HIV Community Planning Council

COUNCIL AFFAIRS COMMITTEE

Tuesday, July 10, 2018 25 Van Ness, 5th Floor Conference Room 3:00-5:00 pm

Committee Members Present: Chuck Adams (Co-Chair), Jackson Bowman (Co-Chair), Ben Cabangun, David Gonzalez, Jessie Murphy, John Paul Soto, Ben Cabangun [E], Michael Discepola [E], Paul Harkin [E],

Committee Members Absent:

Council Members Present: Charles Siron

Others Present: Carmen Ramirez, Kevin Hutchcroft, Nyisha Underwood, Jeremy Tsuchitani-Watson

Support Staff Present: Melina Clark, Dave Jordan, Mark Molnar

Minutes

1. Introductions

The meeting was called to order at 3:05 pm by Co-Chair Adams. Everyone introduced themselves and quorum was established.

2. Review/Approve July 10th 2018 DRAFT Agenda – VOTE

The July 10th DRAFT Agenda was reviewed and approved by consensus.

3. Review/Approve June 12th 2018 DRAFT Minutes – VOTE

The June 12th 2018 DRAFT Minutes were reviewed and approved by consensus.

4. Announcements

- CM Harkin announced: There is a Drug user health webinar next week on Monday and Tuesday that can be watched on Zoom. There will be people participating from across the country.
 - CM Gonzalez added that this webinar is being put together by UCHAPS. It would be great to have people participate.

5. Public Comment

None.

6. Immigration Update

- The Committee reviewed a presentation from AIDS Legal Referral Panel.
- CS Molnar inquired: There are 45 minutes on the agenda for this presentation. What does the group think can be cut down in order to fit into the time allotted?
- CM Gonzalez commented that he went to ALRP's immigration training and enjoyed it very much. The
 most impactful part for him was making sure that providers know how to access ALRP services, know
 what their clients' rights are, and know which places to go that offer immigration services. He noticed
 that many people who attended the training did not have policies in place regarding, for example,
 what to do if ICE came to their workplace.

- He suggested highlighting what people can do to advocate for themselves, as well as what ALRP offers, and how to access those services.
- CM Cabangun suggested keeping the slide on Public Charge. This term is challenging to understand and he finds it very interesting.
- CM Harkin suggested trying to frame the presentation for the Council. The Council is interested in learning how exactly to set up their clients with ALRP. He noted that it is an informative and dense presentation.
- CS Molnar noted that Council Staff can send the entire presentation to the Council, so that it's not lost entirely.
- Co-Chair Bowman inquired: it could be helpful to discuss ICE for the service providers that are part of
 the Council. What are the resources and specific barriers that HIV positive clients face who are
 immigrants to this country, and how can ALRP help them? What barriers do HIV positive immigrants
 face in the system of care?
 - CM Discepola: What about people who are negative, or at risk of contracting HIV? It could be helpful to pull that out a bit from the presentation.
 - CM Cabangun noted that perhaps Public Charge could be a separate discussion.
 - o Carmen Ramirez noted that she can cover this topic relatively quickly.
- CM Murphy noted that the Council already received guidance from DPH about what to do if ICE shows up. Perhaps just a memo would suffice.
- The Committee requested that Carmen cut the presentation roughly in half. She offered to bring the updated slides for a brief review at Steering next week.

7. Carry-Forward Resource Allocation- VOTE

- The Committee considered a motion from Community Engagement regarding carry forward allocation.
- Co-Chair Bowman asked for clarification on the "incentive" vouchers.
 - o CS Molnar clarified that the vouchers are to encourage clients to come to appointments.
- CM Siron asked how much money is left for food.
 - o Kevin Hutchcroft noted that these are rough estimates.
- MOTION: To recommend allocation of unspent RWPA funds from FY 2017-18 in FY 2018-19 as Carry Forward funding to the following:
 - \$200,000 Emergency Financial Assistance/HIPP
 - \$20,000 Ensure Liquid supplemental for providers
 - \$88,881 Client Incentive Vouchers (Grocery/food)
 - \$60,000 Trainings for security personnel
 - o The Committee amended the motion to remove the column "Key Parts of X08 Proposal are NOT Funded," as well as the line showing \$0 funded for the POP-UP Clinic @SFGH.
- VOTE: MOTION PASSES. See column (1) for vote breakdown.

8. Steering Retreat Next Steps- VOTE

- The Committee continued a discussion regarding a next step created at the 2018 Steering Retreat:
 maintaining harm reduction, patient-centered care and trauma-informed care as models for service
 provision; ensuring equity across service categories for all consumers in regards to rights,
 responsibilities, and suspension/termination policies.
- CS Molnar announced:

- At the last committee, the Committee thought it would be helpful to hear from Jeremy Tsuchitani-Watson about the HCAP report, as well as pull data from past Needs Assessments and COLAs. What can the Council do to ensure everything that is noted above? For now, it could be helpful to hear from Jeremy, about any patterns in grievances within service categories.
- Jeremey Tsuchitani-Watson reported:
 - He pulled data from 2016-2018. There were 23 terminations last year. This year, there's only been five terminations so far. In 2016 there were nine terminations. They are relatively small amounts that are spread across different categories.
- CM Murphy inquired: are these the same clients submitting multiple grievances?
 - o Jeremy: Short answer is sometimes. This year there have been 35 unduplicated clients so far.
 - Last year there were 91 unduplicated clients with 135 cases.
- CM Murphy inquired: What is the UDC for the system of care?
 - o Kevin Hutchcroft answered: roughly 7000 for the EMA.
 - CS Jordan added: The people he works with on the Needs Assessment are probably in the hardest 10% to reach. Not all of these folks make it to HCAP, and may even be unaware of HCAP.
- CM Knoble: we were thinking about trends in Service Categories because we noticed the Dental Category came up often.
 - Jeremy: It seems like this category comes up a lot. Just because it's dealt with, doesn't mean it's a grievance or termination. It takes a long time to get this category off this report.
- CM Murphy: Do either of you have any observations of patterns surrounding disparities? Is there a pattern of disproportionate stigma?
 - Jeremy: It depends on the individual so much that he would have to go back and look at the data. He was asked a similar question by DPH regarding trauma informed care.
 - OCS Jordan added: he notices the most cases with folks who experience challenges with mental health, substance use and homelessness. He often hears from substance users about issues around perceived drug seeking, or past drug use. Many agencies ban folks for life.
- CM Gonzalez noted that there should be a focus on the outcome of this conversation.
- Co-Chair Bowman stated that for folks who have unmanaged mental health challenges, the system doesn't seem like it is set up for them.
- CS Jordan noted that the initial part of this conversation is about top down oversight—how can we address issues from a top down policy level?
 - o It's hard to address a small number from a top-down perspective. We hear more and more often that for a small percentage, the system as it is now is not working. San Francisco is also doing very well compared to the rest of the country. Yes, it's a small amount of people, but it's also a small amount of money that could have a lot of change.
- CS Molnar noted that it seems that we are still in the discovery phase. A next step could be addressing specific service categories or mandating something across all service categories.
- CM Knoble noted that going forward, we should think about how to meet the highest need clients where they're at.
- CM Cabangun suggested inviting community members to give input on this discussion.
 - CM Siron noted that this sounds like a Community Forum—what are the next steps to making this happen?

- CS Jordan noted that the Needs Assessment is a key part of gaining community insight to inform Council decisions and resource allocation. It could be challenging to engage the community in a constructive way using a forum.
- CM Discepola suggested talking to different branches about what challenges they're facing with their
 participants. Different branches are doing different things that could be added to the story. This could
 help not only contextualize this, but also show some success stories. He added that he would like to
 see better and more reasonable representation from CBHS.
- CM Knoble noted that they are trying to solve a complex that is too complex to solve. He suggested inviting DPH leadership into the problem and trying to work together to solve this problem.
 - CM Bowman noted that DPH is bigger and has more resources than the Council. They may be working towards solutions that we are not aware of.
- CM Bowman stressed the importance of adapting trainings to be more trauma informed.
- CS Molnar noted that the Council has purview to create a policy that is required across service categories.
 - o Currently there is no requirement to share HCAP findings with program monitors.
 - O CM Discepola noted that often the BOCC doesn't bring anyone from the division with them. Perhaps we could mandate that the BOCC has to bring someone from the division.
- The Committee decided to continue this discussion at the next meeting.

9. Presentation Calendar

- The Committee reviewed and updated 2018 presentation calendar. The following changes were made:
 - o The ARIES update was moved to August.
 - o The San Mateo report was moved to October.
 - As part of the Full Council agenda on July 23rd, the "Component B Update" will now also include an update on DPH's integration efforts surrounding HIV, Hep C and STDs. There will also be time for small group discussions.

10. Next Meeting Date & Agenda Item- VOTE

The next Council Affairs Committee meeting is tentatively scheduled for Tuesday, August 14th 2018 at 25 Van Ness 8th Floor Conference Room from 3-5 pm.

Parking Lot:

• System to monitor the Integrated Plan's objectives.

11. Adjournment

• The meeting was adjourned at 4:55 pm by Co-Chair Adams.

Council Affairs Committee

HIV Community Planning Council
Roll Call: P=Present; A=Absent; E=Excused; L=Leave of Absence

Votes: **Y=**Yes; **N=**No; **B=**Abstain; **R=**Recused (deduct from quorum)

July 10, 2018 roll [1] [2] [3] [4] [5] [6] [7] [8] [9]

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