HIV Community Planning Council

COUNCIL AFFAIRS COMMITTEE

Tuesday, August 13, 2019 25 Van Ness, 8th Floor Conference Room 3:00-5:00 pm

Committee Members Present: Chuck Adams (Co-Chair), Jessie Murphy, Mike Shriver, Charles Siron

Committee Members Absent: Mike Discepola [E], Paul Harkin [A], Dominique Johnson [E], Thomas Knoble [E],

Wayne Rafus [E]

Council Members Present:

Others Present: Kevin Hutchcroft (HHS)

Support Staff Present: Jennifer Cust, David Jordan, Mark Molnar

Minutes

1. Introductions

The meeting was called to order at 3:11 pm by Co-Chair Adams. Everyone introduced themselves and quorum was established.

2. Review/Approve August 13th 2019 DRAFT Agenda – VOTE

The August 13th DRAFT Agenda was reviewed and recommended to be approved due to lack of quorum.

3. Review/Approve July 9th 2019 DRAFT Minutes - VOTE

The July 9th 2019 DRAFT Minutes were reviewed and recommended to be and approved due to lack of quorum.

4. Announcements

• CM Goodwin announced that the RW Grant Application is due August 30th but they usually turn things a few things earlier. Due to the fact that the grant application will be turned in the day of the Summit, CS Molnar is going to get the prioritization exercise completed a couple days before the Summit.

5. Public Comment

None.

6. ARIES Report

- The Committee reviewed the Aries Report from HHS Staff which included:
 - ARIES Team Background
 - Notes on the Data
 - Reporting Period: 3/1/18- 2/28/19
 - Funding Source: All Ryan White Funds and SFDPH HHS General Funds
 - Date of Data: These reports are based on the data in ARIES as of August 7, 2019 and are not reflective of the entire SF system of care or epidemiological data.
 - Total EMA Unduplicated Client Count (UDC): N=7,144
 - o Total EMA to ARIES EMA-primary care

Page **1** of **5**

Q:\General Folder - All Access\Planning Council Committees\2019\Council Affairs\Minutes\FINAL\August 13 2019 CA
Minutes.doc
10/9/2019 5:07 PM

- o Ryan White Eligibility Criteria
- EMA Factoids
- Current Gender for EMA
- o EMA by Current Gender 2011-2019
- o Race for EMA
- Age for EMA
- Federal Poverty Level Percentage for EMA
- Current Living Situation
- Insurance Status for EMA
- EMA ART by Race
- EMA Race by Viral Load
 - CM Murphy inquired about the impact of EPIC
 - CM Goodwin noted that it will take a while to find out if its effective. There is hope that it will be as there is easier tools and ways to collect more nuanced data.
 - CM Murphy inquired about demographics in San Mateo county and asked for more detail.
 - CM Murphy suggested making the "living situation" slide more simplified to look like the rest of the slides
 - CM Shriver suggested adding a trends section as well as noting the ART compliance data. He also asked for different age breakdown to match more closely to the demographics that the Council has been looking at with the Needs Assessment.
 - CM Shriver suggested shortening the Ryan White Eligibility Criteria slide.
 - The committee discussed the "insurance status for EMA" and the need for some caveats about Healthy SF.
 - a. CM Goodwin suggested making the insurance slide into bar graph.

6. Needs Assessment Report

- The committee reviewed the annual Needs Assessment Report from Council Staff which includes:
 Themes:
 - Primary Care
 - CM Murphy inquired about the note that people felt more respected when they had a case manager during appointments.
 - Navigation and case management
 - Benefits
 - Housing
 - Psychosocial Support
 - Safety & Wellbeing
 - Cost of living
 - Conclusions
 - Housing challenges
 - Isolation and need for mental health/psychosocial support
 - Less severe-need population has a need for services
 - Medical needs for an Aging HIV population
 - Benefits/ Navigation
 - Recommendations

- Prioritize of one-time only emergency funds for durable medical equipment (eyeglasses, hearing aids, mobility assistance equipment, and special dental care)
- Increase mental health services specifically to address issues surrounding aging. These
 services should include individual psychotherapy as well as support groups, with an
 emphasis on therapies by licensed staff or significant clinical expertise. These services
 would not be limited to clients with severe mental health diagnosis, but would be
 made available to those dealing with mental health challenges common to the aging
 population, such as depression, anxiety, loneliness and isolation
- Create intensive case management program specific to the aging population, inclusive
 of case managers killed in working with those with complex challenges around both
 medical and benefits, as well as increased mobile peer advocacy.
- The Committee discussed the idea of an Aging COE and if it was important to push for that, or expand aging competency across COE's.
- o CS Molnar spoke about the recommendations and inquired about the language around funding and the creation of new programs and expansion of other programs.
 - CS Jordan noted that these were more philosophical goals, and not intended to change funding sources.
 - Kevin Hutchcroft noted that the committee spoke about making these changes, only if funding were to become available.
- CM Murphy wanted to maintain the power of the recommendations without reallocating funds from other categories.
- o CS Jordan suggested that the recommendations were similar to statements made by the homeless workgroup.
- o CM Siron spoke to his experiences aging with HIV and the need for more support. He inquired about the steps that need to be taken.
- o CM Shriver spoke to the need for the data to be presented but suggested the recommendations be cut or opened up to the larger group for further discussion.
 - CS Molnar noted that the committees have the right to create recommendations for the Full Council to consider
 - The committee spoke about a place and time to have further discussion on recommendations.
- CS Cust inquired if the process of community engagement creating recommendations was standard
 - CS Molnar noted that the recommendation process was standard but they're not always motions. Sometimes the motions relate to carry-forward funding or are used when there is additional funding.
- o CS Jordan spoke about softening some of the language.
- CM Shriver summarized the recommendations and noted that some of points speak to the services competency expansion and some speak to recommendations of service expansion if more money is to become available.
- CS Molnar noted that these items can come to Steering.
- CS Jordan agreed to speak to the Co-chairs from Community Affairs to try and soften some of the language around the recommendations.
- The committee agreed that these recommendations will be brought back to Steering once the language was changed.

7. Presentation Calendar

- CS Molnar read a request for a future presentation by PRC.
- CM Shriver noted that it cannot have any requests for funding.
- The committee agreed to have PRC present in October.

8. Next Meeting Date & Agenda Item- VOTE

The next Council Affairs Committee meeting is tentatively scheduled for Tuesday, September 10th 2019 at 25 Van Ness 8th Floor Conference Room from 3-5 pm.

11. Adjournment

• The meeting was adjourned at 3:50pm 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)

August 13, 2019 roll [1] [2] [3] [4] [5] [6] [7] [8] [9] 1. Ρ **Chuck Adams** 2. Ε Michael Discepola 3. Α Paul Harkin 4. Ε **Dominique Johnson** 5. Ε Thomas Knoble Ρ 6. Jessie Murphy 7. Ε Wayne Rafus Ρ 8. Mike Shriver 9. Ρ **Charles Siron**

Ayes					
Nayes					
Abstain					
Recusal					