

Seattle HIV/AIDS Planning Council

Monday, November 9, 2009-- 4:00 p.m.–6:30 p.m.
2100 Building: 2100 - 24th Avenue South

AGENDA

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|-------|--|-------------|
| I. | Welcome, Introductions & Announcements | 4:00 |
| II. | Meeting Agenda (2 min) <ul style="list-style-type: none">➤ Action: Review and approve | |
| III. | Minutes: (3 min) 📎 Attachment: white <ul style="list-style-type: none">➤ Action: Review and approve | |
| IV. | Grantee Reports (Barb, Becca) <ul style="list-style-type: none">• Including a review of prevention allocations (in October packet)• QM program update | 4:05 |
| V. | Election of EIP Steering Committee Representative <ul style="list-style-type: none">➤ Action: Choose a second EIP representative (must be a King County consumer) | 4:25 |
| VI. | Council Position on Proposed AIDSNet Changes <ul style="list-style-type: none">• Discuss implications of elimination of AIDSNet system and possibilities to replace it➤ Action: Develop a Council position on this issue to be shared on behalf of the Council at the November 10th public input meeting | 4:35 |
| VII. | Break | 5:20 |
| VIII. | Council Statement to HHS Office of HIV/AIDS Policy <ul style="list-style-type: none">• Discuss areas of agreement for the Council on national policy➤ Action: Develop a Council position to be shared on behalf of the Council at the December 9th public forum | 5:35 |
| IX. | Membership Report (James, Marcos) | 6:05 |
| X. | Consumer Caucus Report (Higinio) | 6:20 |
| XI. | Adjourn | 6:30 |

***Barrier-free location
Reasonable accommodation for persons with disabilities
available upon advance request.***

Seattle HIV/AIDS Planning Council

Minutes ☿ Monday, November 9, 2009
4:00pm - 6:30pm

2100 24th Avenue South Seattle, WA 98144

Council Members Present: *Amy Bennett, Ryan Ceurvorst, Sergio Cueva Flores, Shireesha Dhanireddy, Kate Elling, Brandie Flood, Joseph Grant, Sarah Kent, Gerrie LaQuey, Darren Layman, David Lee, Marcos Martinez, Ruth Njoroge, Kris Nyrop, Christine Oyaró, Arthur Padilla, Kevin Patz, Tony Radovich, Michael Raitt, James Redel, Germán Rodríguez, Erick Seelbach, Bob Wood*

Council Members Absent: *Richard Aleshire, Philip Doles, Melinda Giovengo, Robin Langdale, Higinio Martinez, Andrew Murphy, Ron Padgett, Jodie Pezzi*

Planning Council Staff Present: Jesse Chipps, Diane Ferrero, Courtney Speigner (minutes)

Public Health Staff Present: Barb Gamble

Guests: Joachim Hawn, Katie Mitchell, Eckert White, Yodit Wongelemengist

Italics denote Planning Council Membership.

I. Welcome, Introductions and Announcements

Sarah announced she will not be returning to her position at BABES. This meeting is her last Council meeting, as her term ends on the 20th.

The group did a round of introductions.

Jesse announced:

- This will also be the last meeting for Ryan and Melinda.
- Everyone should have received an Evite to Bob's going away party.

II. Meeting Agenda

Jesse reported there would be no care grantee report as Jeff is on vacation and other staff are not available. The Ryan White grant application has been submitted.

☑ *The agenda was approved as amended by acclamation.*

III. Prioritization Minutes

On page 9, the period is missing from the first sentence.

MOTION: James moved to approve the October prioritization minutes with the correction. Tony seconded.

☑ *The motion passed with 17 in favor and David, Kris, and Marcos abstaining.*

IV. October Meeting Minutes

MOTION: Tony moved to approve the October Council meeting minutes as written. Kate seconded.

☑ *The motion passed with 17 in favor and David, Kris, and Marcos abstaining.*

<Katie Mitchell and Yolit Wongelemengist (Project HANDLE) entered at 4:15pm>

<Bob entered at 4:15pm>

V. Prevention Grantee Report

Barb reported on the following points:

- For the last two months agencies have been writing grant proposals for the CDC. There are three proposals from our area:
 - A collaboration between Multifaith, CMCH, Entre Hermanos, and Gay City. Public Health was successful in getting grant-writing assistance with this proposal.
 - Project HANDLE submitted a proposal for the Voices intervention including HIV counseling and testing.
 - POCAAN submitted a proposal for Project Start for formerly incarcerated populations, including testing and counseling through a partnership with Project HANDLE.
- The timeline for these awards is vague. The CDC will review the written proposals and those proposals which meet the minimum threshold will have a pre-decisional site visit.
- Barb went over the Prevention Allocations (the Council received an email copy of these as well as a copy in the October packet). The funding amounts did match the amounts specified in prevention plan, and the caveats in the plan were met as well. Currently contracts are being negotiated with agencies.
 - Public Health is acting as a convening agency in a collaboration between agencies funded for MSM programs (as specified in the Prevention Plan). The first collaboration meeting will be on December 2. Agencies will discuss questions such as: What does the continuum look like? What should it look like? How do we increase referrals between agencies? These meetings are contractually mandated and will be monthly. The intent is that programs can be flexible, and Public Health wants to send the message that it's okay to make changes to the programs (there has been some thought that programs may not make changes over time for fear of not being funded). Ideas from the meetings can be presented at the January Council meeting.
 - The funding allocated reflected a 15% cut.

VI. Election of EIP Steering Committee Representative

Shireesha is currently an EIP Steering Committee Representative and is a provider. The other representative must be HIV positive and a consumer of EIP services. Tony expressed interest in the position.

MOTION: James moved to approve Tony as the EIP Steering Committee Representative. Erick seconded.

☑ The motion passed unanimously with no further nominations or discussion.

VI. Council Position on Proposed AIDSNet Changes

Jesse introduced the topic. She explained that the AIDS Omnibus law created AIDSNet. The legislation being introduced, House Bill 2360, seeks to keep the Omnibus law but eliminate the administrative function of the AIDSNet. In prevention, dollars come to the state and are divided between the six regions. All regions are multicounty except Region Four (King County). Planning, putting funds out for bid, contract management, etc. currently takes place through the largest Health Jurisdiction of each AIDSNet region. In 2006, when the Ryan White Treatment Modernization Act did away with consortia, care planning was moved to the AIDSNet regions as well. The idea of eliminating this structure is to save money. A workgroup met and created recommendations for the new administration system (cherry handout in packet).

Erick (who was on the workgroup) explained that the final recommendation from the workgroup is to not mandate any particular structure but leave it to DOH to come up with a creative structure. DOH would create a planning body (*not* EIP Steering Committee or State Planning Group) for prevention planning for the state and for care planning in the state except for Part A (which would be planned for by the TGA). For King County, the primary impact would be on prevention, but for the state, care is affected as well. Jesse drew the regions for the group.

<Sergio entered at 4:40>

Bob explained that right now House Bill 2360 does not specify in detail what the administrative model would look like. In the Spring, the legislature will likely pass this bill or a modified version of it. Then, DOH would have to establish a plan.

Jesse pointed out that even if recommendation number two is followed, to merge Pierce County with King, Snohomish and Island Counties, for prevention, it cannot be merged for care, due to HRSA requirements.

The group discussed a Council position:

- Kris stated his feeling that the Council should be adamant that Region 4 remain in charge completely of its own planning process for prevention. He stated he had spoken with members of the Washington State HIV Prevention Planning Group, and they agree that King County should be separate. He added his opinion that Pierce should not be merged with our area for planning because of problems with their planning processes. Erick, holding up his conflict card, noted that his agency publicly supports moving contracting to DOH, and suggested that because needs cross geographic boundaries, prevention planning outside of King County could be beneficial.
- David (who is a member of GACHA) stated the most effective thing this group can do is to agree on their recommendations and present them tomorrow. He noted the reasoning for leaving the creation of the planning system to DOH is to not put a specific system into law, which would be difficult to change in the future if necessary.
- It was clarified that Kris's suggestion of recommendation number one includes both planning and contracting.
- Barb clarified that there are two issues: planning and contracting. The State Planning Group (SPG) will continue to exist. One idea would be that SPG plans for whole state; another is that King County would plan for itself and SPG for the rest of the state. Contracting is a separate issue and this does not necessarily have to follow the planning recommendations. Bob noted this may pose a coordination issue. Typically, whichever entity does contracting also does coordinating, and if an agency had a problem and contracting is done at state level, this agency would have to go to DOH for assistance.
- Tony pointed out that the only entity that lobbies on a state level, other than Public Health, is Lifelong, through the Communities in Action Network.
- Shireesha stated her feeling it may not be useful for the Council to discuss this because the group may not be able to reach consensus, coming from different agencies and perspectives. Jesse clarified that the Council only uses consensus in prioritization, and that issues brought to the full Council are decided by a majority vote. Bob stated his feeling that it's appropriate for the Council to develop a position because this legislation could result in the Council no longer doing prevention planning, which is currently about one third of the Council's work. Kris stated his concern that the SPG does not have anywhere near the level of community representation of affected populations as this body. Several group members agreed.
- Sarah asked whether this Planning Council would be able to plan for prevention for King, Pierce, Snohomish and Island Counties (recommendation number 2). This could be possible if there were representatives from other regions. However, this body must be at least 33% PLWH for care planning, and prevention planning has different requirements. It may be difficult to get prevention planning representatives from all the counties and meet the 33% PLWH care mandate.

MOTION: Brandie moved to support recommendation number one, “Leave King County as is including current process to receive and distribute funds.” James seconded.

Discussion:

- Germán expressed his concern that the decision may already be made, and the community input is a formality. David explained that this community forum is for community groups to go on record with their concerns. A report will be sent to the governor’s office regardless of DOH’s decision. Brandie stated her feeling the Council should go on record with its concerns.
- Darren stated that he had worked at DOH for over 10 years, and stated his opinion that it’s time for a change, and King and Pierce Counties should work more collaboratively together.
- Bob noted that Public Health supports the motion; Public Health’s position is to follow recommendation number one.

☑ The motion passed with 15 in favor, David, Erick, Gerrie, Sarah and Darren opposed, and Shireesha abstaining.

The following logistics were noted:

- Everyone can participate in the forum, in person in SeaTac or there is a phone in option from the Yesler building.
- Although the flyer states that email comments are due by Friday, November 6, it’s likely they will accept email comments until 9:30am on November 10.

Tony expressed the importance of consumer participation and adequate representation of PLWH in addition to representation of minority agencies. He stated the language in the recommendations should be stronger, and several members agreed. David noted that even language this body agrees with should be reiterated. Sarah pointed out that recommendation number 10 speaks to that, which states that all funded agencies would have a consumer panel. James noted that this recommendation is at the agency level and asked whether the Council would like to address participation at the planning level. Tony stated that King County is a model that includes active, meaningful representation from consumer, and it should be replicated for prevention and care planning around the state. Several members held up ditto cards. Bob added that representation in decision making, prioritization and resources should follow the epidemic, and several members agreed. Kevin added it should be spelled out that other areas of the state have participation from unaligned consumers that are *not conflicted* for planning because currently planning groups across the state may have consumers that are conflicted. Kris pointed out that CDC guidance does not call for consumer representation in this way.

MOTION: Michael moved that the Council’s recommendation be to emphasize strenuously the need for consumer involvement and that the configuration is representative of the epidemic in the state. Kris seconded.

Friendly Amendment: Kris suggested changing “consumer representation” to “representation by affected community members,” which is more in line with CDC requirements. Michael accepted.

Friendly Amendment: David asked whether the group would want to specify at what level(s) representation by affected community members is needed, and the group agreed it should be at all levels of planning and provision. Michael and Kris accepted.

☑ The motion passed with 18 in favor and Erick, Gerrie, Amy and Sarah abstaining.

BREAK 5:35 – 5:50

Jesse asked the group if committee reports could be ahead of the policy statement discussion, and the group agreed. Kris requested that the Council discuss a position on syringe exchange limitations, and it was noted the group will likely discuss this topic when discussing the Council Statement to the HHS Office of HIV/AIDS Policy.

VIII. Membership Report

James reported Christine has not yet received her letter of appointment. James presented Joachim Hawn for Council membership.

MOTION: James moved to approve Joachim Hawn as a Council member. Kate seconded.

Joachim expressed his excitement about the Council. He noted his observation that consumer input is dwindling, and expressed interest in reintroducing consumer input, which is crucial. Joachim has a background of working in healthcare and has been positive for 25 years.

☑ The motion passed unanimously.

James reintroduced Eckert White and explained the committee is in the process of interviewing Eckert. He also noted that the next membership meeting is on December 1. The Council is looking for consumers (currently the Council is below the 33% consumer requirement), and specifically the group needs African American consumers.

<David left at 6:00pm>

IX. Consumer Caucus Report

Tony reported the Caucus held an outreach meeting at Cal Anderson House the previous week. Five consumers from the house attended. Caucus members brought food and a former Council member and resident of Cal Anderson House made a cake. Tony noted the group had a great discussion about what the Council does and various ways to get involved. The meeting generated some interest in the Consumer Quality Leadership Program. Kate suggested there be posters advertising Consumer Caucus meetings at different agencies.

X. Council Statement to HHS Office of HIV/AIDS Policy

Jesse explained that there will be a meeting held by the Office of HIV/AIDS on December 9, in Seattle. The Council will have two opportunities to give input: submit comments online before November 13 and attend the meeting in person on December 9.

Erick, Arthur, Bob, and Tony wrote a draft of recommendations (see white packet distributed at meeting). The Council can discuss edits and then approve the statement. Marcos noted there are only five issues listed under "Six Biggest HIV/AIDS Policy issues."

Erick suggested the Council take additional action on the first bullet under "Six Biggest Issues" (regarding the use of federal funds for needle exchange) and write a letter to Senator Murray. He noted that Senator Murray is in a position to provide leadership on the issue.

MOTION: Erick moved to write letter to Senator Murray, urging her support of allowing federal funds to be used for Needle Exchange and removal of restrictive language from federal funding legislation. Kris seconded.

Discussion: Kris suggested that this letter add some concrete examples from King County. For example, Capitol Hill Needle Exchange has been across street from Seattle University for 17 years without complaint. Additionally, the University District Needle Exchange has been across the street from the University of Washington, and overlaps hours with a daycare in the same building, again without complaint.

Friendly Amendment: Gerrie suggested that Kris and Erick write a letter to Senator Murray on behalf of the Planning Council, detailing local examples that would support Patty Murray in supporting federal funds being used for Needle Exchange. Erick and Kris accepted.

☑ The motion passed with 20 in favor, and Sergio abstaining.

Barb suggested that the first bullet listed under “Other Important Issues” be moved up to the “Six Biggest Issues” section, and several members agreed.

<James left at 6:20pm>

Barb asked why Ryan White funds weren't included in that bullet to reimburse for all testing (and not just HIV positive tests). Jesse confirmed that Ryan White can pay for a positive test (to confirm a positive test for someone moving from out of state, for example) as well as for CD4 count tests, etc. Bob pointed out that Ryan White funds are typically used for people who have HIV and stated he would argue against using Ryan White funds for case finding, and several members agreed.

MOTION: Michael moved to approve the document, with the bullet move described above. Michael agreed to hold the motion until more issues are discussed.

<Sergio left at 6:25pm>

Barb expressed concern over the wording in the third bullet under “Other Important Issues,” which begins with “Membership of state and/or local HIV prevention planning groups...” She noted that for statewide or regional planning groups, geographic representation makes sense, but for a single county, this would be more difficult and unnecessary. Bob agreed his intention in drafting this was not to refer to King County, and it should be reworded. Marcos suggested the wording be, “state and/or regional or multicounty.”

The group discussed whether the entire document would be forwarded or just the “Six Biggest Issues.” Shireesha stated her feeling the group should focus on the main issues, and that some of the other issues seemed peripheral, for example the addressing “don't ask; don't tell.” Some members agreed, and Tony added that sticking to just six objectives is clearer and more effective, and suggested the rest be submitted as an addendum. Bob argued that the group drafting the document felt “don't ask; don't tell” was important to HIV because it contributes to stigma against sexual minorities which are disproportionately affected by HIV. Marcos noted that while the first six issues may be the most important, there is room in this comprehensive, national policy agenda for the other critical issues listed. Several members agreed.

<Joseph left at 6:30pm>

MOTION: Marcos moved to forward the entire document, including the “Other Important Issues,” with edits previously discussed:

- Move the first bullet under “Other Important Issues” to the “Six Biggest Issues.”
- Change the wording in the third bullet under “Other Important Issues” (now the second bullet) to, “Membership of a state and/or regional/multi-county HIV prevention planning groups...”

Kate seconded.

Discussion: Sarah cautioned that if the strategy outlined in the fourth bullet of “Six Biggest Issues” were used on a federal level, our region would not receive much funds and questioned recommending this strategy on the state level. She also suggested the point be worded to discuss where the trends are heading rather than where the epidemic has been. Kris agreed that using this as an example could lock us into a formula and pose problems for the future.

Friendly amendment: Kris suggested the bullet use the term *incidence* and strike the example from the section. The bullet would read, “The CDC should require that HIV prevention funds be appropriately focused on the populations and regions within states which have the highest incidence.” Marcos and Kate accepted.

The motion passed with 17 in favor and Sarah abstaining.

The meeting adjourned.

NEXT MEETING: Monday, December 14, 2009, 4:00 – 6:30, at the **2100 Building – 2100 24th Ave. S., Seattle 98144.**