



Meeting Minutes

Oregon HIV/Viral Hepatitis/Sexually Transmitted Infection
Integrated Planning Group (IPG)



Committee: Executive

Date: 12/10/14

Number of voting members present: 7 of 9

Number of others/non-voting members present: 2

Agenda item/topic	Key themes in discussion	Outcomes (Decisions or next steps)	Responsible party
Finalize IPG meeting structure for 2015 <ul style="list-style-type: none"> - One key question per meeting - New methods for eliciting ideas and input 	<p>The group reflected on the discussion about the three proposed IPG planning questions presented at the previous IPG meeting.</p> <p>Members agreed that small group discussions help foster participation during IPG meetings.</p>	<p>The group agreed that IPG engagement should focus on three key questions that reflect the largest gaps in Oregon’s continuum of care cascade. Each of the following three questions will be the focus of one meeting in 2015:</p> <ol style="list-style-type: none"> 1) How can we increase HIV testing among people with undiagnosed infection? 2) How can we improve viral suppression among people who are receiving HIV care, but not virally suppressed? 3) How can we address STIs and viral hepatitis among people living with HIV? 	Co-facilitators, Program Design and Evaluation Services
Discuss IPG committee structure for 2015, including:	The group agreed that the original IPG committees are no longer active or needed at this time	Proposed revisions to the IPG policies and procedures will be drafted to re-enforce active	OHA co-facilitator

<ul style="list-style-type: none"> - Continuation of existing model with ad-hoc committees as needed, plus rotating Membership Committee - Future need for the five original committees - Committee chairs' interest in continuing to serve on the Executive Committee as at-large members 	<p>(Membership is the exception). Forming ad-hoc committees as needed should continue to meet the group's needs.</p> <p>The group agreed that IPG applicants and members should continue to receive the message that committee work is expected of all members.</p> <p>The committee chairs present expressed both an interest in continuing to serve on the Executive Committee as at-large members if their committees are discontinued, but also recognized the value in giving other members an opportunity to participate on the Executive Committee if interested.</p> <p>The group discussed the importance of maintaining a diverse Executive Committee that has sufficient representation from community members, from both prevention and care staff and consumers, and from various geographic areas.</p>	<p>participation on at least one IPG committee, but also to allow flexibility. The original IPG committees will remain in the bylaws, but listed as inactive.</p> <p>The policies and procedures will be reviewed to assess whether Executive Committee members should re-apply for the Executive Committee after a two-year term and whether other IPG members should be offered an opportunity to apply.</p>	
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<p>Membership update</p> <ul style="list-style-type: none"> - Six month Membership Committee rotation - Mandatory participation for those selected 	<p>The group discussed continuing challenges related to Membership Committee engagement and efficiency, including time spent orienting new members.</p>	<p>The group agreed to extend the Membership Committee term to one year and to ensure the committee has at least seven members. The policies and procedures will be updated and the IPG will receive an email about this.</p>	
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