



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
**COMMUNITY HEALTH, POLICY AND  
PREVENTION**

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



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**MARIN HIV/AIDS CARE COUNCIL**

**DRAFT MINUTES**

**June 8, 2016**

**Marin County Health & Wellness Campus**

3240 Kerner Blvd., Room 110

San Rafael, CA 94901

3PM – 5PM

**I. Call to Order**

CM W. Flores called the meeting to order at 3:10 PM.

**II. Roll Call**

Council Members Present at Roll Call: Wade Flores, (chair), Roy Bateman, Linda Dobra, Jennifer Malone, Bobby Moske

Council Members Arriving Late: Elaine Flores

Council Members Absent: James Frazier (unexcused)

Staff Present: Cicily Emerson, Kevin Lee

Public Present: Jami Ellermann, Sarah Grossi

**III. Review and approval of Agenda – VOTE**

CM Malone motioned to approve the draft agenda, seconded by CM Bateman, approved unanimously by the Council.

*Public Comment:* None

**IV. Review and approval of Minutes – VOTE**

CM Malone made a motion to approve the draft minutes of 3/9/16, seconded by CM Bateman, approved by the Council.

Unofficial draft minutes from 5/11/16 were not voted on.

*Public Comment:* None

**V. General Announcements**

- Cicily: Kimberly Carroll of the Housing Authority has shared with us that there are 1-2 HOPWA units available for people who are very low-income. Their plan is to collect as many applicants as possible, and do a lottery selecting 10; the first two will receive a unit, and the other 8 will be placed on a waiting

list. These are vouchers, not units, and will act similarly to Section 8 so it won't identify anyone as living with HIV.

- CM Moske: there's a shortage of landlords who are taking vouchers, and it's difficult to find housing. HOPWA needs to update their lists because it's really old.

## **VI. Public Comment**

*Public Comment:* None

## **VII. Co-Chair Report**

- CM W. Flores: Deborah Kasel has decided to resign due to health issues.
- The San Francisco HIV Prevention Planning Council and HIV Health Services Planning Council have officially merged.

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

- CM Dobra – Prevention Program report
  - National HIV Testing Day (June 27) – the plan is to have HIV testing-specific banners on social media.
  - There was a mental health fair on May 18 where connections were made with outside agencies with the hopes of expanding testing outreach to reach those communities.
  - Testing and outreach is also expanding to Center Point since set aside funding for drug treatment programs has dissolved.
  - PrEP is currently offered at Kaiser and Planned Parenthood, but working to promote and provide PrEP within HHS Clinics. Externally, also thinking about having a community forum that's more medically focused to inform people on what PrEP is and who should receive it, and will likely involved San Francisco.
  - Cicily: Insurance covers PrEP, but not always the associated tests.
  - Prevention funding will stay the same for 2017 with funding maintained for another year.
  - MAP's testing grant currently has some funding for PrEP navigation, and MAP's raising private money to provide more PrEP services.
- Ryan White Part funding has not been completely determined at this point, but San Francisco has informed us that the cut is minimal. This means that changes will be minimal for Marin County, and will stay about the same.
- Marin County had site visits for our Ryan White Part A contracts, and it went well.
- Given the attrition in Care Council membership, we need to do more recruitment, and it may be good to take some time during these meetings to discuss recruitment.
- HIV Community Forum – Kevin
  - 14 participants at the forum, predominantly white, male, and older; higher proportion of straight individuals overall.
  - Overall, high satisfaction with all aspects of the forum.
  - Participants addressed interest in support groups and wellness group.
  - Prioritization (dot) exercise revealed that the service categories with the highest priority were emergency financial assistance, medical case management, and medical transportation. Participants were not

as clear about what the health insurance premium and cost sharing assistance entailed. Priority was based on personal priorities more so than their interpretation of community priorities.

- CM Malone: we should be cautious about prioritization data since we don't know whether it's personal preferences and needs or if reporting is based on the general needs of all HIV clients.
- CM Malone and CM Moske: there are challenges with getting information to clients about available services, and client expectations need to be taken into account, especially when they are unrealistic.
- 2015-16 Annual Client Satisfaction Survey – Kevin
  - Preliminary findings at the last Care Council meeting.
  - A draft report summarizing the findings for this year was also shared, and a final report will be shared when it's complete.
  - Clients were generally satisfied with the services they received.
  - The survey's scales were changed, which affects the results, but the level of dissatisfactions remains roughly the same.
  - CM Moske: people who are dissatisfied are probably more likely to complete the survey.
  - CM W. Flores: infrequent users of a service get as much weight in the survey as more frequent users.
  - Kevin: the survey is completed by a range of users, both individuals who are satisfied and dissatisfied, and people who use a service once as well as those who are high utilizers.
  - CM Malone: if funding is tight, quality of service may suffer. For example, emergency financial assistance checks are generally issued in ten days, but some clients want them issued faster. However, faster issuance would increase our administrative costs.
  - CM E. Flores: providers should feel that they're doing their best, but there's always room for improvement.
  - CM Moske: it would help to publicize reasonable expectations about the level of service we can reasonably provide.
- Service Category Summary Sheets – Kevin provided a slide on fiscal year 2015-16 utilization, which needs to be updated to include all Part B service categories. The slide reflects the Service Category Summary Sheets that were provided this meeting and last meeting.
- Prioritization and allocation overview – Cicily:
  - The Council's main function is prioritization of services and allocation of Ryan White Part A funds. At our July meeting, we'll do a prioritization exercise for 2017-18. In August, we'll decide on allocations. July and August discussions will be focused on 2017-18 program years, which begin in March 2017.
  - The process includes the following:
    - Go over any conflicts of interest.
    - Everyone does a prioritization on their own by ranking the order of the service categories and then an average is taken.
    - Allocations – we determine how funding should be distributed to each service category based on flat funding and all the information/data that's been provided. Something to consider for the prioritization and allocation process is psychosocial support services, which has been funded through Part B, but might not be sustained over time.

- Cicily and Kevin are available to provide technical assistance if necessary.

#### **IX. Fiscal Year 2016-17 Ryan White Part A Budget – VOTE**

- Proposal from the County is to shift \$15,000 from AIDS Pharmaceutical to Emergency Financial Assistance, and remove \$17,996 from Home-Based Care and shift \$8,000 to Medical Case Management and \$9,996 to Non-Medical Case Management.
- There will be flat funding for fiscal year 2016-17.
- AIDS Pharmaceutical Assistance should actually be part of Emergency Financial Assistance and will be moved into this service category. The service will remain the same; only difference is that it will be put into another service category and will provide more flexibility. We'll continue to track them separately.
- Home-based care is not as relevant anymore, and there isn't a need to have a nurse case management. Instead we've been providing regular case management, so it makes more sense to move home-based case into medical case management and non-medical case management.

CM Bateman: motion to approve the proposal to shift \$15,000 from AIDS Pharmaceutical to Emergency Financial Assistance, and remove \$17,996 from Home-Based Care and shift \$8,000 to Medical Case Management and \$9,996 to Non-Medical Case Management.

Seconded by CM E. Flores

**Yes:** CM Bateman, CM E. Flores, CM W. Flores, CM Moske

**No:** None

**Recuse:** CM Malone

**Abstain:** None

**4-0-1-0**

**Motion passes with 80% of votes.**

*Public Comment:* None

#### **X. Council Membership**

- Cicily: If Wade is okay with being chair for the time being, maybe we should table this discussion. In the meantime, we should have a more targeted recruitment approach where we ask providers to recruit people to join the Council.
- CM E. Flores: it's important to have council members who are aware of the issues.
- CM Dobra: Kevin and I have talked about this, but we may want to consider broadening our council to focus on other issues related to HIV/AIDS besides the prioritization and allocation process. The Council's allocation role is not exciting to most people and we should consider other HIV issues like prevention that are more engaging.
- CM Malone: we have a reputation as having contentious and unpleasant meeting dynamics. Perhaps we can ask case managers and support group participants to consider joining.
- CM Moske: we need to do a broader outreach strategy

CM Malone: Motion to defer designation of co-chair to a later meeting, seconded by CM E. Flores, approved by the Council.

*Public Comment:* None

**XI. Adjourn**

CM W. Flores adjourned the meeting at 5:00 p.m.

**Next Meeting:**

**July 13, 2016**

Marin County Health & Wellness Campus  
3240 Kerner Blvd., Room 110  
San Rafael, CA  
3:00 p.m. – 5:00 p.m.

**August meeting will be on August 3<sup>rd</sup> (first  
Wednesday) from 2-5pm**

PLEASE PLAN TO COME TO THE MEETING ON TIME, AS WE WILL BE  
STARTING ON TIME AND ENDING ON TIME – We **cannot** extend the meeting  
time. Thank you!