

## HIV Planning Group Meeting Minutes

November 2024 Meeting

January 31<sup>st</sup>, 2024

Meeting held in-person and virtually via Microsoft Teams.

In-person meeting held at the Best Western Premier Central Hotel and Conference Center, 800 E. Park Drive, Harrisburg, PA 17111

Because HPG meetings are audio recorded, specific language will only be noted here for:

1. Individuals giving a formal report or specific announcement
2. Individuals requesting to be noted “for the record”
3. Policy and procedure decisions
4. Motions/votes
5. Recognitions, thanks, etc.

**Once approved by the HPG as part of the minutes, all recordings, presentations, and discussions will be available on [www.stophiv.com](http://www.stophiv.com) in the HPG Planning section.**

<u>Time</u>	<u>Topic/Discussion</u>	<u>Action</u>
9:00am	<b><u>Call to Order and Welcome</u></b> Sonny Concepcion and Mari Jane Salem-Noll HPG Community Co-Chair and Division of HIV Disease Co-Chair	Sonny called the meeting to order
9:00am- 9:05am	<b><u>Introductions and Attendance</u></b> <b>HPG Members Present:</b> Sonny Concepcion, Rob Pompa, Gary Snyder, Leah Magagnotti, Rachel Schaffer, Liza Conyers, Shekinah Rose, Natasha Gorham, Shane Cobert, Clint Steib, Michael Witmer, Tammi Butler, Julia Sughrue, Michael Tikili, Michelle Troxell, Andre Ford, Carlos Dominguez, Miguel Rodriguez, Ginger Scaife, Satina Thomas (HOPE/Hamilton Health), Sharita Flaherty, Nicola D’ Souza, Anne Papandreas, Lupe Diaz, Teresa Sullivan (HIV Fight Philadelphia) <b>HPG Members Not Present:</b> , Marci Egel-Guzowski, Stephanie Knupsky, Ella Kaplan, Joe Mannino, Emma Seagle <b>Planning Partners Present:</b> Sharron Goode-Grant & Najia Luqman (Philly Part A Grantee/Philly HIV Planning), John Haines (SPBP-AC), Ike Onukogu (HIV Surveillance), Godwin Obiri (HIV Surveillance), Patrick Nosko (TB Program), Kris King (Office of STDs), Sara Wojciechowski (Office of STDs), Kimberly Sabolcik (MAAETC), Tiana Warner (MAAETC), Jack Eilber (PA Department of Aging), Kaitlin Salvati (PA Office of Vocational Rehabilitation), Sofia Moletteri (Division of HIV Health, Office of Philadelphia)	Role call was taken for HPG Community Members  Any other attendees who wanted to introduce themselves were invited to do so  All attendees were either in-person or online

	<p><b>Planning Partners Missing:</b> Corrections, Department of Aging, Disability Services Agency, Drugs and Alcohol, Health Equity, Medical Assistance, OMHSAS, Education, HOPWA, PA-FQHC, Viral Hepatitis</p> <p><b>Division of HIV Health/Department of Health Staff Present:</b> Mari Jane Salem-Noll, Kyle Fait, Michelle Rossi, Cheryl Henne, Monisola Malomo, Kendra Parry, Rob Smith, Michelle Schlegelmilch, Jon Steiner, Jan Davis, Moira Foster, Maddison Toney, Cameron Schatz, Savannah Runco, Aditi Anand, Jill Garland, Allison Prim</p> <p><b>Guests:</b> Jeremy Sandberg (Penn State/PEHTI), Ken McGarvey, CJ Rosado, Mike Hellman, Michelle Clarke (Medical Monitoring Project), Lou Montefiori (CCN Pharmacy), Lauren Orkis (PA DOH, Viral Hep)</p>	
<p>9:10am-9:30am</p>	<p><b><u>Meeting reminders</u></b></p> <p>Mari Jane Salem-Noll Announcements:</p> <ul style="list-style-type: none"> <li>• The Division of HIV Disease has been re-named to “The Division of HIV Health”.</li> <li>• University of Pittsburgh Purchase Order has not been renewed so the division of HIV Health will be conducting these meetings. DOH has changed the language and line items in the purchase order, hopefully the grant will be approved by the middle of February the purchase order should be approved. Example: Advertisement, IT hardware</li> <li>• The Division of HIV Health received rejection of PO close to the effective date of PO.</li> <li>• They had to start with the revised budget and justified the revised budget and work statement but were rejected twice.</li> <li>• It doesn’t impact the services that were provided. The Division has been meeting internally to decide how to procure services.</li> <li>• They have removed line items from the revised budget. The Division is more concerned about website and advertising and are trying to work around with it.</li> <li>• The contract is usually 1 or 2 yrs.</li> <li>• University of Pitt is fully aware that it’s not a negotiation, if Dept of General services says they are not going to approve the PO there’s no negotiation there.</li> <li>• Master agreement is not the same contract as the ones with regional grants. The documents are very different.</li> <li>• In regard to impact- University of Pittsburgh staff are getting paid but they are just not doing things on our behalf.</li> <li>• The university continues to pay Pitt’s team salaries- PA DOH has not asked them to do any work.</li> <li>• The Division doesn’t have the same capability as Pitt has. Therefore, the Division asked for patience and understanding as they navigate the facilitation and logistics.</li> </ul>	

	<p><b><u>Recap from Previous HPG Meeting:</u></b>  The last HPG meeting was a full meeting that consisted of presentations and topics from HIV testing and HIV CDR. There was a new member selection and orientation on Jan 5, 2024 where they welcomed the new members and provided a walkthrough of travel.</p>	
<p>9:35am- 9:42am</p>	<p><b><u>Approval of November Meeting Minutes</u></b>  HPG  November 2023 Minutes</p> <ul style="list-style-type: none"> <li>• Shane Cobert made a motion to approve the minutes.</li> <li>• Andre Ford seconded the approval.</li> <li>• Shekina has a dispute in the minutes- correction that the HPG decided that announcements will play on a loop on the projector screen the morning of each meeting, as well as having more dedicated time in the agenda for announcement related questions.</li> <li>• Sofia Correction- Planning partner not an HPG member</li> <li>• The minutes were approved unanimously.</li> </ul>	
<p>9:42am- 9:42am</p>	<p><b><u>Agenda Review</u></b>  Sonny Concepcion, HPG Community Co-Chair</p>	
<p>9:42am- 10:22am</p>	<p><b><u>Announcements</u></b></p> <p><i>Blue highlighted items were announcements added by individuals during the meeting and not included in original announcements email</i></p> <p><b><u>Philadelphia Department of Public Health (PDPH)/Division of HIV Health (DHH) Announcements</u></b></p> <p>Sharron Goode-Grant (Philly Part A Grantee/Philly HIV Planning):  Announced it was her last meeting and Naja will be taking over her role.</p> <p><b><u>Bureau of Communicable Disease Update</u></b></p> <p>Jill Garland:</p> <ul style="list-style-type: none"> <li>• As of Jan 22, there has been changes to the Bureau of Communicable Disease.</li> <li>• There will be a new Bureau of Immunization, which was previously under the Bureau of Communicable Disease. <ul style="list-style-type: none"> <li>○ Our Bureau has doubled in size. During Covid, Immunization grew and providers helped the program grow. It was primarily children’s program and now it’s adults program too. They are also seeking state funding. They are allocating vaccines for adults. With Covid, came a lot of</li> </ul> </li> </ul>	<p>All announcements were compiled and sent out to attendees in advance along with supplemental fliers and attachments</p> <p>After questions from multiple members about meeting announcements and materials, the HPG decided that all announcements and meeting</p>

vaccine fatigue. There are people coming for first time from other countries and need vaccines.

- Under the Bureau of Communicable disease now we have the Division of HIV Health, the Division of Tuberculosis and Sexually Transmitted Diseases, the Division of Communicable Disease Field Services, and the Division of Administration and Financial Services.
- There are two divisions of HIV Health for State and Philadelphia. It would be clear that these are separate organizations since one is for State and the other is for Philadelphia.
- Field Services- We received funding to increase the field staff DIS. During Covid we didn't have enough staff to carry the workload. There wasn't enough capacity to handle congenital syphilis, linkage to care and data-to care so that work force has been expanded. We need admin support since there are so many grants so it's good to have that new admin department as well. There's a DIS trainee classification which is one year long and they become DIS

Ken McGarvy:

- Ken asked Jill to reiterate the new divisions within the Bureau of Communicable Diseases, and she outlined the four divisions, and then she spoke about making the Field Staff their own division. necessary because more so than other DOH bureaus this one has a lot of grants and contracts. Ken stated that the addition of field staff was great because it was needed, and Jill explained that they were able to create the disease intervention specialist within civil service and then the DIS trainee position.
- Thanked Division staff for getting the documents out with the announcements. His next issue was the lack of FHCCP's advisory council, and he was curious if this was discussed or identified during the monitoring. Allie replied that FHCCP is looking to start again and to contact FHCCP directly if he was interested in being a part of it.
- Ken wanted a presentation on the learning collaborative.
- Prevention awarded grant and Ken would like a presentation on the budget.
- Under capacity building Ken wants trainers to do street outreach. Kendra outlined the department if meeting with DDAP to possible doing Savage Sister as outreach. Would like a presentation on the Epi new report.

#### **HIV Prevention Update**

- Shekina Question: What is the difference between a Time-Space Cluster and a Molecular Cluster?

materials will be sent out two weeks prior to the meeting going forward.

	<ul style="list-style-type: none"> <li>○ Godwin outlined that time space is the time between cases and for genetic cluster we are looking for people who have the same genetic HIV strains. How many of individuals within a certain time frame have the same HIV sequence. A followed up was asked if it is more data driven purpose. Jon Steiner answered that Epi’s part of that is more data driven, but that there is a team to investigate based on input from providers and others and if necessary additional enhanced services are then offered. Integrated approach from EPI and the prevention teams.</li> <li>○ Jon’s Response: There are additional ways to identify a cluster. For example: Through a provider noticing an increase of case or field staff connecting multiple partners to one situation or partner.</li> <li>● Shane had a question about the HHS taskforce about the increase in the Syphilis cases around the country. This was put in the parking lot since no one from STD was available for comment.</li> </ul>	
10:35am-11:45am	<b><u>HPG Subcommittees</u></b>	
12:00-1:00 pm	<b><u>Lunch</u></b>	
N/A	<b><u>HPG Subcommittees time continued</u></b> It was determined that subcommittees would be concluded for the day.	
1:00pm-1:05pm	<b><u>Subcommittee and Workgroup IHPCP Update Recommendations</u></b>  Stophiv.org website was shared as a resource.	Subcommittee Co-Chairs
1:05pm-1:28pm	<b><u>STD Program Congenital Syphilis Update</u></b> Beth Butler, Division Direction, TB & STD Program (Parking lot questions: What is the Department doing in response to the increase in syphilis and associated task force?) Task force developed by HHS. There has been a significant increase in syphilis. Specifically in young women of reproductive ages from 14-44 years old. In 2023, there were 29 cases of congenital syphilis outside of Philadelphia (9 in Philadelphia). In many of the cases, the mothers did not seek pre-natal care. The largest concern nationally is the shortage of syphilis treatment. DOH put out 2 health alerts and press conferences in regard to congenital syphilis. DOH is currently implementing changes to the communicable disease treatment guidelines- adding recommendations for syphilis testing during first and third trimester. Changing syphilis case report form to include substance use/abuse language and testing recommendations. DOH is also working to promoting syphilis testing for individuals under the age	

	<p>of 44 years old by mailing letters to providers to encourage testing for the risk populations relating to congenital syphilis.</p>	
<p>1:28pm- 1:51pm</p>	<p><b><u>Ad-HOC Committee on Employment</u></b> Liza Conyers</p> <ul style="list-style-type: none"> <li>• Est. in 2019</li> <li>• Goals for the Integrated HIV Prevention and Care Plan: Increase capacity and implementation of vocational development and employment services.</li> <li>• Collaboration with Temple university to conduct employment needs assessment Comprehensive Statewide needs assessment (CSNA) informs the PA vocational rehab state plan and consequently budget and identifies evidence-based practices.</li> <li>• The ad-hoc committee role will assist with developing and disseminating an HIV employment service needs anonymous online survey to key stakeholders, provide input to facilitating focus groups and individual interviews and identify other existing data sources that may help in gathering necessary data.</li> <li>• People who have stable employment can also get OVR.</li> <li>• HIV employment service needs survey: <ul style="list-style-type: none"> <li>• Item 1: What is your current employment status? Options are working full-time, working part-time, temporary/seasonal, gig work, self-employed and not working.</li> <li>• Do you know where to get resources about addressing any health and/or financial barriers to getting or changing your job?</li> <li>• Are you familiar with Skill-up PA? Options are: Yes and I have used Skill-up PA; Yes, but I have not used Skill-up PA and no.</li> <li>• What are the reasons you do not need employment support? Options are: I am happy with my current job, I am retired, I don't need help etc.</li> </ul> </li> <li>• Several employment and job-training related resources are PA Office of Vocational Rehabilitation, Skill-up PA and PA Career Link.</li> <li>•</li> </ul>	
<p>2:51pm- 3:15pm</p>	<p><b><u>Protocol Presentation</u></b> Gary Snyder, HPG Community Member, Erie Department of Health</p> <ul style="list-style-type: none"> <li>• Objectives: <ol style="list-style-type: none"> <li>1. Protocols Work group: Review the work the HPG protocols work group is conducting.</li> <li>2. Protocols Summary: Provide an overview of the current of the current HPG protocols.</li> <li>3. Group Discussion 1: Discuss language used within the protocols and how to deal with differences going forward.</li> <li>4. Group Discussion 2: Discuss the current meeting structure and what constitutes a meeting for attendance.</li> </ol> </li> </ul>	

- Current members of the workgroup are Gary Snyder, Rachel Schaffer, Guadalupe Diaz, Sharron Goode Grant, Andre Ford, Sonny Concepcion and Natasha Gorham.
- Activities done are review current language, suggest changes, lead discussions during HPG meetings to get approval to make modifications.
- Guiding principles: The HPG protocols give us the ability to work in a productive way to achieve the multi-year plan action items.

Section II:

- Creation and Dissolution of HPG
- Creation and dissolution of Subcommittees, Ad Hoc Subcommittees and work groups.

Section III:

- There was a discussion on mission, vision and values of HPG.

Section IV:

- Scope: The broad scope of HPG ties directly to the Continuum of HIV services in PA and as defined by Dept. and Division to Prevent, Test, Link, Treat and Retain/Re-engage.

There was also discussion on Section V to IX.

**How would the group like to deal with HPG language that may not align with governmental or funding source language?**

- The language in protocols are HPGs.
- Use any language as long as it's close to funding. Regardless of the words they choose, language continues to be a battleground. If they want to go the progressive way, they can use the progressive language. It would be specific words that the group struggles with. It would not be every word.

**Is townhall day considered a meeting?**

- The point of townhall is it should not be considered a meeting because there's no subcommittee, no HPG work is done.
- When HPG first started it was about what division does, it will not be a requirement for the members to attend but will be reimbursed if they attend. After 1<sup>st</sup> or 2<sup>nd</sup> townhall, we decided to do HPG business during HPG meeting.
- Townhall meeting is engaging to community but it's not HPG business.

There was a HPG Panel discussion that included Lupe, Liza, Michael Witmer and Sonny. They discussed why HPG is important? What piece of advice they have for the new members?

- Be a voice, take the pertinent information back to the community.

	<ul style="list-style-type: none"> <li>• Know that change is possible. There's diversity of roles to solve the problem, by working together we can make change, things can't work if you don't know how the systems work.</li> <li>• Don't be afraid to ask questions. No one is going to get offended. This is a place where questions are welcome, it often takes a while to get things done, Stigma survey took several years to happen.</li> </ul>	
3:15pm-3:45pm	<p><b><u>HPG Panel: Member experiences, roles, possibilities, &amp; 2023 Accomplishments</u></b></p> <p>Discussed advice for new members and allowed new members to ask any questions.</p>	Panel TBD
3:48pm	<p><b><u>Summary and Dismissal</u></b>          Sonny Concepcion and Mari Jane Salem-Noll          HPG Community Co-Chair and Division of HIV Disease Co-Chair</p>	Sonny adjourned the meeting

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February 1<sup>st</sup>, 2024

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<b><u>Time</u></b>	<b><u>Topic/Discussion</u></b>	<b><u>Action</u></b>
9:00am	<p><b><u>Call to Order and Welcome</u></b>            Sonny Concepcion and Mari Jane Salem-Noll            HPG Community Co-Chair and Division of HIV Disease Co-Chair</p> <p><b>HPG Members Present:</b> Sonny Concepcion, Rob Pompa, Gary Snyder, Leah Magagnotti, Rachel Schaffer, Liza Conyers, Shekinah Rose, Natasha</p>	Sonny called the meeting to order

	<p>Gorham, Shane Cobert, Clint Steib, Michael Witmer, Tammi Butler, Julia Sughrue, Michael Tikili, Michelle Troxell, Andre Ford, Carlos Dominguez, Miguel Rodriguez, Ginger Scaife, Sofia Moletteri, Satina Thomas (HOPE/Hamilton Health), Sharita Flaherty, Nicola D’ Souza, Anne Papandreas</p> <p><b>HPG Members Not Present:</b>, Marci Egel-Guzowski, Stephanie Knupsky, Ella Kaplan, Joe Mannino, Lupe Diaz, , Emma Seagle</p> <p><b>Planning Partners Present:</b> Najia Luqman (Philly Part A Grantee/Philly HIV Planning), John Haines (SPBP-AC), Ike Onukogu (HIV Surveillance), Godwin Obiri (HIV Surveillance), Patrick Nosko (TB Program), Kris King (Office of STDs), Sara Wojciechowski (Office of STDs), Kimberly Sabolcik (MAAETC), Tiana Warner (MAAETC), Teresa Sullivan (HIV Fight Philadelphia), Jack Eilber (PA Department of Aging), Kaitlin Salvati (PA Office of Vocational Rehabilitation)</p> <p><b>Planning Partners Missing:</b> Corrections, Department of Aging, Disability Services Agency, Drugs and Alcohol, Health Equity, Medical Assistance, OMHSAS, Education, HOPWA, PA-FQHC, Viral Hepatitis</p> <p><b>Division of HIV Health/Department of Health Staff Present:</b> Mari Jane Salem-Noll, Kyle Fait, Michelle Rossi, Cheryl Henne, Monisola Malomo, Kendra Parry, Rob Smith, Michelle Schlegelmilch, Jon Steiner, Jan Davis, Moira Foster, Maddison Toney, Cameron Schatz, Savannah Runco, Aditi Anand, Jill Garland</p> <p><b>Guests:</b> Jeremy Sandberg (Penn State/PEHTI), Ken McGarvey, CJ Rosado, Mike Hellman, Michelle Clarke (Medical Monitoring Project), Kaitlin Salvati (OVR), Lou Montefiori (CCN Pharmacy), Lauren Orkis (PA DOH, Viral Hep)</p>	<p>All attendees were either in-person or online</p>
<p>9:10am-9:13am</p>	<p><b><u>HPG Additional Announcements</u></b></p> <p>Blue highlighted items were announcements added by individuals during the meeting and not included in original announcements email</p> <p>Kendra developed a survey that was placed at each table and entered it into the online teams chat: <a href="https://forms.office.com/g/DTk7r11uQa">https://forms.office.com/g/DTk7r11uQa</a></p> <p>Sonny stated that everyone should request a late check-out.</p>	<p>Attendees were asked if they had any additional announcements not covered on the first day</p>
<p>9:13am-9:15am</p>	<p><b><u>Agenda Review</u></b></p> <p>Sonny Concepcion, HPG Community Co-Chair</p>	

<p>9:15am-10:00am</p>	<p><b><u>SOR Grant and Harm Reduction Vending Machines</u></b>          Kyle Fait, Division of HIV</p> <p>Kyle Fait: There aren't any charges to use the vending machine and free of charge, but there may be a code that would be given to individuals to use the machines. Narcan, support resources and fentanyl test strips will be included on the lists of items stocked in the machines. The machines will not be videoing participants.</p> <ul style="list-style-type: none"> <li>• Meeting with regions on Tuesday Feb 7<sup>th</sup>, regions working with providers. We are working on data points for this machine. We are looking to move quickly. Not every single machine is going to be the same and it will tailor to the people it serves. Division provided condoms, there will be conversation with regions on where it would be the best place to have these machines.</li> <li>• Philly has implemented these machines and speak to them about what rules they had to go through.</li> <li>• The items that will be in the vending machine are oral health items, non-perishable drinks, hygiene items, fentanyl test strips,</li> <li>• There's no charge to use the machines.</li> <li>• The people don't have access to the code, they can reconnect if the code expires.</li> <li>• There will not be recordings from what vendors have said.</li> <li>• The machines will stack them as per what's being used most frequently.</li> <li>• Data will drive what is needed the most in the machines. Data will also assist with QI data quality improvement.</li> <li>• As per Leah Magagnotti, the machines in their region are hosted by the Drug and Alcohol commission and positioned at ER's FQHC's where the pharmacy refills the items such as Narcan and Fentanyl strips.</li> <li>• Is the funding source for the vending machine dictating codes to be restricted to people living with HIV? Ryan white funds have to be used for people living with HIV. When we put items in the machine, we have to look at what funds can fund the various items. Some items can be funded by prevention funds.</li> </ul> <p>Teresa Sullivan: The data will drive what is needed the most in the machines. Data will also assist with QI data.</p> <p>Cameron Schatz: SOR Grant Update.</p> <ul style="list-style-type: none"> <li>• DOH is working with DDAP to including HCV and HIV testing.</li> <li>• Bureau of Epi, Lauren Orkis, was primary on project, now Bureau of Communicable Disease taking on role as of November 2023</li> <li>• DOH works with Penn State and the Health Federation of Philadelphia (C-Change)</li> <li>• SOR materials and toolkits are available on stophiv.com.</li> </ul>	
<p>10:00am-10:29am</p>	<p><b><u>HPG Townhall Locations (Follow-up Discussion from July 2023 Meeting)</u></b>          Kyle Fait, Division of HIV</p>	

	<ul style="list-style-type: none"> <li>• Upcoming HPG Townhall locations for 2024-2027. The upcoming Townhall May 2024 will be held at The Woodlands Inn in Wilkes-Barre, PA. This location has the necessary space to hold enough attendees that the meeting can be promoted to the community and includes a bus system nearby.</li> <li>• September 2024 –Altoona (Family Health Council Region)</li> <li>• 2025: <ul style="list-style-type: none"> <li>○ May – Pittsburgh (Jewish Health Care Foundation Region)</li> <li>○ September – Allentown (AIDSNET Region)</li> </ul> </li> </ul> <p>Note: If a venue becomes available in Bethlehem, this will be changed.</p> <p>The DOH HIV Conference will be held in May 2024.</p> <p>Recommendation from HPG member: DOH should partner with Philadelphia DOH so the location can be in Philadelphia to increase attendees in that area.</p>	
10:29am-	<p><b><u>Passing the gavel to the new Community Co-Chairs</u></b>  Sonny Concepcion and Mari Jane Salem-Noll</p> <p>Sonny passed the Gavel to Rob, who will overtake Sonny’s position as Co-Chair.</p> <p>HPG members along with Mari Jane thanked Sonny for his service as Co-Chair and his impact he has in his field.</p>	<p>The HPG decided to move the passing of the Gavel after the break due to Marijane’s early departure from the meeting.</p>
10:35am-10:52am	<p><b><u>Break</u></b></p>	
10:52am-11:34am	<p><b><u>PAs IHPCP: Review of Federal Feedback and Revision Timeline</u></b>  Cheryl Henne, Division of HIV</p> <p>The DOH has been implementing the Integrated HIV prevention &amp; Care Plan since December 2022. The CDC reviewed the plan and provided comments during Summer 2023 that was presented during a meeting in early October 2023. The comments that were made are recommendations for improvement of the plan. Any changes to the plan will be focused on the workplan unless the division deems otherwise. All of the changes to the plan are reviewed by the HPG for the opportunity to comment. Cheryl Henne will include the prioritization of the federal review comments with the minutes. Cheryl Henne review the questions from the HPG Members below:</p> <ul style="list-style-type: none"> <li>• Timeline: There isn’t a strict timeline.</li> <li>• List of recommended changes are presented to the HPG for consensus to be presented to the Division for consideration for approval.</li> <li>• Changes/updates are made annually.</li> </ul>	<p>The HPG decided to move the IHPCP Update presentation to after the AM break.</p>

	<ul style="list-style-type: none"> <li>• Changes to the plan are focused on the workplan, unless the division deems otherwise.</li> <li>• All changes to the plan are reviewed by the HPG for the opportunity to comment.</li> <li>• Next Steps would be to have lists of all proposed changes to the plan be submitted to HPG for review. Division will review and determine any proposed changes from HPG. Approved changes will be drafted into the IHPCP. Updated plan will be redistributed.</li> </ul>	
11:34am-11:38am	<p><b><u>Parking Lot Questions/Concerns</u></b></p> <p>The next meeting is in a different hotel. Kyle stated that the meeting locations will be going back and forth.</p>	
11:40am-12:40pm	<p><b><u>Lunch</u></b></p>	
12:40pm-1:40pm	<p><b><u>HPG Subcommittees</u></b></p> <p>Evaluation</p> <p>Kyle reviewed the 3F Strategy (Pillar 3: Treat)-Development of SPBP Customer Service call line (CSL). This strategy is needed to ensure consistency and efficacy in all calls addressed through the CSL. The topics for the next meeting in May have already been set.</p>	<p>The HPG decided to move the HPG Subcommittee discussion after lunch (12:40pm)</p>
1:40pm-1:47pm	<p><b><u>Subcommittee Summaries</u></b></p> <p>Evaluation discussed the strategy for 3F- went over options for feedback on the CSL. The committee also discussed looking into the purpose of tracking calls for future enhancements.</p> <p>Innovations will go through the process approval and distributions of the aging survey.</p> <p>Eliza stated that she will include demographic information on the workplace survey and explore other ways to collect data in a low-cost channel.</p>	
1:48pm	<p><b><u>Meeting Summary and Adjournment</u></b></p> <p>Michelle Rossi and Rob Pompa</p>	<p>A detailed summary of the meeting will be emailed to all attendees.</p>