



DEPARTMENT OF
HEALTH AND HUMAN SERVICES

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



MARIN HIV/AIDS CARE COUNCIL

DRAFT MINUTES

July 26, 2017

Marin County Health & Wellness Campus

3240 Kerner Blvd., Room 109

San Rafael, CA 94901

4:00PM – 5:30PM

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I. Call to Order

CM W. Flores called the meeting to order at 4:16 PM.

II. Roll Call

Council Members Present at Roll Call: Linda Dobra, Julie Dowling, Elaine Flores, Wade Flores (chair), Esmeralda Garcia, Jennifer Malone (left 5:45pm), Bobby Moske (left 4:50pm), Ken Travirca

Council Members Arriving Late: James Frazier (4:40pm), Alex Nizovskikh (4:50pm)

Council Members Absent:

Staff Present: Cicily Emerson, Kevin Lee

Public Present: Jami Ellermann

III. Review and approval of Agenda – VOTE

CM Travirca motioned to approve the draft agenda, seconded by CM E. Flores, approved unanimously by the Council.

IV. Review and approval of Minutes – VOTE

CM Malone clarified “Matthew Willis,” not “Matthew Hymel” in Public Health Report.

CM E. Flores motioned to approve the draft minutes with the proposed changes, seconded by CM Travirca, approved unanimously by the Council.

V. General Announcements

- CM Moske: We are making headway in the clinic closure, and have a very large campaign with the unions and other ancillary agencies. Dental Clinic has solicited patients and I've been giving them my card. I've been coordinating patients to go to the Board of Supervisor meetings every week. We're doing a study on how many patients each clinic has and what their insurance is; we're making a financial case that better reimbursements for

MCC is not sufficient for the clinics to transfer care to MCC. Anyone who wants to participate, I have petitions for people to get signatures for those who don't want to see the clinic close. There are other opportunities to participate including attend the Board of Supervisor meetings to share your experiences. The meetings happen every Tuesday at 9am, and begin with supervisory information followed by public comment.

- Cicily: I just got off a call with the State Office of AIDS, San Francisco, and San Mateo. We will receive some funding from the State for prevention efforts although it likely won't be the full amount, and we don't know what the cuts will be. We don't know what the timeframe for when we'll hear back is and the State also doesn't know at this point.

VI. Public Comment

Public Comment: None

VII. Fiscal Year 2018-19 Annual Allocation: Continued – VOTE

- Based on concerns at the last meeting regarding food cards, Kevin provided an analysis of how much is needed to currently fund the cards, and how it would impact the rest of the budget and service categories if the amount was increased.
- The proposed FY18/19 Ryan White Part A budget assumes that the award amount will remain flat-funded. It reduces the amount in Medical Case Management, that difference which will instead be funded in Part B. It increases the funding for the food vouchers, which will be reduced in Part B where it's currently funded. Finally, it increases the amount in Psychosocial Support Services, which is currently funded in both Part A and B, so that the service category is funded only under one funding stream.

	County Proposed FY18/19 Budget
CORE SERVICES	
Outpatient/Ambulatory Health Care	
Oral Health Care	
Health Insurance Premium and Cost-Sharing Assistance	\$ 40,000
Mental Health Services	\$ 85,000
Medical Case Management	\$ 93,000
SUPPORT SERVICES	
Non-Medical Case Management	\$ 118,000
Emergency Financial Assistance	\$ 40,000
Food Vouchers	\$ 59,500
Medical Transportation	\$ 14,000
Psychosocial Support Services	\$ 25,000
Council Support	\$ 280
TOTALS	\$ 474,780

- CM E. Flores asked about whether the Psychosocial Support Services support groups are working and effective, and whether clients are utilizing the services. She shared that some clients have indicated that some of the groups have not been working, something needs to be done about it. Cicily clarified that they're still pilots and we're continuing to observe them as they are building up, and encouraged people to think more about the need for support groups as a concept rather than how they're currently operating, which can be evaluated. Jennifer suggested that we can look at the results from the Client Satisfaction Survey.
- CM Moske doesn't believe it's wise to add \$20 for food cards when it means we're taking away critical services, even if it's for a few people.
- CM Travirca motions to vote on the County's proposal for funding allocation, seconded by CM Frazier. CM Malone calls to question. 4-3-0-3. Doesn't pass.
- CM W. Flores motions to move \$5,000 each from Mental Health, Non-Medical Case Management, Emergency Financial Assistance, and Psychosocial Support Services, and move it into the Food Vouchers, seconded by CM Frazier.
- CM Travirca shared concerns about reducing funds from Mental Health. CM W. Flores clarified the only reason he's proposing reducing from that service category is because utilization has been decreasing.
- CM Dobra asked about the food card amount, and it was clarified that it started at \$20, went to \$40, and is now at \$60.
- CM Dowling asked whether adding \$10 would make a difference. CM W. Flores suggested it's a starting point. Cicily mentioned that it's up to the Council to make those types of decisions given the data they are provided.
- CM Garcia pointed out that the food cards were prioritized lower in the ranking system, and asked how it was being utilized. Kevin shared that last year, about 1,300 food cards were provided to clients. 4-3-0-3. Doesn't pass.
- CM Travirca shared concern that we don't know what's going to happen to services given the potential changes with the clinics, and that it can create problems later down the line if we decrease funding for services and find out it's actually needed; he'd prefer that we reassess four months later once we have a better understanding of the clinic situation.
- CM Dowling shared concerns that there are no services for women and the support groups are the one thing they have, which might not be perfect, but it's a work in progress that's needed. CM Dobra shared similar sentiments for the Latino group, especially from the prevention side looking at new diagnoses.

CM Travirca motions to accept the County's original proposed allocation to be revisited in four months when we have a better understanding of the landscape in the county provided the transition, seconded by CM Frazier.

CM Dobra: (Non-voting)
CM Dowling: Recuse
CM E. Flores: Yes
CM W. Flores: Yes
CM Frazier: Yes

CM Garcia: Yes
CM Moske: Yes
CM Nizovskikh: Yes
CM Trvirca: Yes

7-0-0-2. Motion passes with 100% of votes.

Public Comment: None

VIII. Clinic Changes Discussion – Lisa Santora

- I'm a family physician and preventative medicine specialist. I started my career as a HIV community specialist in Miami, and was a primary care provider providing HIV care and care to the homeless population. Also have worked in Russia, Venice California, and have moved away from direct patient care to building systems that provide care, and have now been at Marin for two years as the Deputy Public Health Officer.
- We are making a recommendation to our Board of Supervisors to close our HHS Clinics and transfer care to Marin Community Clinics. MCC would use the same space so care would still be delivered here at 3240 Kerner Blvd, and ideally with the same providers, which is to be determined. There'd still be an infectious disease specialist, and we'd begin integrating HIV care into a primary care setting, which also has oral health care. The other recommendation is to transfer dental care, currently provided on Fourth Street, to MCC as well. As a government agency, this decision hasn't been made, and there's a public hearing process although we don't have a date yet – can be August 22 to September, but is not certain, and we will inform everyone once we know. I want to make myself available to the community, and to this council. We're having a community forum on August 16 to listen to the community around concerns they may have. We currently have about 200 patients that receive care at HHS Clinics, and 500 people living with HIV in Marin who receive their care throughout the county and San Francisco, and this is an opportunity to address the concern of chronic disease as people age since HIV is no longer what it used to be 30 years ago, by supporting people's holistic care. It's also important that people have access to preventative health care, and integrating behavioral health care services with their care. That's the vision although change is hard, including on staff who've provided excellent care, although this is about how best to provide quality care, use resources, and strengthen the system of care.
- CM W. Flores: My understanding is that everyone will go to one place to access services.
 - Lisa: With this change, there'd be an increase in volume of other patients beyond the two HIV specialist providers, and there'd be more integration of the general population.
- CM W. Flores: Will more people be hired?
 - Lisa: This will depend on the decision of our providers. The vision is that at least one of the providers would work with MCC, but that's to be determined. If that doesn't happen, there will be an infectious disease specialist who will be employed or contracted by MCC. We'll also work on training primary care providers to build that culture of care for patients living with HIV. There are currently one or two nurse practitioners who see patients living with HIV.

- CM Malone: In terms of frequency of access to care for patients living with HIV, is it frequent enough that there could be some confidentiality concerns? What's the thinking about how to handle the waiting room, and other aspects outside of the technical care?
 - Lisa: Medical providers are required to receive training around HIPAA and confidentiality, and we'd work on providing additional support around confidentiality and HIV care. The percentage of HIV patients would be very small – 500-600 HIV visits whereas the capacity is at 20,000 visits.
- Cicily: Would people be able to go to Novato or Greenbrae?
 - If approved, we'd work with each patient to determine who and where the providers are and where would be the best fit for their care. The infectious disease specialist would be at San Rafael, but other providers could see patients, especially if they're just doing labs.

Public Comment: None

IX. New Business – None

X. Adjourn

CM W. Flores adjourned the meeting at 5:59 p.m.

Next Meeting: **September 13, 2017**
Marin County Health & Wellness Campus
3240 Kerner Blvd., Room 110
San Rafael, CA
3:00 p.m. – 5:00 p.m.

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!