



LOS ANGELES COUNTY
COMMISSION ON HIV



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HIVCOMM@LACHIV.ORG • <http://hiv.lacounty.gov> ORG • VIRTUAL WEBEX MEETING

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**PLANNING, PRIORITIES & ALLOCATIONS (PP&A) COMMITTEE
MEETING MINUTES**

January 19, 2021



PP&A MEMBERS PRESENT	PP&A MEMBERS PRESENT (cont.)	PUBLIC	COMM STAFF/CONSULTANTS
Al Ballesteros, MBA, <i>Acting Co-Chair</i>	Derek Murray	Alasdair Burton	Cheryl Barrit, MPIA
	Maribel Ulloa	Sean Boileau	Carolyn Echols-Watson, MPA
Raquel Cataldo, <i>Co-Chair</i>		Stephanie Chen	Jane Nachazel
Everardo Alvizo	PP&A MEMBERS ABSENT	Pamela Coffey	Sonja Wright, MS, Lac
Frankie Darling Palacios	Luckie Alexander	Luis Felix	
Kevin Donnelly	Damontae Hack	Lindsey Horvath	DHSP/DPH STAFF
Felipe Gonzalez	Diamante Johnson	Lien Kho	Pamela Ogata, MPH
Joseph Green	Kayla Walker-Heltzel	Katja Nelson, MPP	Julie Tolentino, MPH
Michael Green, PhD, MHSA	Miguel Martinez, MPH, MSW	Rangell Oruga, MPH	Paulina Zamudio
Karl Halfman, MS	LaShonda Spencer, MD	Barbara Roberts	
William King, MD, JD	Guadalupe Velasquez	Ellen Sanchez, MEd	
Anthony Mills, MD		Lello Tesema, MD	

*Some participants may not have been captured electronically. Attendance can be corrected by emailing the Commission.

CONTENTS OF COMMITTEE PACKET

- 1) **Cover Page:** Planning, Priorities & Allocations Committee Virtual Meeting, 1/19/2021
- 2) **Agenda:** Planning, Priorities & Allocations Committee Meeting Agenda, 1/19/2021
- 3) **Minutes:** Planning, Priorities & Allocations (PP&A) Committee Meeting Minutes, 12/15/2020
- 4) **PowerPoint:** Los Angeles County's Methamphetamine Task Force, 1/19/2021
- 5) **PowerPoint:** Wellbeing Center Program, 1/19/2021
- 6) **Table:** Ending the HIV Epidemic (EHE) Awards – Financial Resources Inventory, Updated 1/9/2021
- 7) **Table:** Fiscal Year 2021 Ending the HIV Epidemic – Primary Care HIV Prevention Funding Opportunity Number HRSA-21-092, List of Eligible Health Centers in Los Angeles County
- 8) **PowerPoint:** Integrated Prevention and Care Planning Proposed Short-Term Action Steps, 1/14/2021
- 9) **Spreadsheet:** Ryan White Part A, MAI Year 30 and Part B Year 20 (2020) Expenditures by Service Categories, as of 11/5/2020
- 10) **List:** Paradigms/Operating Values
- 11) **PowerPoint:** Los Angeles County Commission on HIV; Planning, Priorities and Allocations (PP&A) Committee; List of Paradigms and Operating Values for Priority and Allocation Setting Process

CALL TO ORDER - INTRODUCTIONS - CONFLICT OF INTEREST: Ms. Cataldo called the meeting to order at 1:00 pm.

I. ADMINISTRATIVE MATTERS

1. APPROVAL OF AGENDA

MOTION 1: Approve the Agenda Order, as presented (*Passed by Consensus*).

2. APPROVAL OF MEETING MINUTES

MOTION 2: Approve the 12/15/2020 Planning, Priorities and Allocations (PP&A) Committee Meeting Minutes, as presented (*Postponed*).

II. PUBLIC COMMENT

3. OPPORTUNITY FOR PUBLIC TO ADDRESS COMMISSION ON ITEMS OF INTEREST WITHIN COMMISSION JURISDICTION: There were no comments.

III. COMMITTEE NEW BUSINESS

4. OPPORTUNITY FOR COMMISSIONERS TO RECOMMEND ITEMS FOR FUTURE AGENDAS, OR ITEMS REQUIRING IMMEDIATE ACTION DUE TO AN EMERGENCY, OR IF NEED FOR ACTION AROSE AFTER POSTING AGENDA: There were no items.

IV. REPORTS

5. SUBSTANCE ABUSE PREVENTION AND CONTROL (SAPC) HIV/STD RELATED PROGRAMS

a. Needle Exchange

- Dr. Tesema opened the SAPC report with a review of the six SAPC-funded Needle Exchange Programs (NEPs) countywide. Capacity varies depending on whether or not they are part of a larger agency with additional services, e.g., with the Tarzana Treatment Center which can provide clinical services.
- All NEPs offer: exchange of dirty needles for clean ones; education for People Who Inject Drugs (PWID) on injection drug use risks like infection with HIV and Hepatitis C; and, other harm reduction supplies and services including treatment for common infections, and overdose prevention and education including distribution of naloxone.
- Some NEPS offer on-site HIV and Hepatitis C testing. If they cannot provide testing, they offer referral to a clinic with which they maintain a partnership. Similarly, some NEPs offer on-site detox, but all sites offer opportunities to connect with STD treatment centers, or to access Medication Assisted Treatment (MAT) for substance use.
- SAPC recently received a state grant to increase Hepatitis C screening and treatment. Consequently, it was working to enhance services at sites that do not yet have testing kits and counselors on-site.
- Historically, these services have been underfunded nor has the Board of Supervisors (Board) always acknowledged their import. There is now, however, almost unanimous support for NEP and recognition of harm reduction as a critical public health intervention. That and rising overdose rates has prompted support for more programs on the ground. The main challenge for local communities now is to connect with local partners and address local fears.
- SAPC looks forward to how to better partner with the Commission to further support services.
- Frankie Darling-Palacios asked how the Commission might assist with the Board. Dr. Tedesma was unaware of anything this moment, but discussion at the state level on a safe consumption site bill could be tracked and supported.
- Frankie Darling-Palacios also asked about COVID-19 vaccination for outreach workers. Dr. Tedesma noted they are part of the eligible healthcare worker group. Overall, access has expanded with five Los Angeles County (LAC) megapods.
- ➡ Dr. Ledesma will forward information on the state safe consumption site bill to staff to inform Commission support.
- ➡ Dr. Ledesma will follow-up on a question regarding jurisdiction to establish a NEP in the City of Long Beach. The City has its own independent health department so may need to address such services directly with the state.
- ➡ Commission staff will collect and forward any additional questions not addressed during the meeting to SAPC.

b. Meth Task Force

- Mr. Oruga presented on the PowerPoint in the packet. This Task Force was in its preliminary phase and just had its first meeting in December. It has established a Treatment Committee which was scheduled to meet later in December and a Prevention Committee that was expected to meet early in February 2021. There was discussion at the first Task Force meeting about initial issues to address, partnerships to develop, and background statistics.
- Evidence is mounting for a countywide response. From 2008-2017, there was a 290% increase in meth-related hospitalizations, a 604% increase in Emergency Department (ED) visits, a 707% increase in numbers and 522% percent increase in deaths. By 2015, meth-involved drug deaths had overtaken all other drug deaths, including from opioids.
- Meth is highly available reflecting 48.5% of seized items per the National Forensic Laboratory Information System (NFLIS) in 2018 and the most commonly identified drug in LAC law enforcement seizures since 2013. Price has decreased from \$81 a gram in 2012 to \$56 in 2017, a continuing trend. It is also involved in 36% of LAC violent crimes.

- The Task Force plans to build on lessons learned from the 2005-2006 Crystal Meth Task Force. The new Prevention Committee will inform the meth awareness campaign that had a soft launch in February 2020. A needs assessment and gaps analysis were planned to inform the second iteration which was expected to launch in June 2021.
- The Treatment Committee will focus on Contingency Management and Cognitive Behavioral Therapy strategies. He cautioned, however, that there are high levels of meth treatment program dropout and relapse.
- ➡ Mr. Oruga will follow-up on the number of meth Intravenous Drug Users (IDU). DPH also has a meth dashboard.

c. Student Wellbeing Centers

- Ms. Sanchez presented on a PowerPoint in the packet on these Centers which have been, and continue to be, opened over the past year and a half. The Department of Public Health (DPH) launched a Positive Youth Development (PYD) Program in 2019 to focus on the most critical issues to youth wellbeing: substance use prevention; mental health; and sexual health. Collaborators are: Planned Parenthood of Greater Los Angeles (PPLA); LAC Department of Mental Health (DMH); Los Angeles Unified School District (LAUSD); and, LAC Office of Education (LACOE).
- The overall goal is to establish 50 Centers countywide. Of those, 38 Centers were opened and a 39th was ready to open prior to COVID-19 school closures. Centers were located at both LAUSD (29) and independent district (10) schools. Selection criteria were: high schools in a high need area based on the rate of free lunches and reduced cost meals; chronic absenteeism; and, the absence of another on-site health facility.
- Centers are staffed by one Senior Health Educator in a supervisory capacity and two Health Educators. All have the equivalent of a Master of Public Health (MPH). SAPC seeks to be, and has been, generally successful in placing staff at schools that reflect an appropriate match for staff demographics and backgrounds.
- Each Senior Health Educator supervises four or five locations and the two Health Educators spend two or three days a week at one campus and the rest of their time at another. Each Center is open a little more than half time.
- Services are designed to meet youth where they are, provide information meaningful to them, and provide them with leadership opportunities so they can protect their own and others' health. Services are listed in the presentation.
- Health education is available as supplemental education in classroom health classes or in the Center. Students may also drop into the Center to meet with friends and have the time to develop relationships with Health Educators. Students may train as part of a core group of peer advocates. There is also a call line, virtual options, and parent education.
- DMH has been delivering Zoom workshops on how to deal with stress especially in relation to COVID-19. SAPC was also in the process of launching the DPH Ambassador Program for parents and students. This virtual iteration will provide in-depth training on COVID-19, Social Determinants of Health (SDH) to explain why some communities are impacted more than others, and strategies to help participants educate others in their networks.
- Staff looks forward to returning to in-person interaction. For example, 20 to 30 students would drop into a Center during lunch breaks to pick up free condoms while having an opportunity for interaction with Health Educators.
- Regarding distribution of Centers, there are about six in the South Central Los Angeles area and SAPC was in the process of developing a Memorandum Of Understanding (MOU) with the Inglewood School District. SAPC was also working with Compton, but the effort was sidelined due to school building renovations.
- ➡ Staff will send Commission contact information to Ms. Sanchez for dissemination at Meth Task Force and Student Wellbeing Center Ambassadors/peer advocates to help foster communication between the bodies.

6. EXECUTIVE DIRECTOR/STAFF REPORT

- Ms. Barrit reviewed the agenda and introduced the day's speakers.
- a. **New Committee Members:** She welcomed the multiple new Committee members, especially the much needed consumers.

7. CO-CHAIR REPORT

a. Committee Co-Chair Nominations/Elections (Need 2nd Co-Chair)

- Raquel Cataldo was previously nominated for re-election and Frankie Darling Palacios nominated for election as 2021 PP&A Committee Co-Chairs. No other candidates were nominated. Mr. Ballesteros pledged to assist, as needed.
- The body thanked Mr. Ballesteros for serving as Acting Co-Chair until the body could elect two Co-Chairs.

MOTION 2A: Elect Raquel Cataldo and Frankie Darling Palacios as 2021 PP&A Committee Co-Chairs, as nominated (**Passed by Consensus**).

8. DIVISION OF HIV AND STD PROGRAMS (DHSP) REPORT

a. Fiscal Update

- Ms. Ogata reviewed the updated expenditure reports through the end of 2020 in the packet.

- Ryan White Part B represents \$5 million in funding that comes through the state. Funds are allocated to Housing for Residential Care Facilities for the Chronically ill (RCFCI) and Transitional Residential Care Facilities (TRCF), and to Substance Abuse Residential. Both are expected to maximize their funding.
- Minority AIDS Initiative (MAI) supports Housing For Health permanent supportive housing and the new Rampart Mint development with 22 units for PLWH with mental health disorders. Due to COVID-19, Transitional Case Management expenditures are slightly down. Nevertheless, DHSP expects to spend most of this year's award. It also must spend down the \$285,908 in approved rollover funds from Year 29, one of the smallest roll-over amounts in recent history.
- Part A for Direct Services is approximately \$43 million. Medical Care Coordination (MCC) is the largest investment for the third year at over \$12 million followed by Ambulatory Outpatient Medical (AOM) at nearly \$8 million.
- In COVID-19 impacts, DHSP will be augmenting Food Bank/Home Delivered Meals – Nutrition Support with Health Resources and Services Administration (HRSA) Coronavirus Aid, Relief, and Economic Security (CARES) Act funds. At the same time, Early Intervention Services (HIV Testing Services) have declined somewhat.
- Part A also funds administrative expenditures not listed on the spreadsheet including Quality Management.
- Overall, DHSP anticipates maximizing both Parts A and B. Roll-over from MAI was expected to be between \$250,000 and \$850,000. DHSP was still receiving and processing provider invoices.

b. Contracts and Procurement Update

- Dr. Green noted his sole update was that DHSP issued a solicitation for community engagement as part of Ending the HIV Epidemic (EHE) planning. Five to seven proposals were submitted. DHSP hoped to forward the final proposal to the Board sometime in February 2021. Timing will depend on DHSP staff availability in light of COVID-19 assignments.
- ➡ DHSP will provide an updated solicitation schedule when time permits.

c. Actions Taken to Reduce Barriers to Emergency Financial Assistance (EFA)

- Dr. Green said there was no further information since the Commission meeting. The updated flyer just went out.
- Mr. Ballesteros suggested removing the human element and using a client-driven eligibility algorithm to reduce obstacles. Dr. Green replied MCC Teams were basically doing that, but different needs require different paperwork, e.g., rental assistance will require a copy of the lease in the client's name and documentation from the landlord.
- He felt the process was not that complicated, but that there was a lot of misunderstanding about the service.
- Another person suggested a central site might be used to upload documents, but acknowledged that might pose a Health Insurance Portability and Accountability Act (HIPAA) Act risk.
- ➡ Dr. Green encouraged anyone with specific feedback to provide it as that is the best way to improve services.

9. PREVENTION PLANNING WORK GROUP UPDATE

- Ms. Barrit noted the Work Group presented on proposed short- and long-term activities at the Commission meeting.
- Going forward, the Work Group will be aligning the Prevention Planning activities and the EHE Pillars.
- The other key focus will be to identify key data needs in consideration of strategic needs, time commitment, and DHSP's short staffing in light of COVID-19 Disaster Service Workers (DSW) assignments.
- ➡ Staff will email Commissioners with an invitation to join the Work Group.

V. DISCUSSION

10. REVIEW AND SELECT PARADIGMS AND OPERATING VALUES

- Ms. Barrit noted the Committee requested review of the entire list at the last meeting rather than just those that had been selected for the last couple of years. Current Paradigms are: Compassion and Equity. Current Operating Values are: Efficiency, Quality, Advocacy, and Representation. The full list was in the packet for review.
- Mr. Gonzalez felt the Equity definition was too complex for many people to understand well, especially for people whose first language is not English.
- ➡ Consider how to simplify Equity definition.

MOTION 3: Approve Paradigms of Compassion and Equity; and Operating Values of Efficiency, Quality, Advocacy, Representation, and Humility, defined as admitting that we do not know everything and need to listen to and learn from others, for the Priority Setting and Resource Allocations (PSRA) Process, as revised, and forward to the Commission for approval (**Passed by Consensus**).

VI. NEXT STEPS

11. TASK/ASSIGNMENTS RECAP: There were no additional items.

12. AGENDA DEVELOPMENT FOR NEXT MEETING: There were no additional items.

VII. ANNOUNCEMENTS

13. OPPORTUNITY FOR PUBLIC AND COMMITTEE TO MAKE ANNOUNCEMENTS: There were no announcements.

VIII. ADJOURNMENT

14. ADJOURNMENT: The meeting adjourned at 3:00 pm.