

HIV Community Planning Council

SUMMIT

Friday September 2, 2016

25 Van Ness, 6th Floor Conference Room

10:00-4:00 pm

HIV Community Planning Council Members Present: Chuck Adams, Margot Antonetty, Richard Bargetto, Bill Blum, Jack Bowman, Ben Cabangun (Co-Chair), Cesar Cadabes, Ed Chitty, Billie Cooper, Michael Discepola, Cicily Emerson, Elaine Flores, Wade Flores, Matt Geltmaker, Dean Goodwin (Co-Chair), Paul Harkin, Liz Hall, Ron Hernandez, Bruce Ito, Lee Jewell, Darryl Lampkin, Kevin Lee, T.J. Lee-Miyaki, , Eileen Loughran (Co-Chair), Matthew Miller, Jessie Murphy, Cathy Newell, Ken Pearce, Mick Robinson, Stacia Scherich, Charles Siron (Co-Chair), Don Soto, Eric Sutter, Linda Walubengo (Co-Chair)

HIV Community Planning Council Members Absent: David Gonzalez [A], Ken Hornby [LoA], Andrew Lopez [E], Aja Monet [A], Gwen Smith [E], Chip Supanich [LoA], Laura Thomas [E]

Others Present: John Aynsley, Michael DeMayo, Zachary Davenport, Gina Gemello, Kevin Hutchcroft, Beth Neary, Toni Newman, Amanda Newstetter, Melissa Rosenberg

CHEP Staff Present: Jose-Luis Guzman, Betty Lew, Oscar Macias, Tracey Packer

Support Staff Present: Ali Cone, Dave Jordan, Mark Molnar, Liz Stumm

Minutes

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

The meeting was called to order at 10:16 by CS Molnar. Roll was called and quorum was established.

2. Review and Approve August 29, 2016 DRAFT Agenda – VOTE

The August 29, 2016 DRAFT Agenda was reviewed and approved by consensus.

3. Moment of Silence

The Council observed a moment of silence to honor Council Members who have passed away this year.

4. Announcements

- CS Molnar described that a Conflict of Interest may be held by a Council member who has a fiscal relationship with an agency (e.g. staff or executive board member) that receives or may receive Ryan White Part A services. Council members declared their conflict of interests.
- CM Pearce noted that he has been ill this week and he found out that his ADAP membership has been cancelled. A number of people have been terminated from ADAP and pharmacies are not being informed of this. He was able to get it taken care of, but he is concerned that clients may not be able to advocate for themselves to get back on because you have to call A.J. Boggs to reinstate you with Magellan. Please pass this information on.
 - CM Chitty noted that due to the holiday weekend, patients may not have medication for 5 days. Pharmacies can't call and verify. Is there anything we can do right now?
 - Co-Chair Goodwin talked to someone at A.J. Boggs and they are using programmers to push the data to recover everyone that would have expired. They feel that this will be resolved by the end of the day, but they do not have a plan B at this moment.
 - CM Hall called the Office of AIDS, and they were not aware of this problem. On Monday, A.J. Boggs will be open, their emergency number is (844) 550-3944.

- CM Pearce noted that there needs to be an around the clock emergency line and a system in place to inform pharmacies of these glitches.
- CM Discepola acknowledged that some of the medication that people are not receiving are psych meds, which can be incredibly destabilizing.
- CM Hall noted that people with issues with their medications, should work with their enrollment worker and they should contact the state advisor. Magellan is available 24 hours a day at 1(800) 424-5906.
- CM Bowman announced that Huckleberry Youth Health Center is hiring a CSEC (commercially sexually exploited children) Intervention Specialist. They are looking to hire someone who has experience working with young people and is a great case manager.
- CM Lee-Miyaki announced that Positive Force is hiring a health advocacy worker that would be working with gay/bi men.
- CM Hall noted that the Office of AIDS is recruiting for California Planning Group Community At-large seats.

5. Public Comment

- None.

6. Year in Review

- CS Molnar presented a review of the Council's work from the past year.
- CM Harkin noted that in order to get to zero we need to focus on people who inject drugs. There needs to be more funding for substance use services.
- CS Molnar reported changes in the service category prioritization: mental health was ranked as the top priority, outpatient substance use treatment moved up two positions.
- CM Scherich noted that there is stigma around receiving services for injection drug users. There needs to be better trainings for medical/services providers.
- CM Pearce noted that there are 75,000 unduplicated clients, 15,000 people with HIV and 2,000 people who don't know they have HIV. Half of the people are not in care and connected to our systems. We need to find a way to reach the people who are unaware of their status.
- CS Molnar led an exercise to generate things the Council does not want to lose sight of:
 - Safe Injection sites/Safer consumption sites
 - Consumer centralization
 - The Denver Principles
 - African American disparities
 - Racial justice as a larger public health issue
 - Non-injection drug use/ Alcohol use
 - Harm-reduction based care
 - Seniors 50+/Aging
 - HIV outside of RWPA
 - Easy access to food
 - HIV prevention (non-biomedical)
 - Hepatitis C
 - Stigma
 - Social Isolation/Mental Health

7. CDC Mandate/CDC Letter of Concurrence- VOTE

- CHEP staff presented on the CDC Letter of Concurrence and an overview of the HRSA Mandate.
- CM Cooper inquired about emphasizing Trans women. Why are Trans women grouped with MSM?

- Tracey Packer responded that when you look at total number of Trans women it is significantly higher than other groups, it is a priority population and we track that data separately. San Francisco is one of the first cities to collect data on Trans women. Our agencies implement the 2 question algorithm: Gender at birth and gender right now. There is funding specifically targeting Trans women.
- CM Bowman noted that currently we divide funding based on Epi data. We have seen significant reductions among the MSM population due to resources and funding. There is an opportunity for how we divide funding that can be in-line with disparities. We should recognize advancements and shift funding to populations with disparities. The new Epi data shows there are disparities within the African American community. There should be specific programs/funding for the black community.
 - Tracey Packer responded that the funding allocation is determined by the Council. The MSM population may be a smaller percentage in new infections but there are disparities within that population. The funding is allocated into testing and special projects that address HIV disparities among African American and Latino gay men and Trans women.
- CM Newell inquired about the data of heterosexual cases. Is there a higher percentage of women and what is the breakdown of ethnicity among these cases?
 - Tracey responded that heterosexual women have a slightly higher percentage than heterosexual men and that African American women have the most new cases among heterosexuals. Due to needle exchanges being implemented early on, the city's epidemic has a lower number percentage of heterosexuals.
- CM Ito commented that the API community is left out of these conversations.
 - Tracey responded that we want to target every population but there is not an emphasis because there is not a disparity. However, there are specific programs that target API men.
- CM Pearce commented that he would like to vote for concurrence, but noted that the data makes it hard to see that the funding is going to disproportionate populations.
- **MOTION: CM Geltmaker moves to vote for concurrence that the HIV Prevention programmatic activities and resources are being allocated to the most disproportionately affected populations and geographical areas that bear the greatest burden of HIV disease, including populations at greatest risk of HIV transmission and acquisition in San Francisco, Marin and San Mateo.**
- **CM Miller seconds the motion.**
- **VOTE: Motion Passes. See column [1] for a vote breakdown.**

8. Lunch

9. HRSA Mandate

- CS Molnar led an exercise to generate ideas on how to make sure that Prevention efforts do not get lost with the new merged Council:
 - Understand funding sources and how dollars are spent
 - Be aware of language
 - Integrated projects
 - Don't lose sight of Behavioral Interventions
 - Ongoing, relevant information that looks at the system from a wider perspective
 - Look at how all funding streams address disparity
 - Drug user health
- CS Molnar presented on an overview of the HRSA mandate.
- CM Robinson inquired about the collaboration of the EMA with surrounding areas. The East Bay can impact the work we do in the SF EMA.

- CS Molnar noted that we have contact with other EMA's and TGA's when we reach out to them, but there is no official mechanism.
- CM Blum noted that Prevention representatives come together to share best practices and lessons learned. There is a lot of collaboration with other TGA's and EMA's regarding Ryan White Part F.
- CM Harkin noted that individual programs have informal symposiums for skill sharing and best efforts.
- CM Hall commented that the State is planning on hosting a Summit in the future, we have been held back from doing so in the last couple of years.
- CM Geltmaker noted that the CA Planning Group is an important mechanism due to lack of resources. There are open seats, he encourages Council members to apply.
- CM Hall noted that the East Bay AIDS Center puts on an annual meeting, it's a good way to share what San Francisco is doing.
- CM Newell suggested inviting people from surrounding Councils to attend our meeting.

10. RWPA Resource Allocation- VOTE

- The Council will vote on Ryan White Part A resource allocation funding scenarios.
- CS Molnar reviewed the Eligibility Criteria and Severe Needs & Special Populations definition.
 - CM Antonetty noted that she would like to see people living with HIV and homelessness included in the definition.
- **MOTION: Increased Funding: In the event of increased funding, increases will occur proportionately across all service categories.**
- **Motion Passes. See column [2] for a vote breakdown.**
- **MOTION: Flat Funding: If funding remains at the current level, service category resource allocation will remain level across all categories.**
- **Motion Passes. See column [3] for a vote breakdown.**
- CM Bowman noted that he is not sure that the Council is providing enough resources towards mental health, especially since it is the merged Council's top priority.
 - CM Jewell responded that our grant is less each year, and we have to make sure we have adequate funding for all of our service categories. Our responsibility is to look at the whole system of care. Taking money from other service categories may devastate an entire program.
 - CM Blum noted that this goes downstream into contracts and agencies. We don't know what new programs are going to be, he encourages the Council to visit this later.
- **MOTION: Decreased Funding: In the event of decreased funding, for the first 10% of reductions, allocations for services that are covered under California's essential health benefits package will be reduced proportionately. If further reduced allocation is required, reductions will occur proportionately across all service categories.**
- **Motion Passes. See column [4] for a vote breakdown.**
- The Council discussed that if there was a significant decrease in funding, this motion would be revisited.

11. RWPA Service Category Prioritization- VOTE

- The Council voted on Ryan White Part A service category prioritization.
- CS Molnar noted that everything in support services stayed the same except for legal services, which moved up one spot.
- Core services: There was a jump for outpatient substance abuse. Primary medical care is no longer the top priority, mental health moved to the top.
- CM Jewell commented that mental health programs are in the pipeline. HIV clients are moving from Ryan White to Medicare/Medical. He is concerned about mental health being the Council's top priority, when

this has not been what we have seen in the COLA sessions. He feels that the Council should reconsider placing mental health before primary medical care.

- CM Pearce noted that this exercise does not determine what we fund, but demonstrates what the Council feels are critical arenas of focus currently. Mental health has constantly been coming up as an issue. He feels that the housing crisis in the city has caused legal services to move up positions.
- CM Lee-Miyaki suggested the Council consider a transportation program for the aging HIV population.
- CM Miller noted that it is hard to find mental health counselling not wrapped in with drug counselling.
- CM Harkin commented that a large population of people with mental health issues have substance use issues. He feels that substance use counselling should be ranked closer to mental health services.
- **MOTION: CM Newell moves to approve the RWPA service category prioritization.**
- **Co-Chair Siron seconds the motion.**
- **VOTE: Motion Passes. See column [5] for a vote breakdown.**

12. Integrated Plan Review-VOTE

- Co-Chair Cabangun presented a review of the values and vision statement, goals, objective and strategies and the implementation plan grid of the Integrated Plan.
- CM Bargetto commented that all but one of our objectives are at or exceeding state and national averages, except for the one regarding viral suppression. Why are we below the national and state targets on this objective?
 - Co-Chair Cabangun responded that the consultant Robert Whirry explained that the new target takes into account the lack of current baseline percentages for Marin and San Mateo.
 - CM Blum noted that the city has a large population of long-term survivors, who have been on a lot of medication regimens. This means that not everyone with HIV can become virally undetectable. State and national targets do not roll in people who don't know they are positive, that may be lowering our number.
- CM Chitty inquired if when looking at detectable viral load if you are you looking at a onetime occurrence.
 - Michael DeMayo responded that they looked at 2 dates in a 12 month period.
- **MOTION: CM Jewell moves to approve the values and vision statement, goals, objectives and strategies and the implementation plan grid of the Integrated Plan.**
- **Co-Chair Siron seconds the motion.**
- **VOTE: Motion Passes. See column [6] for a vote breakdown.**
- The Council will vote on the entire integrated plan at the September Full Council meeting.

13. Next Meeting Date

The next meeting is scheduled for Monday, September 26th at 25 Van Ness, 6th Floor Conference Room, from 3:30 to 6:30.

14. Adjournment

- Meeting adjourned at 3:30 pm by Co-Chair Siron.

Summit

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)

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

Aja Monet	A	-	-	-	-	-	-				
Jessie Murphy	P	Y	Y	Y	Y	Y	Y				
Catherine Newell	P	Y	Y	Y	Y	Y	Y				
Ken Pearce	P	Y	Y	Y	Y	Y	Y				
Mick Robinson	P	A	Y	Y	Y	Y	Y				
Stacia Scherich [*Proxy: Eric Sutter]	P	Y	Y	Y	Y	Y	Y*				
Charles Siron (Co-Chair)	P	Y	Y	Y	Y	Y	Y				
Gwen Smith	E	-	-	-	-	-	-				
Donald Soto	P	Y	Y	Y	Y	Y	Y				
Chip Supanich	LoA	-	-	-	-	-	-				
Eric Sutter	P	Y	Y	Y	Y	Y	Y				
Laura Thomas	E	-	-	-	-	-	-				
Linda Walubengo (Co-Chair)	P	Y	Y	Y	Y	Y	Y				
	Ayes	28	30	30	31	28	29				
	Nayes	2	1			3					
	Abstain	3	1		1	1	1				
	Recusal										
	Total	33	32	30	32	32	30				