

# HIV Community Planning Council

## FULL COUNCIL MEETING

Monday October 24<sup>th</sup>, 2016

1035 Market Street, 3<sup>rd</sup> Floor

San Francisco, CA

3:30-6:30 pm

**HIV Community Planning Council Members Present:** Richard Bargetto, Bill Blum, Jack Bowman, Ed Chitty, Michael Discepolo, Wade Flores, Matt Geltmaker, Dean Goodwin (Co-Chair), Liz Hall, Bruce Ito, Lee Jewell, Darryl Lampkin, Kevin Lee, T.J. Lee-Miyaki, Andrew Lopez, Matthew Miller, Aja Monet, Jessie Murphy, Ken Pearce, Charles Siron (Co-Chair), Gwen Smith, Don Soto, Chip Supanich, Eric Sutter, Laura Thomas, Linda Walubengo (Co-Chair)

**HIV Community Planning Council Members Absent:** Chuck Adams [E], Margot Antonetty [E], Ben Cabangun (Co-Chair) [E], Cesar Cadabes [E], Billie Cooper [E], Cicily Emerson [E], Elaine Flores [E], David Gonzalez [A], Ron Hernandez [E: Proxy Ken Pearce], Ken Hornby [LoA], Eileen Loughran (Co-Chair) [E], Cathy Newell [E], Mick Robinson [E], Stacia Scherich [E]

**Others Present:** Zachary Davenport, Alison Hughes, Kevin Hutchcroft, Noah Lopez

**CHEP Staff Present:** Jose Luis Guzman, Beth Neary

**Support Staff Present:** Ali Cone, Dave Jordan, Liz Stumm

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## *Minutes*

### 1. Call to Order and Roll Call. Introduction of Members of the Public.

The meeting was called to order at 3:44 by Co-Chair Goodwin. Roll was called and quorum was established.

### 2. Review and Approve October 24, 2016 DRAFT Agenda – VOTE

The October 24, 2016 DRAFT Agenda was reviewed, amended and approved by consensus.

### 3. Review and Approve September 26, 2016 and September 2, 2016 DRAFT Minutes – VOTE

The September 26, 2016 and September 2, 2016 DRAFT Minutes were reviewed and approved by consensus.

### 4. Announcements

- CM Chitty announced that he has become aware that it is difficult for the hearing impaired community to find information on PrEP and PEP. He inquired if any Council members had any visual tools for the Deaf community that explains what PrEP is and how to use it.
  - CM Supanich commented that he will touch base with CM Chitty offline.
- Co-Chair Siron announced that Council members need to sign-in to the SF AIDS Foundation building before the meeting.

### 5. Public Comment

- None.

### 6. Council Staff Update

- CS Jordan reported that he handed out surveys of potential training topics for Council members. Trainings will be held in the upcoming months.
- It was determined by the Steering Committee that meeting evaluations will be shared with the Full Council. The overall rating of the September Full Council meeting was an 8.8, which is fairly high but a

little lower than usual. Both of the county presentations had universal approval. The Housing presentation had a mixed response, some members wanted more context as of why the presentation was being presented to the Council.

- Co-Chair Goodwin noted that he will be providing context and guiding questions before each presentation.

## 7. CHEP and HHS Update

- Jose Luis Guzman announced:
- GTZ: SFDPH released 4 RFP's in September and they are due between mid-October to early November. CHEP is working on getting the funding out into the community as fast as possible.
- Mayor's Fix-it Team: CHEP has been asked to participate on the Mayor's Fix-it team by addressing concerns of discarded syringes in specific "hot-spots" identified by the Fix-it Director. As part of this initiative, several CHEP staff have been partnering with SFHOT to clean-up syringes, engage with PWID and distribute disposal supplies during 7AM to 6PM.
- Harm Reduction Training Institute: In collaboration with CBHS, we are contracting with the Harm Reduction Coalition to offer harm reduction trainings to DPH and DPH-funded agencies and staff. We are thrilled to be working with Adam Butler, the Capacity Building Coordinator who has extensive experience in this field. For more info, contact Co-Chair Loughran [eileen.loughran@sfdph.org](mailto:eileen.loughran@sfdph.org).
- National Harm Reduction Conference: The 11<sup>th</sup> annual Harm Reduction conference is being held in San Diego from November 3<sup>rd</sup>-6<sup>th</sup>. Several CHEP staff will be presenting at the conference on our efforts around Syringe Access & Community engagement, Hep C and our Drug User Health Initiative.
- Syringe Disposal Boxes: CHEP staff, in partnership with our funded syringe providers and the Fix-it Director are exploring additional sites to place outdoor disposal boxes. If you have locations that should be included in the assessment, please contact Co-Chair Loughran.
  
- Co-Chair Goodwin reported:
- Ryan White Part A Grant Application: Last week, HHS submitted its Ryan White Part A Grant Application. HRSA Part A grant award have two components: Supplemental and Formula. The Supplemental component is based on the strength of the grant proposal. HRSA granted the SF EMA a score of 99 out of 100 points on its proposal. The strength of our written grant application offsets a good portion of the Formula reduction that we are likely to experience most years.
- Waiver for 75% Cores Services Funding Requirement: The waiver application submitted to HRSA by HHS in June has been approved. The SF EMA is not required to meet the 75% Core Services funding requirement.
- Ryan White Part B One-Time Supplemental Funding Opportunity: HHS has been awarded \$1.3 million to expand and amend services for clients in nine separate programs (Outpatient Mental Health, Hospice, Housing, Transitional Housing, Food, Dental and Medical Transportation). The details of this approved funding is still being in process.
- Upcoming QM trainings: HIV & Aging was held on October 17<sup>th</sup>. Other trainings on De-escalation, Group Facilitation, Implicit Bias, HHS Updated Transgender Best Practices, and Treatment Updates are coming soon.
- Local S.F. Ballot Proposition A: Passed in June of 2016, Prop A will result in \$30 million in infrastructure upgrades to several aging SF DPH Health clinics.
- ARIES Provider Meeting: HHS is holding a training this Thursday, October 27<sup>th</sup>.
- ADAP: The majority of ADAP application backlogs have been cleared. The remaining applications that we were unable to process have received an eligibility extension through October 31<sup>st</sup>.

## 8. Getting to Zero Update

- CM Supanich reported:
- Last winter, he joined the GTZ Steering committee along with David Gonzalez. At the September meeting, the group received a presentation on the SFDPH epi report. There were successes among the white MSM community but GTZ is still struggling to reach the Trans community, Women, African American, Latino and the API community.
- The increase in funding that GTZ received through the Mayor and Board of Supervisors will be used for hiring care navigators. Community organizations will start seeing that funding in late winter.
- There was a panel discussion about linkage, care navigation and retention to care efforts.
- The next consortium meeting is December 1<sup>st</sup> from 6-8 PM at 25 Van Ness.
- CM Harkin inquired if there is a better way for DPH to share data with CBOs. Is there a way for GTZ or the Council to look at other jurisdictions that have better data sharing methods, in order to get people re-engaged in care? CBOs also have more information on people who are more difficult to track, which could help with the cascade.
  - CM Supanich noted that he will find out the legal and procedural policies of sharing data with CBOs.
- CM Miller inquired how heavily centered PrEP is in GTZ efforts. He noted that there have been 2 cases where PrEP has failed due to drug resistance. People in SF are engaging in risky behavior because they perceive they are protected.
  - CM Supanich responded that PrEP is one aspect of prevention efforts in the city. We will be looking at several facets of PrEP, such as the increase in STI rates. PrEP has never had a 100% success rate, due to compliance and the effectiveness of the medication. GTZ is aware of the 2 cases, and if that number should increase we will investigate. The GTZ plan has pieces that address care, retention and reengagement.
  - CM Miller commented that he feels the PrEP campaign should better explain its effectiveness.
  - Co-Chair Goodwin noted that nothing is full proof, but a large percentage of people on PrEP are showing success. DPH is conducting trainings with clinicians that are providing PrEP.
  - CM Discepolo suggested that GTZ put together a work group of providers who are providing navigation services around health care and joint consents.
  - CM Lee noted that PrEP is the most effective biomedical prevention to date. There has been behavioral changes, and the increase in STIs needs to be addressed. We are still early in this, more studies will be conducted and interventions will be developed.
  - CM Discepolo noted that sexually active gay/bi men are recommend to get tested for STI's every 3 months. The community needs to be aware of that and providers need to make their clients aware.
  - CM Chitty commented that from the pool of Kaiser patients on PrEP, we found that there is some difference in sexual behaviors but not a lot. PrEP is working. We recommend that patients on PrEP be tested monthly, so we are catching STI's sooner.

## 9. Policy Update

- CM Jewell reported:
- The CAEAR Coalition Board and Membership meetings were held in D.C. from September 25-28<sup>th</sup>. CAEAR members met with Appropriators and Committee members that are responsible for Ryan White funding to encourage an increase in funding.
- The future of the CAEAR Coalition is a concern. Ryan White funds are a declining part of the overall amount of funding for HIV Care and Treatment, due to flat funding of the Part A grant. This is a concern for major EMA's, but also for smaller EMA's and TGA's where Ryan White funding is their only HIV funding. This is also especially true in States where Medicaid under ACA has not been expanded.

## 10. UCHAPS Update:

- Jose Luis Guzman reported:
- The October Membership meeting was held in Chicago. The UCHAPS CDC project officer provided an update about an Integrated Plan boot camp for CDC and HRSA. This will allow CDC and HRSA to give feedback on the plan as one voice. Feedback will hopefully come out in spring of 2017. They will also be conducting webinars on how to utilize the plan in 2017. The CDC continues to develop joint HIV prevention and surveillance FOA listening sessions.
- AIDS United: The U.S. Preventive Service Task Force is conducting studies on PrEP in order to give it a rating under their guidelines. A good rating would make it easier for insurances to cover PrEP.
- Technical Assistance: There was talk about 4<sup>th</sup> generation HIV testing given by the NY Department of Health and Mental Hygiene. This gave UCHAPS a common terminology on HIV testing and the best algorithm to use depending on what population you are working with.
- The next UCHAPS meeting is in March, right before AIDS Watch.

## 11. CDPH Office of AIDS Update

- CM Hall reported:
- Integrated Prevention and Care Plan: CA's Integrated Plan and the CA Needs Assessment for HIV, were successfully completed and submitted to HRSA and CDC. Within these documents, CADPH and the OA outlines a collective vision of GTZ in California, including 4 Goals and 15 Strategies to lead the state in this direction, and 12 Main Objectives to be achieved by December 2021 to measure progress.
- Ryan White Part B ADAP: ADAP continues to work diligently with the new Enrollment Benefits Manager contractor to develop a work plan to resolve issues in a timely manner. A training and communication plan is being developed and an Enrollment Worker Portal and Training Survey was sent out in September. Based on the feedback from the survey, ADAP Enrollment Worker calls will be held on a monthly basis, and policy and enrollment portal updates will be communicated by email. The ADAP webpage has been updated to enhance communication efforts with enrollment workers and stakeholders during the transition.
- RW Part B HIV Care Program: On October 20<sup>th</sup>, OA will conduct an informational webinar for the public about the HRSA requirement for spending under core medical service categories in Ryan White. OA was awarded Supplemental funding from HRSA. All 25 HIV Care programs will receive additional funding.
- HOPWA: On November 3, 2016, the Care Housing Unit will host an instructional webinar on the use of ARIES for HOPWA data.
- AIDS Medi-Cal Waiver Program: The 2017-21 AIDS Waiver Renewal Application was submitted to the Centers for Medicare and Medicaid Services for review and approval on September 29<sup>th</sup>.
- California Planning Group: The CPG had an in-person meeting on October 11-13 in L.A. Co-Chair Cabangun attended as an alternate for CM Discepola.

## 12. MMP Report

- Alison Hughes presented on the SFDPH "Seroadaptive behaviors and HIV prevention strategies among sexually active MSM receiving HIV care in San Francisco".
- CM Geltmaker inquired about how the study defines using a prevention strategy. How do you distinguish if serosorting is a prevention strategy or a happenstance?
  - Alison responded that the data does not address that, we recently just started asking participants what they do to prevent HIV. In this study, we took behaviors that participants reported and lumped them into categories.
- CM Pearce inquired if you have compared the 37% of the 121 MSM who had more than 5 sexual partners in the last 12 month with the rest of the group to see if there were any outlying behaviors.

- Alison responded that we received minimal information about partners. We have not looked at the difference between the groups, but it would be an interesting methodology analysis to see if the additional partners are representative of the last five.
- CM Bowman inquired about why you only asked participants if they used condoms 100% of the time.
  - Alison replied that the questions were subjective. You can't know what "sometimes" means to another person, so we used always as an option. If someone had sex with someone only once vs. multiple times it changes how likely they would use a condom 100% of the time.
- CM Harkin asked if the study only used self-reporting for participant's viral loads.
  - Alison responded that we compared self-reporting with participant's medical records. About 90% of observations agree, which means people are good at reporting their perceived viral load. There are reasons why the self-reported number and the MRA might not match up, i.e. if participants received their viral load number from another source, we may not get the most updated information.
- CM Lee-Miyaki asked if the study compared Puerto Rico's numbers with the main land. He also asked if there will be data on the Pacific Ocean territory in the future.
  - Alison replied that SF is the first MMP site that have looked at this data. We would have to ask Puerto Rico to run the same data. She noted that if the Pacific Ocean Territory is something that people are interested in we could work with the other MMP sites, but we don't have access to other sites data. However, they tend to be collaborative.
- **MOTION: CM Miller moved to have the Community Engagement Committee immediately begin planning for a large scale COLA and possibly a forum for anyone who is on PrEP. He would like to move people of PrEP to the top of the priority list for this year's COLA.**
  - CS Cone noted that this item isn't noticed for a vote, but we can put this on the agenda for the next Community Engagement Committee meeting.
- CM Lee inquired if the study looked at what the motivation was in driving behaviors.
  - Alison responded that this presentation looked at behaviors and not motivation. We did collect some data on beliefs, such as "If my partner tells me they are HIV positive, I am more likely to not have unprotected sex." Most people agreed with that statement but it has nothing to do with their actual behaviors. We started asking people this year, if you have used any prevention strategy over the past 12 months, and what is it?
- CS Cone inquired if there is comparable data for people who are not MSM.
  - Alison commented that we only looked at MSM because they were the only sub-group that had partners on PrEP in 2014.
- CM Bowman asked when they are going to look at the new data.
  - Alison noted that she has looked at the data from 2015. There were no big changes in statistically significant data.

### 13. Dinner Break

### 14. Council Membership -VOTE

- The Council voted on a motion originating from Membership and updated by Steering.
- **MOTION: HCPC membership should not exceed 50 members.**
- **VOTE: Motion Passes. See column [1] for a vote breakdown.**

### 15. Needs Assessment Trends

- CS Jordan presented on Needs Assessment Trends.
- CM Monet inquired about the health risks associated with living in SRO's.

- CS Jordan responded that living in an SRO can be dangerous and unsanitary. Many people do not have kitchen facilities where it is hard to cook food and maintain a healthy diet. After the SRO COLA, we asked HHS to give a presentation about the oversight of SROs in order to see if the Council could do anything about the. There was not a whole lot of oversight, the power structure for SROs are convoluted.
- CM Miller commented that people with mental challenges do not do well in an SRO environment. Were there clients that felt that they needed to use substances due to their living situations?
  - CS Jordan responded that yes, participants have expressed that they began using or isolated themselves while living in an SRO.
- CM Harkin noted that going forward, he would like to focus on drug user health instead of a specific drug like crystal meth. Drugs are drivers for HIV, and it is important that we continue to look at this population.
- CM Thomas commented that at the last Community Engagement meeting, we discussed the populations that we want to look at for next year's COLA. Drug users was on that list. She noted that it was great to see all this information and themes in one presentation. It will be helpful moving forward in choosing needs assessment/COLA topics.
- CM Chitty inquired if there was anything the Council can do to monitor SRO's in order to make them safer.
  - CS Jordan responded that there are SRO's funded for HIV positive residents, the formerly homeless etc., and there is a whole spectrum of facilities. This Council does not have funding purview, but we can always advocate for better conditions.
  - Co-Chair Goodwin noted that there is the SRO task force, the Council can advocate by finding potential funding. The Council is not very connected because we do not directly fund housing.

#### 16. Policy & Procedure Update- VOTE:

- The Council reviewed and voted on policies and procedures.
- The group reviewed the Council Co-Chair Job Description, Committee Co-Chair Job Description, At-Large Seats, Steering Committee, Public Comment, Leave of Absence, Rules of Respectful Engagement, Unfunds, CDC Letter of Concurrence Process, Conflict of Interest, Work Groups, Expense Reimbursement, Tie Votes, Recruitment and Orientation & Training for New Council Members policies.
- **MOTION: To approve the Council Co-Chair Job Description, Committee Co-Chair Job Description, At-Large Seats, Steering Committee, Public Comment, Leave of Absence, Rules of Respectful Engagement, Unfunds, CDC Letter of Concurrence Process, Conflict of Interest, Work Groups, Expense Reimbursement, Tie Votes, Recruitment and Orientation & Training for New Council Members policies.**
- **VOTE: Motion Passes. See column [2] for a vote breakdown.**
- The Policy and Procedure Work Group will next meet in January to allow the Full Council to catch up on passing policies and procedures.

#### 17. Next Meeting Date- VOTE

*The next meeting is tentatively scheduled for Monday, November 28<sup>th</sup> 2016 at 1035 Market St, Room 3-D, from 3:30 to 6:30.*

#### 18. Adjournment

- Meeting adjourned at 6:16 pm by Co-Chair Goodwin.

**Full Council Meeting  
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)

<b>Date: October 24, 2016</b>	[roll]	[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
<b>Chuck Adams</b>	E	-	-								
Margot Antonetty	E	-	-								
<b>Richard Bargetto</b>	P	Y	Y								
<b>Bill Blum</b>	P	Y	Y								
Jackson Bowman	P	Y	Y								
Ben Cabangun (Co-Chair)	E	-	-								
<b>Cesar Cadabes</b>	E	-	-								
<b>Ed Chitty</b>	P	Y	Y								
<b>Billie Cooper</b>	E	-	-								
<b>Michael Discepola</b>	P	Y	Y								
Cicily Emerson	E	-	-								
Elaine Flores	E	-	-								
<b>Wade Flores</b>	P	-	-								
Timothy Foster	A	-	-								
<b>Matt Geltmaker</b>	P	Y	Y								
David Gonzalez	A	-	-								
Dean Goodwin (Co-Chair) Eileen Loughran	P/E	Y	Y								
Liz Hall	P	-	-								
Paul Harkin	P	Y	Y								
<b>Ron Hernandez</b> [Proxy: Ken Pearce]	E	Y	Y								
<b>Ken Hornby</b>	LoA	-	-								
Bruce Ito	P	Y	Y								
<b>Lee Jewell</b>	P	Y	-								
<b>Darryl Lampkin</b>	P	Y	Y								
Kevin Lee	P	Y	Y								

<b>T.J. Lee-Miyaki</b>	P	Y	-								
<b>Andrew Lopez</b>	P	Y	-								
<b>Matthew Miller</b>	P	-	Y								
Aja Monet	P	Y	Y								
Jessie Murphy	P	-	-								
<b>Catherine Newell</b>	E	-	-								
<b>Ken Pearce</b>	P	Y	Y								
<b>Mick Robinson</b>	E	-	-								
<b>Stacia Scherich</b>	E	-	-								
<b>Charles Siron (Co-Chair)</b>	P	Y	Y								
Gwen Smith	P	Y	Y								
Donald Soto	P	Y	Y								
<b>Chip Supanich</b>	P	Y	Y								
Eric Sutter	P	Y	Y								
Laura Thomas	P	Y	Y								
Linda Walubengo (Co-Chair)	P	Y	Y								
	Ayes	24	22								
	Nays										
	Abstain										
	Recusal										
	Total	24	22								