

HIV Community Planning Council
ANNUAL PRIORITIZATION AND ALLOCATION SUMMIT
Tuesday October 3rd, 2017
25 Van Ness, 6th Floor Conference Room
San Francisco, CA
10:00 am-4:00 pm

HIV Community Planning Council Members Present: Margot Antonetty, Chuck Adams, Orin Allen, Bill Blum, Jack Bowman, Ben Cabangun (Co-Chair), Cesar Cadabes, Ed Chitty, Billie Cooper, Zachary Davenport, Cicily Emerson, Elaine Flores, Wade Flores, Matt Geltmaker, Dean Goodwin (Co-Chair), Jose Luis Guzman (Co-Chair), Paul Harkin, Ron Hernandez, Bruce Ito, Lee Jewell, Kevin Lee, T.J. Lee-Miyaki, Jessie Murphy, Mick Robinson, Darpun Sachdev, Michael Shriver, Charles Siron (Co-Chair), John Paul Soto, Eric Sutter, Laura Thomas, Linda Walubengo (Co-Chair)

HIV Community Planning Council Members Absent: Michael Discepola [E], Liz Hall [E], Ken Pearce [LoA], Stacia Scherich [A], Gwen Smith [A]

Others Present: Ana Ayala, Bill Hirsch, Craig Hutchinson, Michael Stoutmire, Kristen Tjaden

HHS Staff Present: Joseph Cecere, Kevin Hutchcroft, Beth Neary

CHEP Staff Present: 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 10:11 pm by CS Molnar. Roll was called and quorum was established. Council members introduced themselves and declared their conflict of interests.

2. Announcements

- CM Antonetty noted the new Department of Homelessness and Supportive Housing's strategic framework is being published. She will be checking in with Council staff about scheduling a presentation with the Council.
- CM Ito announced that the waitlist for the HIV housing portal has opened. Housing Plus is accepting applications for the month of October. It can be an online or paper application.
- Co-Chair Guzman announced that there have been Hepatitis A outbreaks among homeless populations in San Diego and Santa Cruz counties. CHEP is working on a prevention strategy and will distribute prevention materials shortly.
- CM Emerson announced that the Marin County Board of Supervisors is recommending to transfer services from our HIV clinic to the Marin Community Clinic. There are very few primary care HIV doctors in Marin. Things are moving forward and we are doing community planning with the Marin Care Council. This will be a big, difficult change for our clients. If private providers want to start practicing in Marin, please let her know.
- CM Jewell announced that the vote to repeal the ACA has failed. The ACA is still in effect and the window period has increased. He encourages everyone to spread the word.
 - CM Antonetty commented that she has heard that they are strategically closing down the system on weekends to allow less time for people to sign up.
 - CM Jewell responded that administratively they are putting the reigns in, they have also cut the budget for new enrollment.

- CM Geltmaker noted that Darryl Lampkin has resigned from the Council due to the separation of San Mateo and Marin now receiving Prevention funding from the State instead of the EMA.
- CM Gonzalez noted that he was on a phone call about the hurricane follow up. There are still folks in Houston that are HIV positive who are unstably housed. Services have been drastically cut because funding is going towards emergency services. He will send around a list of AIDS service organizations that can be supported.
- CM Davenport announced that there is an open enrollment boot camp, Friday October 20th at UCSF Mission Bay from 8:30-5:00.

3. Public Comment

- None.

4. HRSA Mandate, Eligibility, Severe Need & Special Populations Definitions

- The Council received an overview of the HRSA mandate and update eligibility criteria and definitions.
- CM Emerson noted that the State is developing new standards of care and it will be put out in 2019.
- Co-Chair Goodwin noted that the eligibility criteria for severe need populations has changed from 138% to 150% FPL.
- CM Lee inquired about why monolingual Spanish speakers and not all monolingual speakers are included in the special population's category.
 - CM Soto noted that monolingual Spanish speakers was included after a needs assessment that focused on the Latino population.
 - CM Thomas commented that it is not an exclusive list, we've had data presented specifically about barriers that monolingual Spanish speakers face, and it does not exclude other groups.
- CM Sachdev inquired if there is a way to include at-risk HIV negative people in the eligibility criteria.
 - CM Emerson noted that through early intervention services, not just people living with HIV receive Ryan White services.
 - Co-Chair Goodwin noted that there is a small number of family members who get services like mental health and grief counselling.
 - CM Geltmaker commented that we are utilizing Part B funding under early intervention services to provide HIV testing and PrEP navigation.
- **AMENDMENT MOTION: CM Antonetty moves to remove the undocumented and monolingual Spanish speaker language from the special population definition, to change the FPL from 138% to 150% and to amend the eligibility criteria to include "Be considered at risk for HIV (for EIS only)."**
- **CM Jewell seconds.**
- CM Cooper inquired why Transgender individuals are not included in the special populations' definition.
- The group discussed that this was taken out because Transgender individuals fall under populations with the lowest rates of use of ART.
- **VOTE: Motion passes. See column [1] for a vote breakdown.**
- **MOTION: To approve the Eligibility Criteria and Severe Need & Special Populations Definition.**
- CM Sachdev suggested naming the groups who are included in lowest rates of ART.
 - The group discussed that naming things give them power v. keeping the definition broad and inclusive if things change.
- **VOTE: Motion passes. See column [2] for a vote breakdown.**

5. Needs Assessment- VOTE

- CS Jordan presented on the results of the HIV+ Homeless and Unstably Housed Needs Assessment.

- CM Allen commented that there is a lot of syringe access services in the city, but he feels that there could also be a place where clients can adhere to their meds. He suggests having a one-stop place to take medication and receive services.
 - CS Jordan commented that CM Discepola has mentioned that storage lockers could be a place for people who are homeless to keep their meds. He also noted that safe consumption sites are being looked at to also provide wrap around services in that environment.
- CM Cooper commented that she was once homeless and she was given a chance to better herself. The homeless problem is worse now. Some homeless people feel hopeless, and some case managers don't want to spend too much time with their clients. It's easy to put someone in a Tenderloin hotel and forget about them. In the last 10 years, there has been an increase in high-end condos being built. She feels that there should be more low income housing being built. She noted that people are always saying that things are getting better, but it should have been done already. The same thing has been happening for 30 years. She noted that homelessness occurs past 5:00 PM.
 - CS Jordan replied that he agrees and he is presenting this information for the Council to come up with actionable change.
- CM Antonetty commented that in regards to CM Allen's comment, there used to be a HIV med adherence program in collaboration with DPH and the AIDS Foundation. She is not sure why it went away and it should be tangible to reconvene. This is still a need and med adherence is still important.
- CM Allen commented that when he first moved to the city he was homeless. He noted that he had a problem with taking his meds and being homeless, there were too many distractions during the day. His main focus was on eating and where I was going to sleep that day.
- CM Blum noted that participant's mental health was ranked 10 by this group, he was surprised that money management was also ranked so high.
 - CS Jordan noted that last year the needs assessment was on mental health, which may have contributed to the Council rating it as #1. Money management may have been ranked high by this group because we did drop-in interviews at Lutheran Social Service and a lot of those people are accessing money management through the program.
- CM Thomas commented that the med adherence program ended because it was funded by a grant. She feels that anything that we do that isn't about creating new housing, then we are just moving things around. Until we as a community are providing new housing for people, we are just spinning our wheels. She knows that there are limitations on how we spend this money, but she feels that we can use our voices to demand new housing to be built. She inquired about intensive case management and navigation, people reported that they are receiving support but then they also stated they wanted more intensive case management.
 - CS Jordan noted that the survey is imperfect. He sits them down and explains the purpose and then they fill out the survey. There is a facilitated conversation and an incentivized survey. He noted that they may put different information on the survey than what they express in the interviews. There can be often be a disconnect between the qualitative and quantitative data.
- CM Harkin commented that some agencies hire third party folks to be security guards who have their own biases and may treat clients unfairly. Some folks don't go back to that agency for care because they don't want to be treated like that. This is something he hears all the time.
- Question: Regarding food, were clients aware of hot food provided throughout the city?
 - CS Jordan responded that yes, you can get one meal for the day. The service provider provides frozen meals and some people do not have microwaves or freezers to cook that food. The food service provided is great but it doesn't always reach the highest need population. He suggests coming up with some creative ways to address that.
- Question: Why are there so low numbers from API?
 - CS Jordan noted that we didn't recruit especially from API or from any one population.

- Question: Regarding those who accessed mental health, how many people continued with follow up care?
 - CS Jordan responded that a lot of people access crisis mental health services and some people are accessing ongoing therapy although it can be challenging because there is a rotating cast of therapists. He noted that a lot of people were receiving psych meds.
- Question: There was a quote about not feeling safe being a women in an SRO, how is that addressed in regards to safety?
 - CS Jordan noted that it hasn't been addressed, the dangers of living in the Tenderloin and living in SROS is exacerbated among youth and women. There is not a lot being done to address the safety of anyone in that situation.

Notecards

- In regards to the quote that people who are homeless and have HIV that the majority are more likely to be women, PWID, Transwomen, African American, MSM: This reinforces that addressing housing needs may be effective at reducing HIV health disparities in these populations. The Council should continue to highlight this s and promote housing solutions for HIV prevention.
- Were the previously incarcerated staying in sf due to probation issues
 - CS Jordan noted that yes, some.
- It is heartbreaking to hear the quotes from participants. What can the council achieve if it joined the efforts of other existing bodies involved in addressing structural solutions to homelessness instead of focusing on something small by ourselves?
- The over reliance on abstinence based care creates a huge barrier to for drug users with HIV or at high risk for HIV. We need to make true harm reduction treatment and housing programs.
- I refuse to believe that homeless people don't have dreams or aspirations. It's due to city officials not caring.

Public Comment:

- Craig Hutchinson stated that a lot of the clients that we serve that eventually get housed have a hard time living independently, he recommends providing assistance on how to live independently in a closed environment.
- Bill Hirsch stated that he would like to see a recommendation asking the City to allocate more funding for housing for homeless folks. There are many advocacy efforts, HESPA has actively advocated for funding of a variety of services for homeless folks for many years. The Council can help the citywide efforts to address this issue.
- The Council reviewed motions coming from the Steering Committee.
- **MOTION: To extend Quality Improvement training opportunities to public facing staff that are not service providers (e.g. reception, security).**
- CM Bowman noted that there should be a stronger recommendation about requiring training for public facing staff. People should have the opportunity for this training, he understands that they are contracted staff but he feels that security and receptionists have different training needs. Changing the dynamic of how security guards interact with clients.
- CM Sutter inquired about how far HHS can go to mandate this. He knows that third party security are the toughest to get in line to participate in a client centered perspective.
 - Co-Chair Goodwin noted that HHS likes the idea of adding this as a training component. The first step would be to meet with some of these providers about the timing and focus of the training. He is concerned about mandating these trainings because several of these providers don't receive funding from us. We can encourage third parties to have their staff participate in order for them to be more sensitive and hospitable. He will look into trainings for agencies that HHS does fund.

- CM Geltmaker inquired if agencies rent space out of buildings and landlords provide that security. If you mandated it, it could limit people from responding from an RFP.
 - CS Jordan noted that when we develop this recommendation, our thought was to make the language stronger to compel agencies to mandate these trainings. He had a long conversation with Kevin Hutchcroft and the sense was that there is a variance based on the agency. The thought process was to figure out a way to sell this to security companies as additional work skills for their staff.
- CM Blum noted that customer service excellence training at DPH clinics that go into that you treat everyone with dignity. When you think about people in the front, it is disproportionately women of color who he hears have to find balance between openness and physical safety. We may be surprised at how many people voluntarily take these trainings. A mandate can get strange for agencies particularly if were not paying them.
- CM Shriver noted that what we are talking about is the City and governmental agencies who are impeding us from doing our jobs well and retaining and serving clients. He suggests taking this to the mayor's office or the health department in order to change policies throughout the system.
- CM Cooper commented that she feels that trainings should be mandated. She has seen security guards or receptionists disrespect someone or misgenders someone too many times.
- CM Blum commented that with security staff there are two roads; private and institutional police. Structured into many service contracts for private security are trainings. The issue is that there are not a lot of trainings to refer people to. This may be a great way to get the ball rolling on that.
- **VOTE: Motion passes. See column [3] for a vote breakdown.**
- **MOTION: To have HHS explore the distribution of liquid nutritional supplements (e.g. Boost, Ensure) for contracted agencies who serve highest need populations.**
- Co-Chair Goodwin noted that HHS talked about this and we are doing research. He noted that the Council can utilize future carry forward dollars to fund this. He commented that farmers markets vouchers got approval to double the amount of funding for that next year through supplemental Part B funds.
- CS Jordan noted that during the assessment we saw that people were using boost and ensure because they couldn't make the fresh food that was provided for them. He noted that liquid nutritional supplements are only covered through Medicare for people who have wasting.
- CM Lee inquired if there has been a cost analysis around boost and ensure compared to fast food vouchers.
 - Co-Chair Goodwin noted that there are many options other than Boost and Ensure that we are looking into. For the meals that we contract for, the UOS is quite low, and it is most likely comparable.
- CM Bowman commented that Council Affairs had a conversation about this, and this solution came directly from the community. People stated that this is what they prefer. The drinks are shelf stable, easy to digest and distribute.
- **VOTE: Motion passes. See column [4] for a vote breakdown.**
- **MOTION: To present the findings of the needs assessment to the Frontline Organizing Group.**
- **VOTE: Motion passes. See column [5] for a vote breakdown.**

- **MOTION: To have the Council Co-Chairs set up a meeting with the Director of the Department of Homeless and Supportive Housing.**
- CM Geltmaker suggested amending this motion to have the intent of the meeting be clarified.
- **REPLACEMENT MOTION: CM Sachdev moves to have the Council Co-Chairs set up a meeting with the GTZ Steering Committee and then the Director of the Department of Homeless and Supportive Housing to discuss recent findings of the epi data and the needs assessment.**
- The group discussed having a housing presentation with a lot of QA time and then having the Co-Chairs meet with the Director.
- **MOTION: CM Antonetty moves to table this motion.**
- **CM E. Flores seconds the motion.**
- CM Antonetty noted that it would be helpful to have more communication between the Council and the Dept. of Homeless and Supportive Housing. She noted that a presentation before the meeting would be helpful.
- **VOTE: Motion passes. See column [6] for a vote breakdown.**

Public Comment:

- Bill Hirsch noted that housing is a critical issue for people living with HIV. As HAPN is working on their budget advocacy strategy for the next year we are working to coordinate our efforts with the Council and Getting to Zero. There will be an ask around HIV specific housing.

6. Service Summary Sheets/ARIES Report- VOTE

- The Council received an overview of currently funded services and the demographics of RWPA clients.
- CM Geltmaker inquired about the placement of the therapeutic monitoring category. He also noted that if we are only spending 55% of the funds he is confused about how the savings resulted in staff vacancies.
 - Co-Chair Goodwin noted that that was the category order from last year. This is linked to a document that has all the UOS, UDC and allocation info. He found too late that this was in the wrong order. In regards to the second question, there are two therapeutic programs and they are both funded under general fund. We lowered one of these programs a few years ago and their contract was set up as a cost reimbursement. One of these programs does invoices about what they actually providing. Savings resulted from a low utilization of the genotypic test and savings from staff vacancies.
- Co-Chair Cabangun inquired about ART by race, there was a lot of unknowns for each group. Why are providers not able to gather data from their clients?
 - Flor responded that we allow for agencies who provide case management to ask these questions, not just primary care providers.
 - Co-Chair Goodwin noted that part of it is the importation into ARIES from other primary databases that doesn't completely import the ART information.
 - Co-Chair Cabangun asked if HSS is planning to help providers to address the unknowns.
 - Co-Chair Goodwin noted that we are talking with our data consultants moving forward and sending reminders to providers to clean up their data.
- CM Darpun noted that all of this data is held by HIV surveillance. She inquired why HIV surveillance data is not matched with ARIES clients.
 - Co-Chair Goodwin noted that there would need to be more funding and staff to complete this.
- CM Bargetto noted that to provide outpatient mental health it is \$4,000 per patient. For COE's to provide mental health and primary care it is \$2200. Why is that?
 - Co-Chair Goodwin noted that there is a much smaller UDC than the cost of the real service.

7. RWPA Resource Allocation- VOTE

- The Council will vote on Ryan White Part A resource allocation funding scenarios.
- CM Geltmaker commented that he understands the intent of the increased funding scenario but he is concerned that funding emergency housing will not be utilized how the council intended.
- **REPLACEMENT MOTION: Increased Funding: CM Sutter would like to amend the motion to state “if increased funding occurs, the council will reconvene to discuss this scenario.”**
- **CM Shriver seconds the motion.**
- The group discussed that Emergency Financial Assistance already has a mechanism to support people fighting evictions and to support housing needs, this may be a better service category to assist the homeless and unstably housed.
- **VOTE: Motion passes. See column [7] for a vote breakdown.**

- **MOTION: Flat Funding: If funding remains at the current level, service category resource allocation will remain level across all categories.**
- **VOTE: Motion Passes. See column [8] for a vote breakdown.**

- **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.**
- **VOTE: Motion Passes. See column [9] for a vote breakdown.**

8. RWPA Service Category Prioritization - VOTE

- The Council will vote on Ryan White Part A service category prioritization.
- The Council broke out into small groups to discuss the prioritization.
- Outpatient Substance Use moved up one spot; Pharmaceuticals moved down one spot. Legal Services moved up on spot; Non-Medical case Management moved down one spot. Transportation moved up one spot; Facility-based Health Care moved down one spot.
- **MOTION: CM Shriver moves to approve the 2018 RWPA Service Category Prioritization**
- **CM Thomas seconds the motion.**
- **VOTE: Motion passes. See column [10] for a vote breakdown.**

9. Co-Chair Elections- VOTE

- The nominations for Council Co-chair will be open.
- Co-Chair Cabangun nominates CM Shriver as Council Co-Chair.
- Co-Chair Siron seconds the nomination.
- CM Shriver accepts the nomination.
- Co- Chair Guzman nominates Charles Siron as Council Co-Chair.
- Co-Chair Walubengo seconds the nomination.
- Charles Siron accepts the nomination.
- Council Co-Chairs will be elected at the next full council meeting.

10. Next Meeting Date- VOTE

The next meeting is tentatively scheduled for Monday, October 23rd 2017 at 25 Van Ness, 6th floor conference room, from 3:30 to 6:30.

11. Adjournment

- Meeting adjourned at 4:02 pm by CS Molnar.

Prioritization and Allocation 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: October 3, 2017	[roll]	[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
Chuck Adams	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Orin Allen	P	Y	Y	Y	Y	N	Y	Y	Y	Y	Y
Margot Antonetty	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Richard Bargetto	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Bill Blum	P	-	-	-	-	-	-	-	Y	Y	Y
Jackson Bowman	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Ben Cabangun (Co-Chair)	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Cesar Cadabes	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Ed Chitty	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Billie Cooper	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Zachary Davenport	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Michael Discepola	E	-	-	-	-	-	-	-	-	-	-
Cicily Emerson	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Elaine Flores	P	Y	A	A	Y	Y	Y	Y	Y	Y	Y
Wade Flores	P	Y	A	A	A	Y	Y	Y	Y	Y	Y
Timothy Foster	E	-	-	-	-	-	-	-	-	-	-
Matt Geltmaker	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
David Gonzalez	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Dean Goodwin (Co-Chair) Jose Luis Guzman (Co-Chair)	P/P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Liz Hall	E	-	-	-	-	-	-	-	-	-	-
Paul Harkin	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Ron Hernandez	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Bruce Ito	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y

Lee Jewell	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Kevin Lee	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
T.J. Lee-Miyaki	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Jessie Murphy	P	Y	-	-	-	-	-	-	-	-	-	-
Irma Parada	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Ken Pearce	LoA	-	-	-	-	-	-	-	-	-	-	-
Mick Robinson	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Darpun Sachdev	P	Y	Y	A	Y	Y	Y	Y	Y	Y	Y	Y
Stacia Scherich	A	-	-	-	-	-	-	-	-	-	-	-
Mike Shriver	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Charles Siron (Co-Chair)	P	Y	Y	Y	Y	Y	N	Y	Y	Y	Y	Y
Gwen Smith	A	-	-	-	-	-	-	-	-	-	-	-
John Paul Soto	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Eric Sutter	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Laura Thomas	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Linda Walubengo (Co-Chair)	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
	Ayes		32	32	32	29	28	30	30	32	32	32
	Nayes						1		1			
	Abstain					2	2	1				
	Recusal											
	Total		32	32	32	31	31	31	31	32	32	32