Mission

The mission of the Minnesota Council for HIV/AIDS Care & Prevention is to:

Establish priorities for the allocation of Part A and Part B funds of the federal Ryan White HIV/AIDS Treatment Extension Act of 2009 within the thirteen county Transitional Grant Area (TGA) and the state of Minnesota. In other words, the council is responsible for deciding which services are most needed for people with HIV and how much funding will be used for each of those service areas.

Prioritize high risk target populations for HIV prevention interventions funded through Minnesota’s CDC HIV prevention grant and State appropriation.

Develop and prepare an integrated prevention and care plan for the Minneapolis/St. Paul thirteen county TGA and the state of Minnesota. This plan defines short and long term goals for organizing and delivering care and prevention services.

Assure community participation in the gathering of information related to needs, service priorities and high risk target populations for prevention.

Assess the efficiency of the system the grant recipients use to distribute funds. This includes evaluating how quickly contracts with service providers aresigned, how quickly the recipients pays the providers, whether the funds were used for services identified as priorities by the council and whether all the funds were spent.

Participate in developing a Statewide Coordinated Statement of Need (SCSN). Representatives of the council must participate with representatives of all the other Parts of the legislation in developing a Coordinated Statement of Need. The purpose of the SCSN is to encourage all of the Ryan White programs to work together and to avoid the duplication of services.

Commit to address disparities linked to social determinants of health like poverty, unequal access to health care, lack of education, stigma, and racism to achieve parity.

 Vision

The vision of the council is that people living with, at risk for HIV or affected by HIV, with an emphasis on those from disparately impacted communities, receive the education and help they need to link to care and remain in care and virally suppressed; stopping the spread of the virus and ultimately eradicating HIV. This will be addressed through:

* Developing and evaluating an effective system for assessing current and emerging needs;
* Reviewing existing council related systems and ensuring that measures for accountability are included;
* Establishing funding priorities;
* Building the capacity of all health and social service providers;
* Responding comprehensively through the coordination of prevention, HIV health and support services and housing;
* Advocating when appropriate regarding HIV related issues in the state of Minnesota and the TGA.

Values

In carrying out the work of the council, its members strive to:

* Be client and user (consumer) centered
* Use accessible language to enhance mutual understanding
* Believe in each other’s reality, experience, perspective and expertise
* Commit to create mutual understanding
* Hold each other mutually accountable to interact in accordance with these values
* Take responsibility for own triggers and commit to resolve misunderstandings
* Make sure members have knowledge, information, and skills so everyone can equally participate
* Hold the needs of the whole system foremost, rather than one’s own self-interest or just the needs of an organization/agency/group
* Come prepared to meetings and commit to address questions to increase understanding before attending meetings