I. Call to Order

CM W. Flores called the meeting to order at 3:11 PM.

II. Roll Call

Council Members Present at Roll Call: Linda Dobra, Elaine Flores, Wade Flores (chair), Jennifer Malone, Bobby Moske, Ken Travirca

Council Members Arriving Late: Esmeralda Garcia (3:22pm), James Frazier (3:51pm)

Council Members Absent: Julie Dowling (excused), Alex Nizovskikh (unexcused)

Staff Present: Cicily Emerson, Kevin Lee, Lisa Santora

Public Present: David, Alex Diefenbach

III. Review and approval of Agenda – VOTE

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

IV. Review and approval of Minutes – VOTE

Cicily clarified “pregnant” syphilis, not “congenital.”

CM E. Flores motioned to approve the draft minutes with the proposed changes, seconded by CM Frazier, approved by the Council with one abstention by CM Moske.

V. General Announcements

- CM Dobra: Gay men’s health retreat on January 29
- CM Malone: With support from Horizons Foundation, a new LGBTQ Center in Oakland has opened that is started by and for the African American community. Website: [https://www.oaklandlgbtqcenter.org/](https://www.oaklandlgbtqcenter.org/)

VI. Public Comment
David: I'm here to support my friend Alex who applied for The Spahr Center board of directors in October. Many people are concerned that The Spahr Center board is excluding people living with HIV from serving on their board as a result of conflict of interest, but clients living with HIV should be able to recuse themselves when necessary.

Alex: I have been active in the queer community for the past 20 years and have recently been wanting to become re-engaged. I received the final word from The Spahr Center board reaffirming the policy that clients living with HIV are unable to serve on the board. I have been looking for ways to become more involved including this council, and will continue exploring other opportunities.

VII. Co-Chair Report

- Thank you to everyone for your time and support during my time as co-chair.
- Bill Clinton spoke at a World AIDS Day event at the AIDS Memorial in San Francisco.
- Ed Chitty who works as a RN at Kaiser San Francisco indicated that Kaiser San Francisco is an option for patients with Medi-Cal, Medicare, or Covered California. He can be contacted at: edward.chitty@kp.org

VIII. Prevention Program Report

- Office of AIDS has been holding a series of conferences and Marin has participated since that’s where we’ll be receiving our funding from in this next year. They’re looking at ways to do interventional surveillance, which is a way to use surveillance data to stop the spread of STDs and HIV primarily among MSM, and linking them back into care and PrEP. Different programs exist throughout the state, and we’re working on how we can institute this within our county. One message that was emphasized is that there are many tools to prevent HIV including PrEP, and that we also need to continue linking people who are out of care back into care.
- With the transfer happening, we’ve worked with the AIDS Education Training Center to provide trainings to Marin Community Clinics (MCC) on topics such as HIV stigma, sexual health discussions, testing for STDs, and other topics that will prepare them to work with our current HHS Clinics population.
- The Spahr Center sent two individuals to HIV testing so that we’ll have a more robust prevention staff. They are officially trained, but they will need continued support to get up and running.
  - CM Malone: we now have a diverse staff that includes two African American, one transgender, two gay, and male tester.
- Cicily: we also talked about presenting our STD data at this meeting and have been drilling down on our syphilis cases among MSM, especially among people living with HIV. Hopefully in January or March, we can present some of this STD co-infection data. We’ll be working with positive STD cases on getting tested for HIV and linked to care, if it’s appropriate. Hopefully, we can also run some STD awareness campaigns in the spring.

IX. Division of Public Health Report

- We are recruiting for a Chief Operations Officer and a Chief Strategies Officer, which are revamped positions from other positions, and will be taking place these new couple months.
MCC does plan to have a representative from their agency be on the Council, but that hasn’t been determined yet.

We’re continuing to work on HIV and STD integration by coupling those programs and making sure people are tested, linked to care, or linked to PrEP.

Lisa Santora:

- I went out to Coastal Health today and it was their all-staff meeting. I shared the increase in syphilis cases this year and they were surprised by this. Brings to question how we can be strategic about communication and our efforts to reach specific communities, and to bring awareness to providers.
- Related to the jails, they’ll be implementing electronic health records, which provide opportunities for us to mine the data and provide targeted interventions. It’ll also provide opportunities for us to identify individuals in jail living with HIV who can then be connected to care. We’ll be going live in January.

Clinic Transfer – Lisa Santora

- The Board of Supervisors approved the transfer of care at the Beilensen Hearing contingent upon meeting certain decision-making criteria, primarily having the appropriate providers to offer care. MCC has fully staffed their specialty/infectious disease care team, which will include Dr. Jon Froyd as the clinic lead who treats people with Hepatitis C, Dr. Sandra Wallace who graduated from UCLA and is an internal medicine physician who is also a board certified infectious disease specialist, Dr. Stephen Merjavy who is a family physician and completed a two-year fellowship at USC on HIV care, Dr. Ellen Rosenthal who is an internal medicine physician and used to see patients living with HIV in the County and has just finished an HIV refresher course at UCSF, Michelle Cohen who is a family nurse practitioner who sees patients living with HIV in Novato. Some patients will have a primary care provider and see an infectious disease specialist while others will have one provider – Dr. Rosenthal or Michelle Cohen. Michelle Cohen also provider women’s health services.
- MCC also has a pain management program and we’ll make sure to have a warm hand-off of these patients to ensure there aren’t gaps in medication refills. This, however, is an active pain management program that aims to reduce the mlaeequivalence of opioids that patients use, which may not be the goal of some patients. Given the rise of deaths and complications due to opioids, MCC along with Partnership has worked on decreasing the mlaeequivalence of opioids by providing ancillary services like chiropractic, mindfulness, medication, acupuncture, and other services that address pain and behavioral support. The Council should be aware of this because clients may in the future share concerns about not getting their pain medication, which again, is a communitywide effort to reduce the level of narcotics in the community while still addressing individual pain and substance use.
- January 24 is the last day patients will be seen in the HHS Clinics.
- As far as case management, MCC recognizes the importance of having case management and plan to have case managers onsite and are in the process of recruiting a bilingual complex care case
manager, which is a licensed clinical social worker. Part of the team includes a care navigator who helps coordinates the care systems, two medical assistants, and a nurse. They just had five staff complete ADAP training.

- I’ll be meeting with the pharmacists to discuss how patients can receive their prescriptions. They’ll be able to offer onsite pick-up for patients.
- MCC will develop a direct access phone line so that patients don’t have to call the direct MCC line for appointments, and instead will be calling a separate line.
  - CM Malone: as clarification, will appointments be scheduled through this direct access line or though case managers?
  - Lisa: it may be a combination of these. Some patients will have their new appointment scheduled at the end of their appointment and some will call into MCC.
- Our next big step is going through a HIPAA-compliant individual list of patients and making calls to patients. Our biggest concern is patients becoming lost to care so we want to make sure that we’re identifying patients’ primary care provider, their HIV specialist, that they have an appointment scheduled, and that they attend the appointment. We’ll have outreach team prepared if any patients fall out of care.
- MCC will be the primary provider for HIV care services. They’ve already set up a referral process for the other federally qualified health centers (FQHC). So patients at Ritter, Marin City, or Coastal can refer into the infectious disease specialty at MCC.
- Cicily: dental services have been running at MCC and they’ve already been seeing dental patients. We’ve been working with Lydia Arellano at MCC, and have sent out letters to patients who access dental services with instructions on receiving care.
- Kevin shared feedback and input gathered from the MCC Informational Meet & Greet event on November 14, and actions that MCC and HHS has worked on to address the questions and concerns. Phone calls were made and mailers were sent out. About 15 HHS Clinics patients were in attendance. Many of the questions, issues, and concerns were addressed in Lisa’s update.
  - Confidentiality: MCC staff are trained on HIPAA compliance when first hired and again each year. The waiting room space will be mixed and therefore impossible to know who is being seen for what services. For clients who have concerns related to confidentiality or safety, special accommodations can be made. Finally, MCC has considered issuing cards that will help staff identify which patients are Ryan White so that they aren’t charged for anything.
  - Food cards: MCC patients will continue to receive their monthly food card through MCC just as they’ve been receiving it through Jon Botson at the HHS Clinics.
  - Behavioral health: MCC has a bevarioal health program that includes psychiatrists and licensed therapists that provide a range of services to MCC patients.
Cicily: we’ll continue to work with MCC to develop a FAQ that has all of this information, and offers a way for patients to gather more information related to accessing services.

CM Moske: Medical Case Management funding that previously had been provided to The Spahr Center was shifted to HHS Clinics, but The Spahr Center has continued to provide case management to those clients.

- CM Malone: when the County released the RFP four years ago, our Medical Case Management budget did decrease as did our client caseload.
- Cicily: we had previously funded multiple agencies for Medical Case Management so HHS Clinics has always received funding. If you want to increase allocation for Medical Case Management, that will come out of another service category; we’ve always based our allocations on utilization.
- Kevin: we can always look at the utilization data for Medical Case Management and bring it to the Council.
- Lisa: this is a learning year and will require collaboration between The Spahr Center and MCC. The County clinic also has a different culture from MCC with MCC more able to go above and beyond what we’re able to do at the County.

CM Malone: isn’t there other county funds that go to MCC?

- Lisa: funds for indigent care services. They see patients that are under and uninsured, and receive funding at all four clinics. There’s been a higher uptick in people using these services at MCC, and has ended up costing more than what the County is providing to MCC.
- CM Malone: it’ll be important for the Council to continue to understand the needs of clients and the services provided, and to look closely at the utilization data.
- Cicily: it’s important for the Council to review the utilization and reallocate accordingly.

X. Fiscal Year 18/19 Annual Allocation Revisited

- Kevin reviewed the FY18/19 budget allocation, responding to a motion to revisit the budget allocation.
- CM Moske: does MCC provide health insurance premiums?
  - Kevin: no, The Spahr Center is the only one who receives funding to provide this Ryan White service.
- CM Moske: do we know how much the health insurance premiums have been used?
  - Cicily: our funding projections are based on previous spending, and we’ll be able to see how much the service is being utilized and if it aligns with what’s allocated.
- CM Dobra: from what I recall, the reason why we’re revisiting this budget is because of concerns with case management, which is still being figured out, and nothing has changed as far as case management being offered.
  - Kevin: we are still committed to ensuring that medical case management is offered and doesn’t become compromised.
- CM W. Flores: we also had talked about food cards. I’ve noticed that more people living with HIV are becoming diabetic.
Cicily: this is something to consider as a potential emerging need that we should continue to observe, and perhaps see how we can work with other agencies such as Aging and Adult Services, to provide nutrition education to clients.

Public Comment: None

XI. FY17/18 Meeting Calendar – VOTE

<table>
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<tr>
<th>Month</th>
<th>Agenda Items</th>
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| January | • Reallocation of unspent funds  
• ARIES data presentation  
• Needs assessment updates  
• Program presentation: STDs in Marin |
| March   | • Community forum planning  
• Program presentation |
| May     | • HIV epidemiology data presentation  
• Client satisfaction survey presentation  
• National HIV Testing Day planning  
• Program presentation |
| June    | • Service category presentations  
• Finalize 2018-19 budget |
| July    | • 2019-20 Prioritization |
| August  | • 2019-20 Allocation |
| September | • Policies and procedures  
• Co-chair nominations  
• Program presentation |
| November | • World AIDS Day planning  
• Program presentation |
| Other topics | • Utilization data  
• STD data  
• By-laws (ad hoc committee) |

CM Frazier motioned to approve the FY17/18 meeting calendar, seconded by CM Travirca, approved unanimously by the Council.

Public Comment: None

XII. Co-Chair Elections – VOTE

- Nominees: CM W. Flores, CM Frazier, CM Kelley, CM Moske

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<th>Nominee</th>
<th>L. Dobra</th>
<th>E. Flores</th>
<th>W. Flores</th>
<th>J. Frazier</th>
<th>E. Garcia</th>
<th>J. Malone</th>
<th>B. Moske</th>
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Total votes: 100%
38%
63%
CM Elaine Flores and CM Bobby Moske were approved as the Marin HIV/AIDS Care Council Co-Chairs for their term of December 2017 to September 2018.

Public Comment: None

XIII. New Business – None

XIV. Adjourn

CM W. Flores adjourned the meeting at 5:02 p.m.

**Next Meeting:**  January 10, 2018
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!