



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

Promoting and protecting health, well-being, self-sufficiency, and safety of all in Marin County.



**Marin HIV/AIDS Care Council Meeting
MINUTES**

Wednesday, February 13, 2013

4:30p.m. - 6:30p.m.

899 Northgate Drive – 4th Floor Conference Room

San Rafael, CA 94903

[Approved March 27, 2013]

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Council Members Present: Roy Bateman, Kevin Cronin, Elaine J. Flores, James Frazier, Deborah Kasel, Walter Kelley, Jennifer Malone.

Council Members Absent: Saulo Bonagrazia(AE), Trinity Dushon (AE), Scott Marcum(AU).

Staff Present: Cicly Emerson, Chris Santini, Michael Schieble.

Public: Maria Camacho, Jami Ellermann, Leslie Gallen.

I. Call to Order.

Co-Chair Cronin called the meeting to order at 4:40p.m.

II. Roll Call.

Roll was called at 4:40p.m. Quorum was established with 7 of 10 Members present.

CM Bonagrazia(AE) was absent and excused. CM Dushon(AE) was absent and excused due to illness. CM Marcum(AU) was absent and unexcused.

III. Review and Approval of Agenda - VOTE

CM Malone requested a change in the order of the agenda. Agenda item, "XIII. Discussion of Support Services" was moved to follow "VII. Public Comment" to accommodate the schedules of the Service Providers, who were present.

CM Frazier motioned to approve the revised agenda. CM Malone seconded. There were no objections. The revised agenda was approved.

IV. Review and Approval of January 9, 2013 Minutes – VOTE

CM Bateman requested that the Oral Health amount be corrected to read \$5,200. [Page 3, XI. Reallocation of Unspent Part A Funds FY2012-'13, motion]. Council Support made the correction.

CM Malone made motion to approve the corrected January 9, 2013 minutes. CM Kelley seconded.

A voice **vote** was conducted. No objections were heard.

The revised minutes from the January 9, 2013 Marin Care Council meeting were approved.

V. General Announcements

CM Kasel announced "a flash mob" on February 14, 2013, starting at 12:45p.m. The flash mob will gather on 4th Street at the plaza in San Rafael. This "One Billion Rising" event is designed to bring awareness and demand an end to violence against women. www.onebillionrising.org

CM Kelley announced: 1.) Generation Black History Event, Friday February 15, 2013 from 4p.m. to 10p.m. AAACC 762 Fulton Street (near Webster) San Francisco. 2.) Womens Community Clinic 1833 Fillmore Street 3rd Floor, San Francisco, CA 94115. The Clinic provides many services, including HIV testing. www.womenscommunityclinic.org 3.) Quan Yin Healing Arts Center 965 Mission Street, Suite 405 San Francisco, CA 94103. The Center provides many services, including massage and acupuncture for HIV Clients. www.qyhac.org 4.) "Hot & Healthy with Garza" a Bridge HIV and SFDPH event on January 12, 2013.

CM Frazier reported that he received the “2012 Nia Award for Purpose” presented by the Black Brothers Esteem. The award recognizes outstanding volunteerism in 2012 by BBE.

CM Malone reported that on February 7, 2013, African American AIDS Awareness Day, nineteen rapid HIV tests were administered. 1/3 of the individuals tested were considered “high risk”.

VI. Co-Chair Report

None

VII. Public Comment

None

VIII. Support Services Discussion

A standard template was used for the presentation of information and discussion of each Service Category. The template included; the Ryan White definition of the Service Category, additional information not encompassed by the RW definition, staff explanation of how time is spent providing the service or anonymous client case examples, amount of money spent on service, how unit of service is calculated or counted, and number of units of service and number of clients served to date.

Emergency Funds

Leslie Gallen presented: “Service Category Presentation – Emergency Fund-General” handout (*see attachment -2-pages*)

In the discussion that followed, it was noted that the check goes to the vendor. If a Client needs Emergency Funds assistance, for example PG&E, the payment is sent to PG&E and not to the Client. If a Client is not eligible for RW Emergency Fund assistance, the Service Provider will research other possible sources of funding. Community Action Marin / C.A.M. has access to other funding sources for the payment of PG&E. PG&E low income, Comcast SSI / low income internet, Season of Sharing – rental assistance, St. Vincent de Paul, Salvation Army, and Ritter Center (House) are other possible resources.

The California Lifeline telephone program was discussed for Clients with basic telephone landline service or cell phone service.

The individual annual cap, for a RW eligible Client, is \$400 per year. CM Malone stated that 5% of the Clients exhaust the annual Emergency Fund individual amount, however there is not enough money in the fund to “entitle” each Client to the annual \$400 amount. CM Kasel asked if “over all, Emergency Funds needed more funding?” CM Malone responded that the individual annual amount was raised from \$325 to \$400, however we [M.A.P.] are actually running in the hole for the last three years.

CM Bateman commented that the program consists of a number of small payments. He asked about the cost of administration. CM Malone commented that there isn’t enough money to cover the staff and administration.

Transportation

Leslie Gallen presented: “Service Category Presentation – Medical Transportation” handout (*see attachment - 3-pages*)

L. Gallen added that Clients are encouraged to sign up for a Regional **Transit** Connection (RTC) Discount Card. It was estimated that 60% - 65% of Clients have discount cards. In addition, transportation may include transportation by a Peer Advocate. There are two volunteers at M.A.P. that provide transportation. Often, transportation to a pharmacy is needed by Clients.

It was noted, that a representative from Whistlestop had presented information to the Care Council about the transit program services and eligibility.

CM E.J. Flores commented that Golden Gate Transit has a monthly public meeting and welcomes input from the public. A discussion followed about the use of a \$2.00 bus ticket, which is valid for a local ride / one way only. CM Frazier described his use of Golden Gate Transit, since his doctor is in San Francisco.

Transportation to support groups, as a form of Medical Transportation, was discussed. CM Malone reported

that M.A.P. advocated for medical transportation services for Clients attending support groups. The current definition requires that a support group be professionally facilitated or run in order to qualify for RW Medical Transportation.

CM Bateman asked about the administrative cost of the program. A 10% administrative cost cap was noted. There is a cost benefit of buying bus tickets in bulk, however the benefit is greatly offset by the monthly administration and documentation required to run the program. CM Bateman added, "We have a number of programs that make very small payments. Ryan White doesn't pay for the full cost of administration. I'm ultimately concerned that this may weaken the Service Provider."

5:46p.m. CM Malone leaves. Quorum decreased to 6 of 10 Members present.

Substance Use Treatment – Residential

Chris Santini presented: "Service Category Presentation – Substance Abuse Treatment-Residential" handout (see attachment -2-pages)

CM Frazier asked about the system of care, point of entry to access RW Residential Substance Abuse Treatment. Co-Chair Cronin commented that Clients usually access care by going to the Helen Vine Detox Center or coordinate care with their Case Manger. There was no other discussion about Residential Substance Use Treatment.

Following the Support Services - Service Category discussion, CM Kasel suggested that there should be a requirement for Support Services' Clients to attend a class. The class would provide an overview of the Ryan White support (categories) available, eligibility, and teach household budgeting in order to maximize funds and decrease administrative program expenses.

Public Comment: None

IX. Reallocation of Unspent Part A Funds FY2012-'13 – VOTE

C. Santini distributed a handout titled, "2012-13 Ryan White Part A - Revised Estimated Unspent Ryan White Funds". The revised estimate of unspent funds available for reallocation was \$5,900. It was reported that M.A.P. was seeking assistance with uncovered personnel and operating costs of \$8,900 in the current FY2012-'13.

CM Kelley **motioned** to reallocate \$2,950 for the purchase of Food Cards / Food-Service Category and \$2,950 for M.A.P. personnel and operating costs. CM Frazier seconded.

CM Kasel commented that she would need to see a financial statement from M.A.P. in order to approve additional funds. Adding, "...more money was needed for food". CM Kelley commented that in addition to the M.A.P. food pantry, the Marin Food Bank and Marin City Church Pantry are two, of many locations for food in Marin. C. Santini commented that Service Providers administrative costs are capped at 10%. CM Bateman added, that there is a difference between a Service Provider's administrative cost versus personnel cost. Administration costs could include, computers, network, office supplies, and utility costs, for example. Things that an agency needs to run a program.

Public Comment: None

A roll call **vote** was conducted.

AYES: CM Kelley

Noes: CM Bateman, CM E.J. Flores, CM Frazier, CM Kasel

Recuse: CM Cronin

Abstain: None

1-5-1-0

The reallocation motion was not approved.

CM Kasel **motioned** to reallocate \$5,900 for the purchase of Food Cards / Food-Service Category. CM Bateman seconded.

There was no additional discussion.

Public Comment: None

A roll call **vote** was conducted.

AYES: CM Bateman, CM E.J. Flores, CM Frazier, CM Kasel, CM Kelley

Noes: None

Recuse: CM Cronin

Abstain: None

5-0-1-0

The reallocation of \$5,900 for Food Cards was approved.

X. Division of Public Health Report

C. Emerson reported: 1.) The San Francisco Council has a Health Care Reform Task Force, which has been meeting. The Task Force minutes and other summary information will be forwarded to Members of the Marin Care Council. 2.) Nine men participated in the Marin focus group for Latino MSM (men who have sex with men). Enrique Asis, who facilitated the group is in the process of developing a ~~Marin~~ needs assessment report. 3.) Discussion of the merger of the EMA's San Francisco HIV Health Services Planning Council and the San Francisco HIV Prevention Council is underway.

C. Santini reported: 1.) Marin County received notice that the 2013-'14 Ryan White Part A award amount is expected to be late this year due to Federal Budget delays. Service Providers have been asked to spend at the current rate until the award is announced. 2.) Handout, "Marin County Maintenance of Effort for Ryan White Funding". An overview of and details about the County's Maintenance of Effort was distributed. 3.) A draft of the "2012-2013 Annual Client Satisfaction Survey" was distributed. The response of "not applicable" was added to the survey for Clients who do not feel a survey question applies to them. Attendant Care was removed, since no one has used the service this year. A new survey about the Food Gift Card Program has been added. Any suggestions or edits from Council Members should be submitted to C. Santini via e-mail by February 20, 2013.

Public Comment: None

XI. Membership

2013 Membership Directory

Item tabled due to meeting time.

Scott Marcum Subsequent Term Renewal Vote

Item tabled due to meeting time.

XII. Community Outreach and Advocacy

Item tabled due to meeting time.

XIII. Discussion of Allocation Guiding Principles

Item tabled due to meeting time.

XIV. Next Steps – New Business

Next Meeting: March 13, 2013 – 899 Northgate 4th Floor Conference Room, 4:30p.m. – 6:30p.m.

Next Step / To Do's

- Agenda Item – Develop guiding principles / logic for allocation decisions.
- Agenda Item – Support Services philosophy for all support service categories.
- Agenda Item – Discuss Service Categories per 2013 calendar.
- Agenda Item – Client education on money management.
- CE – Distribute minutes from Health Care Reform Task Force.
- MJS – Facilitate SM subsequent term application.
- MJS – Contact SFAF for information on "AIDS Watch" Washington, D.C. / Summer 2013.

XV. Meeting Adjourned at 6:28p.m.

Service Category Presentation – Emergency Fund-General

1. Provide the Ryan White definition of the service category

Assist with emergency expenses related to essential utilities, housing, food (including groceries, food vouchers, and food stamps) and medication when other resources are not available.

2. Provide additional information if the definition doesn't encompass how this service is being provided in Marin

MAP administers the Emergency Financial Assistance program, providing limited help for very low income clients. Expenditures from the emergency assistance program are restricted to housing-related costs, e.g. PG&E bills or alternate fuel bills; water; garbage; phone bills; cable bills (basic service only) and occasionally assistance with moving or storage costs associated with moving.

The fund also will pay for health insurance premiums, deductibles and co-pays, in keeping with another emergency assistance category in Ryan White that isn't separately funded in Marin. Child care costs, the cost of obtaining an ID and short term and emergency housing costs can also be covered, again in keeping with other emergency assistance categories in Ryan White that aren't separately funded in Marin. In the last 7 years, we have only paid for childcare once and assistance with emergency housing has been very infrequent.

3. Have staff in this service category describe how they spend their time and/or provide some examples of client cases (anonymously) that illustrate the services that clients receive. Indicate if the client case represents a high need client or a typical client. Or have clients themselves speak to the Council about their experiences with a service.

Example of service delivery:

A client comes to MAP with a PG&E bill that they do not have the money to pay. This may be during the winter when utility bills rise. A staff member checks in ARIES to see if the client is currently RW eligible. The staff member checks a MAP spread sheet of emergency fund use to determine if the client has reached the annual limit. Clients in the lowest income category can request up to \$400 in assistance this contract year. If the client is still eligible for assistance, paperwork is completed and sent to MAP's accountant for payment. If the expense is not qualified, the Operations Manager determines if any other funding source can cover the request.

A number of clients have their cell phones paid for regularly. The majority of these clients are undocumented. Many of them do day labor and thus do not have stable incomes enabling them to pay for cell phones. It's our belief that a phone is an essential utility and allows the client to stay in contact with health providers and case managers, thus helping to assure that they remain in care. Therefore, we are willing to cover the cost of cell phone service up to the annual limit.

4. Indicate how much money is being spent on this service

\$15,766 was originally allocated for payments in 2012. Another \$5000 was allocated in January because all payment funds had been expended before the end of December.

5. Describe how a unit of service is counted in the service category

Each request is counted as 1 unit of service (UOS).

6. Describe how many clients have been served to date and how many units of service have been provided to date. (Include information on the frequency of the services received-what is the fewest number of units a client receives and the greatest number as well as how many units the majority of clients receive.)

As of December 31st –

286 requests (UOS) had been provided with Part A and B funding.
93 clients had been served with Part A and B funding.

Fewest # of requests/person = 1
Greatest # of requests/person = 11

Frequency of requests –

< 3 requests = 57 people
4 – 7 requests = 34 people
9 – 11 requests = 2

Eligible clients are divided into two income tiers –

Clients with incomes < \$930/month (eligible for up \$400 in assistance this contract year.)
Clients with incomes \$931 - \$ 1861 (eligible for up \$250 in assistance this contract year.)

Attachment 2

Service Category Presentation – Medical Transportation

1. Provide the Ryan White definition of the service category

Medical transportation services include conveyance services provided, directly or through voucher, to a client so that he or she may access health care services.

2. Provide additional information if the definition doesn't encompass how this service is being provided in Marin

We provide local bus tickets, Clipper Cards and Whistlestop Wheel ticket books rather than vouchers. If a client must use a cab, we have a contract with a taxi company and we reimburse the company for the cost of the ride. We do provide transportation directly for clients, when needed, but we are not reimbursed through Ryan White for the cost of our vehicle.

3. Have staff in this service category describe how they spend their time and/or provide some examples of client cases (anonymously) that illustrate the services that clients receive. Indicate if the client case represents a high need client or a typical client. Or have clients themselves speak to the Council about their experiences with a service.

This program provides Whistlestop Wheel ticket books, Clipper Cards in different denominations and Golden Gate Transit local bus tickets. In addition, when no other option is available and medical transportation must occur, a client can be authorized for a cab ride.

Staff purchases and maintains an inventory of all tickets/cards. They are tracked on a spreadsheet by serial number to ensure that we know how many tickets are available at any time, who has used the fund, and when we need to purchase more tickets. When purchasing tickets/cards, staff determines the quantity needed and contacts the vendor by email to order and pay for the tickets. A staff member goes in person to Whistlestop and/or the San Rafael Transit Center to pick up the tickets. They are entered onto the spreadsheet by serial number to verify that the correct number of tickets was received from the vendor. The inventory list allows us to know how many tickets are available to distribute and it allows us to track use of tickets by client for Ryan White contract purposes.

It is strongly suggested that if a client is eligible to receive a Regional Transit Discount Card (RTDC), they apply for one. This reduces the cost of the trips by 50%. To get the Clipper card cash value onto their RTDC card, a client calls Clipper to have the cash value from the card we give them put on the RTDC. Without an RTDC card, the Clipper card gives a 20% discount on each one way trip.

Transportation assistance is made available for clients to get to medical and MCM appointments, support groups and meetings which contribute to their health and wellbeing.

Example of service delivery:

A client comes to MAP asking for a ticket to take the bus to see his/her doctor at UCSF. Staff verifies in ARIES that the client is RW eligible. If eligible, the client is asked about the number of trips planned to the city and whether the client has a RTDC card to reduce the cost of the trips. The number of Clipper cards the client will receive is determined by the cost of travel from where the client boards the bus to their destination.

For clients needing only local trips, the number of trips planned to and from medical appointments determines the number of GGT local tickets the client receives.

Cost of Rides with Golden Gate Transit Adult Discount Fare Clipper Cards

These fares represent a 20% discount off the adult cash fare for intercounty travel (10% when traveling within Marin) and are valid when using a Clipper card through 7/1/2013.

Bus Zone	San Francisco	Marin County			Sonoma County		East Bay
	1	2	3	4	5	6	
1 <i>(San Francisco)</i>	n/a*	\$3.40	\$4.20	\$5.20	\$7.40	\$8.20	\$6.40
2 <i>(Sausalito, Marin City, Mill Valley, Tiburon, Belvedere)</i>	\$3.40	\$1.80			\$5.20	\$6.00	\$3.40
3 <i>(Corte Madera, Larkspur, Greenbrae, Kentfield, Ross, San Anselmo, Fairfax, Manor, San Rafael, Santa Venetia, Terra Linda, Marinwood, Lucas Valley)</i>	\$4.20				\$4.20	\$5.20	
4 <i>(Ignacio, Hamilton, Novato, San Marin)</i>	\$5.20				\$3.40	\$4.20	
5 <i>(Petaluma, Cotati, Rohnert Park)</i>	\$7.40	\$5.20	\$4.20	\$3.40	n/a*		\$6.40
6 <i>(Santa Rosa)</i>	\$8.20	\$6.00	\$5.20	\$4.20			
East Bay	\$6.40	\$3.40			\$6.40	\$3.40	

2. Indicate how much money is being spent on this service

\$6,760 was originally allocated for payments in 2012. Another \$2000 was allocated in January because all payment funds had been expended.

3. Describe how a unit of service is counted in the service category

Each \$2 local ticket is 1 UOS (one way rides)

For \$10 Clipper Cards, put onto an RTDC the UOS is determined by transit from where the client lives to San Francisco:

5 UOS are counted per card from Sausalito, Mill Valley, and Tiburon

4 UOS are counted per card from going north from Corte Madera to Marinwood
3 UOS are counted per card for travel to Novato

For \$10 Clipper Cards, NOT onto an RTDC the UOS is determined by transit from where the client lives to San Francisco:

3 UOS are counted per card from Sausalito, Mill Valley, and Tiburon
2 UOS are counted per card from going north from Corte Madera to Marinwood
2 UOS are counted per card for travel to Novato

- 4. Describe how many clients have been served to date and how many units of service have been provided to date. (Include information on the frequency of the services received-what is the fewest number of units a client receives and the greatest number as well as how many units the majority of clients receive.)**

As of December 31, 2012 –

1773 one way ride requests had been provided with Part A funding.
46 clients had been served with Part A funding.

Fewest # of requests (one way rides) = 1
Greatest # of requests(one way rides) = 209

Frequency of requests:
< 50 requests - 37 people
51 – 100 requests - 3 people
100 – 209 requests - 6

Eligibility for the Medical Transportation Fund:

Clients with incomes < \$1861/month

A Look at Public Transportation challenges in Marin County

There are down sides to having to use public transportation in Marin County. Golden Gate transit is set up to get commuters to and from San Francisco. Local bus routes which were abundant in the 80's have diminished over time. Golden Gate Transit has made efforts to get into all areas off the Hwy 101 corridor. However, these areas may or may not have a single bus line which runs from 7 or 8 in the morning to 6 or 7 at night. Sometimes there is no service on the weekend.

Golden Gate Transit Routes 35 and 36 are the two bus lines that operate through the Canal. These buses are often crowded and late, come too infrequently and do not operate early in the morning or late at night, with even more limited service on the weekends.

Because of these limitations, we are especially sensitive to the needs of clients who take public transit to medical appointments. Sometimes this is just not practical or feasible. We appreciate the efforts our clients make to use public transit and we want to assure that clients who go to the city for their medical care can make those trips as often as required.

Service Category Presentation – Substance Abuse Treatment Residential

1. Provide the Ryan White definition of the service category

The provision of treatment to address substance abuse problems (including alcohol and/or legal and illegal drugs) in a residential health service setting (short-term).

2. Provide additional information if the definition doesn't encompass how this service is being provided in Marin

Includes detox services at Helen Vine Detox Center. Detox services assist adults under the influence of drugs and/or alcohol to safely withdraw from the ill effects of intoxication.

3. Have staff in this service category describe how they spend their time and/or provide some examples of client cases (anonymously) that illustrate the services that clients receive. Indicate if the client case represents a high need client or a typical client. Or have clients themselves speak to the Council about their experiences with a service.

In 2011/12, a client decided to go into a 30 day residential drug treatment program for help with a methamphetamine problem. This treatment was paid for in part by Ryan White funds. The client successfully completed the treatment and continued to receive help from their aftercare program. The client was very happy with the services and the connections made with other people in the program. Since then, the client has gotten more connected to other support services including mental health care.

4. Indicate how much money is being spent on this service

\$2,000 was allocated to this service category for 2012/13. This funding had not been used by the time the funds for substance abuse treatment-outpatient had run out so the \$2,000 was transferred to the substance abuse treatment-outpatient service category. In addition \$7,180 in Ryan White Part B funds was also budgeted to cover services for clients of substance abuse treatment-outpatient services.

5. Describe how a unit of service is counted in the service category

One unit of service=one bed day

6. Describe how many clients have been served to date and how many units of service have been provided to date. (Include information on the frequency of the services received-what is the fewest number of units a client receives and the greatest number as well as how many units the majority of clients receive.)

See #4 above. In 2011/12, \$1,308 was spent on 35 bed days for 2 clients.