

## HIV PLANNING COUNCIL ALLOCATIONS COMMITTEE MEETING MINUTES

COMMITTEE MEETING WEDNESDAY, APRIL 18, 2019

The HIV Planning Council (HIVPC) Allocations Committee convened in a committee meeting on Wednesday, April 18, 2019 at City Hall, 301 West 2<sup>nd</sup> Street, Room 1029 in Austin, Texas.

Committee Chair Barry Waller called the Meeting to order at 6:01 p.m.

**Council Members in Attendance:** 

Committee Chair Barry Waller, Dale Thele, Juan Troy, Jonathan Wells and Samuel Goings

Council Members Absent: Adriana Sansome Neves

Staff in Attendance (HIVPC Support Staff): Cassandra (Cassie) DeLeon, Interim Assistant Director, Hailey de Anda, Interim Unit Manager, and Laura Still, Planner

Administrative Agent (AA): Glenn Selfe, Trish Niswander

**Presenters:** None

#### 1. CERTIFICATION OF QUORUM

a. Committee Chair Barry Waller established and certified Quorum.

#### 2. CITIZEN COMMUNICATION

a. None

#### 3. INTRODUCTION/ANNOUNCEMENTS

- a. Update on Mayor's Address to the City which included Fast Track Cities as a highlight of the community's efforts.
- b. Welcome and acknowledgement of return of Hailey de Anda from maternity leave and thanked Cassie for filling in during the extended leave.
- c. Center for Health Empowerment (CHE) hosted second Seamless System of Care workgroup meeting for Fast Track Cities. The subcommittee focuses on rapid linkage to care. Workgroup meets monthly instead of quarterly.
- d. Kind Clinic is launching a model clinic and marketing campaign targeting Latinx community

#### 4. APPROVAL OF MINUTES

- a. The minutes from the meeting of March 20, 2019 were reviewed and approved with removal of the term "board" from board meeting.
- 5. DATA REVIEW FOR PRIORITY SETTING AND DISCUSSION AROUND PRIORITY SEETING TOOL

- a. Continued discussion of criteria factors
  - i. Review of the removal of Payer of Last Resort and Core Services as Criteria Factor from last month's meeting. Continued discussion of removal of EIIHA which was tabled due to time constraints.
  - ii. EIIHA was originally added as a criteria factor to help prioritize early intervention. The need was identified due to limited service categories funding early intervention.
  - iii. The committee discussed the use of EIIHA to focus on minority populations which are known as having a disparate impact of HIV and could benefit the most from early identification.
  - iv. The committee identified rapid linkage and early identification as a priority but expressed uncertainty of how this relates to EIIHA as a criteria factor.
  - v. Group decided to keep EIIHA as a criteria factor to priorities early intervention and rapid linkage.
- b. Consensus ranking of two criteria factors: Access to and Maintenance in Care and Consumer Priority
  - i. Appendix A contains the consensus rankings for
    - Consumer Priority and
    - Access to and Maintenance in Care
  - ii. Each service category was reviewed for both criteria factors. The committee provided their individual ranking. The group then discussed the rankings when differences occurred which was common. Discussion included
    - How service categories were defined during consumer survey assessment and possible bias from surveys being conducted in clinics.
    - The services currently funded in a category and changes in services.
    - Trends in spending such as service categories' funds being unspent in past years.
    - Numerous data sources were consulted and referenced such as:
      - a. Consumer survey
      - b. Epidemiological profile
      - c. Qualitative needs assessment data
      - d. HRSA's definition for service categories
      - e. Other materials included in the PSRA binder
  - iii. Laura Still reviewed a one-pager which will be used to inform resource allocation. The one-pagers will be provided during the May meeting.

The committee debated their rankings until a consensus was met.

#### 6. PLANNING COUNCIL STAFF REPORT

- a. Staff report was provided Hailey de Anda (Appendix B)
- b. Directives overview was given as technical assistance (Attachment 1)

#### 7. ADMINISTRATIVE AGENT PART A EXPENDITURE AND VARIANCE REPORT

- a. Expenditure and Variance report reviewed by Glenn Selfe (Appendix C)
- b. Reviewed ADAP service category and its role ensuring all grant funds get spent.

#### 8. ADJOURNMENT

Committee Chair Barry Waller adjourned the meeting at 8:14p.m. without objection.

#### Appendix A

Service				
Category	Maintenance and Access To Care	Consumer Priority		
Health Insurance Premium and Cost Sharing Assistance	8	5		
Outpatient Ambulatory Medical Care	8	8		
Housing Services	8	8		
Medical Case Management (Including Treatment Adherence)	8	8		
Emergency Financial Assistance	8	8		
AIDS Pharmaceutical Assistance - Local	8	8		
Oral Health Care	8	8		
Food Bank / Home Delivered Meals	8	8		
Case Management (Non- Medical)	8	8		
Medical Transportation Services	8	8		
Substance Abuse Services - Outpatient	5	3		
Home and Community Based Health Services	8	3		
ADAP	5	1		
Outreach Services	5	5		
Early Intervention Services	8	8		
Mental Health Services	5	5		
Substance Abuse Services - Residential	3	1		
Medical Nutrition Therapy	5	3		
Psychosocial Support Services	3	3		
Home Health Care	3	3		
Child Care Services	3	3		
Linguistic Services	5	3		
Rehabilitation Services	3	3		
Hospice Services	3	3		

Referral for Health Care/Support Services	5	3
Respite Care	3	3
Legal Services	3	1
Health Education Risk Reduction	3	1

# Appendix B Planning Council: Office of Support Staff Report April 18, 2019 Allocation Committee

#### **ANNOUNCEMENTS**

Hill Country Ride for AIDS Opening Ceremonies April 26, 2019

#### **Health Impacts of Gentrification & Displacement**

When: Thursday, April 25th from 5:30-8:00pm

Where: 1501 Red River St., Austin Texas 78701 Health Learning Building Room 5.201

**Details:** Dell Medical School's Department of Population Health in collaboration with the Community Strategy Team invite you to participate in the fourth event in the Social Identity Series, titled "The Health Impacts of Gentrification and Displacement. Join them for a panel of experts on the changing dynamics of East Austin and the lived experience of gentrification and its impacts on the social determinants of health. Dell Medical School's mission of making Austin a model healthy city must address topics such as gentrification. Having tools and skills to work with those experiencing displacement is crucial to address the health of the community. The goal of this series is to engage physicians and other health providers in ongoing discussions from community members with lived-in experience.

#### Art Erotica sponsored by Octopus Club

When: Saturday, May 18th, 2019 at 8:00pm-11:00pm

Where: 1023 Springdale Rd. #11A, Austin, Texas, 78721

**Details**: ArtErotica 2019 is one of Octopus Club's most anticipated parties of the year! Each year, they celebrate lust, love, and everything in between, while promoting safe and informed sex. The heart of the event is an amazing art auction, and they encourage you to consider participating in a unique and meaningful way! Be a sponsor, donate an original art piece, join their planning committee or simply volunteer at the event. ArtErotica is a 21 and up event. As with all Octopus Club events, this one is 100% volunteer organized and produced; 100% of the money spent at the event will go directly to the Paul Kirby Emergency Fund at AIDS Services of Austin, which assists people living with HIV and AIDS in times of crisis, helping them to pay for food, rent, utilities, eyeglasses, and even medicine not covered by Medicaid

For more information go to: http://octopusclub.org/event/arterotica-2019/

#### 2019 Texas Health Equity Summit

When: August 9th-10th

Where: Austin, Texas

**Details:** This summit will bring together Black and Latinx gay and bisexual men, other men who have sex with men (MSM), transgender individuals, and gender non-confirming individuals to Austin for a weekend of skills building and planning.

The 2019 TX Health Equity Summit will focus on:

- **Leadership Skills**: Turning lived experiences into professional experiences and identifying additional opportunities for professional growth.
- Find and Develop: Spotlighting current projects and identifying ways to build on successes, overcome barriers,

and create sustainability.

- Looking Beyond Data: Provide an update on state HIV statistics and current initiatives and discuss the story behind the numbers.
- Achieving Together: Introduce the community plan to end the HIV epidemic in Texas and discuss where our
  work fits and how we can work towards the goals outlined.

To apply: <a href="http://tinyurl.com/2019EquitySummit">http://tinyurl.com/2019EquitySummit</a>

#### STAFF ACTIVITIES

#### **Ryan White Part A Grant Activities**

- Program Terms Report submitted
- Monthly Project Officer Call

#### **Needs Assessment**

- Updating Epidemiological Profile
- Working with AA to gather data requested from Allocations Committee for use in priority setting in March/April

#### **Comprehensive Planning**

- Technical Assistance plan underdevelopment with Integrated HIV/AIDS Planning Technical Assistance Center (IHAPTAC) to support update and monitoring of the Integrated Plan
- Supporting committee with plan alignment with Achieving Together: A Community Plan to End the HIV Epidemic in Texas and Fast Track Cities Austin

#### **Outreach and Recruitment**

Spring Recruitment for 2019 is being reviewed by Planning Council.

#### **Technical Assistance and Training**

- Boards and Commissions Refresher Training video recording is being made available for group training opportunity during Business meeting.
- Directive Planning CHATT overview for Comp Plan and Allocations
- Satisfaction and Training Needs Survey
- Preview of the Service Category Summary sheet.

#### **Partnerships**

• Fast Track Cities quarterly workgroup meeting. The 1<sup>st</sup> anniversary will be celebrated in June. Stephanie Hayden is the APH executive sponsor.

#### Other

• Staff supported HIV Prevention Grant writing for APH Grant supports Communicable Diseases Unit (CDU) including 9 staff in HIV Prevention Team and Linkage to Medical Care Social Services. The grant total is at \$733,000 for the current period.

#### **Appendix C**

AUSTIN TGA FY18 - BUDG	ET VS	ACTUAL AS	6	F FEBRUAF	RY	28, 2019	
					% of	Grant Year Elapsed	100.00%
PART A DIRECT SERVICES		Budget		Expenditures		Balance	% Expended
AIDS Drug Assistance Pogram (ADAP)	\$	1.00	-		\$	1.00	100.00%
AIDS Pharmaceutical Assistance - Local	\$	237,392.00	-	237,392.00			100.00%
Early Intervention Services (EIS)	\$	87,907.00		87,907.00			100.00%
Health Insurance Premium and Cost Sharing Assistance (HIPCSA)	\$	232,712.00		232,712.00			100.00%
Medical Case Management, Including Treatment Adherence	\$	307,270.00		284,440.44		22,829.56	92.57%
Medical Nutrition Therapy	\$	,	5	,	\$		100.00%
Mental Health Services	\$		5	203,514.73	-	21,690.27	90.37%
Oral Health Services	\$		5	570,831.00			100.00%
Outpatient Ambulatory Health Services	\$	-,,	\$	1,455,436.00	-		100.00%
ubstance Abuse Services - Outpatient	\$		5	143,061.20		11,337.80	92.66%
PART A CORE MEDICAL SERVICES SUBTOTAL	\$	3,363,366.00	\$	3,307,507.37	5	55,858.63	98.34%
mergency Financial Assistance	\$	95,597.00	\$	95,597.00	\$		100.00%
ood Bank/Home-Delivered Meals	\$	97,203.28	\$	97,161.94	\$	41.34	99.96%
lousing Services	\$	138,775.00	\$	138,775.00	\$		100.00%
Medical Transportation Services	\$	20,105.00	\$	20,105.00	\$	-	100.00%
Ion-Medical Case Management	\$	248,590.00	\$	248,080.45	\$	509.55	99.80%
sychosocial Support Services	\$	5,796.00	\$	5,183.07	\$	612.93	89.42%
ubstance Abuse Services - Residential	\$		\$		\$	3,709.00	97.16%
PART A SUPPORT SERVICES SUBTOTAL	\$	736,775.28	\$	731,902.46	5	4,872.82	99.34%
OTAL PART A	\$	4,100,141.28	\$	4,039,409.83	\$	60,731.45	98.52%
					%	of Grant Year Elapsed	91.67%
MINORITY AIDS INITIATIVE (MAI)		Budget		Expenditures		Belance	% Expended
Early Intervention Services (EIS)	\$	62.010.00	Ś	62,010.00	Ś		100.0
MAI CORE MEDICAL SERVICES SUBTOTAL	\$	62,010.00	\$	62,010.00			100.0
Ion-Medical Case Management	\$	314.522.72	ć	305,253,24	ė	9,269,48	97.
NAI SUPPORT SERVICES SUBTOTAL	\$	314,522.72	-	305,253.24		9,269.48	97.
		·	•		-		
OTAL MAI	\$	376,532.72	\$	367,263.24	\$	9,269.48	97.54%
					% of	Grant Year Elapsed	
						Balanc	e % Expended
		Budget		Expenditures		Balance	76 Expended
OTAL DIRECT SERVICES	\$	Budget 4,476,674.00	\$	Expenditures 4,406,673.07	\$	70,000.93	98.44%
TOTAL DIRECT SERVICES	\$	4,476,674.00	Ė	4,406,673.07	\$		98.44%
	\$	4,476,674.00	Ė	4,406,673.07  Grant Year Elapsed		70,000.93	<b>98.44%</b> 83.33%
ADMINISTRATION AND QUALITY MANAGEMENT		4,476,674.00	% of	4,406,673.07  Grant Year Elapsed Expenditures			<b>98.44%</b> 83.33%
ADMINISTRATION AND QUALITY MANAGEMENT	\$	4,476,674.00	% of	4,406,673.07  Grant Year Elapsed		70,000.93	98.44% 83.33% % Expended
ADMINISTRATION AND QUALITY MANAGEMENT  ADMINISTRATION (AA + PC SUPPORT)  RUALITY MANAGEMENT		4,476,674.00	% of	4,406,673.07  Grant Year Elapsed Expenditures	5	70,000.93	98.44% 83.33% % Expended
DMINISTRATION AND QUALITY MANAGEMENT  DMINISTRATION (AA + PC SUPPORT)  UALITY MANAGEMENT	\$	4,476,674.00 Budget 457,995.00	% of \$ \$	4,406,673.07  Grant Year Elapsed Expenditures 457,635.26	5 5	70,000.93 Bolance 359.74	98.44% 83.33% % Expended 99.92%
ADMINISTRATION AND QUALITY MANAGEMENT  ADMINISTRATION (AA + PC SUPPORT)  RUALITY MANAGEMENT	\$	4,476,674.00 Budget 457,995.00 166,999.00	% of \$ \$	4,406,673.07  Grant Year Elapsed Expenditures  457,635.26 156,578.19	s s	70,000.93  Balance 359.74 10,420.81 10,780.55	98.44% 83.33% % Expended 99.92% 93.76% 98.28%
ADMINISTRATION AND QUALITY MANAGEMENT	\$	4,476,674.00 Budget 457,995.00 166,999.00	% of \$ \$	4,406,673.07  Grant Year Elapsed Expenditures  457,635.26 156,578.19	s s	70,000.93 Balance 359.74 10,420.81	98.44% 83.33% % Expended 99.92% 93.76% 98.28%