



LOS ANGELES COUNTY COMMISSION ON HIV

3530 Wilshire Boulevard, Suite 1140 • Los Angeles, CA 90010 • TEL (213) 738-2816 • FAX (213) 637-4748
<http://hiv.lacounty.gov>



STANDARDS AND BEST PRACTICES (SBP) COMMITTEE MEETING MINUTES

June 1, 2017

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	COMM STAFF/ CONSULTANTS
Grissel Granados, MSW, <i>Co-Chair</i>	Joseph Cadden, MD, <i>Co-Chair</i>	Jason Brown	Cheryl Barrit, MPIA
Wendy Garland, MPH	Mathew Emons, MD, MBA	Kevin Donnelly	Jane Nachazel
Bradley Land	Terry Smith, MPA	Dahlia Ferlito	Doris Reed
Angélica Palmeros, MSW		Terry Goddard, MA	
Thomas Puckett, Jr.		AJ King, MPH	
Ace Robinson, MPH		Katja Nelson	DHSP STAFF
Octavio Vallejo, MD, MPH		Rebecca Ronquillo	None

CONTENTS OF COMMITTEE PACKET *(Packets are posted on the Commission on HIV website, upon approval of the minutes.)*

- 1) **Agenda:** Standards and Best Practices (SBP) Committee Meeting Agenda, 6/1/2017
- 2) **Agenda:** Standards and Best Practices (SBP) Committee Meeting Agenda, 5/4/2017
- 3) **Minutes:** Standards and Best Practices (SBP) Committee Meeting Minutes, 5/4/2017
- 4) **Minutes:** Standards and Best Practices (SBP) Committee Meeting Minutes, 4/6/2017
- 5) **Table:** County of Los Angeles, Department of Public Health, Division of HIV and STD Programs, Solicitations Summary, 4/2017
- 6) **Standards of Care:** Los Angeles County Commission on HIV, HIV Prevention Service Standards, Version 13.0, *Draft*, 6/1/2017
- 7) **Standards of Care:** Los Angeles County Commission on HIV, Standards of Care, Residential Care Services-Transitional Residential Care Facility (TRCF), (Proposed Updates Version 1, 5.18.17), 6/1/2017
- 8) **Standards of Care:** Los Angeles County Commission on HIV, Standards of Care, Residential Care Services-Residential Care Facility for the Chronically Ill, (Proposed Updates Version 1, 5.18.17), 6/1/2017
- 9) **Standards of Care:** Los Angeles County Commission on HIV, Standards of Care, Housing Services (hotel/motel and meal vouchers, emergency shelter programs, transitional housing programs, permanent supportive housing programs), (Proposed Updates Version 1, 5.18.17), 6/1/2017

1. **CALL TO ORDER:** Ms. Granados called the meeting to order at 10:05 am.
2. **APPROVAL OF AGENDA:**
MOTION #1: Approve the 5/4/2017 and 6/1/2017 Agenda Orders, as presented (***Passed by Consensus***).
3. **APPROVAL OF MEETING MINUTES:**
Motion 2: Approve the 4/6/2017 and 5/4/2017 Standards and Best Practices (SBP) Committee meeting minutes, as presented (***Passed by Consensus***).
4. **PUBLIC COMMENT, (Non-Agendized or Follow-Up):** There were no comments.
5. **COMMITTEE COMMENT, (Non-Agendized or Follow-Up):**
 - Ms. Garland attended a consortium in May hosted by the California HIV/AIDS Research Program (CHRP). HIV grantees presented on topics across the HIV Treatment Cascade. DHSP presented on Medical Care Coordination (MCC).

- Ms. Garland stated that CHRP Director George Lamp looked forward to reviewing the paper DHSP is developing on MCC evaluation findings. He expressed interest in providing support to jurisdictions across California in replicating the MCC model.

6. EXECUTIVE DIRECTOR'S REPORT:

- Ms. Barrit reported Michael Green, PhD, MHSA presented the Solicitations Summary table in the packet at the 5/16/2017 Planning, Priorities and Allocations (PP&A) Committee meeting. The Summary assists in aligning SBP review and update of Standards of Care (SOCs) with DHSP solicitation development.
- She recommended a focus on review of service categories in the released, in development and planning stages. The majority of those in the planning stage are already well-aligned with current SBP work on residential and prevention services. Substance Use was updated last year, but could also be reviewed again for any additional updates.
- Ms. Barrit and Commission Co-Chairs Land and Ricky Rosales attended the annual Quality and Productivity Commission conference. This year's topic centered on the changing demographics of Los Angeles County and adapting to those changes especially regarding the digital media age and embracing change in departmental programming.
- The conference also suggested a possible topic for the Commission's Annual Meeting: Understanding HIV, STDs and Sexual Health from an Intergenerational Perspective. Some potential speakers have been identified.
- Los Angeles County and the City of Los Angeles are also working with Measure of America, a New York City organization, on a quality of life portrait of Los Angeles County. It will use its Sonoma County model ranking indicators by census tract. Data can inform upstream prevention policy decisions and could be of value to SBP and Planning, Priorities and Allocations (PP&A).

7. PREVENTION STANDARDS UPDATE:

- Ms. Barrit noted Version 13 incorporates feedback from Expert Review Panels (ERPs), DHSP and others. Some comments have not yet been resolved, but all feedback is documented and will inform the formal, 30-day public comment period.
- Mr. King said the SOC was designed to speak to all populations, but highlight acknowledgement of populations with the highest HIV incidence rates, based on the most recent surveillance data, as identified in the 2017-2021 Comprehensive HIV Plan (CHP). Feedback elevated additional highly impacted populations that may not be highlighted in data for a variety of reasons, e.g., due to methodology or because the population is emerging. Those most identified were also noted.
- Community and ERP input also stressed the importance of incorporating Universal Standards to define that HIV prevention services must be: holistic, responsive to the needs and strengths of populations served, designed to address or mitigate Social Determinants of Health (SDH), strength-based, sex-positive, and culturally responsive.
- The Core Prevention Service Categories are: Assessment, HIV/STD Testing and Retesting, Linkage to Biomedical Prevention Services, Referral and Linkage to Non-Biomedical Prevention Services, and Retention and Adherence to Prevention Services. Prevention can occur across a wide range of activities so these categories address the process for encountering HIV-negative, especially high-risk HIV-negative, individuals rather than focusing on services in a particular area such as housing.
- Linkage to Biomedical Prevention Services is addressed separately from Referral and Linkage to Non-Biomedical Prevention Services. The emphasis in Los Angeles County on PEP and PrEP should ensure that any agency can be held accountable to link a client with, at the least, a PrEP Navigator. Documenting linkage to Non-Biomedical Prevention Services, however, is more problematic because clients may choose not to go. Instead, agencies are held accountable for active referral.
- Based on feedback, the emphasis on strength-based encounters was also strengthened and sample questions provided.
- Mr. King noted general agreement on addressing issues such as trauma when possible, but agencies should not assess topics unless they can offer resources, referrals, and/or services.
- He acknowledged it is challenging to operationalize responses to macro issues such as racism at the clinic level. The holistic health and wellness approach to services is meant to help support vulnerable populations. Several members of the body recommended incorporating anti-racism training requirements. Trainings are available, but often Chief Executive Officers and Executive Directors in charge of organizations' culture do not attend. A minimum of four hours could be required.
- AIDS United requires grant applicant boards and senior leadership staff to reflect a certain level of diversity to be eligible.
- Mr. King felt addressing institutional racism required a strong and deep commitment to a process. Two- to eight-hour trainings can be counterproductive by opening up feelings and wounds that are then not addressed.
- Ms. Barrit noted SOC development discussions often raise issues that do not quite pertain to the SOC, cannot be measured well, or are difficult to operationalize. Often policy statements or recommendations are used to address such issues.

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- She was capturing thoughts to inform a strong statement that could incorporate some of the tools shared. She believed in transformation of culture, hearts and minds, but the soil must be fertile. The policy statement and tools can be monitored to evaluate organizational readiness and begin to determine what is measurable, enforceable, and sustainable.
- Mr. Brown noted the Los Angeles County Health Agency Integration Advisory Board (IAB) has eight priorities. One of those priorities is cultural and linguistic competency so that could serve as a starting point.
- Ms. Barrit noted DHSP has not yet heard from the Centers of Disease Control and Prevention (CDC) regarding its Flagship Prevention Funding Opportunity Announcement (FOA). This SOC allows for flexibility to respond as needed.
- ➔ Additional feedback will be incorporated and the SOC will be presented at the 6/8/2017 Commission meeting. It will also be opened for public comment at that time. Comments will be incorporated and the revised iteration presented subsequent SBP and COH meetings.

8. HOUSING STANDARDS:

- Ms. Barrit noted feedback from the Joint SBP/PP&A Committees meeting, the Housing Task Force, DHSP and Lois Starr, consultant. For ease of review, staff separated the various services in the current Housing SOC and set aside the graphics. The Health Resources and Services Administration (HRSA) Housing Services Definitions Policy Clarification Notice (PCN) 16-02 is now included at the beginning of each SOC to provide a framework for service guidelines.
- DHSP currently has active contracts for Transitional Residential Care Facility (TRCF) and Residential Care Facility for the Chronically Ill (RCFCI) services. The current SOC, however, were completed some time ago and needed to be updated to align with current contract language and recommendations from the feedback process. Redundancies were also removed.
- The new TRCF, RCFCI and Housing Services Housing Program Objectives definition was mainly drawn from the Joint SBP/PP&A meeting and aligned with the most recent Los Angeles County Community Development Commission Notice of Funding Announcement (NOFA). Some components listed as optional (page 9) in the prior TRCF SOC were recommended as minimum services in feedback and incorporated on page 2. Fee For Service (FFS) costs were not reviewed for those items.
- Feedback prompted the addition of SOC Service Component bullets for: Representative payee to allow someone to act on the behalf of an incapacitated client; and Linkage to Medical Care Coordination services.
- SOC eligibility requirements were compared with current contracts. The TRCF Global Assessment of Functioning score has been struck as the contract only uses a Karnofsky score of 70 or higher. Income at or below 500% Federal Poverty Level (FPL), \$60,300 for one person, is also in the current contracts, increased from a prior 300% FPL, and used for the three SOC. Housing and Urban Development (HUD) uses the Adjusted Median Income, but FPL is the norm for Ryan White.
- A core change for all SOC is from the Ryan White eligibility standard of "homeless" to "homeless or at risk of becoming homeless." Concerns raised about the expansion mainly pertain to striking the balance to ensure Ryan White does not become a homeless prevention rather than a care and treatment program. At the same time, the most recent Los Angeles Homeless Services Authority (LAHSA) survey reflects a 67% increase year over year in homeless PLWH so the need is critical.
- The "Housing Services - TRCF" section, page 7, and its equivalent "Residential Care Services" section in the RCFCI SOC, page 14, were both renamed "Basic Services," consistent with California Regulation 87860 for improved clarity.
- There was some question whether all basic services listed in the prior TRCF SOC are enacted, e.g., overnight supervision. Project New Hope was a current provider so could offer feedback. RCFCI facilities are licensed, but TRCF facilities are not.
- New sections of "Required Training Topics for Staff" were added to all three SOC based on feedback.
- The body extensively discussed the kind, frequency and thoroughness of site inspections to assure quality. RCFCI sites are licensed and, as such, have more required inspections than TRCF sites, but details were not available at the time.
- The Housing Services SOC is the largest of the SOC encompassing a wide range of services. A key change is the addition of housing service caps, page 3, at 30% of the Fair Market Rent (FMR) for the bedroom type per month. The Final 2017 FMRs for all bedroom sizes in the Los Angeles-Long Beach-Glendale, CA HUD FMR area are included.
- Time limits were also added for: emergency shelter, up to 90 days; transitional housing, up to 6 months; and permanent supportive housing, up to the 24 month HRSA standard. Beyond 24 months, other funding must be engaged.
- Mr. Goddard noted that rental assistance is a more flexible program which can be extended indefinitely. It is also easier to engage landlords with a client receiving open-ended rental assistance that can bridge to Section 8 rather than funding that ends in 24 months. Ms. Barrit noted language is woven throughout the SOC to underline planning for the next service step.
- There was general agreement that flexibility was important, e.g., one client may experience a gap in work due to a hospitalization and may only require short-term rental assistance. Needs vary for each person and may vary over time.
- Service components were copied from the TRCF and RCFCI SOC. Not all may be appropriate for all the Housing services.

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- Ms. Garland said a logic model for this Housing Services SOC was especially important because it was complex with multiple activities and the service is a priority. The logic model can help in monitoring the service.
- ➡ Page 2, TRCF Program Goals, combine bullets 2 and 6.
- ➡ Add description of "balanced meals" under Basic Services.
- ➡ Add occupational therapy to assessment topics.
- ➡ Discuss pertinent Fee For Service (FFS) costs in re-aligning optional TRCF services (page 9) to minimum services (page 2).
- ➡ Add Red Cross CPR certification to the three SOC "Required Training Topics for Staff" sections.
- ➡ Ms. Barrit will review Housing Services General Eligibility Requirements, page 2, bullets 4 (HUD) and 6 (HRSA) to identify how best to align the HUD and HRSA guidelines.
- ➡ Ms. Barrit will review the HOPWA Housing Quality Standards and the LAHSA Guidelines for Crisis Beds for consistency.
- ➡ Ms. Ronquillo will forward the Request For Proposals (RFP) that alludes to the regional offices to Ms. Barrit.
- ➡ Ms. Barrit will review the HRSA and Target Center websites as well as Measure H for projects pertaining to job training.
- ➡ Ms. Barrit will email the body MSWord copies of the Housing SOCs for comments as well as a copy of the NOFA. Comments should be returned to MS. Barrit by 6/26/2017 for inclusion in the iteration for review at the July SBP meeting.
- ➡ The housing tour will be 6/21/2017, at 10:00 am. There is a cap of 15 people. Two groups may be coordinated depending on the number of those interested. Mr. Puckett was added to the list.

9. NEXT STEPS: There were no additional items.

10. ANNOUNCEMENTS: There were no announcements.

11. ADJOURNMENT: The meeting adjourned at 12:00 noon.