

Oakland Transitional Grant Area (TGA)

COLLABORATIVE COMMUNITY PLANNING COUNCIL

"Serving Alameda and Contra Costa Counties"

CCPC MEETING MINUTES

Wednesday, May 24, 2017
1:00 pm – 4:00 pm
Office of AIDS Administration (OAA)
1000 Broadway St., 5th Floor - Room 5000A
Oakland, CA 94607

Monica Cross, Co-Chair

Eric McCann, Co-Chair

I. CALL TO ORDER

The meeting was called to order by Co-Chair Eric McCann at 1:18p.m. who asked the members and guests to introduce themselves. Then a moment of silence was held in honor of those affected and impacted by HIV/AIDS. The Mission Statement was read by Raymond Brickhouse and Group Norms and Values were read by Co-Chair Monica Cross.

| MEETING ATTENDANCE | |
|----------------------------------|----------------------------------|
| Planning Council Members: | |
| Lois Bailey Lindsey | Freddie Smith |
| Raymond Brickhouse, Co-Chair | Phoenix Smith (Grantee, Alameda) |
| Monica Cross | Betty Ubiles |
| Marjorie Katz | Keisha Willard |
| Eric McCann, Co-Chair | |
| Jessica Osorio (Contra Costa) | |
| Absent Planning Council Members: | Staff: |
| Nydia Morales | Akilah Cadet |
| Liam Galbreth | Tatiana Larkin |
| Loris Mattox | |
| Trina Walker | |
| Carla Wright | |
| Community Members/Guests: | |
| Loren Jones | Carmen Foster |
| Lianne Hope | Ramiro Montoya |
| Patty Zevallos | Daniel Allgerere |
| Ivonne Quiroz | |

II. AGENDA REVIEW AND APPROVAL

Co-Chair Monica Cross motioned to approve the Agenda for the May 24, 2017 CCPC meeting. The motion was seconded by Lois Bailey Lindsey. The *Action:* **1705-CCPC-01** was approved.

III. REVIEW AND APPROVAL OF THE MEETING MINUTES

Jessica Osorio made a correction to the notes to say Contra Costa provided information to PrEP instead of linked them to services. Raymond Brickhouse motioned to approve the April 26, 2017 meeting minutes with corrections. Betty Ubiles seconded the motion. The *Action*: **1705-CCPC-02** was approved.

UNFINISHED BUSINESS (Refer to the Appendix for Motions)

IV. GRANTEE REPORT/UPDATE (please review reports)

OAA/ALAMEDA COUNTY, Phoenix Smith (see written report)

- HRSA Visit
 - Off draw down status after 4 years. She thanked Rama, Jameela, Pam, Lorenzo, Shelley, Nick Moss, Dr. Erica Pawn, Keith Waltrip, Previous Council Members and Co-Chairs Liam, Nilda, Monica, Ms. Betty, Lois, and Carla Gold, Eva Mirad, Michael Lee, Tom Mossmiller, Ella, Crystal.
 - o Raymond Brickhouse and Phoenix Smith invited to HRSA national meeting to share how they improved and provide their technical assistance.
 - Fiscal Site Visit: A through fiscal review occurred and we have internal changes to make, but it went well. Only one finding where we need to do fiscal site visits. It was three days all day long to review documentation
 - Just confirmed that the programmatic site visit will occur and a huge portion is for CCPC. He will be in the room with us during the June 28 CCPC meeting and will most likely have a private meeting with the executives. He is big on SOP, standard operating procedures. Assure new co-chairs have Robert's Rules training.
 - We will receive lots of technical assistance for CCPC and the administrators to assure standard process and will be provided by private consultants.
 - o If you as CCPC or community members have questions, ask.
 - o Assure we make outreach calls to the members who are not here today.
- New Fiscal Year: Since we started March we are still experiencing challenges, but in the process of putting several agencies on a corrective action plan to improve documentation. I will discuss more next month.
- Staffing: Still looking for a program specialist and temporary clerk. If you know anyone from the community they need to fill out a TAP application.
 - Remind everyone that we need to make sure that we are stellar on that day. We do need to outreach to our members to make sure we have a full house on that day. It is also important to talk about the agenda.

Friendly reminder that it is hard to move presenters so we may have to keep as is.

Public Comment: What date was the Robert's Rules training on and would it be possible to have the people that are new members to come? Will someone be there to facilitate that meeting.

I didn't say that we would have one, just a suggestion. More like something we can say that we are doing.

Public Comment: Seems like a rocky start, see how many people in the audience and community. Are you going to send flyers out to the community? Can you have at least 40 people attend? How many people in Alameda that have HIV?

We have about 5,000 people with HIV in the county.

Change Cadet has taken over the contract from Sweetwine consulting. Please note that we will need time to do a needs assessment of areas for improvement, but you should see changes in the next three months. Please feel to contact us directly.

CONTRA COSTA, Jessica Osorio (see written report)

- Early Intervention Services: This is a correction of a previous mistake 894 people contacted through our line list program focusing on priority populations, people with repeat STDs, women of color, negative partners of clients in our area systems living with HIV receiving our services, and also MSM. We called 894 people, 38 individuals, 4% were actually linked to PrEP providers. An additional 67 individuals or 7% of that line list received some form of extensive risk reduction services like condoms, lube, referral to STD testing, counseling. The team is almost done with the second line list and will have data about a month after.
- Allocations Process: We had our last meeting on May 8th and the next meeting will be Monday June 12 at the Rainbow Center in Concord to provide recommendations to CCPC.
- Staffing: Public Health Nurse started in April and she is working with Medi-Cal waiver clients in medical nutrition and home care support. In the process of bringing on a Senior Health Education Specialist and hopefully that person will start next week.

What are the biggest challenges when you have a small percentage like 4%?

These are cold calls so that is a challenge in itself, some people are under the age of 18 and parents will intervene and we cannot provide that information to the parent. And also, not having the right contact information for some people. Yes we have a PrEP Navigation Specialist, but that is not the focus of the program; we are primarily focused on enhanced reduction activities to improve their sexual health and PrEP is not an appropriate intervention for probably for the majority of the people we are reaching out to.

CDPH, Marjorie Katz and Sharisse Kemp (see written report)

- Congratulations on being off of draw down status.
- The Governor did reduce his budget proposal and an analysis has been posted on our website. The website was recently updated to be ADA compliant. Not everything that was on our website has not been transitioned to the new website. www.cdph.ca.gov is the new site but you can visit www.archivecdph.ca.gov for that files you are accustomed to.
- On a quarterly basis we are reviewing the Integrated Plan. We have an Integrated Plan Specialist who is leading this effort and working with each of the branches of the office to assure we are on target. Each branch has been given a role to assure we are all working towards getting to zero and holding ourselves accountable.
- HIV CARE Program: We finished the year; Part B goes from April to March. The year-end report is due to our office by May 31st. There is a new HOPWA manager. Clinical Management, CQM staff has been participating in a national quality center in disparity learning exchange and it has been a wonderful experience. CQM Nurse is working on updating the statewide QM plan which is in the process of being reviewed and we will be focusing are CQM metrics for youth efforts will be focused on viral load suppression for youth because that is what the data told us is the most important area to look at statewide, youth 18-24, and we are doing planning to do quality improvement process.
- Webinar held last week is on the website. It was on Improving STD Screening with Dr. Julie Stoli and it was excellent.
- AIDS program is continuing monthly calls with Project Directors setting up the site reviews for the rest of 2017.

- HIV Prevention: The Syringe Exchange Clearing house will now expand to include naloxone. If interested please contact us for anyone who would like to start a program.
- Surveillance and Research: New Section Chief.
- ADAP, Sharise Kemp
 - Data processing and eligibility section Manager hired.
 - o Enrollment Site payment application will be paid by former contractor data.
 - o Eligibility Transfers effective April 20 if an Enrollment Worker application is submitted between 8am-6pm using the ADAP Enrollment System Mon-Fri, the client will have access to their ADAP formulary medications at the pharmacy within 15 minutes
 - Magellan client ID cards started to be mailed to clients with anticipated completion date of June 5.
 - o Enrollment System: Being developed in stages with features and improvements every four weeks.

Is the naloxone distribution project is it separate from the state naloxone grant? I think it is the same but contact Sandra Ross, feel free to email me.

As an ADAP enrollment worker, I am having difficulties getting to the second part of the training. Is there someone who can help me technically so I can finish?

Yes, you should be assigned an ADAP Advisor and they can provide you with technical assistance of the training.

It is more for the second part of the webinar training?

You contact me directly.

I have always had ADAP support, but now they have started charging me and this is the first time since 1991. Can you help me?

Whenever a community member is accessing services like Ryan White you will contact Pamela Casey to file a grievance and we can investigate it right away.

V. REPORTS: STANDING COMMITTEE CO-CHAIRS AND MANDATED CATEGORY REPRESENTATIVES (Action Items Only)

MEMBERSHIP: Betty Ubiles and Monica Cross provided an update. Asked to extend Loren Jones membership via a further discussion. Dr. Barbara Green Ajufo will be seated next month due to review of the bylaws indicating final seating is done by the CEO (Board of Supervisors) or Designee (OAA). [Discussion was held on the relationship with the Board of Supervisors and bylaws designee]. Update the Bylaws and check/update the Membership Bylaws/operating procedures. Ask for the community members to apply or reapply for CCPC members. There is a need to re-examine the voting procedures and to update the Conflict of Interest Form, prior to the fund allocation period to assure that everyone is voting without conflict. [Discussion was held on the voting procedures]. Shared need for the Robert's Rules of Order training.

QUALITY DATA: Loren Jones, community member of Data shared that there were no action items, but there is a need for a Chair of the committee. Other members have agreed to send a request to the Executive Committee to extend her membership for a further discussion. Change Cadet staff is acting as the chair in the meantime to keep the momentum going. The committee has decided to only meet remotely via video/phone and reduced the time by half an hour in order to help with barriers to the meeting time.

Even though you do not sit at this table, community members can join committees.

PLWHA: Raymond Brickhouse shared that they did not meet as the committee was in Sacramento for and HIV related event.

NEW BUSINESS

VI. REALLOCATION REQUEST, VOTE

Jessica Osorio shared the need to reallocate 24K from Legal Service due to not being able to secure a contractor to provide legal services. Move 18K to Oral Health Care and 6K to Home and Community Based Health Care due to insufficient funding in those categories in order to meet the projected need. Eric Cross, motioned to move the funding as presented. Keisha Willard seconded the motion. moved to call a roll call vote. All were in favor and the motion was approved. The *Action:* **1705-CCPC-03** was approved.

VII. ORAL HEALTH REPORT PRESENTATION, Lois Bailey Lindsey

(see presentation)

What is your biggest costs?

It's in the labs. It gets very expensive because the clinic has to contract with the laboratory. So the lab charges a certain amount of money for dentures.

Does it decrease the lab cost?

No. If anything it goes up.

What is the cap?

We do not have a cap. The planning council did not want to put a cap on services. So if you need 14K worth of care then you get it.

How do you then determine the unduplicated amount for care?

We get it from Plan A and rest we ask the council. It is up to the dentist and dental directors to determine what is done. But they do get what they need to eat, chew, and apply for a position or job.

How long ago was the decision made to not put a gap?

It was a long time ago.

Do we need to revisit the idea of a cap or a max? Ryan White is the payor of last resort so we want to make sure if there are any other resources before we use that because that means other clients may not receive it. Oral health services is fully funded and at the same time we want to assure there are limits to this funding. Should we discuss in the future?

So if you are on Medi-cal you are not eligible for the CARE program. But if you have something that is not covered under Medi-cal then you are eligible.

For someone like me who doesn't have a case manager, how would I get services.

Do you have dental insurance? Perhaps go through Highland

With new branding are you sending out flyers to the communities? We need it...with current contact.

I can.

Does it look like budgetary that we will need to return money back to HRSA or could we increase the dental allocation to serve those in need?

I don't know. Please ask during the fiscal presentation I think next meeting.

I was told to wait until July.

You can ask the office anytime regarding reallocation

I can do that.

VIII. QUALITY DATA FOR ALAMEDA COUNTY PRESENTATION, Pam Casey

We find that sometimes clients do not want to state their ethnicity. Okay.

I just think the pie charts are great. It is eye opening.

I just want to remind you they are Alameda County.

In the age of antiretroviral therapy and many communities are saying the science shows that if your viral load is undetectable is saying that you cannot transmit the virus for 28% still under the diagnosis of AIDS.

It's because even though you are on your medications and your numbers may go up, but if you are diagnoses with AIDS you keep that diagnosis forever.

Our agencies to make sure we have documentation of status in their files.

Yes but the file will only say they have HIV+ but AIDS status is unknown

So they are not sure if they received an AIDS diagnosis. Once your T cell count goes low you automatically have an AIDS diagnoses

They are HIV status and have a letter that states that.

Yes but they do not have status of continuum of care.

Not sure why it is separated out that way.

It is confusing and it needs to be worked out. We will have our AIRES person look at that.

It is still best to do an HIV test as there have been cases where clients are on HIV meds but do not have HIV. Especially when they come out of state.

This data is just for Alameda County, so we need technical assistance from Alameda County for how to improve our data.

It can be one or two things, like data entry or people do not want to tell you when it comes to unknown reasons for exposure. People do not want to be judged or deal or feel it is any of their business.

Speaking from a former case manager perspective I can't help that maybe the Case Manager makes it uncomfortable for clients/patients to speak? Case Managers can stereotype as well. What are we doing with the Case Manager to help them feel safe and they can trust us in order to provide services for quality of life?

There is a regional case manager meeting and we are working with Dr. Cadet to have a presentation here. We also are looking to have more outreach and have meetings out in the community with a community church.

Keisha Willard would like to have a presentation with Keith Hall.

This would be a great question for a medical focus group.

HRSA does not like unknowns so we need to figure out how to fix that. We can only have 10% or less for that category.

IX. CALIFORNIA PLANNING GROUP MEETING UPDATE, Raymond Brickhouse

I am part of the statewide group and have been appointed on the membership committee so I will be recruiting people to sit on the state council. They will be starting a housing committee and I put my name in the hat for that and will have more to report on a later date. I will continue to represent the county the best way I can.

X. MEMBERSHIP STATUS, Akilah Cadet

- Voting via email on certain items to speed things along for certain time sensitive items.
- I will be introducing a Laptop Exchange program to make sure every chair has access to the files and voting.
- The website is up to date.

- Staffing announcement: Introduced Lianne Hope as a new team member and former employee for Boston's Planning Council. She will help with outreach, recruitment, leadership, and council engagement.
- Phoenix Smith said she is working to hire an intern to help with CCPC.
- There will be a review of Bylaws in particular to membership.
- Encouragement to connect with members you have a relationship.

Can we have the meeting from 1pm-5pm?

Sure. Since we are all here will that work for the group?

Yes.

XI. ANNOUCEMENTS

- A new case manager has been hired for one of the agencies.
- 30th Annual East Bay AIDS Annual Update will be June 2: Phoenix Smith will be doing a presentation on the Fast Track Initiative.

XII. COMMUNITY/PUBLIC COMMENTS

• From the Congressional Budget Office will lead to 22 million less American's with less insurance. With housing people have been pushed from SF, to Oakland, to Contra Costa. How is housing assistance provided.

There is a separate agency for housing.

- With Dental, how long does it take for someone to get their teeth fixed.
 It depends on what is done and what they need. They should ask their dentist if they feel it is taking too long. I encourage patients to advocate on their behalf and talk to the dentist, if not the dental director.
- Tomorrow outside of City Hall there is going to be a meeting for the budget.

XIII. ADJOURNMENT

Raymond Brickhouse made a motioned to adjourn the meeting. The motion was seconded by Betty Ubilies. The *Action*: **1705-CCPC-04** was approved.

MOTION APPENDIX

1705-CCPC-01: Motion Adopted

Monica Cross motioned to approve the Agenda for the May 24, 2017 CCPC meeting Lois Bailey Lindsey seconded the motion.

• 1705-CCPC-02: Motion Adopted

Raymond Brickhouse motioned to approve the Minutes for the April 26, 2017 CCPC meeting. Betty Ubiles seconded the motion.

• 1705-CCPC-03: Motion Adopted

Eric McCann called for a vote to reallocate funds from Legal Services to Oral Health Care and Community Based Health Care for Contra Costa County. Keisha Willard seconded the motion. The motion was approved unanimously.

• 1705-CCPC-04: Motion Adopted

Raymond Brickhouse motioned to adjourn the meeting. Betty Ubiles seconded the motion.