



HIV Health Services Planning Council and HIV Prevention Planning Council

TRANSITION TEAM

Wednesday, February 25th 2015

HIV Health Services
25 Van Ness, 3rd floor
4:00-6:00 pm

Transition Team Members Present: Jackson Bowman, Dean Goodwin, Wade Flores, Mary Lawrence Hicks, Ken Hornby, Andrew Lopez, Mark Molnar, Tracey Packer, Ken Pearce, Charles Siron, Chip Supanich, Eric Sutter, Channing-Celeste Wayne

Transition Team Members Absent: David Gonzalez [E], Paul Harkin [A], T.J. Lee [A], Eileen Loughran [A]

Others Present: Lee Jewell [HHSPC], Oscar Macias [HPPC], Kevin Hutchcroft [HHS]

Support Staff Present: Ali Cone, Jennifer Cust, Dave Jordan

Minutes

1. Introductions

The meeting was called to order at 4:10 pm by Co-Chair Supanich. Everyone introduced themselves and quorum was established.

2. Review/Approve February 25th 2015 DRAFT Agenda – VOTE

The February 25th 2015 DRAFT Agenda was reviewed, amended and approved by consensus.

3. Review/Approve January 29th 2015 DRAFT Minutes- VOTE

The January 29th 2015 DRAFT Agenda was reviewed, amended and approved by consensus.

4. Announcements

- None.

5. Public Comment

- None.

6. Snapshot of HIV Care and Prevention Funding

- Dean Goodwin and Tracey Packer presented the, “San Francisco HIC System of Care: Community Health, Equity & Promotion Branch, HIV Health Services Presentation for Transition Work Group, February 25, 2015” which included these topics:
 - HIV Prevention Core Services
 - Category 1: Community- Based HIV Testing
 - Category 2: HERR to Address Drivers Among MSM
 - Category 3: Prevention with Positives
 - Providing services to people who are positive- to access care and stay in care.
 - Categories 4-7: Special Projects
 - Category 8: Citywide Syringe Program
 - Set Aside Funded Programs
 - HIV Health Services Comparison for RQ Eligible Clients Who Become/ Are ACA Enrollee
 - The services categories were broken up into these three services:

- ACA Services
 - Enrollee may become ineligible for RW Care Services
 - Enrollee: Remains eligible for RW Services.
- Spectrum of engagement in care among persons diagnosed with HIV, 2009-2012, San Francisco
- SF Services Continuum- HIV Prevention Services Focused Activities
 - People at risk
 - New diagnoses
 - Linkage and retention in care
 - Viral suppression
- HIV Prevention & Care Collaborative Efforts
 - PWP in Centers of Excellence (CoE)
 - Linkage to CARE
 - Epi Profile
 - Planning Council Collaborations
 - Integrated CARE and Prevention Plan
- PWP in CoE- Targeted Populations & Areas
- Linkage Services Funded Programs by CHE&P and HHS
- Strategies for everyone, HIV negative individuals, strategies for HIV positive individuals to link to care.
 - Goal: improved health outcomes. The plan adopted, “Getting to Zero” language.
- 2015 CHE&P Resources Allocation
- 2014 Care & Treatment Resource Allocation
- Resource Allocated by County
- Trends in HIV Care and Prevention Funding 2012-2015
 - RWPA grant award- A total of about 62% funding reduction in three years
 - CDC HIV Prevention grant award- a total of about 63% funding reduction in four year.
- Dean Goodwin described the work of Ryan White Part B.
 - Ken Pearce inquired about the proportions of funding for both Care and CHE&P that goes to all three counties
 - Dean Goodwin- it’s based on living AIDS cases.
 - Tracey Packer- San Mateo and Marin used to be funded through the state, and then not funded at all, and then they received the option to get funding through SF or the state and they decided to go with San Francisco.
- Ken Pearce referred to the city backfills and noted that Prevention received 8 million and Care, about 9 million and wondered if those figures correlated to cuts?
 - Tracey Packer- Prior to the reductions, there were General Funds allocated to Prevention- about \$3 million dollars. The \$8 million dollars includes what Prevention was already receiving.

7. Developing a shared Culture

- CS Molnar introduced the document, “HRSA Ryan White HIV/AIDS Program Part A, B and CDC HIV Prevention Planning bodies: Integrated HIV Prevention- Care Planning Activities,” included by the suggestion of Laura Thomas. He noted page 6, which referred to Chicago and LA as the only two integrated councils. San Francisco is going to be ahead of the curve.

8. Planning Council Support/ HHSPC Director

- Mark Molnar introduced, “Planning Council Support FAQ,” which included:
 - What is Planning Council Support?

- What is the role of the HHSPC Director? Why is the title of this position, “HHSPC Director” and not, “Planning Council Support Program Director”? Who oversees this position? Why does Council Staff comment during meetings?
 - Charles Siron noted that the Director Job description and title was created by the Council Members.
 - Mark Molnar- Council staff comments during meetings in a way that somewhat parallels HIV Health Services.
 - Dean Goodwin also noted that HHSPC staff adds historical contexts.
 - Ken Pearce spoke to the importance of historical knowledge and why that would be a reason not have Council Members term out.
- Why is HHSPC staffing provided by a community-based agency rather than by SFDPH?
 - Mark Molnar noted that there could be conflict if the admin was the recipient of council directives and also the grantee.
 - Mark Molnar noted that HHSPC staff comes from Shanti because of experience on the Council, but also because of volunteer management and peer service experience.
 - Tracey Packer suggested it might be helpful to speak about SFDPH Staff’s role so the Councils could understand the similarities and differences.

9. Consultant for Joint Executive/ Steering Committee- VOTE

- Co-Chair Supanich introduced the topic and noted that both Council’s seemed to be in agreement last time about hiring a consultant. It would be from a firm that both Councils feel comfortable with, an independent voice without prejudice to work on things that might be difficult.
- Jack Bowman suggested the possibility of using a consultant that has been used before and the Care Council feels comfortable with, like Harder+Company.
- Mark Molnar noted that the Care Council had also worked with CompassPoint.
- Mary Lawrence Hicks inquired about the budget for a consultant.
 - Dean Goodwin- we’ve allocated 20- 30 thousand from Quality Management, which should get us through about 7-9 months of support. He also noted that he has an RFQ list with about 21 vendors listed.
- Charles Siron suggested the Transition Team choose three companies to interview.
- Kean Pearce asked Dean and Tracey for experiences with companies and noted that the right individual could be more important than the company.
- Mark Molnar spoke to the Council’s experience with Harder+Company.
- Co-Chair Supanich suggested the Transition Team interview facilitators from the two companies we’re familiar with and then maybe one that is new. He also suggested either a segment of the team meet with the possible consultants or they are invited to the next meeting.
- Dean Goodwin suggested pursuing the DPH contracting guidelines for interviewing vendors. They could also throw out a blanket request for qualifications and interests from the remaining vendors, Harder and Co and Compass Point.
- Tracey Packer noted that it’s important to have specific expectations for the consultant.
- Dave Jordan noted that the person who was hired from Compass Point to lead the CARE Council’s Facilitation Training has her own consulting agency.
- Wade Flores inquired if the consultant would be as needed, or a permanent fixture.
 - Co-Chair Supanich- they would have to be with us for a while.
- The Transition Team spoke about the approval process for both Councils.
- Charles Siron felt that both Councils should approve the hiring of a consultant.
 - Jack Bowman spoke to the fact that most of the Executive Committee is at the Transition Team, and that the way the Prevention Council works, it wouldn’t have to go to the Full Council for a vote.

- **CM Pearce moved to hire consultant for the Joint Steering/ Exec Committee. Charles Siron seconded.**
 - **VOTE: Motion passes. See attached: row [1] for breakdown.**
- Ali Cone inquired if the Co-Chairs were going to facilitate or would the consultant take the role?
 - Co-Chair Supanich- I thought that the Co-Chairs would facilitate the meeting and the consultant would organize the discussion and synthesize the ideas.
- Co-Chair Lopez spoke about the need for the consultant to synthesize and use documents and items both council's already have.
- Tracey Packer suggested that all of these specificities could be the questions that are asked of the interviewees to determine their facilitation style.
- The Transition Team discussed the pros and cons of the facilitator having an end product in mind. The team agreed that there needs to be clear goals and documents generated, but not necessarily an end product.
- Mary Lawrence Hicks suggested that the process be efficient- with the possibility of having a smaller group interview and bring the top three applicants to the Transition Team. The goals in mind could be: good facilitation, someone to produce a good set of documents, and a clear idea of the process.
 - The Transition Team discussed the pros and cons of having a smaller group to handle the interviews.
 - Jack Bowman spoke in favor of Mary Lawrence's suggestion.
 - Ken Pearce spoke in favor of having the interview process be open to get more input
- Co- Chair Supanich noted that the interview process will take some time and will push a lot of items onto the next meeting.
- Wade Flores moves to create an ad hoc group to conduct an interview for the consultant.
- Charles Siron moved to have an ad hoc group with two co-chairs of this committee, the council staff Mark Molnar, Tracey Packer, Dean Goodwin. There should be 6 people.
 - Mark Molnar and Tracey Packer suggested that they aren't included in the official ad hoc group.
- **Jack Bowman moved to have a two-step process, an ad hoc committee made up of Dean, Tracey, Co-Chairs and two reps from Care, and one from HPPC. The second step is for the ad hoc group to bring back the candidates for the Transition Team to review and decide. Channing Wayne seconded.**
- Ken Pearce suggested that there be back-up solutions to the ad hoc membership.
- The transition team spoke about the motion being too specific with the naming of individuals, and thought it would be best to keep it vague, so that there could be alternates.
- **Jack Bowman amended the motion to say: moved to have two step process, an ad hoc committee to do initial interview of consultants to bring back candidates for Transition Team. The ad hoc group would be co-chairs of the Transition Team, two reps, one from CARE and one from HPPC. Charles Siron seconded.**
 - **VOTE: Motion Passes. See attached: row [2] for breakdown.**
- Dean Goodwin noted that he agreed with Tracey, that DPH shouldn't choose, but their roles could be to help vet and help gather candidates for the ad hoc committee to review.

10. Next Meeting Date & Agenda Items- VOTE

- The committee discussed meeting evaluations and the Co-Chairs agreed to decide how to proceed and then report back.

- Co-Chair Lopez suggested extending the next meeting be 3 hours and the transition team agreed. Jack suggested there be food for the next meeting.
- **Possible next agenda items:**
 - Formation of Joint Executive/ Steering Committee
 - Action Steps/ Task List
 - Next Meeting Date & Agenda Items.

11. Adjournment

The meeting was adjourned at 5:55 pm by Co-Chair Supanich.

Transition Team HHSPC & HPPC

Date: February 25, 2015	[roll]	[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]
1. Jackson Bowman	P	Y	Y						
2. David Gonzalez	E	-	-						
3. Paul Harkin	A	-	-						
4. Mary Lawrence Hicks	P	Y	Y						
5. Andrew Lopez	P	Y	Y						
6. Eileen Loughran	E	-	-						
7. Chip Supanich	P	Y	Y						
8. Laura Thomas	E	-	-						
9. Channing-Celeste Wayne	P	Y	Y						
10. Eric Sutter/ Ken Pearce	P	Y	Y						
11. Ken Hornby/Wade Flores	P	Y	Y						
12. Charles Siron/ T.J. Lee	P	Y	Y						
13. Tracey Packer	P	-	-						
14. Mark Molnar	P	-	-						
15. HHS Representative	P	-	-						