

**California HIV/ AIDS Planning Group
Palm Springs Downtown Hilton
November 1, 2006**

Members in Attendance:

Jamila Shipp (Chair); Frank Strona (Co-Chair); Freddie Williams (Co-Chair Elect); Kevin Farrell (OA Co-Chair); Peg Taylor (OA Co-Chair); Sue Strong (Facilitator); Sabina Laveaga; Laura Thomas; Bart Aoki; Mauricio Perez; Bonnie Williams; John Melichar; Joe Acosta; Sharla Smith; Dorothy Kleffner; Michael Cunningham; Ricki Rosales; Rachel Anderson; Bamby Salcedo; Fernando Sanudo; Steven Tierney; Kevin Williams; Jeffrey King; Cesar Cadabes; Paul Sanchez; Leslie Poston; Jason Takumoto; Leslie Poston; Bill Blum; Ellen Swedberg; Shoshanna Scholar; Bill Musik; Joy Rucker; Mario Perez; Greg Mehlhaff

Office of AIDS Staff in Attendance:

Amy Kile-Puente (CHPG Liaison); Michael Cunningham; John Keasling; Karl Halfman; Chris Borges; Reggie Caldwell; Coleen Keelan; Gail Sanabria; Estella Kile; Richard Iniguez; Jeff Byers; Marilyn Miller; Kathy Russell; Therese Ploof; Chris Krawczyk; Brian Lew; Kama Brockman; Alessandra Ross

Wednesday, November 1, 2006

8:00 am

Meeting called to order by Jamila Shipp.

- Agenda Review
- Moment of Silence
- Announcement: Application available online November 1—December 8 (deadline).

8:10 am

Local Welcome

8:15 am

HIV CARE Branch Update presented by Peg Taylor, Chief

- See handout regarding updates in November information packet.
- Topics highlighted: Medicare Part D; Re-authorization of Ryan White (additional information provided by Laura Thomas and Joe Acosta)

8:30 am

Education and Prevention Services Branch presented by Kevin Farrell, Chief

- See handout regarding updates in November information packet.
- Topics covered: Recognition of the CHPG Membership committee; a more accessible CHPG application process; Introduction of Chris Krawczyk, new Chief of the HIV Prevention Research and Evaluation Section; Successful Prevention with Positives Conference in early October which provided an opportunity to get to know and recognize outreach workers; OA in the planning process of a Prevention Summit (projected date October/November 2007); National AIDS Conference will take place in Palm Springs in 2007.
- 2007 will be a big year for the EPS Branch:
 - Counseling and Testing Re-Structured Program
 - New online system LEO (Local Evaluations Online)
 - CDC Grant Application

8:45 am

2007-2010 Scopes of Work Changes presented by Gail Sanabria, Chief, HIV Community Prevention Section

-Intervention Specialist, Kevin Sitter, assisted in creating "core elements" for county interventions. STD/HIV Prevention Training Center will be offering trainings to help with new expectations of the interventions.

Shoshanna Scholar: concerned about the requirements; will the core elements make it difficult considering the variety of clients?

-OA is creating a Guidance and trainings will be available to everyone. The trainings will enhance facilitation skills.

Shoshanna Scholar: IDU interventions are very different.

-OA is trying to "raise the bar." OA will provide the resources and the guidelines.

Steven Tierney: This is not the bar to raise. OA should not continue to provide funding for programs that do not work.

Joy Rucker: Normal intervention do not compare to IDU interventions. OA may say "guidelines" but local AIDS offices may make it mandatory.

Bamby Salcedo: STD PTC should make trainings available in Spanish.

Sharla Smith: Can CHPG take a look at the core elements?

Jeffrey King: "Core elements" sound like CDC. What thought has gone into helping the local AIDS offices? When will the trainings be available and how accessible will they be?

-Twenty-five trainings (sessions) statewide. OA will work with local AIDS offices.

-The draft of the Core elements will be distributed to CHPG members when it is ready along with holding a statewide stakeholders meeting.

-Targeted Prevention is still a program funded outside of these elements and guidelines.

Shoshanna Scholar: Can OA wait for IDU Task Force guidelines to be included in the process and guidelines?

-No. Scopes of Work are due by March 2007.

Laura Thomas: Can these guidelines state that IDU/needle exchange programs are excluded?

Frank Strona: Can OA market these trainings better?

-OA is addressing this issue with STD PTC

Frank Strona: Spanish trainings need to be made available.

Bamby Salcedo: How will we know about the trainings?

-Those details are still in development.

Rachel Anderson: Does OA plan to work with local health jurisdictions which may be professionally challenged?

-Kevin Farrell: OA is currently working on increasing the acceptance of IDU interventions.

Joy Rucker: Where is the proof that syringe exchange actually works? These guidelines are developed based on other populations.

-Gail will need to meet with the IDU Task Force regarding this issue.

Leslie Poston: You do not know whether or not things work until we try it. And all the interventions will have to be adjusted.

9:25 am

Counseling and Testing Program Restructure presented by Brian Lew, Chief, HIV Counseling, Testing and Training Section.

- Currently piloting program in 6 Local Health Jurisdictions – Los Angeles, Fresno, San Francisco, Orange County, Riverside and Yolo.
- OA is collecting monthly progress evaluations
- A final evaluation will be collected at the end of the pilot
- A client survey

10:00 am

Co-chair elect Nominations

Ellen Swedberg – Accepted
Leslie Poston – Declined
Shoshana Scholar – Declined

10:05 am

Break

10:15 am

RAC and TF Breakouts

11:45 am Lunch

12:45 pm

RAC and TF Breakouts

4:30 pm

Announcements

- Sylvia Britt-Raven – November 30 is WORLD's 15th Anniversary
December 1, there will be a large rally in San Francisco for World AIDS Day
- Joy Rucker – Harm Reduction Coalition Conference next week at the Oakland Marriott
- Shoshana Scholar – Harm Reduction Questionnaire, if anyone is interested in taking part
- Joe Acosta – Palm Springs is the site for the next US Conference on AIDS

Motion: Mario Perez would like to keep the nominations for co-chair elect open until tomorrow

Second: Joy Rucker

Consensus not reached; Formal Vote Y:18; A: 2; N:14

Additional Nominations

Mario Perez – Declined

Dorothy Kleffner – Declined

5:00 pm

Role Call/Adjourn

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November 2, 2006**

Members in Attendance: Frank Strona, Jamila Shipp, Freddie Williams, Kevin Farrell, Peg Taylor, Joy Rucker, Sabina Laveaga, Rachel Anderson, Laura Thomas, Bart Aoki, Bonnie Williams, Bill Musick, Joe Acosta, Sharla Smith, Dorothy Kleffner, Michael Cunningham, Leroy Blea, Ricki Rosales, Bamby Salcedo, Greg Mehlhaff, Fernando Sanudo, Kevin Williams, Mauricio Perez, Jeffrey King, Cesar Cadabes, Paul Sanchez, Mario Perez, Leslie Poston, Jason Takumoto, Sylvia Britt-Raven, William Blum, Ellen Swedberg, Shoshana Scholar.

Office of AIDS Staff in Attendance: Chris Borges, Reggie Caldwell, Karl Halfman, Kama Brockman, Tom Stopka, Estella Kile, Richard Iniguez, Coleen Keelan, Denise Absher, Jeff Byers, Gail Sanabria, Alessandra Ross, Marilyn Miller, Kathy Russell, Therese Ploof, Michael Cunningham, Brian Lew, Chris Krawczyk

8:00 am

Welcome/Agenda Review

Additional Nominations, final request:
Sharla Smith – Accepted

8:10 am

Co-Chair Elect Speeches

- Ellen Swedberg
- Sharla Smith

8:25 am

Remembering Our Roots, Speaker: Sylvia Britt-Raven

8:40 am

Public Comment – None

Break

9:00 am

RAC presentation

The RAC recommended that OA consider the following principles, goals and recommendations when addressing revisions to funding approaches:

1. Statewide HIV case finding should be broadened and on-going.

The HIV Care Branch should include efforts across public/private partners to improve case finding.

2. The HIV Care Branch should include efforts to develop and sustain prevention activities in care settings.
3. Link all HIV+ persons to a medical provider and drugs.
This is to be the first priority for funding and the last item to be reduced if funding declines severely. It is essential.
4. Keep all HIV+ clients in medical care.
This may require programs such as Bridge, EIP, CMP, medical case management, Positive Changes or others which are focused on finding and keeping hard to serve clients in care.
5. Barriers to accessing medical care must be removed.
 - a. These interventions should be LHJ determinations, with guidance from OA re: menu of approved interventions
 - b. LHJs to consider available funding, client needs, geography, special populations and other pertinent factors to local area..
6. The HIV Care Branch should support client self-care, independence and transitions between public and private programs and services.
 - a. OA should develop and support policy changes such that clients and service program staff understand, buy-in and implement this paradigm shift.
 - b. The HIV Care Branch should develop benefits management processes in order to effectively transition clients between public and private programs and services (entrance/exit management and strategies).
7. The HIV Care Branch should re-energize and stimulate coordination between state agencies to improve services to HIV+ persons.
 - a. With fewer funds and increasing numbers of clients, a proactive approach to working together will aid clients, the OA and other agencies involved in this effort.
 - b. Reciprocity and letters of agreement are examples of ways in which these collaborations might be formalized.
8. The HIV Care Branch should develop a “community-based funding” model (a block grant model) to increase local flexibility in program design, to reduce administrative burden at the state and local levels and to improve client services. It is recommended that the model include the following:
 - a. a defined community planning process,
 - b. clear parameters from the Care Branch re: uses of funds and any funding restrictions,
 - c. a requirement that ARIES be used,
 - d. emphasizing LHJ flexibility in program development and planning to meet local needs,
 - e. pilot testing of a new system no later than 2008,
 - f. transition planning for full implementation.
9. The HIV Care Branch should use these principles, goals and recommendations in formulating the next statewide and/or consolidates plan for HIV services and care.

Move to adopt – Steven Tierney

Second – Rachel Anderson
Passes with 1 Abstain

9:20 am

Transgender Panel

Transgender Needs:

- A safe place
- A meal
- Clean needles for hormone injections
- Transgenders providing services
- Acknowledging mental health issues
- Advocating for transgender women to be incarcerated with women and vice versa
- Internet outreach, especially in rural areas that are unable to provide services
- Volunteer opportunities for capacity building regarding professional activism
- Trainings for superintendents to breakdown barriers in the school environments and make sure schools adhere to anti-discrimination laws
- Support—not just financial but with time

November 20 is Transgender day of Remembrance

10:45 a.m.

Care and Prevention Integration Task Force Presentation

Recommendations:

1. The Care and Prevention Integration Task force recommends that OA implement a survey (developed by the C/P Integration Task Force) to gauge their level of integrated care/prevention services currently happening in LHJs.
2. The Care and Prevention Integration task force recommends to OA that language in the care and in the prevention guidance's' regarding care and prevention integration mirror one another.
3. The Care and Prevention Integration task force recommends that OA explore the development of an RFA that would be jointly funded with CARE and Prevention dollars that will focus on PWP activities, outreach and prevention activities in care settings.

Recommendations Passed.

11:00 a.m.

Gay/MSM Task Force

Recommendations:

1. For designated LHJs to create an **Action Plan** to adequately address the HIV prevention needs of African American gay men and men who have sex with men (MSM).
Action Plan Guidelines
 - Funding targeted to be more specific and address the disproportionate impact of HIV among AA gay men/MSM.
 - Address social, cultural, political and economic factors that impact HIV risk.
 - HIV prevention in the context of preventive health care and wellness.

- The designated LHJs are into two tiers that were established based on C&T, AIDS case and US Census data.
- The **Action Plan** should be established in conjunction with local CPGs and AA gay men/MSM who understand their community.
- The **Action Plan** start July 1, 2007.
- C&T Goal: To increase testing for HR AA gay men/MSM
- HE/RK Goal: To provide effective HIV prevention services for AA gay men/MSM (For Us By Us).

Recommendation Passed.

11:30 am Lunch
Gifts and Acknowledgments

1:00 pm

Substance Use/IDU Task Force

Recommendations

1. That the Steering Committee/OA define a strategy for more effective use of CHPG in its advice and consent role to OA on HIV/AIDS, as defined by the CHPG's bylaws and the CDC;
2. That the 7-10 Guidance be presented to CHPG Task Forces with sufficient time and clear structure for our input;
3. That SEPs, which are fundable by OA, be included in the 7-10 Guidance as a separate category with separate guidelines developed in consultation with SU/IDU Task Force.
4. That the SU/IDU Task Force Continue next year.

Recommendations passed.

1:20 p.m.

Transgender Working Group

Recommendations

1. For CHPG to continue with the TG Working Group.
2. Encourage more Transgender representation as a whole at CHPG.
3. To Review applications and active participation of Transgender identified CHPG members to advocate for the needs of transgenders at the state level and be open about being TG.
4. Support recommendations for the TG Priority Initiative.

Recommendations passed.

1:30 p.m.

Women's Task Force

Recommendations:

1. The Women's Task Force recommends that the CDHS Office of AIDS creates a statewide Women's HIV Advisory Group that would advise OA on policies and programs related to the HIV prevention, care and treatment issues of women in California. (If proposal is accepted, it is recommended that the Women's Task Force disband).

Motion does not carry.

2. The Women's Task Force recommends that the Membership Committee prioritize applicants interested in women and HIV when determining CHPG membership in order to increase the visibility of women's issues.

Motion Passed.

*Issues raised: How does the African American Advisory Board and the Latino Advisory Board work in relation to the Office of AIDS and how can CHPG be more aware of the work they are doing?

2:50 p.m.

Should CHPG sign the CDC grant letter of concurrence?

CHPG requests time to review the CDC grant before signing the letter of concurrence. All members need a copy of the application before signing by co-chairs.

Process:

CDC made application available July 1, 2006 with a due date of September 15.

Rachel Anderson: This is the primary function of the CHPG and they demand an opportunity to review before agreeing to concur. A sub-group (committee) should be formed to work on these types of documents.

Bill Blum: There is a concern that Office of AIDS is being put in the middle.

**A letter from CHPG should be developed and sent directly to CDC to expand time frame.*

Office of AIDS agrees to send the grant electronically to members.

3:10 p.m.

Recommendation presented by Laura Thomas

BACKGROUND

- *Funding allocation for the Ryan White CARE Act will soon be based on reported HIV/AIDS cases, rather than just diagnosed AIDS cases.*
- *HIV reporting by name was authorized by the California Legislature earlier this year.*
- *HIV reporting is very incomplete in California, although we know that we have thousands of cases and are providing services to many of the people living with HIV in the state.*
- *If we do not count all the cases, we stand to lose millions in RWCA funds.*
- *California needs to take extraordinary efforts to ensure all prevalent cases are counted to avoid unnecessary funding cuts in the future.*
- *The updated information will also ensure that our planning efforts have the most complete, accurate data on HIV disease in California.*
- *The State Office of AIDS oversees the California HIV/AIDS surveillance efforts.*
- *OA can use its resources and authority to speed up HIV reporting from all LHJs.*
- *This work needs to start now, and should not wait until the next fiscal year.*

RECOMMENDATION

The CHPG recommends that the State Office of AIDS increase funding for HIV surveillance efforts as soon as possible in order to increase HIV reporting across the state.

This could include direct funding to LHJs, funding for state-wide programs, and technical assistance.

Any available funds that can be re-directed in the current fiscal year should be re-directed to this effort.

Motion passed.

3:15 p.m. Year End Wrap-Up

Highlights:

- Website launched
- Restructured agenda allowing more time for recommendations
- Full Breakfast
- Process/New use of a facilitator (work in progress)
- New governance

3:45 p.m. Adjourn