DEPARTMENT OF HEALTH AND HUMAN SERVICES

COUNTY OF MARIN   *Larry Meredith, Ph.D., Director*

DIVISION OF PUBLIC HEALTH
COMMUNITY HEALTH &
PREVENTION SERVICES
899 NORTHGATE DRIVE, SUITE 415
SAN RAFAEL, CA 94903
PHONE: (415) 473-4340
FAX: (415) 473-6266

Marin HIV/AIDS Care Council Meeting
MINUTES
Wednesday, November 10, 2010
4:30p.m. - 6:30p.m.
3420 Kerner Blvd.
San Rafael, CA 94903
Connection Center – Room 109
[Approved January 12, 2011]

Council Members Present: Kevin Cronin, Elaine J. Flores, Wade Flores, Walter Kelley, Scott Marcum, David Witt.
Council Members Absent: Roy Bateman(AE), James Frazier(AU), Jennifer Malone(AE), Norge Santana(LOA).
Staff Present: Cicily Emerson, Fern Orenstein, Chris Santini, Michael Schieble.
Public: none

I. Call to Order
The meeting was called to Order at 4:47p.m. by Co-Chair Kelley.

II. Roll Call
Roll was called and quorum was <u>not</u> established with 5 of 9 Council Members present.
Co-Chair Kelley asked for general announcements. The agenda approval vote and approval of minutes was tabled. The Large Group Strategic Planning discussion was begun <u>without</u> a quorum present.

CM Bateman(AE) and CM Malone(AE) were absent and excused. CM Frazier(AU) was absent and unexcused. CM Santana (LOA) is on a leave of absence.

CM Witt arrived at 4:55p.m. and quorum was established with 6 of 9 Members present.

III. Review and Approval of Agenda
Tabled – no quorum

IV. Review and Approval of Minutes – VOTE
Tabled – no quorum

V. General Announcements
None

VI. Public Comment
None

VII. Co-Chair Report
None
<u>Public Comment</u>: None

VIII. Strategic Planning Discussion – VOTE.
Fern Orenstein distributed a recap of the Care Council Informal Survey. Seven Council Members completed and returned the survey. The feedback was grouped by "themes from collected surveys" which included; Council strengths, Council responsibilities, likes, dislikes, relationship with the County, challenges, and needs. F. Orenstein commented, "…I thought these were very honest answers to the survey".

Personal needs and specific Council needs were listed. F. Orenstein introduced an exercise to prioritize the list of specific Council needs. Using a system of colored dots, Council Members were asked to rank by priority the list of needs.

After discussion, Council Members opted not to conduct the ranking exercise. It was concluded that the order in which the needs were recapped was also thier priority ranking. (#1 highest priority).

Council Needs:
1. Increase membership. More people/members.
2. Streamline Council meeting structure.
3. Enhance Council Member participation through support and training.
4. Improve planning of annual process of prioritization and allocation.

Review of Council Structure
CM Witt gave a brief review of the history of the Care Council and the prior Council stating, "The Council was reconstructed after the flame up and burn out of the prior Council." The subcommittee structure was developed, "…because there was a lot of work to do." A "rigid structure and bylaws" were developed. CM Witt added, "…it's created a structure and rigid discipline that is hard to support". CM W. Flores commented, "The current structure is very simple so we can bring people into care and do the actual work and …it stuns me that people [Council Members] think one meeting per month produces burn out".

The discussion continued about the current Committee and Council structure. No specific recommendations were produced from the discussion.

Training
There was consensus that training for new Members is lacking. Currently, the Membership Committee does an annual inventory of training needs and produces training. A request to San Francisco Council Support should be made so additional training resources are available. Training topics discussed included; 1.) What is HRSA [Health Resources and Service Administration]. 2.) What are barriers to care (general and specific to Marin). 3.) What is the Needs Assessment. 4.) How is the prioritization and allocation process conducted.

The Brown Act was discussed as an example of training for Council Members.

Epi-data
Developing projections of the number of people who are out of care based on the use of epidemiological data was discussed. An allocation for outreach based on the number of people out of care was suggested. CM Witt suggested that a data driven culture should be developed with the information supplied up-front.

Prioritization Process
There was agreement that the prioritization process is not linked to the allocation process. C. Emerson commented, "Prioritization does not translate into a system of care and the 75%/25% mandate is a consideration." There was consensus that the time spent on prioritization should produce more value and usable output.

Agenda Setting
CM W. Flores commented that it was hard to get anything on the agenda and that affected the substance of the meeting. Using the "New Business" agenda time to develop future agenda topics and the meeting agenda was discussed. There was consensus that the Co-Chairs and the Council as a whole were responsible for determining meeting agenda topics.

Steering Committee
A steering committee comprised of the Council Co-Chairs, Committee Co-Chairs, and interested Council Members was suggested for the purpose of agenda setting. There was agreement that the Steering Committee would meet separately from the Council meeting. After the initial meeting(s), the Steering Committee would meet quarterly.

Co-Chair Cronin commented, "There are pending changes from MediCAL, new eligibility for MediCAL, and electronic records requirements. We are entering into a period of rapid change and this is not the time for fewer meetings". Co-Chair Kelley suggested, "… short precise meetings that stay on point and stick to the agenda." CM E.J. Flores commented, "There is a lot up in the air".

The Steering Committee will meet to develop the 2011 calendar and agendas for first quarter meetings.

CM W. Flores suggested that the annual calendar should include meeting agenda topics. CM Witt suggested that the Steering Committee discuss: 1.) What the Council Structure will be. 2.) Meeting agendas. 3.) Bylaw changes and priorities. 4.) A timeline for proposed changes.

6:35p.m.Point of Order- Meeting overtime. Co-Chair Kelley made motion to extend the meeting time to 6:45p.m. The motion was approved and the meeting was extended.

December Meeting
CM W. Flores suggested that the Care Council should meet for the Holiday gathering and potluck the 3rd Wednesday of December, December 15, 2010. There was a consensus. The location needed to be researched and will be announced.

January Meeting
CM Marcum made motion to meet from 5:00p.m. to 7:00p.m. on Wednesday, January 12, 2011.
CM Witt seconded.

Although scheduled to start at 4:30p.m., a review of the meeting start times shows that Council meetings start around 5:00p.m. when quorum is present. Changing the meeting start time was discussed.

Public Comment: None

Vote: 6 - 0 - 0 - 0
Ayes: CM E.J. Flores, CM W. Flores, Co-Chair Kelley, Co-Chair Cronin, CM Marcum, CM Witt.
Noes: None
Recuse: None
Abstain: None
A voice vote conducted. The January meeting start time was changed to 5:00p.m.

IX.   New Business / Next Step – To Do's
- Holiday Gathering: December 15, 2010 - 4**:30**p.m.-6:30p.m.
  Social and pot luck dinner. Location TBA.
- Steering Committee to meet prior to January 2011 Council meeting.
- Next Meeting: January 12, 2011 - 5**:00**p.m.-7:00p.m.

Agenda Item – Develop Steering Committee and meet (early January).
Agenda Item – Epi-data request specific data & analysis.
Agenda Item – Develop training schedule for Council Members.
CS – E-mail request for suggested Client Satisfaction Survey questions.
WF – Business Card information / Taco Limited.

X.   Meeting Adjourned at 6:50p.m.