

HIV Community Planning Council
ANNUAL PRIORITIZATION AND ALLOCATION SUMMIT
Friday September 27th, 2019
25 Van Ness, 6th Floor Conference Room
San Francisco, CA
10:00 am-4:00 pm

HIV Community Planning Council Members Present: Chuck Adams, Orin Allen, Alexandria Andrews, Bill Blum, Ben Cabangun, Cesar Cadabes, Ed Chitty, Elaine Flores, Matt Geltmaker, Dean Goodwin (Co-Chair), Thomas Knoble (Co-Chair), Ron Hernandez, Bruce Ito, Lee Jewell, Lily Krutel, Helen Lin, Antwan Matthews, T.J. Lee-Miyaki, Jessie Murphy, Ney Nascimento, Irma Parada, Ken Pearce, Darpun Sachdev, Charles Siron, John Paul Soto, Michelle Spence, Laura Thomas

HIV Community Planning Council Members Absent: Margot Antonetty [E], Jackson Bowman [LoA], Billie Cooper [E], Michael Discepola [E], Cicily Emerson [E], David Gonzalez [E], Paul Harkin [E], Dominique Johnson [E], Juba Kalamka [A], Mike Shriver [E], Gwen Smith [A], Eric Sutter [E]

Others Present: Rose Kalmin (PRC), Nga Le (Marin County HHS), Michelle Sobers (Jansen), Stephen Spano (HCAP), Wanda Vasquez (Jansen)

DPH Staff Present: John Aynsley (HHS), Kevin Hutchcroft (HHS), Beth Neary (HHS), Sharon Pipkin (Epi)

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

Minutes

1. Welcome and Icebreaker

- CM Cabangun led Council members in an icebreaker activity.

2. Introductions and Conflict of Interest Declaration

The meeting was called to order at 10:45 am by CS Molnar. Roll was called and quorum was established. Council members introduced themselves and declared their conflict of interests.

3. Review and Approve September 27th 2019 DRAFT Agenda

The September 27th 2019 DRAFT Agenda was reviewed and approved by consensus.

The agenda was amended to switch the Service Summary Sheets and the Epi presentation. The Epi presentation will now occur after lunch.

4. August 26th 2019 DRAFT Minutes – VOTE

The August 26th DRAFT Minutes were reviewed and approved by consensus.

5. Announcements

- None.

6. Public Comment

- None.

7. HRSA Mandate

- The Council received an overview of the HRSA-mandated planning council activities.
 - CS Molnar outlined the roles and responsibilities of the Council. These include:

- Define and determine how conflict of interest will be handled.
- Planning Council support staff
- Assess Needs
- Assess the efficiency of the administrative mechanism
- Develop standards of care and evaluate services
- Set priorities and allocate resources
- The difference/similarities of roles and responsibilities of the Grantee and the Planning Council
- He also went over the current eligibility, severe need and special populations definitions, which were officially approved at the June 2019 Full Council meeting.
- The Council thanked him for his presentation.

8. Break

9. Service Summary Sheets

- John Aynsley provided the annual presentation regarding the RWPA HIV service continuum, including:
 - CM Lee-Miyaki inquired why the UOS numbers are so low when there is such a need for dental care.
 - CM Goodwin responded that they fund two dental programs from RWPA. One program is a school, which sees a larger number of clients. The other is a DPH program that doesn't have a waitlist. If you are frontline staff and have folks on a waitlist, please come talk to DPH staff.
 - CM Krutel spoke to the disparity in dental care-- 50% of folks accessing dental services are white.
 - CM Goodwin responded that RWPA is payor of last resort. People don't have private dental insurance. What you see with dental is more of a representation of Epi, since there are many folks who are not insured.
 - CM Murphy asked if the units are meals?
 - John Aynsley responded that the UOS represent meals, groceries, etc... It's measured by weight.
- The Council thanked John Aynsley and CM Goodwin for the presentation.

10. Needs Assessment Recommendations- VOTE

- The Council considered motions regarding recommendations from the annual Needs Assessment.
- CS Molnar noted that these motions came out of this month's committees and work groups, starting at Council Affairs. The motion is already on the floor.
 - **MOTION: Prioritize one-time only emergency funds for durable medical equipment (eyeglasses, hearing aids, mobility assistance equipment, and special dental care). To develop strategies for implementation and increase accessibility to these funds by and for individuals most in need.**
 - **MOTION PASSES by roll call vote: See column (1) for vote breakdown.**
 - **MOTION: Explore ways to augment mental health services, specifically to address issues surrounding aging. These services should include individual psychotherapy as well as support groups, with an emphasis on therapies by licensed staff or those with significant clinical expertise. These services would not be limited to clients with severe mental health diagnosis, but would be made available to those dealing with mental health challenges common to the aging population, such as depression, anxiety, loneliness and isolation.**

- CM Jewell asked who will be exploring this.
 - a. CM Cabangun responded that it's meant to be broad, so that it can be decided more specifically later.
 - b. CM Goodwin noted that last year the Board of Supervisors added one-time funding for LTS, which was added back this year as part of the budget.
- **MOTION PASSES by roll call vote: See column (2) for vote breakdown.**
- **MOTION: As new funds become available, to create intensive case management program specific to the aging population, inclusive of case managers skilled in working with those with complex challenges around both medical and benefits, as well as increased mobile peer advocacy.**
- **MOTION PASSES by roll call vote: See column (3) for vote breakdown.**
- **MOTION: The Community Engagement Committee will compile demographic data by COE in order to assess the possibility of bolstering gerontology services within the current COE model. The committee will also explore collaboration with the LTCCC, the Department of Aging and Adult Services (DAAS), and with the Aging and Adult Services Commission, as well as gather information for analysis and dissemination within the aging population and the HCPC.**
 - CS Jordan noted that we realized we needed more information on aging specific services, as well as to reform a collaboration with the LTCCC.
- **MOTION PASSES: See column (4) for vote breakdown**

11. Lunch

12. Epi Presentation

- The Council received its annual presentation from Sharon Pipkin, including:
 - Trends Among Persons Living with HIV and New Diagnosis
 - Aging epidemic
 - Diagnosis trends by transmission category (men and women)
 - Trends in New HIV Diagnoses by Race/Ethnicity
 - Trends in Percent of Annual Diagnoses by Race Ethnicity: 2014-2018
 - Sharon noted that the numbers for Native American/Indian folks were so small that they omitted it from the report to protect confidentiality
 - Trends in Rate of New Diagnoses among Men, by Race/Ethnicity
 - Trends in Rate of New Diagnoses among Women, by Race/Ethnicity
 - Number and Percent of Homeless at Time of Diagnosis
 - Summary of New Diagnoses
 - Decreases: MSM, women, whites and Asian/Pacific Islander
 - Increases: people who inject drugs (PWID), African Americans (AA), Latinx persons, homeless persons
 - Latinx diagnoses were both the highest number and highest percent, superseding annual white diagnoses for the first time
 - In 2018, 20% of new diagnoses were homeless
 - Improvements in HIV Care Continuum
 - Faster Time to care Indicators

- Underlying Causes of Death for the 3 time periods
- Median Age at Death by Underlying Cause of Death and Time Period
- Underlying Causes of Death was HIV, by Race/Ethnicity
- Underlying Causes of Death was Non-AIDS Cancer, by Race/Ethnicity
- Health Disparities: PrEP Cascade
- Survival after Stage 4 (AIDS) 2012-2016 Diagnoses
- Health Insurance Status at Time of Diagnosis, 2014-2018
- Health Disparities- Viral Suppression among PLWH
- Disparities in Viral Suppression
- Homeless Persons Diagnosed with HIV Compared to All Diagnosed with HIV, 2009-2018
- PLWH Homeless or living in SRO, 2018
- Summary
 - Positive Trends
 - a. Overall decline in annual new diagnoses
 - b. HIV are continuum, increasing trends of proportions linked to care and virally suppressed, including faster time to care indicators
 - c. Deaths with underlying cause of HIV continue to decline
 - d. Increased proportions of new diagnoses with health insurance
 - Improvement needed
 - a. New diagnoses increased: among African American and Latinx persons, PWID, homeless persons
 - b. Increasing proportions of deaths due to causes that can be intervened on: heart disease and deaths linked to alcohol and substance use, including drug overdoses
 - c. Poorer survival after Stage 3: African Americans, PWID
 - d. No health insurance: More than a quarter of some subgroups (Latinx, API, TWSM)
 - e. Lowest viral suppression rates among PLWH: PWID, TWSM-PWID, and homeless persons
- CM Murphy asked about the incomplete 2018 death data.
 - Sharon responded that they didn't have this at the time of publication.
- CM Murphy spoke to disparities among new diagnoses—are these historic disparities or are we collecting more data at this point in time? Moving forward, should we expect those percentages to increase?
 - Sharon responded that we're not seeing this due to better diagnostics. In 2017 and 2018, we have more people who are getting diagnosed late (often stage 3). Overall we think there's good coverage in testing, rather than a diagnoses bias.
- CM Pearce spoke to page 167: he noted that the number of deaths this year is a dramatic change from 252. He spoke to the differences in causes of death between the younger and older populations.
- The Council thanked Sharon for her presentation.

13. RWPA Resource Allocation- VOTE

- The Council considered motions for increased, flat and reduced funding. CM Goodwin went over the specific numbers for the funding scenarios.
 - CM Geltmaker spoke to the last page with the reductions towards everything. Why would a reduction happen towards a category that doesn't have any RWPA funding?

- CM Goodwin replied that we look at the entire system of care funding source. If a program was funded at 500k, part from RWPA and part from general fund, the reduction would be applied across the whole thing.
- CM Murphy inquired if the Part B allocations are final.
 - CM Goodwin: this does not include the supplemental funding every year, just the base funding.
- CS Molnar spoke to the difference between Abstention and Recusal. A recusal means that you are subtracting from the number of votes—you are not counting towards the vote. Abstention does not subtract you, and it in effect counts as a No vote. The main reason you'd abstain is that you don't have enough information to vote.
- **MOTION: To approve the Increased Funding allocation scenario.**
 - *If increased funding occurs, the council will reconvene to discuss this scenario.*
- **MOTION PASSES by roll call vote: See column (5) for vote breakdown.**
- **MOTION: To approve the Flat Funding Allocation Scenario.**
 - *If funding remains at the current level, service category resource allocation will remain level across all categories.*
- **MOTION PASSES by roll call vote: See column (6) for vote breakdown.**
- **MOTION: To approve the Decreased Funding Allocation Scenario.**
 - *In the event of decreased funding, for the first 10% of reductions, allocation 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 by roll call vote: See column (7) for vote breakdown.**

14. Break

15. 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.
- CM Jewell commented that if we want to get to zero, our funding will eventually need to address the populations experiencing the most significant health disparities. He also spoke to the differences between how each county handles their Prioritization.
- **MOTION: CM Jewell moves to approve the 2019 RWPA Service Category Prioritization.**
- **CM Lee-Miyaki seconds the motion.**
- **MOTION APPROVED: See column (8) for vote breakdown.**

16. Co-Chair Elections- VOTE

- Nominations for Council Co-Chair are open.
- CM Pearce nominates CM Gonzalez and CM Shriver for co-chair. CM Siron seconds the nomination.
- CM Hernandez nominates CM Spence. CM Lee-Miyaki seconds the nomination.
 - CM Spence declines the nomination.
- The vote for Council Co-Chair will happen at next month's Full Council meeting.

17. Additional Business- VOTE

- None.

18. Next Meeting Date

The next meeting is tentatively scheduled for Monday, October 28th 2019 at the 25 Van Ness, 6th floor conference room, from 3:30-6:30pm.

19. Adjournment

- Meeting adjourned at 3:24pm by Co-Chair Walubengo.

Annual 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: September 27, 2019	[roll]	[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
Chuck Adams	P	Y	Y	Y	Y	Y	Y	Y	Y		
Orin Allen	P	-	-	-	-	-	-	-	-		
Alexandria Andrews***	P	-	-	-	-	-	-	-	-		
Margot Antonetty	E	-	-	-	-	-	-	-	-		
Bill Blum	P	Y	Y	Y	Y	Y	Y	Y	Y		
Jackson Bowman	LoA	-	-	-	-	-	-	-	-		
Ben Cabangun	P	Y	Y	Y	Y	Y	Y	Y	Y		
Cesar Cadabes	P	Y	Y	Y	Y	Y	Y	Y	Y		
Ed Chitty	P	Y	Y	Y	Y	Y	Y	Y	Y		
Billie Cooper [E: proxy T.J. Lee-Miyaki]	E	Y	Y	Y	Y	Y	Y	Y	Y		
Michael Discepola [E: proxy Lee Jewell]	E	Y	Y	Y	Y	Y	Y	Y	Y		
Cicily Emerson	E	-	-	-	-	-	-	-	-		
Elaine Flores	P	Y	Y	Y	Y	Y	Y	Y	Y		
Matt Geltmaker	P	Y	Y	Y	Y	Y	Y	Y	Y		
David Gonzalez	E	-	-	-	-	-	-	-	-		
Dean Goodwin (Co-Chair) Thomas Knoble (Co-Chair)	P/ P	Y	Y	Y	Y	Y	Y	Y	Y		
Paul Harkin	E	-	-	-	-	-	-	-	-		

Ron Hernandez	P	Y	Y	Y	Y	Y	Y	Y	Y		
Bruce Ito	P	Y	Y	Y	Y	Y	Y	Y	Y		
Lee Jewell	P	Y	Y	Y	Y	Y	Y	Y	Y		
Dominique Johnson	E	-	-	-	-	-	-	-	-		
Juba Kalamka	A	-	-	-	-	-	-	-	-		
Helen Lin	P	Y	Y	Y	Y	Y	Y	Y	Y		
Antwan Matthews***	P	-	-	-	-	-	-	-	-		
T.J. Lee-Miyaki	P	Y	Y	Y	Y	Y	Y	Y	Y		
Jessie Murphy	P	Y	R	Y	Y	A	Y	Y	Y		
Ney Nascimento	P	-	-	-	-	-	-	-	-		
Irma Parada	P	Y	Y	Y	Y	Y	Y	Y	Y		
Ken Pearce	P	Y	Y	Y	Y	Y	Y	Y	Y		
Wayne Rafus	A	-	-	-	-	-	-	-	-		
Darpun Sachdev	P	Y	-	-	-	-	-	-	-		
Mike Shriver	E	-	-	-	-	-	-	-	-		
Charles Siron	P	Y	Y	Y	Y	Y	Y	Y	Y		
Gwen Smith	E	-	-	-	-	-	-	-	-		
John Paul Soto	P	Y	Y	Y	Y	Y	Y	Y	Y		
Michelle Spence	P	Y	Y	Y	Y	Y	Y	Y	Y		
Eric Sutter	E	-	-	-	-	-	-	-	-		
Laura Thomas	P	-	-	-	-	-	-	-	-		
	Ayes		22	20	21	21	21	21			
	Nayes										
	Abstain										
	Recusal			1							
	Total		22	21	21	21	21	21			