INLAND EMPIRE HIV PLANNING COUNCIL

Riverside/San Bernardino California Transitional Grant Area

Maxwell Ohikhuare, MD	**Gregory French**
County Health Officer Co-Chair	**Community Co-Chair**

Standards Committee

Thursday, March 14, 2013
12:30pm-2:00pm

Meeting Location	Teleconferencing Location
SB County Public Health	Desert AIDS Project
173 W. 3rd Street, 6th floor	1695 N. Sunrise Way
San Bernardino, CA 92415	Palm Springs, CA 92262
(909)693-0750	(760) 323-2118

These facilities are in full compliance with the Americans with Disabilities Act of 1992.

Agenda

12:30pm	**1. Call to Order** ▪ Roll Call* ▪ Introductions	T. Evans
	2. Public Comments[1]	Members of the Public
	3. Members Privilege	PC Members
	4. Approval of Agenda[2]	T. Evans
	5. Approval of the Minutes[2] 5.1 Minutes of February 14, 2013	T. Evans
	6. Old Business[2] 6.1 Review Standards	T. Evans
	7. New Business 7.1 Review Provado EIS Summary Report (A-1)	T. Evans

8. Public Comments

9. Members Privilege

PC Members

10. Review of Action Items

PC Staff

11. Agenda Setting for Next Meeting
April 11, 2013 at DAP

PC Members/ T. Evans

12. Roll Call*

PC Staff

2:00pm   **13. Adjournment**

T. Evans

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[2] The agenda item may consist of a discussion and a vote. Public comments can be made prior to each Planning Council vote.

* Members must be present at both roll calls to receive credit for meeting attendance.

** Attachment was not available at time of printing, but will be available at the meeting.

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EIS Program Evaluation Report

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Background

PROVADO The Group (Provado) was hired by the Ryan White Program (RWP) to conduct an evaluation of the Part A-funded EIS services provided by Ryan White providers in the Riverside/San Bernardino, CA TGA.

The objectives of this evaluation were:

- Evaluate the effectiveness of the current program
- Identify potential barriers and preparation necessary to transition to an updated EIS program
- Determine the training necessary for providers to transition to a newly designed program

Methods

During the months of November and December 2012, Provado conducted evaluations via telephone interviews. Participants included: RW Program Staff, Planning Council Members, and RW Provider Staff from the five EIS-funded providers across the TGA. Provider participants included staff of all levels from upper-management to front-line staff. A total of 23 interviews were conducted.

Items of Note

Common themes emerged as listed below:

- There are varying degrees of expertise among providers
- There are varying degrees of knowledge and support by upper-management of different agencies
- The measurement focus has been on number of contacts vs. successful outcomes
- PC members indicated a willingness to dedicate necessary funds to adequately support EIS in future program years in light of the EIIHA mandate.

Overview of Suggestions

Suggestions from Provado are listed below:

- Implement of EIS best practices demonstrated by various TGA providers
- Standardize the EIS programs across the TGA (models and data collection)
- Implementation of specific outcome measures to effectively assess the goals and success of the program

Actions

Actions have been identified based on the findings and recommendations of Provado. See the table below

	Topic	Suggested Action
Communication		
1.1	Provider-Provider	Convene regularly scheduled meetings to receive updates on RWP and PC and encourage communication and collaboration.
1.2	Provider-PC	Develop and implement a standardized reporting program: what to report, how to record, how to retrieve, how often
1.3	RWP-Provider	A) Design the EIS program per the "elements of successful programs" and involve everyone in the design process B) Utilize best practices C) Share the latest EIIHA Plan with providers and PC
Quality Management Monitoring / Outcome Measures		
2.1	CQM Plan	Update plan and include measures for EIS: informing, connecting and possibly LIHP linkage success
2.2a	HIV Unaware	Achieve and maintain a 1.1% positivity rate for HIV testing and counseling
2.2b	HIV Unaware	Connect 90% of newly diagnosed clients to medical care within 90 days of diagnosis
2.2c	HIV Unaware	Retain 95% of clients who are newly linked to medical care for at least one year
2.3a	Unmet Need	Connect 90% of unmet need to medical care within 45 days of initial successful contact
2.3b	Unmet Need	Conduct "Barriers to Care" assessment on 100% of unmet need who are successfully contacted
2.3c	Unmet Need	Retain 95% of clients that are newly linked to care in medical care

Next Steps

Provado is currently drafting a proposal for Phase II of the EIS project that will include a data gathering, monitoring, and reporting system for the TGA. Phase III may include assistance related to training and sharing best practices for outcomes improvement.

EIS Evaluation - Key Informant Interview Questions

PLANNING COUNCIL MEMBERS (3)

1. Introduction
2. Re-visit Purpose of Call
3. Questions:
    a. Thinking back to the first year that Early Intervention Services (EIS) funding was discussed by the Planning Council, what issues were the focus of discussions regarding why it needed to be funded?
    b. Has the intent of the EIS program changed since it was first funded? What are the current expectations of the program?
    c. (Read EIS Definition to KI) Given this definition and the reasons the program was funded by the Planning Council, in your opinion, what are the benefits for clients of a well-funded and well-executed EIS program?
    d. With the intent and benefits of the EIS program established, what sort of reports or updates do you feel the Planning Council needs to continue to evaluate the success of the program? How frequently should these reports happen?
    e. (Refer to EIIHA from Part A Grant) Given that the Grantee has committed EIS funding to fund the EIIHA program, which is required by HRSA, how comfortable are you with the EIIHA requirements and the resources being dedicated to them?
    f. Do you feel the Planning Council needs a debriefing by the Grantee on the scope and intent of the EIIHA program for 2013?

AGENCY PERSONNEL (15)

(U=Upper Management, M=Mid-Level, F=Front Line)

1. Introduction
2. Re-visit intent of call
3. Questions:
    a. How well do you understand the current intent of EIS funding? (UMF)
    b. Please describe your agency's EIS program. (UMF)
    c. What were the goals and objectives that were set for your agency for the EIS program? (UM)
    d. What sort of technical assistance/support for EIS services has your agency requested and/or received from the Grantee? (UM)
    e. Describe your average day providing EIS services. (F)
    f. How does your agency monitor services provided and expenditures requested for EIS programming? (U)
    g. How often does your agency have leftover EIS funding? (U)
    h. What is a "unit of service" for EIS at your agency? (MF)
    i. How do you document a "unit of service" for EIS at your agency? Include all documentation sources, including hand-written or ARIES entries.(MF)
    j. Have you heard about the proposed new focus of EIS in 2013 to fund the Early Identification of Individuals with HIV/AIDS (EIIHA) program?
    k. If you have heard of it, how comfortable are you with implementing EIIHA at your agency on 3/1/2013?
    l. What sort of training would most benefit your agency and staff in order to prepare for EIIHA services?

INLAND EMPIRE H.I.V PLANNING COUNCIL

Maxwell Ohikhuare	**Gregory French**
County Health Officer Co-Chair	**Community Co-Chair**

Standards Committee
Thursday, February 14, 2013
12:00pm-1:30pm

Meeting Location	Teleconferencing Location
Human Social Services	Desert AIDS Project
150 S. Lena Rd.	1695 N. Sunrise Way
San Bernardino, CA 92415	Palm Springs, CA 92262
909-693-0750	(760) 323-2118

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Minutes

Members: B. Contreras, T. Evans, P. Hagan, L. White, D. Wahl, D. Huntsman, B. Orr
Guests: B. Flippin, A. Ziven, G. Gonzales, C. Harris, L. Lopez
Staff: A.Fox, M. Hoze

12:39pm	**1. Call to Order** ▪ Roll Call* ▪ Introductions	T. Evans
	2. Public Comments[1] **None**	Members of the Public
	3. Members Privilege **None**	PC Members
	4. Approval of Agenda[2] **Motion/Second**: D. Wahl, P. Hagan **Motion Carried**.	T. Evans
	5. Approval of the Minutes[2] 5.1 Minutes of January 17, 2013 **Motion/Second**: D. Wahl, P. Hagan **Motion Carried**.	T. Evans
	6. Old Business[2] • SACH Dental provided a PowerPoint presentation on SACH's mission, services provided, and dental	T. Evans

programs available.
- There was detailed discussion about the referrals process from other providers, when determining funds already used.
- There was detailed discussion on the purpose of consumer signature on the treatment plan.
- Committee discussion on the difference between established dental patients vs. new patients.

7. New Business

8. Public Comments
NONE

T. Evans

9. Members Privilege
NONE

PC Members

10. Review of Action Items
Staff Will:
1. Make copies of Provado Summary for committee members
2. Agendize developing framework tool for March meeting
3. Request interview questions used by Provado for the EIS survey
4. Find out what RWP timeline is with Provado

PC Staff

11. Agenda Setting for Next Meeting
March 14, 2013

PC Members/ T. Evans

12. Roll Call*

PC Staff

2:05pm ### 13. Adjournment

T. Evans

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