

HIV Community Planning Council

FULL COUNCIL MEETING

Monday, November 25th, 2024

25 Van Ness Ave Room 610

4:00-6:30 pm

HIV Community Planning Council Members Present: Chuck Adams, Robert Arnold, Erwin Barrios, Bill Blum, Franco Chevalier, Ed Chitty, Zachary Davenport, Elaine Flores, Elyse Griffin, Jesus Guillen, Ron Hernandez, Lee Jewell, Helen Lin, Derrick Mapp, Marco Montenegro, Irma Parada, John Paul Soto, Charles Siron, Richard Sullivan, Manuel Vasquez

HIV Community Planning Council Members Absent: Matt Geltmaker [E], Reina Hernandez [A], Juba Kalamka [E], Chris Kent [E], Thomas Knoble [E], Nga Le [LOA], T.J. Lee-Miyaki [A], Gwen Smith [E], Laura Thomas [E]

Others Present: Anna Branzuela, Julie Case, Julie Dowling, Matt Foreman, Fanny Lapitan, Yusha McClure, Martin Muneton, Maceo Persson, Stephen Spano, Marc Vincent, Mike Zaugg

DPH Staff Present: Saadhana Deshpande, Maria Lacayo

Support Staff Present: Mark Molnar, Kira Perez, Kat Tajgeer

Minutes

1. Call Meeting to Order and Roll Call. Introduction of Public. Co-Chair Welcome.

The meeting was called to order at 4:03 pm by CM Parada. Roll Call was called, everyone introduced themselves and quorum was established.

2. Review and Approve November 25th, 2024, DRAFT Agenda – VOTE

The November 25th, 2024 DRAFT Agenda was reviewed and approved by consensus.

3. Review and Approve October 28th, 2024, DRAFT Minutes – VOTE

The October 28th, 2024 DRAFT Minutes were reviewed and approved by consensus.

4. Announcements

- CM Parada reminds the Council that all announcements made by Council Members and members of the public will be capped at 3 minutes. She notes folks will get a reminder at the 2-minute mark that they have one minute remaining.
- CM Flores announces that Julie Case and Julie Dowling from the Marin HIV Planning Council are present at today's Full Council meeting.

5. Public Comment

- None.

6. Staff Announcements

- CS Molnar announces that all committee meetings for December have been cancelled and will resume in January. He notes that there will be a vote at the end of today's meeting to determine if the December Full Council meeting will be cancelled, too.
- CS Tajgeer announces she will be sending out updated calendar invites for the 2025 Full Council meetings.

7. General Updates

- CAEAR Coalition – CM Jewell
 - Appropriators face a December 20th, 2024 deadline to advance the Fiscal Year 2025 (FY2025) funding measure under the current continuing resolution (H.R.9747). House Appropriations Chair Tom Cole previously urged Republicans to pass the FY2025 spending bills before year-end, but they may instead pursue another CR extending into the 119th Congress to leverage

their expected majority for a partisan funding package. Congress resumed work on November 12, focusing on must-pass legislation during the lame duck session, including FY2025 appropriations. NASTAD remains engaged in monitoring the process and advocating for robust funding for HIV, hepatitis, and drug user health programs.

- Maria Lacayo adds that the CAEAR Coalition will be informed when it would be best to do Hill visits for advocacy, highlighting that red states will need a lot of support and advocacy.
- HHS – CM Blum
 - Maria Lacayo announces that she is transferring out of her role at HIV Health Services (HHS) and will begin working at the SFDPH Contracts Development Unit beginning in December. She says this will be her last Full Council meeting and thanks the Council for her time with them.
 - ❖ CM Jewell thanks Lacayo for her wonderful work.
 - ❖ CM Parada thanks her for her commitment and kindness.
 - ❖ CS Molnar thanks her for her time on behalf of Council Staff.
 - CM Blum highlights SFDPH staffing updates noting that Aman Lail will become the Administrative Officer for Ambulatory Service for San Francisco Health Network, replacing Dr. Albert Yu. He adds that they will welcome back Tangerine Brigham as the Deputy Director of San Francisco Health Network.
 - CM Blum updates the group that the HRSA/HAB site visit report has been released. He notes the report was overall positive, receiving 13 commendations. He highlights the findings that need to be corrected.
 - ❖ CM Jewell asks if CS Molnar will keep the Council updated on Membership recruitment.
 - i. CS Molnar notes the Steering committee will be doing by-law and policies & procedures updates and they will be brought before the Full Council as the Council sees fit. He notes there will be updates around Council Member tenure and term limits. He adds that the Membership committee is working on recruitment, highlighting that the Council needs to recruit more non-aligned consumers and Black/African American folks.
 - CM Blum provides an update on the SF Interagency Collaboration on HIV and Aging Work Group, which consists of HHS, Mayor’s Office of Housing and Community Development (MOHCD), and Disability and Aging Services (DAS), noting they continue to meet monthly.
 - CM Blum notes that HHS is working with SFDPH Jail Service HIV Integrated Services to provide an EHE funded project around relinkage of care for people transitioning out of jail.
- CHEP & CPG – CM Knoble
 - There are no CHEP updates month.
 - CM Soto provides an update on CPG, as he is a member-at-large. He notes they just had a great 3-day meeting in Riverside and the theme was “From Burnout to Balance: Building Community Wellness through Self-Care.” He adds that they are looking for folks to join the CPG committees, noting that this is separate from member recruitment.
- SOA – CM Kent
 - There are no SOA updates this month.
- ETE Update – CM Sullivan
 - CM Sullivan updates the group that he had to miss the November ETE meeting due to illness. However, he provides an update on the convening that is scheduled for Spring 2025. He says they are working on formulating a proposed agenda and are currently in the process on voting for a name for the convening. He notes that the ETE Steering Committee is responsible for implementing the convening. He adds that the December ETE meeting was cancelled and they will resume meetings in January.

- ❖ CM Montenegro asks if CM Sullivan has a sense of how many folks will be participating and where the convening will be held.
 - i. CM Sullivan says he doesn't have that information yet, but will know more in January.
- ADAP Update – Nikki Gracey
 - There are no ADAP updates this month.

8. Needs Assessment Report – Kira Perez and Kat Tajgeer

- CS Perez and CS Tajgeer present the 2024 Needs Assessment, which focused on the Black/African American community and yielded a total of 31 participants.
- CS Tajgeer provides an overview of self-reported participant data, including demographics such as age, length of time living with HIV, gender identity, and sexual orientation. Additionally, she highlights the results of the Service Category Ranking exercise, with Primary Medical Care ranked highest, followed by Dental Care and Legal Services, and Hospice ranked lowest.
- CS Perez reviews findings from the Service Category discussion and interviews, highlighting key participant concerns. In Primary Medical Care, participants emphasized the importance of staying engaged with providers, especially as they age and face other health issues impacted by HIV. Concerns included medication side effects and frequent provider changes, which cause anxiety about provider HIV knowledge. For Mental Health Care, participants wanted more support when seeking help and noted difficulties navigating insurance. Food insecurity was another major issue, with participants stressing its critical role in overall health. Interviews revealed additional barriers, including cultural stigma within the Black/African American community, internalized stigma, and fears of being ostracized if their HIV status became known. Participants also highlighted challenges with housing, particularly its impact on those managing substance abuse or mental health issues, and appreciated the convenience of injection medication options despite concerns about long-term effects.
- CS Tajgeer reviews the recommendations from the findings. The first recommendation is to offer HIV specific care for all healthcare providers, including new staff, to improve patient confidence in care. Second, promote existing psychosocial support groups that offer emotional support and guidance while clients wait for a formal mental health service provider. Lastly, develop & distribute culturally tailored messages addressing common misconceptions through various methods such as flyers & posters, infographics, and videos.
 - CM Guillen asks about participants' concerns about medical doctors losing expertise and if these comments are coming from community clinics.
 - ❖ CS Perez says that a lot of participants have been living with HIV for a long time and have been taking meds for a long time and the concern comes from losing doctors that have been with them for a long time.
 - CM Mapp says he finds the recommendations to be "soft" and notes he is not surprised about the concerns around medicalization as there is deeper cultural context there.
 - ❖ CS Molnar responds that the recommendations were reviewed by the Community Engagement Committee and that they could return to that committee for discussion and revision.
 - CM Griffin asks if there was a part of the survey where participants could provide their recommendations.
 - ❖ CS Perez says the survey focuses on demographics, but the recommendations usually come from the discussions where participants will share what they would like to see.

- CM Blum speaks to the third recommendation, saying it could possibly be provided outside of HHS, as there isn't a fundable service within HHS that could enact this recommendation. He also asks for specifics about what should be communicated.
 - ❖ CS Molnar responds that the messages should be ones that could reduce stigma.
 - i. CM Montenegro adds that culturally tailored messaging that could be used by multiple service providers would be useful.
- CM Ron Hernandez asks a clarifying question regarding participants who chose "N/A" when asked if they failed to take their medications in the last 12 months.
 - ❖ CS Tajgeer responds that participants who chose this option did not forget to take their medications.
- CM Sullivan notes that a lot of challenges experienced by communities may come from within their own communities.
- CM Flores asks CM Blum about the food vouchers given to clients.
 - ❖ CM Blum provides an overview of current food services.
- CM Guillen says it was interesting to see that participants said they weren't taking their medications due to staying out late, especially given the majority of participants' ages.
 - ❖ CS Perez responds that this was only one participant who made that comment.

9. Break

10. DAS LGBT Services – DAS Staff

- Michael Zaugg provides an overview of the Department of Disability and Aging Services (DAS), including its vision, mission, values, and programs such as Adult Protective Services, In-Home Supportive Services (IHSS), and Legal & Guardianship Programs. He also highlights the Clinical and Quality Assurance unit, which facilitates collaboration between DAS and community-based organizations (CBOs) to assess community needs. Zaugg reviews the DAS Program Areas, their services, a map of funded program sites in San Francisco, and the FY23-24 budget, noting the majority is allocated to IHSS Aid Programs.
- Fanny Lapitan discusses the Benefits and Resources Hub, focusing on the DAS Eligibility Unit, County Veterans Service Office, and Integrated Intake and Referral Unit. She provides an overview of how folks can access DAS services, and highlights how the DAS Benefits and Resources Hub can be utilized to get folks connected.
- Maceo Persson shares accomplishments of the San Francisco LGBTQ Aging Task Force, highlights LGBTQ+-focused services provided by DAS CBO partners, and discusses the creation of the San Francisco Disability Cultural Center through community advocacy.
- Zaugg discusses DAS's HIV and Aging Services, noting that DAS doesn't currently have any HIV-specific resources. He highlights DAS's role in the SF Interdepartmental Collaboration on HIV and Aging, which aims to connect services across DAS, SFDPH, and MOHCD.
 - CM Guillen expresses concern about how long it has taken for DAS to incorporate HIV-specific services. He notes that the LGBTQ older adults report came out and asks how that information will help DAS shape their services. He also asks what people can expect from the SF Interdepartmental Collaboration on HIV and Aging. Additionally, he adds that he is very worried about people with mobility issues in their homes.
 - ❖ Zaugg says the statewide survey was released that afternoon and he hasn't had a chance to dig in. He is excited dig into it and they will take the information seriously. He recognizes the idea of folks having to go back into the closet as they access aging services and he speaks to initiatives they have in place to try to ease that.
 - CM Jewell acknowledges it is time to face the avalanche of people that are aging with HIV that are going to need services. He invites Zaugg to work with CS Molnar to return to the Council to report back on how the collaboration is going.

Lee Jewell	P	Y	Y								
Juba Kalamka	E	-	-								
Chris Kent	E										
Thomas Knoble (Co-Chair)	E	-	-								
Nga Le	LOA	-	-								
T.J. Lee-Miyaki	A	-	-								
Helen Lin	P	Y	Y								
Derrick Mapp	P	Y	Y								
Marco Montenegro	P										
Irma Parada	P	Y	Y								
John Paul Soto	P	Y	Y								
Charles Siron	P	Y	Y								
Gwen Smith	E	-	-								
Richard Sullivan	P	Y	Y								
Laura Thomas	E	-	-								
Manuel Vasquez	P	Y	Y								
Ayes		20	20								
Nayes		0	0	0	0	0	0	0	0	0	
Abstain		0	0	0	0	0	0	0	0	0	
Recusal		0	0	0	0	0	0	0	0	0	
Total		20	20								