

MN HIV Services Planning Council Meeting
September 8, 2015
9 am-12 pm
Health Services Building, Room L15
525 Portland Ave. S., Minneapolis
Minutes

Council Members Present:	
Alejandro Aguilera	Joe Larson
Andy Ansell (phone)	Valentine Momo
Loyal Brooks	Florence Kulubya-Nabeta
Jared Erdmann	Lesa Nelson (Council Co-Chair)
Krissie Guerard	Rob Pioli
Bielca Guevara	Matt Toburen
Keith Henry, M.D.	Gwen Velez
Marvin Innes	Aaron Wittnebel
Hank Jensen (Council Co-Chair)	Monica Yugu
Council Members Absent:	
Scott Bilodeau	Midnight
Winston Cavert, M.D.	Asneth Omare
Daphne Cooper	John Salisbury
Terral Ewing	Craig Schmidt
Al Fredrickson	
Community Members/Guests/Consultants:	
Bryan Bick, DHS	Jim Mara, Hennepin County
Emily Dale, Hennepin County	Mary McCarthy, RAAN
Amy Dusek, Hennepin County	Julie Hanson-Perez, MDH
Katherine Finlayson, DHS	Bonnie Rossow, DHS
Kathryn Hansen, Hennepin County	Tom Ruter, DHS
Rob Kacheroski, DHS	Karin Sabey, Positive Care Center
Part A Representatives:	Part B Representatives:
Jonathan Hanft, Hennepin County	Nick Metcalf, DHS
Planning Council Staff:	
Carissa Weisdorf, Administrative Specialist	Krista Larsen, (minutes)

Quorum Present? **Yes**

I. Call to Order and Introduction

Hank called the meeting to order at 9:00 am and introductions were made.

II. Lighting of the Candle – Terral Ewing

Connie, the founder of Camp Benedict, passed away two weeks ago due to complications from AIDS, the candle is lit in her honor.

III. Welcome and Introductions

IV. Consideration and Approval of Proposed Agenda & July meeting minutes

The minutes were approved unanimously. **MOTION:** Aaron motioned to review the Part A, B and staff report in written form so we can discuss the **Ryan White Part B proposal**. Loyal seconded. All in favor.

V. Co-Chair Update

- Lesa is going to Washington, DC for the US Conference on AIDS (USCA) with Marvin.

- Hank - None

VI. Part A Report (Provided in written format)

Jonathan Hanft, Hennepin County

- First Quarter Expenditure Report will be sent out later.

VII. Part B Report (Provided in written format)

Nick Metcalf, DHS

VIII. Prevention Update

Krissie Guerard, MDH and Julie Hanson-Perez, MDH

- Proposal that went out a few weeks ago want people to voice concerns and thoughts to take back for further discussion.
- Hank said in the interest of time please keep questions short and to the point so everyone gets a chance to speak.
- Aaron asked for working documents to be disseminated prior to the proposal.
- Alejandro asked what is the rationale and the alternatives to this proposal, more cost effective to move MDH prevention to DHS unit. Why dissolve effective fiscally sound program? Doesn't see a vision, it appears to be top down. Krissie Guerard said it is CDC funds, DHS is HRSA. There needs to be a collaboration between STD/TB/HIV. Talking about prevention includes STD, TB, Hepatitis and that is why those diseases are put together at state level.
- Aaron: eliminate STI section of MDH and give it to DHS. We don't need the surveillance data. Once someone is positive they don't need MDH, they need connection to care. MDH is a data collector and that is their function, monitoring and surveillance, doesn't believe they have the capacity to offer services. MDH doesn't have funding from state for prevention, concern that when/if Ryan White phases out our history shows DHS asking for funding for these services. MDH doesn't submit requests for prevention. Worries if these services are in their hand at MDH. Krissie Guerard: MDH does receive state resources for prevention and money goes to community through RFP. MN is one of two states where care and prevention is not together and where it is proven effective.
- Aaron stated §256 from 1991, legislator ordered to DHS for service delivery. Is there legislation commissioner is pushing for to reassign to MDH. Kathrine said not at this time but they will seek it if it's needed. Ryan White Part B grants management, part of larger care and prevention strategy statewide. Not at that point yet, bringing it to the community first.
- Marvin asked what was the impetus for this and why consumers were not involved.
- Response: There were community members that went to legislators.
- Aaron: None of the committee members he spoke with on Health and Human Services knew.
- Response: it may not have come from Health and Human Services committee but other legislators who had heard from consumers.
- Hank: Were these community members, people living with HIV?
- Response: It was a combination of both PLWH and others.
- Kathrine said community members went to the legislature and asked for them to consider the proposal. The department met to discuss how this could work. Now it is brought to the community. Aaron said members of HHS Committee-finance and legislature had never heard of the proposal and would not suggest it. Kathrine said the legislatures heard from constituents not committee legislators. Proposal includes talking to legislators and commissioners. Perhaps at that time they hadn't heard. Hank asked for clarification from community members, Katherine said people living with HIV doesn't know names.
- Is there anyone from the DHS team who wishes to speak?
- Aaron: I believe they have been told not to comment.
- Katherine: Clarification: Staff was told to express their feelings and ideas but not while acting as DHS Representatives. Staff has been involved since early February.

- Aaron: Does not agree that staff has been included nor has legislature been involved.
 - Rob: Everything has been running smoothly
 - The split is 3 ways MDH Contract managers, training, and quality management
 - Rob and policy coordinator absorbed into HH eligibility and insurance
 - ADAP admin assistants will report to [Jerry Nord] who has no involvement currently in HIV/AIDS
 - MDH and their success rate so far. MDH is currently involved in prevention and the prevention has not gone down. All of Ryan White has since its beginning has included the voice of people living with HIV. As far as I am aware there are no people with HIV involved.
 - Katherine: epidemic not changing: it is true, no change. Perhaps then it is the right time for a change. What would be good for the community?
 - Dr. Henry: MN should perform well. Minnesota has the 2nd - 3rd highest insurance rate, low case rate and great hospitals, but we are just performing at a mediocre level. Simply shifting administrative services will not correct the problems. We need much more vibrant leadership to pull this off, business as usual will not cut it. No vision or leadership is addressed in the proposal.
 - Alejandro – I have been on the DHS advisory committee since February, and this [August 23] is the first I have heard about this. No one accessed us or the medical community for assistance to be innovative. Why leave HH there if prevention is care and care is prevention. There won't be a separate HIV unit. Desist in this proposal and go back to the drawing board. **MOTION:** Move for a no confidence vote in this proposal.
 - Aaron – 2nd the motion of no confidence in the Ehlinger-Jesson proposal on HIV/AIDS prevention.
 - Hank: we have never taken this kind of vote
 - Aaron as the advisory board for Part B – We are well with-in our rights to make such a motion.
 - Withdrawn
 - **MOTION:** Aaron makes another motion to accept committee reports except for Planning and Priorities as written and people can follow up with those afterwards in order to extend time for discussion about this proposal.
 - Hank: There is a motion to amend the agenda. Is there a second?
 - Alejandro second.
 - Motion passes unanimously.
 - Matt: from a higher level, if this is done right it could be successful. We have had some significant level of DHS failures, such as the rebate monies. Something has to happen and change.
 - Aaron: What really needs to happen to invigorate prevention is to reintroduce comprehensive sex education. There is a need for change, but is this the only proposal on the table? Is there feedback for other proposals?
 - Hank: finishing questions due to time.
 - Katherine and Krissie are available to come back for further discussion once the questions have been submitted
- Aaron: asked that discussion continue during open forum after Amy's integrated planning presentation.

IX. Committee Reports (Provided in written form)

A. Community Voice

- Accepted as written in earlier motion

Executive

- Accepted as written in earlier motion

B. Needs Assessment & Evaluation

- Accepted as written in earlier motion

C. Operations

- Accepted as written in earlier motion

D. Planning & Priorities

- Lesa: regarding **Action Item: Home and Community-Based Health Services Standards of Care**. The Council voted **16-0**, the co-chair abstained due to facilitation.

BREAK

X. Reintroductions

XI. Quality Management Update

Emily Dale

- PowerPoint Presentation

XII. Integrated Planning Update

Amy Dusek and Andy Ansell

- PowerPoint Presentation

XIII. Staff Report

Carissa Weisdorf, Hennepin County

- Most recent draft of the bylaws is on the website
- There will be a few adjustments but you will have two weeks to review.
- Feedback on bylaws due by September 30th
- The committees will be brought up during the interview process
Aaron: regarding the faith based member, as we don't capture the data of affiliation and their views may not align with the broader base.

XIV. Co-Chair Update

- Lesa – Hank is leaving. Presented him with a mug and certificate.
- Hank – Thanks for the past 7 ½ years. Please continue to bring your passion to the table. It is really all about the community. Stay focused on why we are here.

XV. Open Forum

- **MOTION:** Aaron: reintroduce a motion. We move to hold a vote of no confidence on the Ehlinger/Jesson proposal.
- Marvin: perhaps we should change the wording to say we reject it completely
- Aaron: Point of order. According to the Robert's Rules of Order the mover of the motion and the seconder of the motion are the ones allowed to speak first and second.
- Alejandro: I still would like to reintroduce our motion. I would like them to stop looking at this motion and let them know we want them to come up with a better proposal.
- Aaron: The reason why, after discussing this with legislators, that if you want to be a part of the proposal the current proposal needs to be stopped. They can always bring this current proposal back to the table, but this makes a firm statement that says we do not want this proposal. Please vote yes on the vote of no confidence send a message that we need to restart and look at other ideas to work on prevention, and perhaps bring the Department of Education to the table on these discussions.
- Matt: Disagree with the motion. It's a valuable conversation, and this vote removes us from the conversation.

- Jonathan: Hennepin County does support this proposal. We need to take a stronger public health approach to HIV. There is nothing in the proposal that says the quality of service changing, it's premature to have this vote.
- Lesa: call for vote in the no confidence in the proposal as it is written on August 28th, 2015.
 - Aye 8
 - Nay 3
 - Abstain 3
 - Motion passed

XVI. Announcements from the Floor

- Expand listening sessions across the state
- 15 slots open on the new board about disparities from the Multicultural Department of Human Services on the Secretary of State's website
- Joe: Turned in my resignation as Executive Director of the Aliveness project. This will be my last Council meeting.

XVII. Adjourn

- Marvin motioned to adjourn the meeting at 12:05 pm.
- Seconded.
- Adjourned.

Documents Distributed Before the Meeting:

- Proposed Agenda
- August 11 meeting minutes
- Part A update
- Part B update
- Committee Report Summaries
- Ryan White Part B proposal and cover letter
- **Action Item:** Standards of Care Home Based Care
- Home and Community Based Health Services Standards

Documents Distributed At the Meeting:

- Question cards for Katherine and Krissie regarding MDH/MDHS proposal
- Half-Sheet: Questions/Comments for Amy Dusek

kl/cw