with HIV were accessing antiretroviral therapy, an increase of 2.3 million since 2016 and up from 8 million in 2010
- In 2017, 59% of all people living with HIV were accessing treatment
- In 2017, 80% of pregnant women living with HIV had access to antiretroviral medicines to prevent transmission of HIV to their babies

New HIV infections - Global

- New HIV infections have been reduced by 47% since the peak in 1996
- In 2017, there were 1.8 million new HIV infections, compared to 3.4 million in 1996
- Since 2010, new HIV infections among adults have declined by an estimated 16%, from 1.9 million to 1.6 million in 2017
- Since 2010, new HIV infections among children have declined by 35%, from 270,000 in 2010 to 180,000 in 2017

AIDS-related deaths - Global

- AIDS-related deaths have been reduced by more than 51% since the peak in 2004
- In 2017, 940,000 people died from AIDS-related illnesses worldwide, compared to 1.9 million in 2004 and 1.4 million in 2010

90-90-90 - Global

- UNAIDS and partners launched the **90-90-90** targets which aim to diagnose **90%** of all HIV-positive persons, provide antiretroviral therapy for **90%** of those diagnosed, and achieve viral suppression for **90%** of those treated by 2020
- In 2017, three out of four people living with HIV (**75%**) knew their status; among people who knew their status, four out of five (**79%**) were accessing treatment; and among people accessing treatment, four out of five (**81%**) were virally suppressed

Key populations - Global

- Key populations include: Men who have sex with men (MSM); people who inject drugs; female sex workers; transgender women
- Key populations and their sexual partners account for:
 - 47% of new HIV infections globally
 - 95% of new HIV infections in Eastern Europe, Central Asia, the Middle East & North Africa

16% of new HIV infections in Eastern and Southern Africa

- The risk of acquiring HIV is: 27 times higher among men who have sex with men (MSM); 23 times higher among people who inject drugs; 13 times higher for female sex workers; 12 times higher for transgender women

Mental Health Addictions Services Advisory Board – Ms. Becker

- Ms. Becker is attending a free community based event Sat., Sept. 15, at 9:00 a.m. at Chilton Medical Center, Pompton Plains, designed to promote education about mental health awareness, depression and suicide prevention, and the important of access to mental health care.
- The Morris County library is hosting inspiring and fun-filled Stigma Free events in September to bring together to help eradicate the stigma associated with mental illness and substance use/abuse through creative expression, education and resources. The Library Director, Susan Calantone, is embracing all of this great work. To register for these events, visit <https://LifeCenterStage.com/>. In Morris County 34 out of 39 towns are stigma free as well as many community partners. We have a seamless continuum.
- All are invited to attend “The Legislative Response to NJ’s Opioid Epidemic” breakfast on October 1 from 9:00 a.m. to 11:00 a.m. at the Wyndham Hamilton Park Hotel and Conference Center at 175 Park Ave. in Florham Park. To register go to <https://drugfreenj.org/breakfast> or call (973) 625-1998.
- There will be a Knock Out Opioid Abuse Concert of hope and love on Thursday, October 4 at 6:00 p.m. at Malcom Forbes Amphitheatre at Morristown Medical Center, 100 Madison Ave., Morristown. The concert will feature performances by the winners of the Knock Out Opioid Abuse Songwriters Scholarship Contest. For more information, please see <https://LifeCenterStage.com/>.
- Ms. Rose Brown, Mental Health Association of Essex and Morris County, said a Legislative breakfast will be held on October 26 at 8:30 a.m. at the Park Avenue Pub, 184 Park Avenue, Florham Park. The cost is \$30.
- Ms. Becker stated that she recently attended a Recovery Event at Greystone. The event was primarily for residents. Freeholder DeFillippo was there. She gave a Proclamation to the new CEO, Tomika Carter. Some talked about their recovery.

Council on Aging, Disabilities & Veterans –

The Division is currently working on their 2019-2021 Area Plan Contract with the state.

ADRC reported 809 calls from June-August regarding information and assistance and case management.

Veteran’s office reported 771 calls and 148 veteran office visits, with 109 VA claims completed.

Nutrition project reported providing 93,325 meal from Jun- August.

Committee approved a motion for a Grant in Aid Senior Support Budget Modification for Hope House granting their request to reduce the 2018 level of service, which would reduce funding in the amount of \$37,410.

Committee approved a motion for a budget Modification for a Grant in Aid Senior Support budget modification for Interfaith Food Pantry Home-Delivery Program increasing their Level of service resulting in an increase in funding by \$37,410.

Motion passed to approve funding \$960,987 in Area Plan Contract sub grants, an increase from 2018 where \$870,798 was received from the state and awarded.

Motion passed to approve \$1,117,819 in Grant in Aid funding requests. This is an increase in \$25,000 from 2018, which was a portion of the 2019 Grant in Aid increase.

Youth Services Advisory Council – No Report

XIII. Partnership Announcements

Ms. Carter stated that the Super NOFA (Notice of Funding Availability) was submitted on Sept. 17. This money is mostly for permanent housing/rental assistance.

Morris County has begun the Coordinated Entry process. There is now one list of the homeless maintained through 2-1-1. When a person dials 2-1-1 hotline, they are connecting themselves with a continuum of service providers in Morris County committed to assessing each individual situation and responding accordingly. The system is intended to minimize traditional barriers to shelter and housing services by creating a single point of entry and providing additional support to access as needed. Those in need of shelter and others who are experiencing a housing crisis can make the call to 2-1-1 themselves or go into one of two drop-in centers to get connected to the appropriate housing and shelter resources in the county. This will help the county get a better handle on the homeless situation.

Morris County Housing Authority opened their Section 8 waiting list. Over 700 applications were received in one day. The last time the list opened was in 2012. At that time they received 800 applications over the course of two months. The waiting list is now closed.

XIV. Old Business – None

XV. New Business - None

XVI. Public Comment – None

XVII. Adjourn –

Motion made by Mr. Tom Pepe to close the meeting at 6:47 p.m. Mr. Pawelczyk seconded the motion. The meeting adjourned.

Respectfully Submitted,

Patricia Mocarski
Administrative Secretary