

Philadelphia EMA HIV Integrated Planning Council
Prevention Committee
Meeting Minutes
Wednesday, January 24, 2018
2:30-4:30 pm
Office of HIV Planning

Present: Mark Coleman, Dave Gana, Gus Grannan, Clint Steib, Leroy Way

Excused: Jen Chapman, Loretta Matus

Absent: None

Guests: None

Staff: Nicole Johns, Briana Morgan, Stephen Budhu

Call to Order/Introductions: C. Steib called the meeting to order at 2:36 pm. Those present introduced themselves.

Approval of Agenda: C. Steib presented the agenda for approval. **Motion:** L. Way moved, G. Grannan seconded to approve the agenda. **Motion Passed:** All in favor.

Approval of Minutes: C. Steib presented the minutes for approval. **Motion:** L. Way moved, G. Grannan seconded to approve the December 13, 2017 minutes. **Motion Passed:** All in favor.

Report of Chair: C. Steib stated L. Matus apologized for her absence. C. Steib gave a short debrief of the state HPG's January meeting. C. Steib stated he is a member of State HPG and also its Evaluation subcommittee. He explained the State HPG met in January over the course of 2 days and they discussed PrEP and membership recruitment. During the first day the committee discussed PrEP implementation in Pennsylvania. The committee discussed some of the barriers to access of PrEP, and C. Steib noted the differences between rural and urban perspectives pertaining to access. The committee also discussed what were some plausible methods for PrEP marketing and media advertisement.

During day 2 the committee discussed membership recruitment. C. Steib stated there were 6 vacant seats on the state HPG and they were looking for new members. He explained there is an application process much like the HIPC membership application. G. Grannan asked if there are geographic location requirements for membership. C. Steib stated no there is not, but the Philadelphia region was gravely underrepresented. N. Johns stated M. Ross-Russell and she have attended the state HPG meetings and usually there not that many members from the EMA. C. Steib commented there were only 3 representatives from the Philadelphia EMA and of the 3 he was the only member from Philadelphia.

Report of Staff: N. Johns informed the committee there are flyers in the conference room about a focus group and encouraged members to spread the word.

N. Johns stated OHP will be hosting an overdose reversal training by Prevention Point on Friday, February 9, 2018 from 12-2 pm. OHP will not be providing lunch or reimbursing for transportation, but all are welcome to bring their own lunch. RSVP is necessary, and those interested can RSVP with her after the meeting. Email links to RSVP will also be sent to HIPC members in the near future.

N. Johns informed the committee the Comprehensive Planning Committee (CPC) is also reviewing the integrated plan. She noted the Comprehensive Planning Committee is working on barriers to retention, and stated they participated in a brainstorming activity in their November meeting. In their January meeting the CPC reviewed and their prioritized ideas. She explained CPC was discussing an HIV testing checklist which ties into the work of the Prevention Committee.

N. Johns stated the Points of Integration work group created a checklist for HIV testers to use at diagnosis about 5 years ago, and the checklist was reviewed by the CPC in their January meeting. She explained representatives from AACO attended the January meeting and shared some of the planning activities AACO was involved with. She noted the AACO representatives agreed with the idea of a checklist and recommended it could be incorporated into the HIV testing protocols.

N. Johns invited the committee to attend CPC meetings, on the third Thursday of every month.

C. Steib noted AACO has some trainings for providers coming up so HIV checklist information could be disseminated there.

Action Items: None

Discussion Items:

- **Opioid Task Force Recommendations**

B. Morgan asked the committee if they have seen the city press conference¹ on Tuesday, January 23, 2018. She stated the press conference was broadcasted on Facebook Live yesterday. She noted the press conference showcased the different viewpoints of law enforcement and the public health perspective in regards to safer injection sites and opioid use. B. Morgan played the video for the committee. After the video the committee discussed their thoughts and reactions. M. Coleman stated he agreed with the SIS model but was concerned it was not youth-focused.

B. Morgan distributed the Opioid Epidemic in Philadelphia Implementation of the Mayor's Task Force. B. Morgan asked the committee if they still were interested in drafting the letter to the Mayor's Task Force, since SIS have been sanctioned in Philadelphia. G. Grannan stated he was in favor of the stance Philadelphia is taking about SIS and added the city was looking at SIS from a clinical viewpoint. He referenced the research (Davidson/Kral) from earlier meetings and stated SIS are exceptionally good at decreasing overdose deaths. He explained the institution of SIS was a step in the right direction but he noted the model does not account for dealing with stigma. He explained the SIS model the city was going to use did not account for how opioids are used for treatment. With this model physicians are deterred from prescribing opioids at all, and he noted this could be harmful. G. Grannan emphasized he was not advocating for opioids. He explained overdose deaths are caused when people can no longer get prescription opioids for chronic pain management and use heroin instead.

D. Gana stated he agreed with the model, and didn't think it was forcing PWID to abstain from usage. He stated he agreed with the model and was curious to see its effectiveness.

M. Coleman referenced the handout. A veteran who used opioids for chronic pain management ended up homeless and addicted to non-prescription opiates. He explained homeless veterans was a growing issue in Philadelphia, and suggested this should be presented to the VA. G. Grannan stated in that scenario, the veteran's physicians were pressured to stop prescribing opioids and it caused harm.

1. <https://www.npr.org/sections/health-shots/2018/01/24/580255140/whats-next-for-safe-injection-sites-in-philadelphia>

B. Morgan stated since the city is not directly funding the SIS model there is maybe an issue with an interested organization receiving funding. G. Grannan agreed with B. Morgan and added it was important to find a suitable funding source for the SIS.

B. Morgan reminded the committee Governor Wolf declared a state of emergency for the opioid crisis². She stated someone at the press conference asked the Governor his stance of SIS. The Governor replied he would leave SIS for regions to decide how they were going to handle them. G. Grannan inquired if syringe exchange was discussed. C. Steib replied he did not believe that was discussed. B. Morgan clarified in the press conference the governor did not explicitly mention syringe exchange.

- **Integrated Plan update**

N. Johns notified the committee OHP has received the data for the integrated plan monitoring. She suggested the committee could review the data and make recommendations based off the data. She noted the data could be matched to the data measures in the integrated plan i.e. syringe access vs. the amount of syringe exchanges in the EMA. She stated the committee could review the data points and see if the data points match what they want to measure.

C. Steib stated he felt the integrated plan should be reviewed. He stated in his opinion the committee has moved away from syringe access, and suggested the committee could review the plan and reprioritize their activities. N. Johns agreed, and stated the committee could work plan activities for the integrated plan. She explained the integrated plan was going to be updated in September 2018.

- **Debrief on PrEP Work Group**

C. Steib stated he attended the PrEP Work Group's January meeting. He explained the work group was looking for a HIPC member to chair the meetings. He suggested L. Matus and he may be able to chair the meeting for the interim, but the work group is actively looking for a chair. In the January meeting the work group briefly reviewed some of their previously recorded ideas. Members were given the opportunity to vote on ideas they felt strongly about, but votes were not tallied due to time constraints. He noted in the next meeting C. Conyngham and E. Aaron would prioritize ideas based on number of votes, and then present them to the work group. He added the conversation was spirited but did not necessarily align with the work of the Prevention Committee.

C. Steib stated he was not able to attend the PrEP Work Group's November meeting. D. Gana stated in the November PrEP work group meeting the group divided into smaller groups and brainstormed answers to 6 questions:

1. What ideas do you have to improve access to PrEP in Philadelphia including insurance and medical coverage for labs and visits?
2. What ideas do you have to improve community outreach and education around PrEP?
3. What ideas do you have to improve provider awareness, education, and prescribing PrEP?
4. What messages would you want prioritized for education around PrEP?
5. What ideas do you have to improve HIV/STI screening and testing and linkage to PrEP care in Philadelphia?
6. What ideas do you have to improve PrEP roll-out in Philadelphia?

He stated the small groups were given the opportunity to answer all questions and then network at the end of the meeting. He explained the recorded ideas were presented to the work group in the January meeting.

G. Grannan stated he was troubled by the demographics of the PrEP work group. He explained in the work group there were only a few HIPC members and collectively only 3 members of the Prevention

2. <https://www.governor.pa.gov/governor-wolf-declares-heroin-and-opioid-epidemic-a-statewide-disaster-emergency/>

Committee across the 2 meetings. He expressed his concerned about community representation at the work group meetings.

C. Steib stated there was great attendance at the work group but asked if there a way to recruit some of the work group members to join the Prevention Committee. N. Johns suggested recruitment could be brought up at the next PrEP work group meeting. C. Steib agreed and suggested in the next meeting an agenda item could be recruitment. He suggested a member of the Nominations Committee could attend to talk about HIPC recruitment.

The committee shared their opinions about the PrEP Work Group's first two meetings. The consensus was the committee felt the PrEP Work Group's work did not fit into the integrated plan, and the group was not representative of the community. The committee felt the work group should reevaluate its purpose in the upcoming meetings. The committee also expressed concern that a lot of time was devoted to networking, which is not a community planning activity.

B. Morgan suggested the committee should explore ways to get providers to recruit individuals who they serve to add more community input. The committee decided to continue this discussion at the next meeting due to time constraints.

Old Business: None

New Business: None

Research Updates: None

Announcements: None

Adjournment: Meeting adjourned by consensus at 4:36pm.

Respectfully submitted by,

Stephen Budhu, Staff

Handouts distributed at the meeting:

- Meeting Agenda
- Meeting Minutes
- OHP Calendar