



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  
January 13, 2021**

**Marin County Health & Wellness Campus**

Meeting conducted via Zoom

3:00 – 5:00 pm

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**I. Call to Order**

CM Elaine Flores called meeting to order at 3:04 pm.

**II. Roll Call**

Council Members Present at Roll Call: Elaine Flores, Wade Flores, Esmeralda Garcia, Bobby Moske, Linda Dobra, Jodie Campbell, Lydia Arellano, Leslie Gallen, Alex Nizovskikh, Julie Dowling

Council Members Arriving Late: None.

Council Members Absent: None.

Staff Present: Nga Le, Cicily Emerson, Tyler Evans (HHS), Karina Arambula (HHS), Loretta Rogers

Public Present: Dana Van Gorder (Spahr), Melanie Thompson (MCC), Sandra Wallace (MCC), Rhiannon Saltzman (Spahr), Andy Fyne (Spahr)

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

CM Elaine Flores requested that members review the draft agenda. Wade Flores requested that Item X – Vaccine Presentation, be switched with Item XIII – Co-Chair Nominations, in order to accommodate the schedule of Dr. Tyler Evans who will be giving the vaccine presentation.

CM Esmeralda Garcia moved to approve the draft agenda with Wade Flores' amendment. The motion was seconded by CM Linda Dobra. The motion was approved unanimously by the Council.

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

- a. November 3, 2020 meeting minutes – Wade Flores asked that the word “minority” be added to the title of the Spahr Center’s group for English-speaking minorities with HIV. Nga Le made the correction. CM Bobby Moske moved to approve the minutes with the amendment. CM Julie Dowling seconded the motion. The motion passed unanimously.

**V. General Announcements:**

- a. CM Leslie Gallen made the following announcements:
  - i. The Spahr Center has hired Jay Campos as a Bilingual Prevention Navigator. His start date is January 19<sup>th</sup>.
  - ii. There will be a Zoom retreat offered by the Spahr Center, consisting of three sessions, conducted over a month and a half. Activities will include yoga, meditation, storytelling and a cooking class given by Andy Fyne.
  - iii. The Spahr Center is considering applying for 340B PrEP Program. This is in discussions.
  - iv. Sheri Graham has been hired as Spahr Center's new Pantry Manager and HCV Navigator.
  - v. Through the 340B Prescription grant, the Spahr Center will have funds available to help clients with housing, rent, and one extra \$60 food card per month.
- b. CM Bobby Moske reported on problems using the MCC dental services.
  - i. Due to the pandemic and current SIP orders, neither UCSF nor University of the Pacific is taking patients at this time through the MCC Dental Clinic. CM Bobby Moske urgently needs care for his crown. If it is not taken care of soon, he will lose the tooth. He urges that MCC make Ryan White funds available to pay for an out-of-network provider to do this work if UCSF and UOP are not available. In his opinion, MCC is holding on to these funds which could be used for this purpose. He says he is not the only one who is facing this problem. No one is getting work done on crowns or root canals. He cannot afford to pay for this himself. MCC has to make Ryan White funds available for out-of-network providers during the pandemic.
  - ii. CM Alex Nizovskikh stated that he is facing similar problems. He needs to have a tooth extracted and has waited a year for an appointment. Most of the dental appointments are in Alameda and other counties which do not work for him.
  - iii. CM Wade Flores stated that he meets regularly with MCC administration regarding patient services, most recently last Monday. At the meeting, he heard that all dental services were up and running. He was shocked to hear what CM Bobby Moske had to say. He will bring this to the administration's attention. They are trying to improve relationships with clients. He asked that CM Bobby Moske and CM Alex Nizovskikh each send him an email with a description of their situation, and he will follow-up.
  - iv. CM Lydia Arellano stated that she used to work for MCC and during her time, there was a separate oral surgery program for extractions, etc. and Ryan White patients were accepted. She said that this was a whole different program. It is a one-day a

month program, contracted with an oral surgeon in Marin, and is not through UCSF. When she was working at MCC, she took care of all Ryan White patients. It is her understanding that the program is still running. She will send an email tonight to CM Bobby Moske and CM Alex Nizovskikh with a copy to CM Wade Flores with information.

**VI. Public Comment:** None

**VII. Co-Chair Report:** CM Wade Flores wished all members a Happy New Year. CM Elaine Flores thanked all members for letting her be co-chair and for their support. She has enjoyed her term as co-chair.

**VIII. Prevention Program Report:** CM Linda Dobra reported that not much has changed since the last report on Prevention. Just after those minutes were put out of the last meeting which said that she was putting more time into prevention, the first vaccine shipment arrived, and she was pulled into the vaccine distribution program. However, we continue to reach out to any positive cases that are admitted into the jail to link them to medical services. We want to assure they are getting their medications without interruption. We are working to assure they are linked to medical services also when they are released; this is difficult at times as we are not notified when they are released, and it can happen quickly. As soon as the person gets into the jail, we work with the social worker to make sure they are getting their meds in jail and are connected to medical care upon release. Regarding the HCV program, we are interviewing for an outreach worker. It looks like we have a lot of good candidates. Other than that, CM Linda Dobra reports that the majority of her time has been spent on vaccine distribution. We have been vaccinating health care workers by invitation only, averaging around 500 – 600 doses per day. At that pace, we should move through the tiers fairly quickly. The tiers can be found at [hhs.org/coronavirus](https://www.hhs.org/coronavirus) under “vaccine.” We need to get increased amounts of vaccine per delivery and the powers-that-be are working on that. We are working with CVS Pharmacy to get all residents of skilled nursing facilities, etc. vaccinated. The staff members at those facilities are now getting their second dose. The hospitals have gotten their vaccine allotments and have vaccinated their staff members.

**IX. Presentation – COVID-19 Vaccine Update – Dr. Tyler Evans, Deputy Public Health Officer, in charge of vaccine distribution program:** Dr. Evans briefly gave his background which has been in HIV. He acknowledged that at this point, being HIV positive does not qualify a person for prioritization. This is something that is currently being discussed on a national level. He then gave a PowerPoint presentation which was later sent to all CM members. He shared his screen and reported the following:

- a.** The surge of cases we are currently experiencing is considerably higher than the surge in July. This is probably the result of all the indoor gatherings which happened over the holidays. Hospitalization data is a good metric to use. Currently, we are at 3% ICU capacity available.
- b.** Regarding vaccine distribution, the guiding principles are efficiency, transparency and equity. The vaccine arrived on December 16<sup>th</sup> and vaccination started that same day. This week, we are vaccinating dental clinics, pharmacies, lab workers, etc.
- c.** Karina Arambula presented data on Marin's receipt and distribution of vaccine. She offered the caveat first that the data she has is not completed. She shared her screen and showed a brief PowerPoint presentation. Her current data via CDPH showed 5,847 doses administered and 757 vaccinations completed i.e. both shots given. She is able to break down the recipients by age, sex, ethnicity, etc. CM Linda Dobra stated that the figures show that mainly the work force population has been vaccinated and in future we should see more of the aging population. Karina agreed. She confirmed that the people vaccinated are those living in the county or working in the county at the skilled nursing facilities, clinics, etc. The first tier were Marin county health care workers whether or not they actually live in the county.
- d.** At this point, Dr. Evans' laptop died. Without the slides, he reported that planning is going on. The POD (point of distribution) is the critical piece. The central POD is at the Marin Center. Right now, we are at 1,400 capacity. The vaccine comes to the State and then is distributed by the State. The tier structure is determined at the federal level. The vaccine is being distributed at the local level by the local health departments, multi-jurisdictional organizations like Kaiser, correctional facilities like San Quentin and CVS/Walgreens pharmacies. The State gets the vaccine and the guidelines, and they make the determination as to distribution to the various counties and entities, based on the tiers and determination of risk. We do not know exactly how these calculations are made. We hope to complete Phase 1a by the end of next week. This group is the most critical, comprising health care workers who have been working and exposed continuously all this time plus the most vulnerable patients.
- e.** The next problem Dr. Evans stated was vaccine hesitancy. This has not been as much of a problem so far as was feared. Since we have been vaccinating health care workers whose medical literacy is high, we don't know yet how much of a problem this will be going forward. But, since the pandemic has affected people negatively in so many ways, i.e. economically, socially as well as medically, we do not anticipate that we will get too much resistance. In this regard, maintaining clear, positive messaging is important. The PIOs (Public

Information Officers) at each of the entities are coordinating to get the right message out consistently to the public.

- f. HIV positive people will probably not be included as a priority group. As we work to lift the stigma from this diagnosis, this may not be a bad thing. But, if people are immuno-compromised, that is a different story. How that is defined is not yet clear. The only priority category is people 64 and above with co-morbidities. Dr. Evans believes that people who are dealing with housing insecurity should be prioritized. IV drug users and people with STDs are prioritized, but sex workers and others are not. We are using the food service workers and agricultural workers as proxies for the Hispanic community but does that really cover them?
- g. **Q&A:**
  - i. CM Bobby Moske reported that he had read that 30% of MarinHealth health care workers had declined the vaccine and 60% of health care workers overall in Contra Costa County had declined the vaccine. What is that all about? Dr. Evans said he did not realize that the hesitancy rate was so high in Contra Costa. The issues seem to be safety and efficacy along with fear of allergic reactions. The cause of this concern is the speed with which the vaccine was developed, but actually, the clinical trials were normal trials; there were no short-cuts on that. He reviewed the trials, which included a cohort that was as diverse as possible. There was parallel production of the vaccine going on at the time of the trials. As soon as the Emergency Authorization was granted, the vaccine was shipped out. We received it on Dec. 16<sup>th</sup>. The quality of the trials was not affected, but people don't know that. We need to keep having conversations about this and good messaging. There are some people who are waiting to see what the effects are on other people before getting vaccinated themselves. That's not the best approach. We need to get this vaccine in our bodies as fast as possible.
  - ii. CM Wade Flores asked where he and other members of the Council fit in the priority list. He is a Kaiser patient, for example. Dr. Evans stated that HHS is requesting that Kaiser patients contact their providers and get their vaccinations there as Kaiser gets vaccine supplies separately from the Health Dept. As far as being HIV positive, it may be that people with this diagnosis will be in the Stage 1b cohort. CM Leslie Gallen said she saw notification from Kaiser that they will start vaccinating patients on Jan. 15<sup>th</sup>. There were phone numbers to call to set up appointments.
  - iii. Another question was how long after receiving the first dose would the vaccine offer protection. Dr. Evans replied that the average of Pfizer vaccine is 52% after 14 days, but the longer the vaccine is in the body, the greater the protection. There

are some people who are saying that only one dose should be fine, that it will provide about 80% protection over time. Dr. Evans thinks that we cannot know that for sure. It is best to get both doses. That strategy has not been tested. We need to stick with the science. With the Moderna vaccine, it is not clear what protection is provided after the first dose. He explained how the mRNA vaccines work.

- iv. CM Wade Flores asked if the vaccine has any effect on the medications that HIV positive people take. Dr. Evans replied that it does not.
- v. Andy Fyne asked about the circumstance where a person receives the first shot and then gets infected with COVID-19 on day 10. Dr. Evans replied that the first shot would give up to 50% effectiveness, but that means a person would have a 50/50 chance of getting infected. It is not clear if having the first shot will make sure you have a milder infection if you do get infected. Everyone's body is different, and the amount of viral load determines the seriousness of the disease. The vaccine could reduce the viral load which could mean milder disease but that is not tested.
- vi. Another question was whether the vaccine will be effective in producing immunity in immune-compromised people. Dr. Evans replied that this has not been tested but the vaccine was tested on older people who have less robust immune systems which may be generally comparable to immunosuppressed individuals and it was found to be as effective with them as with the general population.
- vii. Rhiannon Saltzman asked if she could spread COVID-19 to others if she had received the vaccine and then was exposed to COVID-19 from a co-worker. Dr. Evans replied that it was possible, which is why it is wise to still take precautions after having been vaccinated. However, once herd immunity is reached, then the chances of spread become so low as to be not a concern.

**X. Division of Public Health Report:** Cicily Emerson reported the following:

- a. Website: She reviewed the [coronavirus.marinhhs.org](https://coronavirus.marinhhs.org) website, particularly the "Marin County Coronavirus Information" webpage which has a lot of data. It will show where the county is with vaccine distribution. There will be a focus on equity, particularly when Tier 1B cohort is being vaccinated. There is a page on COVID-19 data which shows where Marin County is with regard to the curve. She also reviewed where the county needs to be in terms of positivity rate and other metrics in order to have the Stay-At-Home order lifted a little and bring us back into the red tier. CM Bobby Moske said that he is really impressed with the website.

- b. Curative: Cicily reported that we have a new testing resource, Curative. They recently had some bad press, but we still consider them a good testing option. She reviewed the locations and dates where Curative is offering testing. It is self-referral. CM Bobby Moske asked how often one should be tested. Cicily replied that it depends on one's level of risk. Some high-risk occupations have received recommendations to get tested monthly. One should get tested after travel. CM Linda Dobra said that there is no guidance on this. If one is masking and following stat-at-home orders, then regular testing is not required. But monthly testing may be good for people who are essential workers and at greater risk of exposure. At this point only staff at skilled nursing facilities and like work locations are being required to be tested regularly.
- c. Hospital Capacity: CM Wade Flores asked if anyone is being turned away at the hospitals because the hospitals are overwhelmed as is happening in Los Angeles. Cicily replied that there is not problem with hospital capacity here in Marin at this time.
- d. Contracts for Ryan White grants Part A and Part B: Cicily Emerson reported that the contract renewals for Ryan White grants are coming up in February for Part A and in March for Part B. We will be working with our providers to come up with new scopes of work, etc. for the coming year.
- e. Coalition: A Coalition is being formed with MCC and Ritter house. The meeting is set for January 25. A staff person will be assigned half-time to work on the HCV grant.

**XI. Presentation – Syringe Access Program:** Cicily Emerson and Andy Fyne of Spahr Center shared their screens and gave a PowerPoint presentation on the Syringe Access Program. The PowerPoint presentation will be sent to all Council members after the meeting.

- a. Cicily Emerson reviewed the status of the opioid crisis in the U.S. as a whole, in California and then in Marin County. She reviewed the benefits of the syringe access program. Then, she reviewed the background of the program which began in 1990 with a Board resolution and was renewed via legislation in 2011. The success of the program was shown in low rates of HIV transmission. The Spahr Center has operated the program in Marin County since 1999 and moved to a mobile unit on Dec. 1, 2018. The program reports to the HIV/AIDS Care Council biannually.
- b. Andy Fyne, Harm Reduction Director at the Spahr Center, then shared his screen and provided a separate PowerPoint presentation which will also be sent out to all Council members after the meeting.
- c. Andy Fyne reported that the Spahr Center operated under a harm reduction model, feeling that any positive change is worth the effort. Abstinence is the ultimate goal but reducing harm as an individual is preparing to give up drugs is an important goal as well.

- d. Their program is needs based rather than exchanging one used needle for a new one. If an individual requests more needles, needles for friends, etc., the Spahr Center supplies what they request. They supply a wide variety of syringes and supplies, including naloxone kits and instruction, safer smoking supplies, HIV and HCV rapid tests, etc.
- e. Safer Smoking: The Spahr Center distributes glass pipes and other supplies for smoking drugs and encourage smoking rather than injecting as overdoses are less likely when drugs are smoked rather than injected. Also, the risk of disease transmission is lower with smoking. This is a harm reduction strategy.
- f. Referrals: The Spahr Center gives out referrals for treatment.
- g. Safe Disposal: They provide canisters for safe disposal of needles and other supplies.
- h. Funding: Funding for this program is provided by the California Harm Reduction Initiative which is renewed every three years. This allows the Spahr Center to have one and a half people dedicated to this work. It funds safer use support groups, peer-to-peer interns, and advisory council and outreach to communities of color. Andy Fyne particularly mentioned the safer use support groups that Rhiannon is leading; they have been very successful. This group has gone from once a week to four times a week. CM Bobby Moske pointed out that meth users have no place to go in Marin County for a meeting. They have to go to Contra Costa County for this. We need a meeting for people who want to stop smoking meth. Andy Fyne suggested that he and Bobby work together on this through RxSafe Marin which is another funder of Spahr Center's programs. Andy then reviewed what is being done through RxSafe Marin.
- i. Sites: Andy Fyne reviewed the current syringe exchange sites.
- j. Naloxone: Andy Fyne reviewed the benefits of naloxone. CM Bobby Moske reported that RxSafe Marin is providing naloxone and naloxone training to all pharmacies in Marin. The training provides CMEs for those who take it. Andy reviewed the statistics, including number of interventions, number of syringes distributed, etc.

**XII. Co-Chair Elections:** CM Bobby Moske moved that Wade Flores and Elaine Flores' terms be extended another six months. CM Lydia Arellano seconded the motion. The motion carried unanimously.

**XIII. Adjourn:** The meeting was adjourned at 5:05 pm.

**Next Meeting:**                    **Wednesday, March 10, 2021**  
   **Location: Via Zoom**  
   **3:00 – 5:00 pm**