



Minutes ☘ May 10th, 2021
4pm-6:30pm

Virtually through Zoom

Council Members Present: *Katie Hara (Madison Clinic, Council Co-Chair), Richard Prasad (Country Doctor, NAPSRA Co-Chair), Andrew Ashiofu, Jonas Nicotra (Membership/Operations Co-Chair), Amber Casey (Hepatitis Education Project), German Galindo, Susan Buskin (Dept. of Public Health-Seattle & King County), Genie Sheth (City of Seattle-Human Services Dept.), Lina Stinson-Ali, Teresia Otieno (Center for Multi-Cultural Health), John Rodriguez (+Caucus Co-Chair), Hector Urrunaga-Diaz (Bailey-Boushay House), Ron Padgett (NAPSRA Co-Chair), Tony Radovich (System of Care Co-Chair)*

Council Members Absent: *Michael Louder (Council Co-Chair), Eve Lake, Gladys Wiessner*

Planning Council Staff Present: Karen Chung, Wilson Pipkin (minutes)

Recipient Staff Present: Linda Coomas (Ryan White Part A Recipient), Mark Baker (clinical quality management), Shila Wu

Visitors Present: Wanda Vazquez (Janssen Infectious Disease), Gabriel Silberblatt (City of Seattle), Ray Harris (Washington State Dept of Health-Ryan White Part B), Karen Hartfield (Dept. of Public Health-Seattle & King County), Kevin Hockley (Optum HIV Pharmacy), Ada Santerre-Nigaglioni (Lifelong), Howard Russell (AIDS Health Foundation), Leticia Merlin (Spanish/English interpretation), Jason McGill (Health Care Authority-Medicaid), Patricia Ogunmola-Nazzal (Dept. of Corrections), Michael Lidel (prospective Councilmember)

Italics denote Planning Council Membership.

I. Welcome, Introductions and Announcements

Amber announced a vaccine clinic this Friday administering the 1 dose Johnson & Johnson COVID-19 vaccines with no ID requirements and interpreters available. This is a joint effort by the Hepatitis Education Project (HEP), Country Doctor and Entre Hermanos.

Eve is on leave and will be returning later in the summer.

Ray announced that the demo for the HIV discrimination and stigma survey is almost done and will be sent out to HIV and drug user health programs soon.

Gabriel announced that Housing Opportunities for People with AIDS (HOPWA) funds are available through the City of Seattle-Human Services Dept. for housing assistance. Reach out to Gabriel.silberblatt@seattle.gov for more information. There is a provider coordination meeting Tues, May 11th.

The Quality Management Advisory Committee (QMAC) will be meeting May 17th. They are working on the year end report to turn into the Health Resources and Services Administration (HRSA).

Susan announced there is an opening for a disease research and intervention specialist on the team recruiting and interviewing for the Medical Monitoring project.

<https://www.governmentjobs.com/careers/kingcounty/jobs/3069732/disease-research-intervention-specialist-mmp>

II. Meeting Agenda

There was a change for reappointing Michael Louder.

The agenda was approved as amended by acclamation.

III. Meeting Minutes

The April minutes were approved as written by acclamation.

IV. Public Comment

None.

V. Recipient Report

On April 16th the objective application review committees met and made recommendations for funding and decrement plans. This needs to be approved by the Council before contracts can be developed for the awarded funds. There is a survey being developed with the HIV/STD Education Team to get feedback why agencies didn't apply or are not interested in Ryan White funds.

<Ron Padgett joined the meeting.>

There were concerns and frustrations expressed around the food program currently funded by Ryan White Part A (RWPA), and the amount of food which cannot be eaten or consumers do not know how to cook. It was noted that the survey is designed to gather more information on this, and that Mark is working to gather information on this topic for the System of Care Committee.

VI. Executive Committee Report

To address these issues with Food & Meals, the Executive Committee is putting together an ad hoc work group to address this lack of culturally relevant and dietary specific food available. The sub-priority of food vouchers that funds were allocated for were not applied for.

<Jason McGill joined the meeting.>

Much of this issue arises from the original target population of HIV/AIDS work. Populations of color struggle to get their needs met.

Questions on this topic included:

- Is it possible to work with small ethnic grocery stores to implement food vouchers?
- How can we stop using a white savior mentality to provide HIV services?
- It was noted unmet needs can also be integrated into directives attached to funding awarded.

- Accessibility of the Food & Meals service has been an ongoing problem, feedback has been given on this, and the problem remains. Do we really need any more data or groups on this topic before changes are made?
- Can food be better provided throughout the Transitional Grant Area (TGA)?
- Can there be advocacy up the chain to HRSA on the increasing requirements of funds? This adds difficulty to application for and use of funds for consumer services. It can be costly to afford to apply for RW funds, and the applications can become stale and undiverse due to this.
- It was noted that technical assistance is provided for applicants and contracted providers.
- How can we gather information on this topic that doesn't come from a focus group, survey, or white centered data gathering method?
- It was noted Ryan White Part B (RWPB) is also working on this kind of a workaround to get information to and from focus populations at the state level.

<Patricia Ogunmola-Nazzal joined the meeting.>

- It was noted that a lot of target communities only disseminates information through word of mouth, not through flyers or other common methods. Are there workarounds possible to get funding information out to these communities through trusted messengers?

VII. Membership/Operations Committee Report

Interviews were conducted with Ray Harris and Patricia Ogunmola-Nazzal, and Michael Lidel's references were reviewed. Implicit bias training was discussed, and trainers/trainings will be reviewed at the next meeting. *Michael Louder* has been reappointed for another term.

MOTION: Jonas moved to nominate Ray Harris for Planning Council membership in the Ryan White Part B position. Katie seconds.

Discussion: Ray introduced himself and his experience doing HIV work.

The motion passed with the following vote:

- In favor – 13 –: *Katie, Richard, Andrew, Jonas, Amber, German, Susan, Genie, Teresia, John, Hector, Lina, Ron*
- Opposed -0-
- Abstaining -0-

MOTION: Jonas moved to nominate Michael Lidel for Planning Council membership in the incarcerated PLWH position. Katie seconds.

Discussion: It was noted that if a motion comes from a committee, it does not require a second.

The motion passed with the following vote:

- In favor – 13 –: *Katie, Richard, Andrew, Jonas, Amber, German, Susan, Genie, Teresia, John, Hector, Lina, Ron*
- Opposed -0-
- Abstaining -0-

MOTION: Jonas moved to nominate Michael Louder for a second term on the Council.

Discussion: None

The motion passed with the following vote:

- In favor – 13 –: *Katie, Richard, Andrew, Jonas, Amber, German, Susan, Genie, Teresia, John, Hector, Lina, Ron*
- Opposed -0-
- Abstaining -0-

VIII. Needs Assessment, Priority Setting & Resource Allocation Committee Report

Due to a 6.5% (\$417,343) reduction in the applied for RWPA award, this committee worked to reallocate funds. This process was long and well thought out with an extra meeting held to address this and the Food & Meals issues. Overall, those service categories funded over \$100,000 were cut by 5%, and those under were cut by at least 2% with some exceptions.

- Those funds that were not applied for were eliminated (\$190,193).
- The cut to Housing was lowered to 4% (\$34,659) due to it being the primary priority.
- The cut to Psychosocial Support was lowered to 3% (\$58,055) due to being the secondary priority.
- Non-Medical Case Management (NMCM)-Housing was reduced by 4% (\$25,522).
- Emergency Financial Assistance was cut by 15% (\$20,838) due to it being newly funded and the availability of other funding sources.
- NMCM-Engagement & Retention-Minority AIDS Initiative (MAI) allocations were reduced in both the Black and Latinx populations by 3.66% (\$3,651 and \$1,919 respectively).
- Outpatient Ambulatory Health Services (OAHS)-Treatment Adherence was reduced by 10% (\$31,683).
- Early Intervention Services (EIS) MAI allocations were reduced by 18.15% (\$20,000).
- Food and Meals was reduced by 9.45% (\$76,310).

<Andrew Ashiofu left the meeting.>

<Michael Lidel joined the meeting.>

Even though the food voucher funds were not applied for, the identified need for culturally relevant meals remains a priority. There was a request to add a question on the survey to determine why psychosocial support funds were under-requested. There may be some carryover funds available later in the year to cover some gaps. The reallocations decisions were difficult, but there was consensus in the NAPSRA committee.

MOTION: Ron moved to approve this reallocation. Richard seconds.

Discussion: There was a question about folks with conflicts being able to vote, and it was stated that due to this being a whole funding package they are allowed to vote. It was noted that those approved today still have yet to be approved by the Executive in order to vote.

The motion passed with the following vote:

- In favor – 9 – *Katie, Richard, Amber, Jonas, Ron, Teresia, Susan, Hector, Genie*
- Opposed -0-
- Abstaining -2- *Lina, German*

IX. +Caucus Report

The last meeting was well attended and there was discussion around food vouchers, co-chairs and what the safety plan will be if/when in person meetings return. It was stated that King County has not put out any policies on in person meetings, and the requirement to telework will be lifted in July. Hybrid options will need to be available. If there are access needs around this, reach out to Council staff. There was a question about whether agencies can be required to provide care to those who have not been vaccinated, and the recipient will investigate this more. It was stated that there are rules around cherry picking clients, and that this rule applies to the COVID vaccination situation.

X. System of Care Committee Report

Much of what this committee covered has already been discussed here. The principles that SOC operates on are:

- Be actively antiracist and tie in the County's strategic equity plan.
- Address the needs of those with the greatest disparities first
- Have accountability for ourselves as a committee, the recipient and subrecipients.
- Do not defer to the agencies and spell out what we want.
- Do not rest on your laurels.
- Those being served by RWPA funds should be those with the greatest need.
- Historically marginalized populations are underrepresented in data.

XI. Planning Council Data Needs

This is a high-level conversation around data needs that the Council may have especially around the Ryan White Services Report (RSR). There are data options outside the RSR including: various client satisfaction data, the Medical Monitoring Project (MMP), epidemiologic data, Provide data (demographics, services provided), and HIV/AIDS Bureau (HAB) performance measures. Provide data is Health Insurance Portability and Accountability Act (HIPAA) compliant, has access controls and Provide has been used by numerous other jurisdictions. It was noted there is information in the Provide database that is an indicator of immigration status, but information is not directly collected on this. These data sources are used to make funding decisions, determine service categories, monitor service categories, measure health outcomes, improve client satisfaction and inform client care.

Limits and considerations include:

- HIPAA considerations necessitate only the provision of aggregate data.
- Per HRSA rules agencies are not identified in data sets.
- Some data is more difficult and time consuming to obtain.
- Data is broad and varied necessitating specificity.

The floor was opened to brainstorm queries and questions:

- Is it possible to gather data on clients who do not return after a single visit?
- Can cross referencing occur between surveillance and Provide data?
- Can data be gathered that goes beyond numbers and allows for cultural nuance? (The Council needs assessment will provide qualitative data.)

- It was stated that client satisfaction surveys and community outreach has been done countless times, and the data around service gaps have been consistent. How do we use the data we already have to do something new and creative?
- If it is left to the agencies, they will do the bare minimum, and nothing will change.

XII. Adjourn

NEXT MEETING: 4pm, Monday June 14th virtually through Zoom.