



**Marin HIV/AIDS Care Council Meeting**  
**MINUTES**  
**Wednesday, July 9, 2014**  
**3:00p.m. - 5:00 p.m.**  
**899 Northgate Drive – 1<sup>st</sup> Floor Conference Room**  
**San Rafael, CA 94903**

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**Council Members Present:** Roy Bateman, Kevin Cronin, Saulo Bonagrazia, Elaine Flores, Walter Kelley, Jennifer Malone (MAP), Deborah Kasel

**Council Members Absent:** Trinity Dushon (AE), James Frazier (on leave), Scott Marcum (AE)

**Staff Present:** Cicily Emerson, Sparkie Spaeth, Cio Hernandez

**Public:** Wade Flores, Bobby Moske, Jennifer Cust- SFHHSPC, Ali Cone- SFHHSPC, David Jordan- SFHHSPC, Mark Molnar- SFHHSPC

**I. Call to Order**

The meeting was called to order by Co-Chair Walter Kelley at 3:00p.m.

**II. Roll Call**

Roll was called and quorum was not met with 6 of 10 Members present.

J Malone, T Dushon, J Frazier, and S Marcum were absent.

J Malone arrived after roll call and the attendance increased to 7 of 10 Members present. Quorum was then met.

**III. Review and Approval of Agenda - VOTE**

Agenda was approved with the elimination of item IV Minutes.

CM E.J. Flores motioned to approve the agenda. CM D Kasel seconded.

A voice vote was conducted. No objections were heard and the agenda was approved unanimously.

**IV. Review and Approval of Minutes - VOTE**

C Emerson explained that there are no minutes to review, so agenda item removed.

**V. General Announcements**

Lodi Pharmacy: CM W Kelley shared that he has a friend who has a family owned pharmacy in Lodi, CA. They have been delivering medicine to him for years. They have been successful in delivering medicine on time, every month, with convenient scheduling. Walter would like them to do a presentation for the council. Lodi Pharmacy. To be added to future agenda.

AIDS Walk: CM J Malone shared that the AIDS Walk is on July 20. She encouraged everyone to let other people know, to encourage participation. It is a great way to support our local services. If anyone makes a donation, all of the money stays in Marin. She passed out flyers promoting the walk.

**VI. Co-Chair Report**

None

**VII. Public Comment**

CM W Flores shared that SF will likely get waiver, so over 25% of Ryan White funds can be used for support services.

**VIII. San Francisco Care Council Update**

M Molnar and three other staff from SF Care Council made a presentation about the Care Council's and

their roles [SEE POINTPOINT HANDOUT]. Care Councils are mandated by Ryan White legislation to prioritize and allocate use of care funds.

[S Bonagrazia arrived at 3:20p.m.]

Care Councils don't have a role in contracting decisions. Marin and San Mateo Councils advise the SF Council on its funding allocations for the region. Marin's care allocation is based on its proportion of living AIDS cases in the SF EMA region. SF Care Council also advises SF on allocation of city funds for AIDS services. SF Care Council are covered by Brown Act and SF Sunshine Ordinance. Because Marin Care Council is an advisory body, it's not required to comply with Brown Act or SF Sunshine Ordinance, but it chooses to follow the Brown Act. Ryan White legislation requires all SF Care Council members to be appointed by SF Mayor. SF Care Council chooses to over-represent communities of color and other disadvantaged groups. HIV Consumer Advocacy Project (Brian Brophy at AIDS Legal Referral Panel) handles grievances about Ryan White-funded services in the three counties. CAEAR Coalition (Communities Advocating Emergency AIDS Relief Coalition) is a national group that advocates for services for people with AIDS. Care Council should not lobby, but can educate for decision makers to be aware of impacts of reduced funding. OK for Council to ask County to backfill reductions in CAEAR funds, but not to ask County to fund a particular agency. A SF agency representative on the SF Care Council is not allowed to approach SF Board of Supervisors for funding specifically for their agency, but can approach SF Board of Supervisors for funding for AIDS services in general. All decisions of Marin and San Mateo Care Councils are subject to approval by the SF Care Council. The Care Council assesses the needs of the HIV+ community through comprehensive needs assessments (not used much anymore), focused needs assessments for targeted communities (trans, crystal meth users, seniors, etc.), and small-scale targeted focus groups. SF typically does four small focus groups per year, but hasn't done a comprehensive needs assessment for several years due to the high cost. Community and Consumer Affairs Center organizes the focused needs assessments.

CM Bonagrazia suggested contacting Narcotics Anonymous to connect with crystal meth users.

CM Malone asked if service utilization data includes a broad range of people.

M Molnar responded that focused needs assessments get suggestions about which service categories might need to be expanded. Marin Planning Council is not federally mandated. SF requires Marin to have a Marin community advisory body, but does not dictate the form of that body.

C Emerson added that Marin has a seat on SF HIV Planning Council. There's a process for governances about the needs assessment process, priority setting process, and process for allocation of funds to service categories. Marin decides its own procedures and rules, but in SF, Council members are not encouraged to approach elected officials in an advocacy role. It's best for Council members to work collectively on advocacy issues, and to advocate as a Council on Council-approved issues.

Public Comment: None. Move to public health report.

## **IX. Division of Public Health Report**

C Emerson explained that we are having significant staffing challenges. There are no minutes from the last meeting, which she apologizes for. Marin AIDS project has gotten the RFP, and there are transitions of people who are getting their case management from Marin AIDS but getting care at clinics. Prevention program is going well – National HIV testing posters from June are still up and since those posters have been up, the testing has had a good outcome.

S Spaeth shared that Marin County is doing an assessment of HIV clinical services in Marin. A consultant will interview clients and clinic staff, to see what would be the best model for Marin now that the ACA is here and that everything is changing. We're looking at the best model. It is starting now and will go on for the next 6 months. If you are interested in contributing, let C Emerson or C Hernandez know. Due to reduced funding and short staffing, S Spaeth suggests that this council meet every month or quarterly. The purpose of the meetings is to plan and evaluate, but the funding can't support a monthly meeting. She would like a County of Marin employee to be represented as a co-chair or member of the council in order to result in a more effective partnership. We don't want to take funds from services to fund admin. Marin has four federally qualified health clinics, The Marin County Clinic, and the Tom Steale Clinic. What makes sense for serving Ryan White clients today?

*Question:* are the needs assessment for your clients, is that to determine health needs? To see how system of care will evolve with ACA. Marin Community Clinics, Marin City, Speciality Clinics. How have FQs played a

primary role in other counties. That's one model we're looking at. We're looking at other models to determine best strategy.

*Question:* aren't most of our clients here long-term survivors who are in care and do know how to navigate the system? So is this for newly infected people?

*S Spaeth response:* No, we're looking at everyone. We're looking at the system; what is the best model for the system.

*Question:* is that going to take into account some analysis of comparative costs?

*S Spaeth response:* Yes, it will be very extensive.

*Question:* They are interested in interviewing people who are receiving care in Marin.

But the reason people might be receiving care in SF is because of a problem receiving care in Marin.

*S Spaeth response:* I will take that back to be considered.

*Question:* if two times per month is too frequent, now you're talking about meeting once per month, and I think we need more time to meet together, because each person is putting their solutions on the table. With so much time in between it might not be as effective in generating solutions.

*S Spaeth response:* We don't have the resources to support that. You guys can meet without County support as often as you like. The funding has been dramatically cut. We're at bare bones for service delivery.

*Question:* what if we spend the time more on action and less on talking?

*S Spaeth response:* if there is a need at some point where something comes up that is of concern, we can schedule a meeting. The role of the Council is to prioritize and allocate funds. We will do that in the next two meetings. Then we can check in and see how that is going.

*Question:* in order to get money from SF, we have to have this advisory board. We don't know if we can do that in less time, to make the decisions. Going forward, we should allocate more money for Council support. I make the recommendation that we provide enough money to the Council to hold meetings according to HRSA laws.

*S Spaeth response:* we have to have this by September.

Public Comment: None

## **X. Membership – VOTE**

The Council interviewed W Flores.

- a. What do you feel that you bring to this group?  
Experience – I was here when it was formed. I serve on the SF Council, I've chaired 4 committees (membership, CCA). Been a member of that group for 6 years and a member of Marin for 8 years. Strong advocate for people living in Marin, SF, and San Mateo. I support people living with HIV/AIDS.
- b. How would you set aside your personal issues to serve?  
You have to put your personal feelings aside because you're speaking for everyone else. You have to be able to set that aside, no matter what buttons got pushed.
- c. Do you represent a certain constituency?  
Latinos, long-term survivors, 50+s
- d. What obstacles / barriers do you see working with this group in particular?  
It's not to use my connection to SF too much like I did last time. When I provide info from SF it's not to beat people over their head with it. When the info isn't shared, that's my responsibility, but not to do that too much.
- e. What obstacles do you anticipate and how would you deal with that?  
Pick your battles. And put those ahead of your personal feelings?
- f. Any other questions?  
What do you think the Council needs at this point in its history?  
It needs to come back to the trust the first time the council was formed. There was a sense that everyone was focused, and that go last after the last blow you guys had. We have to regain trust with each other and with the county.  
How do you see us doing that?  
You're doing better than I expected. There are some gaps, you didn't get the same training that we got at the beginning; get the same training as SF. That slacked off and broke down because it wasn't understood what was required of you. It's not mandatory, but you should go. Things are changing in SF.  
I do listen to the recordings – they are available.

If we did decide to meet 4 times a year, would you think it would be wise to attend SF meetings in the interim?

You probably could meet every other month because things are happening so fast. Then you need to catch up as things come up. Every other month. Priority and allocation is important, but every little piece is connected to that allocation. And if you have to catch up on all the information, you need more time.

g. Do you have any questions for us?

No.

A voice **vote** was conducted.

**AYES:** CM Bonagrazia, CM Cronin, CM E.J. Flores, CM Kelley, CM Malone, CM Kasel

**Noes:** None

**Abstain:** CM Bateman

**Recuse:** None

**6-0-1-0**

Wade wins the vote.

CM Malone asks question: Does someone in the County know what the budget is for the staff of the SF Council and what percentage it is of the EMA.

Response: \$300,000 for staff and council. They keep their admin low, around 3%. Ryan White is around 12 million.

CM Malone responds: It would be interesting to know that, since we have so much less money. Many things we would like to do, in a complex way, it's difficult for us to do that. San Francisco has a large staff.

Response: Planning council support: \$418,000 (2% of entire grant); Grant was 20 million in 2014; \$15 million for San Francisco, We get \$500,000, but SF has 76% of AIDS cases. SF is required by law to have that planning council and we are not.

Co-Chair Kelley presents application of Bobbe Moske to join the Council.

CM Flores makes motion to accept Bobbe Moske's application. CM Bateman seconds. Motion approved. Vote will take place next meeting. New members must attend one Care Council meeting.

Public Comment: none

## **XI. Conduct Annual Prioritization – VOTE**

Instructions to the Council were given to review service categories and then rank them 1 through 11 (with a new category – Cost Sharing).

Motion made by CM Malone to approach the prioritization strictly on the bases of the importance of these services, regardless of the funding and document that so that when the Council gets to the allocation part, it keeps in mind that we aren't using the prioritization ranking to do so. Motion seconded by CM Cornin. Opinion: Keep the list the way it is and vote on it.

A voice vote was conducted and the motion approved with CM Kasel and CM W Flores abstaining.

CM Malone made a motion to extend the meeting 15 minutes (as it is now 5:00 pm). CM E Flores seconded. A voice vote was conducted and the motion approved.

The Council reviewed each member's rankings. Results were then averaged [SEE EXCEL SPREADSHEET FOR COMPLETE LIST]

1 = mental health services

2 = case management

3= outpatient

4 = oral health

5 = medical case management

6 = emergency financial service

7 = AIDS Pharmaceutical assistance

8 = health insurance premium and cost-sharing assistance

9 = foodbank / home-delivered meals

10 = medical transportation services

11 = home health care

Motion to set the order was made by CM Kasel and seconded by CM W Flores. A voice vote was conducted and the motion approved. CM Malone opposed.

**XII. Next Steps – New Business**

**Next meeting: August 13, 2014, 3-5 pm  
Connection Center 3240 Kerner Blvd. #110**

**XIII. Meeting Adjourned at 5:20p.m.**