



# LOS ANGELES COUNTY COMMISSION ON HIV

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## PLANNING, PRIORITIES & ALLOCATIONS (PP&A) COMMITTEE MEETING MINUTES

March 20, 2018



PP&A MEMBERS PRESENT	PP&A MEMBERS PRESENT (cont.)	PUBLIC	COMM STAFF/CONSULTANTS
Al Ballesteros, MBA, Co-Chair	Rebecca Ronquillo	Scott Blackburn	Cheryl Barrit, MPIA
Jason Brown, Co-Chair	LaShonda Spencer, MD	Sean Boileau	Carolyn Echols-Watson, MPA
Frankie Darling-Palacios	Yolanda Sumpter	Alasdair Burton	Jane Nachazel
Grissel Granados, MSW	Russell Ybarra	Katja Nelson	Julie Tolentino, MPH
William King, MD		Jasmine Yancey	
Abad Lopez			
Miguel Martinez, MPH, MSW	<b>PP&amp;A MEMBERS ABSENT</b>		<b>DHSP STAFF</b>
Pamela Ogata, MPH	Susan Forrest		None additional
Deborah Owens Collins, PA-C, MSHCA, MSPAS, AAHIVS	Anthony Mills, MD		
	Derek Murray		
Raphael Peña			

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- 1) **Agenda:** Planning, Priorities & Allocations (PP&A) Committee Meeting Agenda, 3/20/2018
- 2) **Minutes:** Planning, Priorities & Allocations (PP&A) Committee Meeting Minutes, 2/20/2018
- 3) **Table:** Planning, Priorities & Allocations Committee, PY 29 (FY 2019-2020) Allocation Timeline, Revised 2/2018
- 4) **Graphic:** Summary of Demographic Data, HOPWA Central Coordinating Agency (CCA), Draft 3/20/2018
- 5) **Table:** 2017 Greater Los Angeles Homeless Count, Families Data Summary, Los Angeles Continuum of Care, 8/21/2017
- 6) **Table:** 2017 Greater Los Angeles Homeless Count, Chronically Homeless Data Summary, Los Angeles Continuum of Care, 8/21/2017
- 7) **Graphic:** 2017 Homeless Count Results, Health Conditions, 18+, Los Angeles County, 2016 - 2017, 2017
- 8) **Table:** Health For Housing, Statistical Data
- 9) **Table:** Education by Health District and Supervisorial District (SD), Life Expectancy by Health District and Supervisorial District (SD), Median Personal Earnings by Health District and Supervisorial District (SD), 2017-2018
- 10) **Plan:** Minority AIDS Initiative Plan Update (2017-2021), Approved 3/9/2017
- 11) **Table:** Los Angeles County Commission on HIV (COH), Ryan White FY 2017-2018 Directives, Approved 3/9/2017
- 12) **Table:** Ryan White PY 2017 and 2018, Priority Rankings, 8/15/2017
- 13) **Table:** Los Angeles County HIV/AIDS Strategy for 2020 and Beyond, Epidemiological Overview, Demographic Tables, 9/25/2017
- 14) **Table:** Core Prevention Components, Draft 2018

**CALL TO ORDER:** Mr. Brown called the meeting to order at 1:05 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 2/20/2018 Planning, Priorities and Allocations (PP&A) 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 COMMENT**

- 4. NON-AGENDIZED OR FOLLOW-UP:** There were no comments.

**IV. REPORTS**

- 5. EXECUTIVE DIRECTOR'S REPORT:** Ms. Barrit noted her difficult duty of emailing information on 3/19/2018 on the sad passing of Commission member Thomas Puckett, Jr. She waited to send the notification until she could speak with his mother, Susan McNab, and partner, Bernard Moy, to confirm details of the memorial service. Commission meetings will adjourn in his memory.

**a. Los Angeles County HIV/AIDS Strategy (LACHAS):**

- Ms. Barrit noted an announcement at the 3/8/2018 Commission that some future Commission meetings will serve as community engagement opportunities in the Health Districts (HDs). The focus of these meetings is to explore how LACHAS can be applied to local HD efforts and how stakeholders can galvanize around that goal.
- Planning is underway to hold the 4/12/2018 Commission meeting in the Northeast/San Fernando Valley. She is working with colleagues from the Northeast Valley Health Corporation, a Ryan White-funded agency, to identify a location. A reservation is on hold with the San Fernando Regional Pool Facility with the Van Nuys City Hall as an alternate. Both have banquet facilities and are in the same vicinity. The selection should be finalized by end of day.
- Ms. Barrit has been reaching out to providers in the area to ensure they are in attendance and fully engaged. Raquel Cataldo is helping coordinate with Tarzana Treatment Center which has a site in the area.
- The meeting will be 10:00 am to 12:00 noon. Starting a bit later offers people more time to arrive at the new site. Registration will begin at 9:30 am. Local providers will have the opportunity to set up resource tables so that both Commission members and the community, especially consumers, can become more familiar with their services.
- Ms. Barrit would speak shortly with the Consumer Caucus Co-Chairs to determine whether or not the Caucus will meet after the Commission meeting. The site will be reserved until 2:00 pm in case it does.
- Ms. Barrit had a planning call scheduled with Michael Green, PhD, MHSA and Maria Orozco for the next week to develop an agenda. Commission members from the area will also be asked to play a more visible role.
- The meeting will be documented as usual ensuring that community feedback and sentiment are captured.
- The flyer will be bilingual English/Spanish and Spanish interpretation will be provided.

- 6. CO-CHAIRS' REPORT:** Mr. Brown attended the 3/19/2018 Transgender Caucus meeting to better understand their needs, gaps, and barriers. Housing was a key issue raised. They also discussed a directory of services specializing in transgender matters.

**V. DISCUSSION**

**7. HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA):**

**a. Review HOPWA Planning Timeline:**

- Ms. Ronquillo noted Ryan White Program (RWP) and HOPWA timelines differ. That complicates selecting best times to discuss aligning and complimenting each other's programming, policy, and planning priorities. The timeline in the packet reflects her discussions with Ms. Barrit and staff to incorporate HOPWA to better enable informing each other.
- The Program Year (PY) for HOPWA and the three other formula grants managed by the City of Los Angeles runs from April 1st to March 31st. The Consolidated Annual Performance and Evaluation Report (CAPER) on HOPWA's formula grant to the US Housing and Urban Development Department (HUD) in July.
- The City of Los Angeles has also received a HOPWA competitive grant for the past three or four cycles. The \$3 million grant over three years enhances Tenant-Based Rental Assistance (TBRA) for the chronically homeless. Standard TBRA



offers 12 months of assistance and transition to a Housing Choice (Section 8) voucher. The grant increases assistance to 18 months and adds wrap-around services. HOPWA submits an Annual Progress Report (APR) for that grant.

- Ms. Ronquillo will present on findings of the CAPER to PP&A at the August 2018 meeting.
- Ms. Barrit and Ms. Ronquillo will collaborate on Commission assistance in preparation for community meetings on the Consolidated Plan in October, e.g., snapshots of populations including demographic information and client needs.

#### 8. MASTER PROGRAM DIRECTIVE:

- Ms. Barrit said Miguel Fernandez, Alliance for Housing and Healing (AHH), could not attend, but forwarded data for review. AHH is HOPWA's Central Coordinating Agency (CCA) which processes applications countywide for TBRA, Permanent Housing Placement (PHP), Permanent Supportive Housing (PSH), and Short-Term Rental, Mortgage and Utility (STRMU) assistance.
- Mr. Ballesteros asked about Housing For Health (HFH) data. Ms. Ogata replied that program is still in the start-up phase. HFH just recently signed the Memorandum of Understanding (MOU) so DHSP will be working with contractors shortly.
- On the client age range, Mr. Ballesteros noted PLWH comprise an aging population. Mr. Brown added there is a broader range of services available to Transition Age Youth (TAY). Many also choose to live with their friends.
- Ms. Barrit noted PP&A requested data on Social Determinants of Health (SDH). Education, life expectancy, and median personal earnings data by City/Area Name, HD, and Supervisorial District (SD) is from *A Portrait of Los Angeles County 2017-2018 Report* commissioned by the Board of Supervisors (BOS). These are the most commonly referenced SDH. Lower education and personal income generally is reflected in lower life expectancy.
- Counter-intuitively, often immigrants have a higher than anticipated life expectancy than education and personal income would indicate. Some studies refer to this as the "Latino Health Immigrant Paradox," but data does not address quality of life, e.g., often those populations have higher rates of asthma, obesity, and some forms of cancer.
- Forward questions on AHH data to staff for clarification, e.g., health districts (HDs) noted do not align with HDs in the Los Angeles County HIV/AIDS Strategy (LACHAS).

#### 9. 2018 PREVENTION PLANNING:

- Ms. Barrit noted HIV prevention data is harder to obtain as the Health Resources and Services Administration (HRSA) requires specific clinical measures compared to the Centers for Disease Control and Prevention (CDC) which does not.
- The Commission and DHSP are working on data development. Ms. Ogata noted DHSP collects data from its contractors, but will need a few months to clean and prepare it for presentation. Currently in the packet were the MAI Plan and Directives, both approved 3/9/2017, and Priority Rankings, approved 8/15/2017, based on Comprehensive HIV Plan (CHP) 2017-2021 Objectives. LACHAS also suggests options, e.g., specific HDs might be highlighted.
- Ms. Barrit said this time of designing and rolling out prevention allocations offers an opportunity to align with RWP. Care and prevention are intertwined, e.g., what can be done upstream to impact infection rates in communities of color. Neither community planners, providers, nor consumers should be able to tell whether funding is coming from RWP, CDC, or Net County Cost (NCC). All that matters is that the system is achieving optimal care and preventing new infections.
- Dr. King noted 20% of any problem usually covers 80% of issues, but wants to ensure targeting uses objective data. Mr. Ballesteros added PP&A is always challenged to target inadequate funds.
- Mr. Burton noted successful programs may mask risks in an area so cautioned not to defund what is already working.
- PP&A had a broad discussion on possible investment targeting including: focusing on particular HDs such as Southeast and/or San Antonio; considering overlay of key SDH such as poverty over targeted populations; outreach to those who engage in MSM behavior but do not identify as such; considering how to ensure clients retain access to services when gentrification-fueled migration moves them into new areas; education for high risk African-American young women 13-24.
- Mr. Martinez suggested a first step of updating Directives and CHP Objectives to better align with LACHAS goals. Second, he suggested incorporating Core Prevention Components STD outcomes, though measures may not be immediately available. Regarding objective data, there has been HIV and STD rate mapping for a decade and results remain consistent. While SDH are important, he felt the best way to choose was per those rates. Ms. Ogata supported choosing the most impacted HDs.
- Mr. Burton asked whether there was data to identify if people who live in a HD receive services there or in another HD. On a related question, he asked whether people are willing to go to another HD if theirs lacks services. Ms. Ogata replied DHSP has client and provider addresses for HIV surveillance data and DHSP-contracted services, but not for other services. Ms. Ronquillo noted Requests For Proposals (RFPs) can target health desserts to build capacity, if needed.
- Ms. Barrit noted the HIV prevention award is \$17,950,000, but the just under two million tests deemed need would cost \$60-79 million. The RWP award will be \$40-43 million. She asked for clarity on what information can aid the committee's

decision-making process. For her, epidemiology data and HIV/STD burden are key to identifying who is impacted from prevention through viral suppression.

- Mr. Ballesteros noted there are many sources of funding for HIV testing, e.g., through Medicaid, health plans, Community Health Centers (CHCs). He suggested a policy piece to carry the message that these providers must do their share.
- The group also discussed accessing PrEP via apps, but noted high risk youth typically lack funds and need a navigator.
- ➡ For the April meeting, staff will mark up the MAI Plan and Directives to improve alignment with LACHAS goals. Staff did a crosswalk of the LACHAS and CHP. Goals do align overall, but Ms. Barrit will draft a revision highlighting prevention.
- ➡ Ms. Barrit and Ms. Ogata will collaborate on information for April meeting investment decisions, as noted: 1. HIV/STD epidemiology data and case rates, with weighted Chlamydia, gonorrhea, and syphilis by population; 2. Poverty, with CHP financial information and housing cost burden. (There was also interest in HDs with service desserts.)

**10. MINORITY AIDS INITIATIVE (MAI) PLAN:**

- The current MAI Plan targets Young MSM, African-Americans, Latino MSM, and transgender persons. Mr. Ballesteros suggested reviewing current CDC allocations to avoid duplication.
- Ms. Ogata noted funding can only be expended if it is allocated to programs that exist and that can absorb more funds. She suggested planning benefits by focusing on what services are needed, for whom, and then how to best fund them.
- ➡ Ms. Barrit will work with Ms. Ogata to develop an MAI financial spreadsheet with two or three years of utilization.

**VI. NEXT STEPS**

**11. TASK/ASSIGNMENTS RECAP:** There was no additional information.

**12. AGENDA DEVELOPMENT FOR NEXT MEETING:**

- ➡ Staff will distribute some information in advance of the 4/17/2018 meeting in order to facilitate decision-making.
- ➡ The 4/17/2018 meeting will be extended from 1:00 to 4:30 pm. Lunch will be served.

**VII. ANNOUNCEMENTS**

**13. OPPORTUNITY FOR PUBLIC AND COMMITTEE TO MAKE ANNOUNCEMENTS:** There were no announcements.

**VIII. ADJOURNMENT**

**14. ADJOURNMENT:** The meeting adjourned in memory of Thomas Puckett, Jr. at 3:00 pm.