

MN Council for HIV/AIDS Care and Prevention Meeting
May 10, 2016
9 am-12 pm
Health Services Building, Room L15
525 Portland Ave. S., Minneapolis
Minutes

Council Members Present:	
Alejandro Aguilera	Valentine Momo
Mike Behl	Florence Nabeta
Tom Bichanga	David Neller
Colleen Bjerke	Lesla Nelson
Roger Ernst (Council Co-Chair)	Gelli Overton
Terral Ewing	Rob Pioli
Al Fredrickson	Val Rubin-Rashaad
Robert Gillum, Jr.	Karin Sabey
Bielca Guevara	Matt Toburen
Marvin Innes	Thuan Tran
Tim Kopischke	John Vener, MD
Rick Laska	Rob Yaeger (Council Co-Chair)
Larry McPherson (Council Co-Chair)	
Council Members Absent:	
Robert Andrews	Gwen Velez
Loyal Brooks	Monica Yugu
Kyle Dular	
Community Members/Guests/Consultants:	
Cheryl Barber, MDH	Bobby Long, DHS
Keith Henry, MD, Positive Care Center	Jim Mara, Hennepin County
Stephen Jensen, Community Member	Stephanie Watts, Hennepin County Communications
Hennepin County (Part A) Representative:	DHS (Part B) Representative:
Thuan Tran	Colleen Bjerke
MDH (CDC) Representative:	
Chryssie Jones	
MCHACP Staff:	
Patrick Tschida, Coordinator	Carissa Weisdorf, Administrative Specialist (minutes)

Quorum Present? **Yes**

I. Call to Order & Reading of the Guiding Principles

Rob called the meeting to order at 9:10 am and said he is facilitating. Robert G. read the 6 guiding principles aloud.

II. Lighting of the Candle

Rob Yaeger lit the candle and displayed a photo of Bill Dorn, Bill Kummer, Keith Galan and Carlton Hogan from the March on Mora in 1989; Rob talked about their work in the HIV/AIDS community. We also remember Mike's mom Shirley who passed away on May 2.

III. Welcome and Introductions

Patrick welcomed Stephanie Watts from Hennepin County Communications who is filming for an award ceremony at which the integrated planning workgroup will receive the Hennepin County Administrator's Award.

IV. Consideration and Approval of Proposed Agenda

Marvin motioned to approve the agenda and Mike seconded; the agenda was approved by unanimous consent.

V. Consideration and Approval of April 12 Meeting Minutes

Mike motioned to approve the minutes and Marvin seconded; the minutes were approved by unanimous consent.

VI. Co-Chair Update

- Roger said the three co-chairs are attending the 2016 National Ryan White Conference on HIV Care and Treatment in Washington, DC in August.
- The co-chairs received an update on the standards of care process; it is a HRSA requirement for the council to create standards of care for core and supportive services. We need to adopt standards for the 21 services we fund and it is spread out over the years with 4-5 completed each year. He reminded the council that the work is done at the committee level and the standards development process included several opportunities to attend to provide feedback. Council members are welcome to attend consumer or provider input meetings especially if they have experience with the service area.

VII. Part A Update

Thuan Tran, Hennepin County

- Thuan provided the Part A update in Jonathan's absence.
- We received our Part A grant award; the May 25 PAC meeting will include a reallocations proposal.
- Sept 30 is the deadline to submit the 2017-2021 comprehensive plan; PAC and DEC are working on creating it and the council will approve it at the August 9 council meeting.
- The grant application guidance will be released in mid-August and we anticipate the grant application will be due in mid-October.

VIII. Part B Update

Colleen Bjerke, DHS

- DHS has not yet received their grant award.
- Bonnie is attending and presenting at the 5th Annual Hepatitis C Tribal Summit in Mahanomen which is funded by DHS.
- DHS is providing a Regional Fiscal Health Training on May 24 and May 25 for ASOs that receive Ryan White funding and anyone is able to attend. Parking is available at St. Joe's which is two blocks away.
- MCM regional training in Omaha on May 9 and May 10; the location of the training rotates.
- DHS is partnering with MDH at the upcoming Social Work and HIV Conference, May 26-28.
- The ADAP Coordinator position is open until May 23.
- Rob and Colleen attended NASTAD in Detroit and insurance billing was discussed.

IX. Prevention Update

Chryssie Jones, MDH

- Chryssie attended to provide the Prevention Update in Krissie's absence.
- MDH received 9 proposals for their PrEP RFP and will decide which agencies will get funding to expand PrEP in MN.
- Looking at capacity building for funded and not funded agencies; if you have a need for capacity building for your organization contact MDH.
- Rapid rapid point of care testing; two different manufacturers can confirm a positive test and the results will be available much faster.
- Rob attended Youth + Tech in San Francisco; it was a two day social media 101 training.
- The council will prioritize target populations next year.

X. Council Staff Update

Patrick Tschida, Carissa Weisdorf, Hennepin County

- Patrick reminded attendees to sign a consent form to be videotaped today for the award ceremony.
- Patrick will debrief with the co-chairs after each council and committee meeting so we can ensure we continue to improve and hear from everyone around the table. What went well/what could be improved.
- The June, July and August Council meetings are important to attend.

- Carissa said council business cards are available on the back table.
- Carissa revised the meeting calendar and updated copies are available today. One change is the August 9 Council meeting is an all-day retreat from 9 am-3 pm. Dates and locations for weekly meetings are included in Carissa's voicemail message.
- We will provide lunch today if you can stay to discuss the 2015 HIV/AIDS Surveillance Data Presentation.

XI. Prioritization & Allocations Process Review

Patrick Tschida

- Patrick presented a PowerPoint for the Prioritization & Allocations Process.
- If you need assistance with the prioritization process please contact staff to set up an appointment.
- Karin asked how the process will impact prevention; it doesn't feel like we've incorporated prevention.
 - Rob said he's been talking to NASTAD to provide TA for the population prioritization process. We need to complete our HRSA requirements or people won't get their care and services.
 - Include prevention and MDH funding into the process; it feels unchanged.
 - Patrick said PAC and DEC are meeting together and creating objectives and activities in the comprehensive plan related to prevention.
 - Thuan said perhaps prevention can adjust their timeline for prioritization setting to improve coordination especially as prevention moves towards prevention with positives.
 - Alejandro says it's helpful to get the grantee updates in advance and suggests MDH and DHS provide their updates in advance.
 - Rob said their financial information tends to be static.
 - Patrick said it won't be perfect the first time but we are integrated now. Karin said integrating care and prevention has been occurring with providers for decades.

XII. Committee Reports (provided in written form)

A. Executive

B. Community Voices (CVC)

- The next meeting is Tuesday, May 17.
- Terral asked members to advertise the meeting so we can increase attendance.
- Medical Transportation standards of care will be discussed at the meeting. It was suggested that we include in the email announcement that transportation costs to attend the meeting will be reimbursed.
- Providers already had a meeting to give input. The meeting for consumers is after the CVC meeting and held on the same day to make it convenient. The process approved by PAC is only unaligned consumers should attend this meeting. Karin said the third bullet point should be changed because it is incorrect. The change: it is after the CVC meeting and only for unaligned consumers.
- Rob suggested we think of alternative technological ways to get input. Rick said CVC is looking into getting additional voices at CVC.
- Rick asked for Hennepin County's social media guidelines.
- Alejandro said the co-chairs should review the research done by Julie Wilbert. Rick would like this.

C. Membership & Training

- Committee members and staff interviewed a potential candidate last Thursday and will discuss the candidate at their next meeting; will forward her nomination to the council to vote.

D. Needs Assessment & Evaluation (NA&E)

BREAK

E. Planning & Allocations

Action Item: Substance Abuse Standards of Care. **MOTION:** Tim motioned to approve the *Substance Abuse Standards of Care* which were approved by PAC and Executive as part of the standards development process. **DISCUSSION:**

- Thuan said the HRSA definitions are non-negotiable and this version of the standards doesn't include two additional HRSA definitions that were recently sent out (it was part of the policy update last month): prescribed acupuncture services and syringe access services. It would go under HRSA's definition on page one. He said this modification expands on the standards and doesn't restrict it.
- Thuan suggests removing the MHSPC definition, it is redundant to the HRSA definition and MHSPC doesn't exist anymore; recommends we adopt the HRSA definition.
- Karin asked if syringe access services are only allowable for HIV positive people; Thuan replied yes because Ryan White services can only be provided to HIV positive people. Funding can't be used to pay for syringes but any expenses related to syringe exchange.
 - Matt said this is a change for HRSA to allow for syringe access and would like to see this group dig into it more. Need additional info about this; Thuan said he or the co-chairs can talk to our HRSA project officer.
 - Marvin asked if we want to table this until we get additional clarification on this. Thuan is moving to amend this version of the standard. Terral said we need additional information; we can adopt now and get more info later. David said let's accept HRSA's policy now.
 - Alejandro said Al proposed a change to the standards and that is why we tabled it.
- **MOTION:** Thuan motioned to amend the HRSA definition to include: *Acupuncture therapy may be allowable under this service category only when, as part of a substance use disorder treatment program funded under the RWHAP, it is included in a documented plan and Syringe access services are allowable, to the extent that they comport with current appropriations law and applicable HHS guidance, including HRSA- or HAB-specific guidance.* Bielca seconded. No further discussion. Rob Y abstained due to facilitation and Karin and Matt abstained due to a COI. The council voted **22-0**. Motion carries.
- Matt is unclear of the conflict of interest policy in regard to voting.
- **MOTION:** Take out MHSPC definition and only include the HRSA definition. No discussion. Rob Y abstained due to facilitation and Karin and Matt abstained due to a COI. The council voted **22-0**. Motion carries.
- Al said he would like to hear more from providers if *Standard 7: Provider Qualification* needs to change.
 - Thuan clarified the standards read one of the following qualifications needs to be met.
 - The recently approved standards for Health Education/Risk Reduction (HE/RR) included these same qualifications.
 - Matt said as a provider this is restrictive but providers had an opportunity to comment during the provider input meeting and he said providers can work with Hennepin County. He suggested in the future let's think 5-10 years down the line and build in flexibility if possible.
 - Roger is now facilitating and Rob Y said there are members of the community who don't have a degree but have gone through it.
 - Thuan said an edit to make to the standards is HIV experience.
 - Karin said this service requires a LADC but three years of experience in HIV can be difficult; she doesn't want it to be so restrictive that providers can't fill the position and it impacts consumers. Matt and Karin want flexibility written into the standards.
 - Thuan said after the council approves the standards the administrators work with providers for capacity building. Thuan said we think this is a high impact service and at minimum the qualifications should match HE/RR which was approved.
 - Terral thinks the education requirements is too much. Life experience can match educational experience.

- Rick suggested continuing education specific to HIV may be more relevant than x number of years of experience. There is outdated info on HIV out there.
- Patrick provided a point of clarification: grey areas are HRSA requirements and are non-negotiable. LADC is a state requirement for chemical counseling and TA will be provided. We don't want the standard to be what is currently offered but what we want the standard to be.
- Roger said we are discussing but no one has amended the motion and we need to keep moving with this.
- Marvin said providers and consumers gave input and PAC and Executive approved.
- Matt said clarification on what relevant experience is would be helpful. Thuan said the standard should read relevant HIV experience.
- **MOTION:** Al motioned to change standard 7.2 to 2 years and Rick seconded. DISCUSSION: A provider only needs to meet one of these requirements. Roger said agencies need flexibility and he likes how it is written. Roger called the question. Rob Y abstained due to facilitation and Karin, Thuan, Matt and Alejandro abstained. The council voted **16-1**. Motion carries.
- **MOTION:** Tim's original motion to approve the standards as written. DISCUSSION: Bielca recommends people who provide these services also attend our meeting but this can't be written into the standards. Gelli referred to standard 7.3 and said in Minnesota you need 880 hours to become a LADC; Patrick said this is a HRSA standard and is non-negotiable and it is for supervision. Rob Y abstained due to facilitation and Karin, Thuan and Matt abstained. The council voted **14-0**. Motion carries.

Action Item: 2016 Guiding Values for the Prioritization & Allocations Process. **MOTION:** Marvin said prior to the prioritization and allocation process we need to adopt guiding values; PAC and Executive recommend adopting these values. The purple sections are what happens if there is an increase in funding. DISCUSSION: Matt said regarding the 2% increase for staff time and it can be difficult to keep employees without a substantial raise. No further discussion. Rob Y abstained due to facilitation; the vote was unanimous. Motion carries.

F. Disparities Elimination

XIII. Open Forum

None

XIV. Announcements

- Terral said camp is June 6-10 and there are openings for providers to attend the mini health fair.
- Karin said this week is National Nurses Week.
- Alejandro said the Latino workgroups met on Sunday and Monday for strategic planning and asked providers to tell their Latino clients about the workgroups. Thuan said the previous comprehensive plan included activities related to these workgroups and there are three active workgroups led by the participants. The workgroups are for anyone, providers and unaligned consumers and Thuan will send the info to the council.
- Larry may need to miss a future meeting due to family commitments.

XV. 2015 HIV/AIDS Surveillance Data Presentation

Cheryl Barber, MDH

The council received a presentation on the 2015 HIV/AIDS Surveillance Data.

XVI. Adjourn

Marvin motioned to adjourn the meeting and Florence seconded. The meeting adjourned at 12:05 pm.

XVII. Lunch & HIV Epidemiology Questions & Discussion

Meeting Summary:

- The Substance Abuse Standards of Care were approved with a change to the definition and a change to standard 7.2 to from *3 years* to *2 years*.
- The 2016 Guiding Values for the Prioritization & Allocations Process were approved.
- The council received a presentation on the 2015 HIV/AIDS Surveillance Data.

Documents Distributed Before the Meeting:

- Proposed Agenda
- April 12 Meeting Minutes
- Committee Report Summaries
- **Action Item:** Substance Abuse Standards of Care
- Substance Abuse Standards of Care
- **Action Item:** 2016 Guiding Values for Prioritization & Allocation Process
- 2016 Guiding Values for Prioritization & Allocation Process

Documents Distributed At the Meeting:

- Part A Update
- Updated 2016 Meeting Calendar
- MCHACP Business Cards

cw/PAT