

Meeting Summary

Meeting Information

Date	April 16, 2019
Location	Hope House, 19-21 Belmont Avenue, Dover
Start Time	11:07am

Attendance

Members

Name	Representation	Affiliation
Jennifer McGee Avila	Advisory	Northeast/Caribbean AETC
Tania Guaman	Advisory	Newark EMA Planning Council
Aliya Onque	Advisory	City of Newark, Ryan White
Geri Summers	Advisory	Rutgers University HIV Prevention
Lydia Sanchez	Morris	Family Health Center
Allison Delcalzo-Berens	Sussex	Family Health Center
Johanna Moore	Auxiliary EIRC	Zufall Health Center

Guests

Name	Affiliation
Summer Brown	Family Health Center
Marisol Knox	Catholic Family and Community Services
Ariel Alonso	Catholic Family and Community Services
Robert Armstrong	Human Services Advisory Council
Jaclyn Cruz	Family Health Center
Lisangie Antoniello	Planned Parenthood
Pannell Strawbridge	Community Action Board
Michelle Latona	St. Clare's Services
Christina Baluja	St. Clare's Services
Robert Meredith	NJAS
Ophelia Ledeto	City of Newark, Ryan White

Meeting Summary

Welcome
Delcalzo-Berens called the meeting to order at 11:07am and held a moment of silence. The February 19, 2019 minutes were reviewed. An edit was made to the address for the Family Health Center and a recommendation was made to include a sentence regarding a conversation about soliciting new Non-Ryan White members of the committee. Moore made a motion to approve the minutes with edits. The motion was seconded by Sanchez and the motion passed without comment at 11:12am.
Presentation: MSW 2018 Needs Assessment Findings
Delcalzo-Berens presented the results of the needs assessment completed by the committee in 2018. Providers committed to assisting with Spanish translation of the consumer surveys during future needs assessments and Summers offered use of her agency's electronic survey tool for the next needs assessment. See presentation materials following the meeting summary. In regard to the identified recommendation for a stigma free campaign, Summers noted that there is a stigma workgroup through the NJHPG that can offer outside training.
Workgroup Discussions: Strategies for Improvement

Workgroup 1: Expanding Referral Networks

- Have an agency spotlight at each meeting from a guest invited by members of the committee on a rotating basis.
- Capitalize on service directories from other established organizations such as 211 and NPIN

Workgroup 2: Increasing Access to Bilingual Services

- Indicate languages spoken at organizations in directories
- Use service translation devices, possibly requesting funds through special initiatives
- Ensure all marketing materials, including websites, are translated

Workgroup 3: Improving Interagency Collaboration and Communication

- Create a subcommittee of providers to focus on interagency collaboration and focus on cost-effective collaborative endeavors

These ideas will be discussed in greater depth during upcoming meetings.

NJ HIV Housing Collaborative Focus Group

Baluja facilitated a focus group around housing:

- What are the common barriers to stable housing?: cost, fair market rate is too low for Morris County, lack of affordable housing stock.
- How does your organization address housing needs within community?: increase funding streams, attend advocacy and education events, refer to 211 or directly to housing agencies.
- How does the group address housing concerns that come up at meetings?: Consumers are referred to the appropriate places, the committee members advocate at various levels
- Does your agency participate in your local CoC meetings focused on homeless prevention/housing planning?: Yes all RW funded agencies in the region participate in CoC meetings.

Subcommittee Updates

Community Action Board: Moore reported that the CAB is changing its usual meeting dates and times to accommodate the needs of the chair. The next meeting is planned for May 8th at 5pm at NJAS. The meeting will include a focus group regarding the core services waiver implemented by the City of Newark.

Agency Updates

HIV Prevention: Summers reported that there is a Prevention and Care conference coming up in June. The flyer will be circulated via email.

AETC: McGee-Avila reported that there is an upcoming Day of Learning and an upcoming webinar series. Flyers will be circulated via email.

Zufall: Moore reported that all of Zufall will shut down on April 24 for a full staff stigma-free training. Moore also reported that she is a member of the Ending the Epidemic Task Force and that there is an important survey that all are being asked to complete. The survey will be circulated via email.

Family Health Center: Delcalzo-Berens reported that a new linkage to care coordinator has been hired.

Ryan White: Onque reported that 18 contracts have been executed and 18 more contracts are being processed. She asked providers to start submitting reimbursement reports for March.

Planned Parenthood: Antoniello reported that Planned Parenthood has a team doing HIV education and testing at schools and other community locations.

Newark EMA: Guaman reported that the Planning Council is working on a core services waiver to be able to fund programs outside of the traditional 75/25 split.

Hope House: Alonso reported that there are two new housing programs (HPP and HPRP) and invited all participants to collect flyers about the programs after the meeting.

Adjourn

Moore made a motion to end the meeting with a second from Cruz. The motion passed without comment at 12:37pm.

Regional Needs Assessment 2018

Morris, Sussex and Warren Counties

Needs Assessment Goals

Engage local consumers in service planning.

Engage local providers in coordinated systems planning.

Annual

Objective, data-driven results

Make changes based on data.

Needs Assessment Topic

How are case managers communicating information about mental health and behavioral risks to consumers?

Comparison with population of PLWHA in the region
Heavily concentrated in Morris County
45+
Women
Latino
Exposure category
Even diversity of diagnosis years
Housing
Socio-economic status

Demographics

Family Health Center
Compliance with medical care
Questions focused on barriers to care AND to following through with referrals
Barriers identified by consumers and providers
Lack of transportation
Lack of health insurance
Not identified as barriers by consumers but identified by providers
Mental illness
Stigma

Infectious Disease and Medical Case Management

Consumers in the region place a large amount of trust in their MCMs.
The relationship between the consumer and the MCM is integral to the consumer psycho-social success and development.
Potential of provider bias that consumers do not follow through with referrals.
Lack of referral to non-RW provider agencies.
Lack of problem solving outside of provider agencies or RW network when a referral or resource is unknown.
Providers are screening and assessing in line with or better than NEMA standards of care.

Access to Mental Health and Substance Use Support

Low level of need for sexual health or injection drug health prevention messaging and information

MCMs engage consumers in conversations about behavioral interventions even when consumers do not feel that it is a need

These conversations were successful in helping consumers feel confident to make healthy choices

Case Manager Assistance with Behavioral Risks

Recommendations for Improvement

- Additional training for extended staff of larger agencies
- Placement of mental health support, counseling or support groups in more prominent locations in waiting rooms
- Initiation of stigma-free campaign
- Additional training about behavioral health issues

Recommendations for Improvement

- Expansion of provider relationships to increase referral networks
- Inclusion of additional support groups and bilingual counselors
- Additional interagency collaboration and communication
- Offer mental health education to consumers