

Sonoma County
COMMISSION ON AIDS

HIV CARE CONSORTIUM
HIV HEALTH PLANNING COUNCIL
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**MINUTES OF THE MEETING OF THE SONOMA COUNTY
COMMISSION ON AIDS/HIV CARE CONSORTIUM
HIV HEALTH PLANNING COUNCIL**

August 12, 2009

625 Fifth Street, Citiview Rooms, Santa Rosa

Members Present: Ron K., Alix. S., Lynn C., Cerrissa M., Steve B., Dwayne Z., Anna B.,
Shari B., Rick D., Herb L. Lisa A., David W., and Susan C.
Members Absent: Ruben C., Glenn S., Marion D., Celia B., and Harold L.
Staff: Kelly E., Ellen S., and Claire E.

1. **Call to Order** – The Chair called the meeting to order. Introductions were made for the benefit of the public.
2. **Memorial Moment** – A moment of silence was observed to keep in mind those who have passed during this epidemic.
3. **Public Comment/Announcements**
 - A long term survivor expressed concern about preserving medical services which are critical. He stated that the other services have been wonderful but both agencies and consumers must be adult in this difficult time. Delays in making decisions could be disastrous to the care system.
 - The Chair signed a letter in support of the National AIDS Strategy on behalf of the Commission.
 - Welcome to David, a new Commissioner
 - The World AIDS Day activities will be mostly in Guerneville this year. The theme is leadership. Volunteers are welcome to participate in the planning efforts.
4. **Summary notes from the July 29, 2009 Special Meeting** – A motion was made and seconded to accept the minutes. The minutes were approved as written.
5. **Distinguished Service Awards**
 - Recipients of the Awards are: Danny Beaver, Jessica Strange, Jetta Sear, Paulette Omalette, Sil Machado, and ReConnect Advocates (Carolyn Epple, Robert Kavanagh, Sean Kelson, Herb Light, Richard Pryor, Scott Voelte, Ginger Washburn, Ren Worden, and Dwayne Zentner).
6. **State of the Epidemic - Report from the Department of Health Services**
 - Dr. Mary Maddux-Gonzalez provided information about the state and county budget impacts on the entire health department. For a year there have been strategic planning discussions in all areas of health, including HIV. Since 1987, the County has been a major provider of HIV services, and there have been great changes in HIV in 22 years; the care for persons with HIV has shifted to a chronic disease care model. The health care infrastructure has also changed. There is now a network of clinics that provide 85% of primary care to the MediCal population.

- Funding reductions are likely to continue in main HIV funding sources which include; the Ryan White Part A funding, State Office of AIDS HIV funds, and county realignment funds. Public Health is addressing these reductions in a proactive way rather than reacting to each cut as it happens. A planning process is being convened to address sustainable ways to provide quality medical care to HIV+ individuals. This process will look at the best way to accomplish this, best use of funding and other resources so people get essential medical services. The County is open to all options and the process will include participation of current providers, Commissioners, and other stakeholders. The timeline hasn't been set yet but it is anticipated it will take several months. Dr. Mark Netherda will lead this process, as the Deputy Health Officer with 11 years as the former medical director of HIV clinic, he is uniquely qualified.. Dr. Netherda said it will take a lot of input to develop a quality medical care system with limited resources. The days of having substantial financial resources are long past, Sonoma County needs cost effective, sustainable, and quality care and a plan that looks five and ten years into the future.
- Staff reported that the County switch to eHARS will likely happen in February or March. The State is switching next week. Once the system is fully operational, cases will be unduplicated; the numbers may change but will be a more reliable set of numbers. As of May 20, 2009, there have been 2,039 AIDS cases and 1,147 deaths. There have been 288 HIV cases and 13 deaths.
- Staff reported that although the Prevention Division is also waiting for information on the future funding for HIV Testing, Education and Prevention, some services have transitioned out of the Division. Partner Counseling and Referral Services (PCRS) has transitioned to communicable Disease and is being handled in similar ways to other STDs.
- The Division received another letter from HRSA "to clarify Santa Rosa's continued status as a Transitional Grant Area (TGA) under Part A of the Ryan White HIV/AIDS Program. If Santa Rosa fails for one more consecutive year to meet the statutory criteria for continued status as a TGA, Santa Rosa will no longer be considered a TGA and will lose eligibility for funding under Part A of Title XXVI of the Public Health Service Act in fiscal year (FY) 2011. Therefore, the FY 2010 grant will be the last grant to Santa Rosa as a TGA." There are three Eligible Metropolitan Areas (EMAs) and six TGAs in California. The deadline for the CARE Act is September 30, 2009, as it will expire on that day if no action is taken by congress. There has been no discussion about changing criteria but consensus documents requested an extension of deadlines.

7. Action Item: HOPWA Services Plan

- Staff introduced the Action Item. HOPWA helps people obtain and maintain stable housing. Suggestions for modification to the HIV HOPWA Services Plan were based on discussions with services providers and utilization of the services. A proposal was made to change allocations in the plan by increasing housing search assistance and allocations to tenant based rental assistance which will double the number of people receiving assistance. Reductions to short term emergency assistance are recommended due to under utilization and increased oversight to ensure that the most in need receive the services. The Project Based Rental Assistance should be eliminated from the plan since it wasn't used and isn't planned to be used. Commissioners voted: 9 in favor, none opposed, 1 abstention.

8. Discussion: Process for HIV Services Plan

- Members of the task force provided an overview of the history of the thoughtful process that the Commission on AIDS (COA) has gone through for five years to keep up with changes and review available facts to create values based priority plans. It is the recommendation of the task force that the periodic review of the planning that has occurred be honored and not changed. The core values of the system haven't changed. It would be time consuming to make changes in the current year, the current process of midyear review could occur before a new process would be able to make a recommendation for changes in the current fiscal year. The task force proposes reviewing the HIV Services Plan that was recently adopted for FY10-13. The timeline and

process was explained for modifying the FY10-13 plan. The task force could meet again, bring recommendations to COA in September, and unconflicted group of COA members can take the information and meet. A revised plan would need to be approved by November to meet internal deadlines. This could require several additional COA meetings.

- Ron outlined that there is a difference between the priorities valued by COA and allocations based on available funding. The process group made three recommendations for the Commission to consider:
 - 1) There are severe time constraints involved in changing contracts in the current fiscal year. There is a mid year review process that happens every year to shift funds based on utilization. It is recommended to not modify the FY09-10 HIV Services Plan. There will be cuts to services commensurate with cuts from the state budget. Commissioners voted: 9 in favor, none opposed, one abstention.
 - 2) The HIV Services Plan lists services in order of priority. The process for changing the priority is lengthy and the order has been approved recently by the Commission after the FAWG and commissioners reviewed data. The allocation may change but it is recommended that the ranking order remain the same. Commissioners voted: 9 in favor, none opposed, 2 abstentions.
 - 3) COA needs information from medical providers. The HIV Clinic and West County Health Centers (WCHC) provided information about their structure and the impacts of the state budget. Both agencies discussed the impacts that have already affected the agencies and the impacts that are in the immediate future. The way services are delivered will be different than they have been in the past. It is unclear if there is enough information to revise the HIV Services Plan. The HIV care system evolved when there was a lot of money, and when there was a great deal of hand holding, and not in a time of reconnect. The clients themselves are assets. The medical care is first, foremost always first priority including people who are falling out of care and will cost more in the long run as well as saying we don't care about those people and adds to stigma and puts us back 20 years.
- If reconnect is an underlying value, where is agency reconnect in the way services are delivered? FAWG members looked at each service and made recommendations for each service to connect to the service community outside of HIV funding. The value of health outcomes for clients and serving the most in need needs to be validated.
- Information issues to be considered by the process task force before the next Commission meeting are; how every service provider is being adversely affected, some people will fall out of care regardless of decisions made, there are people who aren't at the table and never have been at the table and they are the ones the new system will serve, changes must be made to every service to meet changing resources and changing needs of clients. There are also timing issues to be considered; its not clear if we are prepared to make a decision, the public health process may be the impost important information needed and may take longer than the timeline for the HIV Services Plan.

9. Positive Stories

- There were no positive stories shared

10. Business Update

- Per the current bylaws COA must be made aware that a letter will be sent to a Commissioner who missed many meetings in 2008 and 2009 both prior to and after receiving a six month leave of absence. A final vote will be held at the September meeting 15 days after the letter of notice has been sent then the Board of Supervisors can be notified of the removal.

11. Agency Updates

- Face to Face (F2F) has transitioned the medical case management program to the two clinics currently providing medical care for HIV+ clients. Seven staff will be laid off. All other services will continue including non-medical case management services. Rick will convene a roundtable for service providers and will bring information to the Commission from roundtable meetings..
- The Drug Abuse Alternatives Center (DAAC) HIV team has also been cut significantly with most on reduced time. If there isn't additional funding the mobile testing sites will close in September. The successful Ladies Night is also closing.
- Human Services in home health services has been drastically reduced. Child Protective Services, CalWorks, and Adult Protective Services have been reduced. MediCal is dropping dental services.

12. PAC/RAC Committee update

- PAC met on August 6th, it was decided that quarterly meetings at the County offices will be PAC business meetings and other meetings will be PAC agency meetings. Agency meetings will focus on providing information to consumers, getting input and bringing consumer information to the Commission. The agency agendas and minutes will be posted on the Commission website and at the service agencies to increase consumer awareness. PAC members asked Commissioners and agency staff to promote these meetings and participate in the agency PAC meetings. The first meeting will be on September 17th from 2:00 – 4:00 p.m. at Food for Thought. The October meeting is planned for an evening at West County Health Center. PAC asked that a ReConnect update from agencies be a part of agency updates at Commission meetings.

13. What's New in HIV?

- This item was postponed due to the late hour.

14. Items for next meeting agenda. The second read of the Bylaws revision, Process task force procedure or recommended actions.

15. Closure – Meeting was adjourned at 7:40

The next meeting is on Sept 2, 2009 at 4:15 p.m.
625 Fifth Street, Citiview Room