

**Philadelphia HIV Integrated Planning Council  
Prevention Committee  
Meeting Minutes of  
Wednesday, October 25, 2017  
2:30-4:30p.m.**

Office of HIV Planning, 340 N. 12<sup>th</sup> Street, Suite 320, Philadelphia, PA 19107

**Present:** Mark Coleman, George Matthews, Loretta Matus, Joseph Roderick, Leroy Way, Melvin White, Robert Woodhouse

**Guests:** Caitlyn Conyngham (AACO)

**Excused:** Jennifer Chapman, Tiffany Dominique, Clint Steib

**Absent:** Gus Grannan

**Staff:** Nicole Johns, Briana Morgan, Stephen Budhu

**Call to Order:** L. Matus called the meeting to order at 2:30 p.m.

**Welcome/Moment of Silence/Introductions:** L. Matus welcomed the Prevention Committee. Those who were present introduced themselves and participated in an ice breaker activity. A moment of silence followed.

**Approval of Agenda:** L. Matus presented the agenda for approval. **Motion: L. Way moved, M. White seconded to approve the agenda. Motion passed: All in favor.**

**Approval of Minutes** (September 27, 2017): L. Matus presented the September 27, 2017 minutes for approval. **Motion: M. White moved, L. Way seconded to approve the minutes. Motion passed: All in favor.**

**Report of Co-Chair:** L. Matus stated the PrEP Work Group email had been sent out to HIPC members.

L. Matus informed the committee a new Request for Proposal (RFP)<sup>1</sup> has been released by AACO. She noted the proposals would be reviewed by January 2018<sup>1</sup>.

**Report of Staff:** N. Johns stated the Consumer Survey Report is in progress, and the goal is to have a presentation in the December HIPC meeting.

B. Morgan stated OHP is working on a new website to reflect integration of the two planning bodies. She explained the new website will include an HIV resources inventory, an update to the Epi Profile, and new social determinants of health maps based on new census data. She explained the new website will be designed with ease of use in mind, and she will seek feedback from HIPC members.

N. Johns informed the committee that building management has requested that no one smokes in front of the building or by the side entrance.

1. This is in reference to the City of Philadelphia's RFP for more information visit <http://www.phila.gov/rfp/pages/default.aspx>.

**Action Items:** None

**Discussion Items:**

- Objective 1.2.3

N. Johns asked the committee to review excerpts from the HIV Integrated Plan 2017-2021. She stated the excerpt pertained to drug use and the opioid epidemic in the EMA.

She reminded the committee Strategy 1.2.3 was to ensure equitable access to syringe access services, substance use treatment and related harm reduction services. She noted this strategy was broad and suggested the committee dissect the strategy into smaller sub categories. N. Johns suggested the committee could make recommendations to HIPC about expanding access to harm reduction services. N. Johns noted the Comprehensive Planning Committee was also reviewing the integrated plan. She suggested the Prevention Committee could share their recommendations/ideas with the Comprehensive Planning Committee before presenting them to the HIPC.

N. Johns distributed the Mayor's Task Force to combat the Opioid Epidemic Final Report and Recommendations and asked the committee to review the report. She noted there are recommendations especially pertinent to PLWHA. Upon review of the report, M. White shared a personal anecdote about his experience with the opioid epidemic. He emphasized that everyone is connected to the opioid epidemic, and he advocated the committee should review syringe access services and naloxone. N. Johns agreed; she noted the predicted overdose deaths in Philadelphia will be over 1200 for 2017. She explained the integrated plan was written to include these activities and services.

N. Johns asked the committee to divert their attention to the white board in the room. On the board were three questions:

1. How do recommendations relate to interact with HIV care continuum?
2. Where are the opportunities to incorporate the recommendations in the HIV care continuum?
3. How can we design the HIV prevention system/services to best serve PWID and other drug-users?

N. Johns asked the committee if they would like to separate into smaller groups to discuss the questions. L. Matus stated she felt that the committee should discuss the points as one body. C. Conyngham inquired how the Prevention Committee could expand on services that were already in place, as opposed to creating new services. She explained she thought these services should be more inclusive of PLWHA and populations who were vulnerable to HIV. L. Matus asked C. Conyngham if she was inquiring about the Prevention Committee's involvement in planning. C. Conyngham explained she was interested to know if the Prevention Committee worked separately from other committees or planning bodies at the city or health department. She stated the opioid epidemic in Philadelphia is a pressing need, and injection drug-use is correlated to HIV and Hepatitis C. M. White replied the opioid problem was a pandemic rather than an epidemic. He explained the opioid problem was a global issue and Philadelphia was just a microcosm. He stated he agreed with C. Conyngham; the only way to fight the pandemic was to pool resources, and the HIPC subcommittees would need to work together with other groups. L. Matus reminded the committee that they can make recommendations to HIPC.

She noted OHP has helped with planning and analysis of plans from the city and other places. N. Johns informed the committee M. Ross- Russell has been involved with city-wide planning. She explained M. Ross-Russell brings the opinions and recommendations from HIPC and its' subcommittees to the health department and other planning meetings at local and regional levels. N. Johns noted she also agreed with C. Conyngham. She suggested the committee could focus on areas of the Ryan White system where there are opportunities to implement the task force recommendations<sup>2</sup>. N. Johns stated the committee could present their feedback to the HIPC. L. Matus noted the committee would have to look closer at pre-existing services and identify the community stakeholders. M. White inquired who the stakeholders are. M. White proposed the committee should contact neighborhood Pharmacists, since they often had a close relationship with their communities.

N. Johns requested the committee review pages 17-23 of the Mayor's Task Force report. She suggested the committee could review the recommendations made in the report. The recommendations are as follows:

1. Improve health care professional education
2. Establish insurance policies that support safer opioid prescribing and appropriate treatment
3. Increase the provision of medication-assisted treatment
4. Expand treatment access and capacity
5. Embed withdrawal management into all levels of care with an emphasis on recovery initiation
6. Implement "warm handoffs" to treatment after overdose
7. Provide safe housing, recovery, and vocational supports
8. Incentivize providers to enhance the quality of substance use disorder screening, treatment, and workforce
9. Expand naloxone availability
10. Further explore comprehensive user engagement site(s)
11. Establish a coordinated rapid response to "outbreaks"
12. Address homeliness among opioid users
13. Expand the court's capacity for diversion to treatment.

She noted the report had housing recommendations and she stated housing for PLWH is currently being reformed in New Jersey. L. Matus stated she agreed with the recommendations from the report and she recommended the committee should include education recommendations. L. Matus stated the committee should recommend HIV prevention messages are always included in opioid abuse prevention messaging, especially in social media.

N. Johns asked the committee if they wanted to have presentations at HIPC meetings on medication-assisted treatment. L. Matus replied she would be interested in having Prevention Point come, and she added she would like to hear more about safer consumption sites. C. Conyngham suggested HIPC have Narcan training at some point. C. Conyngham explained Narcan training was short and HIPC members can in turn teach their prospective agencies. She stated Narcan was widely available but not enough people were trained on how to administer it. L. Matus asked the committee if they would be interested in having Narcan training. M. White inquired if the training would be public. N. Johns replied yes the training would be open to the public since it would be during a HIPC meeting, which are always public. C. Conyngham commented the inclusion of trainings in HIPC meetings may improve attendance and recruitment prospects.

2. The task force recommendations are in reference to pages 15-25 of the Mayor's Task Force to Combat the Opioid Epidemic in Philadelphia.

At the conclusion of committee discussion N. Johns summarized the committee was interested in the following trainings: Narcan, medication assisted treatment, comprehensive user sites, and syringe access. She suggested doing the training in a series of meetings as opposed to doing all the trainings in 1 HIPC meeting. L. Matus recommended Narcan should be the first training. N. Johns agreed, but she made note it depends on the availability of the training partners. N. Johns noted the training would likely start in January 2018. L. Matus proposed the Prevention Committee should advise the HIPC having HIV prevention education efforts included in messages about opioid use. L. Matus specified the Prevention Committee could start by recommending providers offer HIV testing with Hepatitis C testing when screening for opioid abuse. N. Johns suggested the committee should further review the Task Force report to make recommendations for Ryan White services. L. Matus replied the committee needs to review housing, and she inquired about how to proceed.

N. Johns asked the committee if they had any recommendations or requests for the next two meetings. N. Johns asked the committee if they had any training information needs. N. Johns suggested that G. Grannan can give a presentation/training about safe consumption sites in the upcoming meetings. L. Matus agreed and she added the training should include both safer consumption sites as well PLWHA experiences with them. M. White stated he was in agreeance with L. Matus and he noted the training would be inclusive of access to care and it would address the opioid epidemic. He explained with the training the committee would be actively working on strategy 1.2.3.

L. Matus stated the Prevention Committee will move on with trainings, and suggestions for any city-wide media campaign.

**Old Business:** None

**New Business:** None

**Research Updates:** None

**Announcements:** L. Matus reviewed results from National Latino AIDS Day. She noted there were no new HIV diagnoses during voluntary testing. She thanked the committee for their participation.

C. Conyngham announced the PrEP work group will have its first meeting Wednesday, November 15, 2017 from 1-2:30pm. She informed the committee an email was sent to all HIPC members. She stated the email contained a survey about preferences and availability. She thanked committee members for their participation and noted members were welcome to forward the email to anyone they felt should be part of the work group. She stated feedback was welcome and she has included current feedback for structure of the first work group meeting.

N. Johns announced at the November HIPC meeting there will be a trauma-informed care presentation.

**Adjournment: Motion:** L. Way moved, G. Matthews seconded to adjourn the meeting at 3:23p.m. **Motion passed: All in favor.**

Respectfully submitted by,

Stephen Budhu, OHP Staff

Handouts distributed at the meeting:

- Meeting Agenda
- September 27, 2017 Meeting Minutes
- Integrated Plan pages 20-22, 46-48
- Mayor's Task Force Status Report
- Final Recommendations of the Mayor's Task Force to Combat the Opioid Epidemic  
Reducing Harms from Injection Drug Use & Opioid Use Disorder
- OHP Calendar