## **HIV Community Planning Council**

## **FULL COUNCIL MEETING**

Monday January 22<sup>nd</sup>, 2017 25 Van Ness, 6<sup>th</sup> Floor Conference Room San Francisco, CA 3:30-6:30 pm

HIV Community Planning Council Members Present: Chuck Adams, Orin Allen, Margot Antonetty, Richard Bargetto, Bill Blum, Jack Bowman, Ed Chitty, Billie Cooper, Zachary Davenport, David Gonzalez (Co-Chair), Matt Geltmaker, Jose Luis Guzman (Co-Chair), Liz Hall, Paul Harkin, Ron Hernandez, Bruce Ito, Lee Jewell, Dominique Johnson, Kevin Lee, Jessie Murphy, Ken Pearce, Mick Robinson, Darpun Sachdev, Michael Shriver (Co-Chair), Gwen Smith, John Paul Soto, Laura Thomas, Linda Walubengo (Co-Chair),

HIV Community Planning Council Members Absent: Ben Cabangun [E], Cesar Cadabes [E: Proxy Ron Hernandez], Michael Discepola [E], Elaine Flores [E], Wade Flores [E], Timothy Foster [A], T.J. Lee-Miyaki [A], Stacia Scherich [A], Charles Siron [E: Proxy Michael Shriver], Eric Sutter [E]

**Others Present:** Michael Alexander, Barbara Green Ajufo (CAPS), Bill Hirsch (ALRP), Amy Cuckorich, Hanna Hijord, Sherisse Kemp, Tracey Packer, Nyesha Underwood

HHS Staff Present: Beth Neary

**CHEP Staff Present:** 

Support Staff Present: Ali Cone, Dave Jordan, Mark Molnar, Melina Clark

## **Minutes**

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

The meeting was called to order at 3:37 pm by Co-Chair Gonzalez. Roll was called and quorum was established.

## 2. Review and Approve January 22<sup>nd</sup>, 2018 DRAFT Agenda – VOTE

The January 22<sup>nd</sup> DRAFT Agenda was reviewed and approved by consensus.

- MOTION: Co-Chair Gonzalez moves to have the Membership Update become agenda item #7.
- Co-Chair Shriver seconds the motion.
- VOTE: Motion passes. See column [1] for a vote breakdown.

## 3. Review and Approve November 27, 2017 DRAFT Minutes – VOTE

The November 27, 2017 Minutes were reviewed and approved by consensus.

#### 4. Announcements

- CS Jordan announced that Community Engagement will start examining target populations for the upcoming years, COLAs and needs assessments. He invited anyone who is interested to email him, or attend the next meeting on Wednesday February 7<sup>th</sup> at 3pm.
- CS Molnar announced that CS will be taking individual photos for the website at the next Full Council meeting. Council Members are also welcome to send CS their own pictures or can choose to not have their picture taken.

#### 5. Public Comment

Bill Hirsh commented that HAPN and ALRP have been working to coordinate efforts with Getting to Zero
(GTZ). They are waiting on the city for backfill from federal funding cuts, to continue funding for the
Golden Compass Project, housing subsidies, mental health services and Safe Consumption Sites (SCS).
They invite the Council to join them in their advocacy efforts.

#### 6. Council Staff Update

- CS Cone noted that the deadline is approaching for filing 700 forms. She has emailed the Council with instructions for filing them electronically.
  - o Council Staff also has hard copies and sample forms available upon request.

#### 7. Membership Update- VOTE

- The Council reviewed a motion coming from the Membership Committee recommending Cassandra Roberts as a member of the HCPC.
- MOTION: To approve Cassandra Roberts as a member of the HIV Community Planning Council.
- VOTE: Motion passes. See column [1] for a vote breakdown.

## 8. CDPH Office of AIDS update

- CM Hall reported:
  - Senate bill 239, chaptered in 2017, took effect January 1 2018. It modifies state penal laws related
    to HIV transmission that specified a higher punishment than laws related to transmission of other
    communicable diseases. More information can be found on the OA website.
  - Dollar amounts are available on website for the Ryan White Part B HIV Care Program Allocation Award. All HCP and Minority AIDS Initiative (MAI) contractors received their 2018/2019 allocation award notifications. The deadline for budget forms to be submitted is February 23<sup>rd</sup>.
  - The Housing Plus Project (HPP) is beginning the program evaluation process. This program is in the third year of a five-year implementation, and we're excited that we have the staff to make this work.
  - There was an in-person Stakeholder Engagement Group (SEG) meeting in Sacramento. The SEG is working with OA to update the HCP, MAI, and Housing Opportunities for Person with AIDS (HOPWA) allocation formulas. Kevin Hutchcroft was representing San Francisco and is available to answer questions.
  - In October there was a stakeholder webinar to share information about HCP training needs and how to potentially improve HCP trainings in the future. Based on feedback from the two options presented for training, "Option 2" was chosen going forward. This option would establish two contracts, separating meeting and conference planning services from training only services. This will include establishing a competitive bid process for training services to increase the likelihood of procuring the best vendor to provide these services.
  - Assembly Bill 2640 went into effect January 1<sup>st</sup>. It requires medical providers or people
    administering HIV tests, to inform patients at a high risk for contracting HIV about prevention
    methods including PrEP and PEP.
  - In November OA hosted a combined HIV prevention and HIV surveillance conference in LA, which
    was meant to provide information about the new 5 year HIV prevention and surveillance strategy
    that went into effect January 1. The conference highlighted the best practices, strategies for
    implementing that contract as well as Getting to Zero.
  - The OA Prevention Branch is developing a Program Guidance for its new five-year Integrated HIV Surveillance and Prevention PS18-1802 grant, which is expected to be released in March 2018. This grant applies to San Mateo and Marin counties but not to San Francisco.

- The Merced Needle Exchange has applied to CDPH to authorize a new syringe exchange program. The proposed needle exchange will have a fixed site at the Family Care Clinic, a rural non-profit clinic which predominantly serves Medicaid and uninsured patients. Public comments will be accepted through March 20<sup>th</sup> 2018, after which the department will have 30 days for a decision.
  - o CM Cooper inquired how a needle exchange works in family care center.
    - CM Hall replied that she will follow up with more information.
- Sharisse Kemp reported:
  - The newly released state budget continues to support the GTZ program. It also supports OA's
     Surveillance and Prevention programs, which continue to receive state and general funds. The
     prevention funding remains unchanged. The update includes two new changes related to the AIDS
     Drug Assistance Program (ADAP).
    - The ADAP Eligibility and Enrollment Budget Change Proposal requests additional funding to support two administratively established and 15 permanent positions to manage the increased workload involved in transitioning ADAP enrollment services to CDPH, OA.
    - The ADAP Estimate proposes an increase in funding to ADAP Enrollment Sites. They propose that the total amount of funds allocated to ADAP Enrollment Services is adjusted annually, based on caseload and estimated services to be performed in each fiscal year. They will use performance measures in existing ADAP enrollment sites to ensure that additional funding is used to transition medication-only clients to private insurance and OA-HIPP and meet defined metrics, such as improvement in viral suppression rates at each enrollment site.
  - OA is developing the enrollment worker training for the PrEP Assistance Program which will be released in early 2018.
    - On December 14 2017, 9 individuals received the program policy and system training. Once they complete the ADAP Enrollment System (AES) eLearning, they will begin enrolling ADAP clients into comprehensive health coverage.
  - The Covered California open enrollment period ends January 31<sup>st</sup> 2018. ADAP staff and enrollment workers were provided with Management Memoranda containing information regarding changes for Covered California consumers and resources to help assist clients in choosing a health insurance plan. OA mailed letters in English and Spanish to existing clients who use Covered California as well as those without insurance. They apologized for inadvertently sending letters to clients who were ineligible for Covered California.
  - CM Pearce thanked OA for revisiting how they reimburse enrollment centers.
  - o Public comment None.

## 9. Drug User Health Initiative

- The Council reviewed a presentation from Hanna Hjord on the Drug User Health Initiative (DUHI).
- CM Cooper asked if the police training includes cultural competency training for police officers.
  - Hanna Hjord replied that the main focus of training is how to identify overdose, what signs to look for and how to help.
  - CM Thomas thanked CM Cooper for bringing this up and acknowledged that it needs work. Her coworkers have done a lot of good bridge building with them, including line-up training.
    - CM Harkin noted that this training was focused on law enforcement learning to recognize a drug overdose and reverse it. In the past, police officers were calling EMS in the event of an overdose, but people would die before the EMS could do anything. Usually it is drug users and their friends doing overdose reversals. This training is attempting to change the culture surrounding police overdose response, in order to focus more on saving lives.

- CM Cooper inquired whether needles are counted when disposal boxes are emptied. She was curious about the frequency of needle disposal in different neighborhoods.
  - Hanna Hjord stated that the needles are counted.
  - Co-chair Guzman added that he empties the needle disposal kiosks. Many people also drop
    water bottles full of needles. CHEP is working with partners at DPH to figure out how to
    manage kiosks that are filled with trash. They have noticed increasing use of the disposal
    stations near the Bill Graham Civic Auditorium.
- Co-Chair Shriver expressed concern about overdose deaths resulting from the drug GHB.
  - Hanna Hjord noted that GHB has not been of focus of DUHI, but that it seems like an issue that should be incorporated.
  - CM Harkin noted that it's becoming more common to see interactions of different drugs leading to overdose. Currently they are focusing on opiates.
- Co-Chair Shriver asked for an update on the prevalence of fentanyl in San Francisco.
  - CM Harkin responded: The indications are widespread. It seems to be most prevalent in drugs bought in SOMA or the Tenderloin, but can be found in other areas as well. Fentanyl test kits are being distributed around San Francisco.
  - o CM Hernandez asked if a program exists that distributes free naloxone.
    - Hanna Hjord mentioned that there is a clean needle exchange at 13<sup>th</sup> and Howard that has naloxone available.
  - CM Johnson stated that her building has syringe disposal boxes in the elevators. She inquired if DUHI
    gets any statistical information from SRO's.
    - Co-chair Guzman responded that their program Jose only deals with outdoor disposal, and don't get syringe use information from SRO's. Some public restrooms have sharps disposal, which are usually managed by custodial staff. Those aren't managed by DPH. Because they don't fund that program they don't get data automatically from them. However it's something DPH could look into.
  - CM Johnson expressed concern about needles on ground in her neighborhood. There need to be more drop boxes in different locations in the Tenderloin.
    - Co-chair Guzman offered to check-in further during the break about box placement. He noted that DPH needs to work with building managers concerning this issue.
    - CM Cooper added that boxes are needed along Larkin Street at the intersections of Ellis,
       O'Farrell and Hyde, in addition to in Korea town near Eddy and Larkin. She noted that there are no boxes in this area.
  - Public Comment- Michael Alexander has noticed there are many drug users near the school on Ellis and Leavenworth. He would like a box to go there because of all the kids in the area.

#### 10. CHEP & HHS Update

- Co-chair Guzman reported:
- The CDC 18-1802 joint HIV prevention/surveillance FOA started January 1<sup>st</sup> 2018. For component A, which is combined HIV prevention and surveillance funding, CHEP received about 5 million. Funding for component B (Project OPT-IN), will be announced in February.
- There are two new disposal kiosks, in Bayview on Evans and Shelby St., and on 5<sup>th</sup> between Bryant and Harrison.

- Emily Raganold will be joining CHEP as the End Hepatitis C project coordinator. She will be working closely with the funded sites around Hepatitis C testing data and quality assurance.
- CHEP is partnering with Harm Reduction Coalition to offer harm reduction trainings to DPH and DPH-funded agencies.
  - CM Pearce inquired how the current CDC grant compares with past years.
    - Tracey Packer noted that this represents a significant decrease from past years. CHEP received 11 million in 2011 for HIV prevention. At that time, the CDC determined that funding should be prioritized where the most cases and largest disparities exist (Southern US). The backfill from San Francisco has come close to offsetting the reduced funding.
  - Co-Chair Shriver inquired how the 4.2 million compares to the high-water mark.
    - Co-Chair Guzman responded that the high water mark was 250k higher. They did not get the ceiling of the reward, but it was closer than in the past.
- Co-chair Goodwin announced: (1:09:50)
  - The written report for the October 2017 Ryan White Part A Comprehensive Site Visit will be available in the next few weeks.
    - Lenny Green is now considered "essential personnel", so in the event of another government shut-down he will remain working and available to answer questions.
  - The State Office of AIDS Ryan White Part B Comprehensive Site Visit Tuesday will be on Tuesday January 23<sup>rd</sup>.
  - Today was the deadline for all HHS funded programs to submit their ARIES client level data for 2017. HHS will be reviewing the data and following up with providers before everything is submitted to HRSA.
  - Concerning the HHS Quality Management Program:
    - HHS held a client de-escalation training in December, with about 20 provider staff attending. There is an upcoming training called Group Communication, Facilitation Strategies and Skills Development to be held in February or March. Immigration Legal Issues and Creating a Welcoming Environment will be held by the end of February.
- The Council responded with questions:
  - CS Molnar asked for an update regarding Barbara Garcia's message to service providers about federal attention to San Francisco as a sanctuary city.
    - CM Blum responded that there is a series of steps that can be taken to lawfully block ICE entry into clinics. Barbara Garcia's extensive memo outlines the steps that DPH is required to follow. He added that there is a quick response team available to call in the event of an ICE raid.
    - CM Chitty inquired if this procedure is required of private providers, doctor's offices or Kaiser.
    - CM Blum responded that while DPH does not have jurisdiction over them, they have shared this information widely within the care provider network. DPH would respond promptly if they received a request for a consultation.
    - CS Molnar added that Council Staff is available to send out the explicit instructions upon request.
- Public comment—None.

#### 11. At-large Member- VOTE

- The nominations for At-Large Steering Committee member will be open.
- CM Adams nominates CM Pearce as At-Large member.
- CM Hernandez seconds the nomination.
- CM Pearce accepts the nomination.

- MOTION: To approve Kenneth Pearce as an At-Large Steering Committee member of the HIV Community Planning Council.
- VOTE: Motion passes. See column [3] for a vote breakdown.
  - CS Molnar clarified that Ken will be filling the remainder of David's term, which is one year.

#### 12. Break

## 13. U=U (Undetectable=Untransmittable)

- Matt Spinelli, an HIV and PrEP provider, gave a presentation on the U=U campaign.
  - Evidence for U=U has been accumulating since 1998, when they first learned that women who suppressed their viral load didn't transmit HIV to their babies. Multiple studies have been conducted since then which support the evidence that an HIV-positive partner with an undetectable viral load cannot transmit the virus to an HIV-negative partner.
  - The most compelling evidence was found in during two 2016-17 studies, PARTNER and Opposites
    Attract, which found that out of 65,000 condom-less sex acts, there were 0 HIV transmissions
    within partnerships. This evidence swayed many people who were previously opposed to U=U,
    such as Tony Fauci.
  - The CDC is supportive of the U=U campaign. They said in a statement, "people who take ART daily
    as prescribed and achieve and maintain an undetectable viral load have effectively no risk of
    sexually transmitting the virus to an HIV-negative partner."- CDC (September 2017)
  - Getting to Zero (GTZ) is also supportive of the U=U campaign.
- Matt Spinelli responded to questions from the Council.
  - CM Pearce inquired about the difference between being undetectable and having a suppressed viral load. Different labs seem to have different definitions on what this means. He emphasized the importance of making sure the public understands the difference between suppressed and undetectable.
    - A conservative estimate would mean a suppressed viral load under 200. Public health language is difficult to explain to the public, which is one reason they are doing their best to promote the U=U campaign.
  - CM Murphy inquired if there have been any efforts to include People Who Inject Drugs (PWIDs) in trials related to U=U.
    - There currently aren't any trials for PWIDs. The mode of transmission is different for PWIDs than for sex partners, which makes it a different process for scientific sampling. Treatment is likely to reduce transmission, but there is no evidence yet that undetectable=untransmittable for Injection Drug Users. This information may not be available for some time.
- The panel commented on the U=U campaign. The panel included Shannon Weber director of HYD and loveyoutoo.org, Paul Marcelin, a member of the HIV Community Advisory Group at DPH, Mike Shriver, Co-Chair of the Council and Chair of the board at the National Memorial AIDS Foundation, and Matt Spinelli, an HIV and PrEP provider at Ward 86. Hyman Scott, a physician at Ward 86, facilitated the panel discussion on U=U.
- The panel introduced themselves and asked the council to comment on the messaging surrounding U=U.
   Are there any concerns about caveats?
  - cM Cooper noted the importance of maintaining HIV testing as a high priority. There are still many folks in San Francisco who are infected but undiagnosed.
    - Shannon Weber agreed that HIV testing needs to be a priority, and nuances such as this need to be kept in mind during the U=U campaign.

- CM Harkin added that U=U complements efforts to get people tested and to use PrEP.
   U=U provides incentive for people to find partners who are in regular care, who get tested regularly, who are undetectable and who are using PrEP.
- CM Blum inquired what the role of providers should be regarding educating patients about U=U.
  - Matt Spinelli responded that the U=U message is still controversial in the provider community. This campaign needs to target providers as well as consumers.
  - Shannon Weber added that the U=U message needs to be consistently shared by all types of providers, including doctors, nurses, support staff, etc. In order for people to remain engaged in care, they need a team of folks who all have the same information.
  - Hyman Scott added that a multidisciplinary approach could be helpful in promoting U=U, as the health care industry can be very hierarchical. Providers also need to be more comfortable talking about sex with their patients.
  - Co-Chair Shriver stressed the importance of adherence, compliance, motivation and maintenance in HIV prevention efforts. The U=U campaign needs to be promoted more widely throughout the city.
- CM Pearce has noticed a disparity concerning undetectable status among providers. Different
  providers also test for CD4 count and viral load at different frequencies, and there is a disparity
  among labs concerning undetectable and suppressed status. He emphasized the importance of
  making undetectable status universal among providers, especially for long-term survivors. (49:00)
  - Matt Spinelli noted the importance of making sure the HIV community is not divided over the U=U message. The campaign aims to be inclusive of everyone in the HIV+ community, including long-term survivors. He also noted that the research shows that a viral load of 200 copies/ml or less is considered untransmittable.
  - Hyman Scott added that there is a need to make sure providers feel comfortable, while also ensuring that the messaging is not stigmatizing for people who meet the threshold.
  - CM Harkin noted that providers have an obligation to explain results clearly and thoroughly. It is very important for providers to have this discussion about what undetectable means and how sensitive the tests are with their patients.
- Some Council members expressed concern that there could still be a possibility of transmission from an undetectable, HIV+ partner to an HIV negative partner. Some council members were unsure if undetectable means fewer transmissions, or no transmissions at all. Others were concerned that the U=U campaign will encourage people to have unsafe sex.
  - Co-Chair Shriver noted that if an HIV+ partner has an undetectable viral load, they cannot transmit the virus to an HIV negative partner. The data is very clear. This is true regardless of whether the negative partner is using PrEP.
  - Shannon Weber added that while the science irrefutably backs U=U for sexual transmission, there
    is still debate about perinatal transmission, breastfeeding and drug use.
- Public Comment- None.

#### 14. UCHAPS Update

- Co-chair Guzman noted that the next UCHAPS meeting is on January 23<sup>rd</sup>.
  - They will soon begin testing a new virtual meeting structure. Co-Chair Guzman will have more details available after the meeting on January 23<sup>rd</sup>.

#### 15. Public Policy Update

- CM Jewell reported:
- The senate has voted to end filibuster on the government, with an agreement that will keep the government funded through February 8<sup>th</sup>.
- HHS is moving forward to dismantle the ACA.

- Michael Goldrosen, the Department Director of the Ryan White program was indicted. High level officials are now managing the Ryan White Program.
- The president fired all members of the Presidential Advisory Council on HIV/AIDS (PACHA). It's not unusual for a president to do this, but AIDS activists are concerned about who Trump will appoint.
- Vice President Pence posted on his website that he was looking forward to reauthorizing Ryan White
  act. There doesn't appear to be a consensus in Congress to do this. We don't want to see it
  reauthorized right now.
- CA State update: Medi-Cal received the lion's share of the Health funding in Governor Brown's state budget proposal.
- California is planning to expand Covered California by adopting an Individual Mandate, requiring all Californians to have health insurance.
- The Trump administration announced a new "conscience and religious freedom" office to protect health workers who oppose abortion, sex-changes and some contraception.
- The Care Coalition board meeting is scheduled for January 28<sup>th</sup> and 29<sup>th</sup>.

## 16. Next Meeting Date

The next meeting is tentatively scheduled for Monday, February  $26^{th}$  2018 at 25 Van Ness,  $6^{th}$  floor conference room, from 3:30 to 6:30.

## 17. Adjournment

Meeting adjourned at 6:24pm by Co-Chair Gonzalez.

# Full Council Meeting HIV Community Planning Council

Roll Call: **P**=Present; **A**=absent; **E**=Excused; **L**=Leave of Absence Votes: Votes: **Y**=Yes; **N**=No; **B**=Abstain; **R**=Recused (deduct from quorum)

Date: January 22, 2018	[roll]	[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
Chuck Adams	Р	Υ	Υ								
Orin Allen	Р	Υ	Υ								
Margot Antonetty	Р	Υ	Υ								
Richard Bargetto	Р	Υ	Υ								
Bill Blum	Р	Υ	Υ								
Jackson Bowman	Р	Υ	Υ								
Ben Cabangun	E	-	-								
Cesar Cadabes Proxy Ron Hernandez	E	Υ	Υ								
Ed Chitty	Р	Υ	Υ								
Billie Cooper	Р	Υ	Υ								
Zachary Davenport	Р	Υ	Υ								

Michael Discepola	Е	-	-				
Cicily Emerson	Р	-	Υ				
Elaine Flores	E	-	-				
Wade Flores	Е	-	-				
Timothy Foster	А	-	-				
Matt Geltmaker	Р	Υ	Υ				
David Gonzalez	Р	Υ	Υ				
Dean Goodwin (Co-Chair) Jose Luis Guzman (Co-Chair)	P/P	Υ	Υ				
Liz Hall	Р	Υ	Υ				
Paul Harkin	Р	Υ	Υ				
Ron Hernandez	Р	Υ	Υ				
Bruce Ito	Р	Υ	Υ				
Lee Jewell	Р	Υ	Υ				
Kevin Lee	Р	Υ	Υ				
T.J. Lee-Miyaki	Α	-	-				
Jessie Murphy	Р	Υ	Υ				
Irma Parada	Р	Υ	Υ				
Ken Pearce	Р	Υ	Υ				
Mick Robinson	Р	Υ	Υ				
Darpun Sachdev	Р	Υ	Υ				
Stacia Scherich	Α	-	-				
Mike Shriver	Р	Υ	Υ				
Charles Siron Proxy Mike Shriver	E	Υ	Υ				
Gwen Smith	Р	Υ	Υ				
John Paul Soto	Р	Υ	Υ				
Eric Sutter	E	-	-				
Laura Thomas	Р	Υ	Υ				
Linda Walubengo (Co-Chair)	Р	Υ	Υ				

Ayes	31	31				
Nayes						
Abstain						
Recusal						
Total	31	31				