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EXECUTIVE COMMITTEE MEETING MINUTES

April 25, 2019



MEMBERS PRESENT	MEMBERS PRESENT (cont.)	PUBLIC	COMM STAFF/ CONSULTANTS
Al Ballesteros, MBA, Co-Chair	Mario Pérez, MPH	Raquel Cataldo	Cheryl Barrit, MPIA
Grissel Granados, MSW, Co-Chair	Juan Preciado	Joshua Ray, RN,	Carolyn Echols-Watson, MPA
Traci Bivens-Davis	Greg Wilson		Dawn McClendon
Jason Brown		DHSP STAFF	Jane Nachazel
Michele Daniels	MEMBERS ABSENT	None additional	Doris Reed
Bridget Gordon	Joseph Cadden, MD		James Stewart
Miguel Martinez, MPH, MSW	Aaron Fox, MPM		Julie Tolentino, MPH
Katja Nelson	Kevin Stalter		Sonja Wright, MS, Lac

CONTENTS OF COMMITTEE PACKET

- 1) Agenda: Executive Committee Meeting Agenda, 4/25/2019
- 2) Minutes: Executive Committee Meeting Minutes, 1/24/2019
- 3) Minutes: Executive Committee Meeting Minutes, 2/28/2019
- 4) Minutes: Executive Committee Meeting Minutes, 3/28/2019
- 5) Recommendations: 2019 Annual Meeting Planning Recommendations, April 2019
- 6) Code: Code of Conduct, 4/11/2019
- 7) Table: 2019 Co-Chairs' Priorities, Draft 12/21/2018
- 8) Table: Los Angeles County Commission on HIV, Public Comment Tracker, ongoing
- 9) **Summary**: Presentation Summary and Recommendations for Community Practice and Action, Panel Discussion on the Impact of HIV/AIDS among Young People and their Efforts in Response to the Epidemic, 4/11/2019
- 10) PowerPoint: Division of HIV and STD Programs, Client Feedback, 4/16/2019
- 11) Table: 2019 (Proposed) Membership Slate, 4/23/2019
- 12) **Memorandum**: Development of County Advocacy Positions on Legislation and Budget Items of Interest to the County in Sacramento and Washington D.C., 3/11/2019
- 13) Memorandum: 2019-20 State Budget Support HIV, HCV, STD Proposals, 3/22/2019
- 14) Summary: CA HIV Alliance, Restore HIV Prevention Funding \$20 Million Ongoing, Budget Request Summary
- 15) Press Release: Presidential Advisory Council on HIV/AIDS Announced New Members, 3/14/2019

CALL TO ORDER, INTRODUCTIONS, CONFLICTS OF INTEREST: Ms. Granados called the meeting to order at 1:02 pm.

I. ADMINISTRATIVE MATTERS

1. APPROVAL OF AGENDA

MOTION #1: Approve the Agenda Order, as presented (Passed by Consensus).

2. APPROVAL OF MEETING MINUTES

MOTION #2: Approve the 1/24/2019, 2/28/2019, and 3/28/2019 Executive Committee Meeting Minutes, as presented (*Passed by Consensus*).

II. PUBLIC COMMENT

3. OPPORTUNITY FOR PUBLIC TO ADDRESS COMMISSION ON ITEMS OF INTEREST WITHIN COMMISSION JURISDICTION: There were no comments.

III. COMMITTEE NEW BUSINESS ITEMS

4. OPPORTUNITY FOR COMMISSIONERS TO RECOMMEND ITEMS FOR FUTTURE AGENDAS, OR ITEMS REQUIRING IMMEDIATE ACTION DUE TO AN EMERGENCY, OR IF NEED FOR ACTION AROSE AFTER POSTING AGENDA: There were no items.

IV. REPORTS

5. EXECUTIVE DIRECTOR/STAFF REPORT

A. Welcome New Executive At-Large Members: Ms. Barrit joined the Co-Chairs in welcoming new At-Large Members: Michele Daniels, Bridget Gordon, and Greg Wilson.

B. 5/9/2019 COH Meeting Agenda Preparation:

- The May meeting was expected to be light with a focus on moving regular Commission business. The meeting was planned with the goal of striking a balance with the heavier presentations and panels of recent meetings.
- June: Ekow Sey, PhD, MPH will present on DHSP's Linkage and Retention Program (LRP), per Commission request.
- July: Ashlee Oh, Chief Executive Office (CEO) will present on the CEO's Homeless Initiative and Measure H, also per request. Ms. Oh and Ms. Barrit were reaching out to other housing-related groups to broaden the conversation.

C. 2019 Annual Meeting Preparation:

- Ms. Barrit noted draft recommendations in the packet reflecting the suggestion for a conference style meeting with breakout sessions. Recommendations highlight topics of: LA's HIV Planning Council, which garnered strong support at the March meeting; Fostering Coordination for Improved Health Outcomes; and Best Practices from the Field.
- Once Executive develops consensus on topics, staff will request Commissioner engagement, e.g., as co-presenters.
- Staff was reviewing venues for things like cost, public transportation accessibility, and breakout rooms. The Dollar High Community Center, Compton Blue Line Station, was checked, but food is pricey and the Blue Line is closed for repairs. St. Anne's Conference Center with three breakout rooms has been reserved as a back-up location.
- Regarding a question on the intended audience, Ms. Barrit said the Annual Meeting traditionally has been an opportunity for community outreach, but attendance has dropped in recent years, especially last year. It was hoped this focus will help improve outreach and increase understanding of the Commission as an important body.
- Agreed to use proposed format. Staff will begin to reach out to potential Commissioner participants.

6. CO-CHAIR REPORT

A. Meeting Management Updates and Reminders:

(1) Revised Code of Conduct: Ms. Granados noted the revised Code in the packet. It will be in all packets for meetings of the Commission and its bodies to inform attendees. Commissioners will be asked to sign to affirm agreement.

(2) Quorum and Attendance:

- Ms. Granados noted that last month not only the Executive, but several Committees, did not achieve quorum. Members are responsible to advise staff if they cannot attend a meeting. She and Mr. Ballesteros cannot always attend but, if they know quorum is at risk, they will make every effort to do so.
- Members who find it consistently hard to attend their Committee can request a different assignment from staff.

B. Co-Chair Priorities:

- Ms. Granados said the Work Plan and Co-Chair Priorities will alternate in the packet monthly. The priorities were being presented again this month since quorum was not reached last month.
- The Priorities include those from all the Committee Co-Chairs as well as Mr. Ballesteros and herself. She focused on reviewing those pertinent to Executive. Those are: 1. Monitoring funds to address STD rates, topic was being raised by Co-Chairs during Health Deputy meetings; 3. Brown Act training, completed; 4. Across all Committees, mini-trainings,

ongoing; 5. Executive-Operations-Consumer Caucus, consumer training, ongoing; 9, Los Angeles County HIV/AIDS Strategy (LACHAS) community meetings, incorporation into Commission meetings and coordination with DHSP.

- C. 2019 Work Plan Review and Follow-Up: Core topics were integrated into the Co-Chairs Priorities discussed above.
- D. 4/11/2019 COH Meeting Review and Follow-Up:
 - (1) Public Comment: The tracking document was reviewed. No additional follow-up was needed.
 - (2) Commission Member New Business Items: There were no new items.
 - (3) National Youth HIV/AIDS Awareness Day (NYHAAD) Colloquia Panel Recommendations/Follow-Up:
 - Ms. Granados noted the colloquium panel summary in the packet with eight recommendations from Thomas
 Davis, Catharsis Project, panel moderator. She highlighted the first recommendation for a youth advisory board.
 - The Commission has struggled to engage youth. It is hard to adapt a not very conducive environment. Suggestions have included a new Youth Caucus, outreach at Commission meetings, coordinating with groups like Consumer Advisory Boards (CABs) and Connect to Protect Los Angeles Coalition (C2P LA) which addresses structural barriers.
 - Mr. Pérez encouraged thinking critically about meeting redundancy and the expectation that youth attend multiple meetings when Commissioners themselves are not meeting quorum.
 - A youth advisory board is noble, but Vulnerable Population contracts already require CABs. Six of eight contracts target young people at greatest risk of acquiring HIV and those living with HIV. The goal is to involve them directly in development, evaluation, and implementation of Los Angeles County (LAC) programs that benefit them. These 50 to 80 young people directly inform programs versus what might be anticipated from an advisory group meeting monthly or quarterly at the 1,000 foot planning level. Input from the former was likely to be preferable.
 - He suggested an opportunity for a different relationship between the Commission and C2P LA, an existing body that is inviting to young people and magnifies their voices. C2P LA could help inform the work of the Commission.
 - Ms. Gordon asked about the Vulnerable Populations contracts. Mr. Pérez replied there are eight contracts held by seven contractors. One contractor has both a contract serving the transgender community and another serving young, gay and bisexual men of color. Many Commission concerns are addressed under these contracts, e.g., Social Determinants of Health (SDH) and an holistic approach to work to create a safe space.
 - DHSP could offer an update on overall initiative progress but, as historically, not by individual contractor. The main public opportunity to review whether individual contractors are meeting goals is when renewal contracts go to the Board of Supervisors (BOS). An attachment indicates if each contractor is not making, meeting, or exceeding goals.
 - Mr. Martinez agreed with using input from existing bodies such as CABs. He did recommend adding Part D CABs to address populations such as women that were not well represented under the Vulnerable Populations contracts.
 - He also recommended sending three or four specific questions to CABs for facilitators to present for response annually. It is difficult for facilitators to garner input on the basis of a general description of the Commission.
 - Mr. Pérez noted he highlighted Vulnerable Population CABs as there is a mandate that young people's voices directly inform contract implementation. DHSP planned to do more of that, but feedback would differ if assessing young people's feedback on delivery of HIV medical care or accessibility of the alcohol and drug treatment system. He urged clarifying what the body wanted to assess and how often. Then he recommended a cross-walk to identify other potential mechanisms to provide the data or enhance the assessment, as well as to identify gaps.
 - Mr. Ray asked about HIV testing opportunities for young people, e.g., whether testing was offered in high schools. Mr. Pérez noted LAC has over 80 school districts, each offering varying degrees of information. Most are not compliant with the California Healthy Youth Act, intended to provide robust sexual health information. He was unaware of any offering HIV testing, but there is a movement toward school-based wellness centers. The clinical service most likely to be delivered is STD screening, diagnosis, and treatment, though that has been underutilized.
 - Most young people access services through a DHSP-funded targeted HIV testing program or the private health care system. The Centers for Disease Control and Prevention (CDC) recommends that everyone between the ages of 13 and 64 be tested for HIV at least once in their lifetime. No measure requires testing all young people.
 - Members asked about younger children exposed to HIV through perinatal transmission or abuse. Mr. Pérez said Part D Centers of Excellence address HIV in Women, Infants, Children, and Youth (WICY). DHSP also gets several hundred thousand STD laboratory reports annually. Its Public Health Nursing Unit works with the Department of Children and Family Services (DCFS), e.g., if someone too young to give consent is diagnosed with Chlamydia.
 - In California, young people who are 12 or older can also consent to most sexual health services on their own.
 - Regarding Juvenile Hall, Mr. Pérez said all youth are screened for STDs on entry and treated, if diagnosed. Partner contacts are done, including after release, if possible. HIV testing is also offered and case management is available.

- He added DHSP responses differ for Juvenile Hall, the LAC Jail system, and the state prison system of 33 facilities. Each system operates with independent authority. In addition, 40% of parolees return to LAC with many HIV+.
- Staff will highlight distribution of BOS agendas which include DHSP service contract renewals.
- Agendize developing one to two questions for CABs per Committee, e.g., from Planning, Priorities and Allocations on needs assessment. Three or four questions will be identified and sent to CABS two to four times per year.
- Refer revisiting Special Population Guidelines to Standards and Best Practices (SBP) Committee.

7. DIVISION OF HIV AND STD PROGRAMS (DHSP) REPORT:

- Mr. Pérez reported DHSP and its partner, Housing For Health (HFH), Department of Health Services (DHS), recently met to discuss maximizing funds. Issues were systemic with everyone addressing housing, housing vulnerability, and homelessness.
- HFH continues to be challenged with the human resources needed to intensively case manage clients with multiple
 morbidities in these systems. Even more importantly, there is a continuing lack of unit availability.
- DHSP's focus is housing PLWH but, clearly, many HIV- homeless also face regional housing challenges. Mr. Wilson added identifying an HIV- client as having a mental health or substance abuse issue is often the only way to access housing.
- On a related note, Mr. Pérez said DHSP wants to systemically both house and case manage clients to provide the support many clients need to remain housed. Regional mental health capacity overall is inadequate. It is also clear that there are not enough housing case managers in the system now with the training and skill set to assist those with co-morbidities. Several hundred new people are needed and that will require new models. Ms. Gordon recommended incorporating peers.
- Mr. Martinez urged looking at the patient journey. His site just had its first person go into the program. He was involved, the Medical Care Coordination team (MCC), two case managers, a nurse, and a clinic person were all involved just to work through forms despite a kind person helping by phone. Ms. Cataldo has a few units and tries to help people with challenges, but the system is hard for landlords, too, and they are often demonized. Both sides of the system should be addressed.
- DHSP received the Commission's extensive list of Program Directives. Kyle Baker and Michael Green, PhD, MHSA were reviewing them and Mr. Pérez planned to report back on DHSP perspectives at the next Executive Committee.
- All week, DHSP has been hosting three liaisons from the CDC for a site visit review of DHSP's entire HIV prevention portfolio and HIV surveillance system. The CDC now funds them as part of one integrated prevention and surveillance grant.
- The Commission has expressed interest in DHSP's molecular surveillance so notes are being developed for a presentation.
- As many are aware, the Department of Health and Human Services (HHS) has committed to make investments tied to ending the HIV epidemic nationwide. LAC is one of the 48 target areas. Multiple discussions suggest various approaches to allocate funds, e.g., to local health departments or to community based organizations, but planning remains fluid.
- HHS also announced a plan to develop a national STD control plan for the first time. Listening sessions were happening across the country. Mr. Pérez attended the last session about ten days ago and offered ideas to our federal partners.

8. LOS ANGELES COUNTY HIV/AIDS STRATEGY (LACHAS) REPORT

A. Stigma Reduction Plan Next Steps: Ms. Barrit reported the Comprehensive HIV Plan (CHP) Goals and Objectives Work Group will reconvene on 5/30/2019 to begin work. Materials are prepared from the work facilitated by Tim Vincent, MS at the Commission. He was also open to attend this first meeting.

9. STANDING COMMITTEE REPORTS

- A. Planning, Priorities, and Allocations (PP&A) Committee:
 - (1) Review of Priority and Allocation Setting Process: PP&A reviewed the process and potential enhancements.
 - (a) Priority and Allocation Planning Tools: Some new tools have been developed to help with planning.
 - (2) RWP, CDC HIV Prevention, and Net County Cost (NCC) Fiscal Updates:
 - Mr. Brown said PP&A heard fiscal updates and clarification on the Commission's role regarding different funding streams. While it allocates directly for RWP funds, its role regarding other streams is advisory.
 - Mr. Martinez continued that recommendations are being developed for multi-year planning.
 - (3) DHSP Quality Improvement (QI) Program: Becca Cohen, MD, MPH presented on the PowerPoint in the packet.

B. Standards and Best Practices (SBP) Committee:

- (1) HIV Continuum Framework: SBP is engaging in its annual review and update of the Continuum Framework.
- (2) Universal Standards of Care (SOC): The review of the Universal SOC is to incorporate recommendations on highly impacted populations. In addition, SBP is addressing SOCs prioritized by PP&A in order to have updated SOCs ready to inform new DHSP Requests For Proposals (RFPs) anticipated in multi-year planning.

C. Operations Committee:

Page 5 of 6

- (1) Policies and Procedures: There was no additional discussion.
- (2) Membership Management:
 - (a) Membership Applications: Ms. Bivens-Davis reported all the applicants were reviewed at the March Operations meeting. All but one applicant is an Unaffiliated Consumer.

MOTION #3: Approve membership applications, as presented, and forward to 5/9/2019 Commission meeting for recommendation to Board of Supervisors, as follows: Craig Scott, MA (Alternate), Pamela Coffey (Unaffiliated Consumer), Thomas Green (Alternate), Kayla Walker-Heltzel, MPH (Alternate), Amiya Wilson (Unaffiliated Consumer), Joshua Ray, RN (Unaffiliated Consumer), Miguel Alvarez (Alternate), and Nestor Rogel (Alternate); see proposed Membership Roster (Passed by Consensus)

- (i) Craig Scott, MA Alternate:
- (ii) Pamela Coffey Unaffiliated Consumer:
- (iii) Thomas Green Alternate:
- (iv) Kayla Walker-Heltzel, MPH Alternate:
- (v) Joshua Ray, RN Unaffiliated Consumer:
- (vi) Amiya Wilson Unaffiliated Consumer:
- (vii) Miguel Alvarez Alternate:
- (viii) Nestor Rogel Alternate:
- (b) 2019 Membership Drive Preparation:
 - Half of Commissioner terms expire each June 30th. Renewal reminders have been sent to those whose seats are expiring. The deadline to submit applications is 4/26/2019.
 - Interviews were expected to begin next week. Criteria for new and renewal Members is essentially the same, but there are additional factors for renewals such as attendance history, contributions, and whether the Member has upheld the Code of Conduct and Policies/Procedures.

D. Public Policy Committee:

- (1) County Policy and Budget:
 - (a) 2019-2020 Legislative Session Docket: The Docket should be finalized by the next Executive meeting. MOTION #4: Approve the 2019-2020 Legislative Session Docket, as presented (Postponed).
 - (b) Housing: The Los Angeles Homeless Services Authority (LAHSA) has not yet released its homeless count. It may be available by the next Executive meeting.
- (2) State Policy, Legislation, and Budget:
 - Ms. Nelson reported 70 to 100 people plan to attend a Day of Advocacy in Sacramento on 4/30/3019. Meetings were scheduled with various representatives to educate the Legislature on the End the Epidemics initiative.
 - Budget information was in the packet.
 - Agendize discussion on recommendations regarding the proposed Executive Order on drug prices.
 - (a) California HIV Alliance: The budget ask was in the packet.
- (3) Federal Policy, Legislation, and Budget: Information was in the packet.
 - (a) Presidential Advisory Council on HIV/AIDS (PACHA):
 - Ms. Barrit reported Kevin Stalter had expressed concern at the lack of representation for many communities including consumers, communities of color, and LAC.
 - The public can attend, space permitting, or watch via webcast. There may also be opportunities for comment at times which the Commission might use to elevate underrepresented voices..

10. CAUCUS, TASK FORCE, AND WORK GROUP REPORTS

- **A.** Assessment of the Administrative Mechanism (AAM) Work Group: Ms. Bivens-Davis reported the first meeting was very fruitful. Nevertheless, due to schedule changes over time, the Work Group was now recruiting new members.
- **B.** Aging Task Force: There was no report.
- **C. HIV Service Awards Work Group**: Ms. Bivens-Davis reported the Work Group was finalizing language to go to the May Operations meeting to open nominations and define composition of the nominating committee.
- D. Black/African American Community Task Force: The Task Force will meet 4/29/2019.
- E. Consumer Caucus:
 - Ms. Barrit reported the Caucus had its first customized leadership series training at the April meeting. The UCLA Health Data team used LACHAS data to facilitate a conversation on how to use data to amplify personal experiences.

- Upcoming trainings will include Dr Cohen presenting on Quality Improvement and requested topics such as addressing structural change, public speaking, and advocacy.
- F. Women's Caucus: Co-Chair nominations were open.
- G. Transgender Caucus: Co-Chair nominations were open.
- V. NEXT STEPS
- 11. TASK/ASSIGNMENTS RECAP: There were no additional items.
- 12. AGENDA DEVELOPMENT FOR NEXT MEETING: There were no additional items.
 - VI. ANNOUNCEMENTS
- 13. OPPORTUNITY FOR PUBLIC AND COMMITTEE TO MAKE ANNOUNCEMENTS: There were no announcements.
 - VII. ADJOURNMENT
- 14. ADJOURNMENT: The meeting adjourned at 2:25 pm.