



Consortium Meeting Minutes
Monday, September 10, 2018 10am-12pm
North Richmond Center for Health
1501 Fred Jackson Way Richmond 94801

Present:	
Thandi Harris, WORLD	Janice Lipnisky, Community Resident
Janice Anderson, WORLD	Aaronique Gordon, LMCHD
Teri Leichenger, Food Bank Contra Costa & Solano	Leslie Carminer, CalPEP
Angela Moore, Contra Costa Interfaith Housing	Rosie Taylor, CalPEP
Nyokie Franklin, Contra Costa Interfaith Housing	John Johnson, HIV/AIDS & STD Program
Vance Drouillard, Rainbow Community Center	Roberto Montes, HIV/AIDS & STD Program
Angel Mateo, LifeLong Medical Care	Nga Le, HIV/AIDS & STD Program
Brittany Cash-White, LifeLong Medical Center	Anuja Chand, HIV/AIDS & STD Program
Irma Donaldson, NHNR	Obiel Leyva, HIV/AIDS & STD Program
Gabriela Quiroz, Planned Parenthood Northern CA	Anjuli Clopper, HIV/AIDS & STD Program
Natalia Tocino, Planned Parenthood Northern CA	Jessica Osorio, HIV/AIDS & STD Program
Loris Mattox, HEPPAC	Derail Hill, HIV/AIDS & STD Program
George Reynolds, Health Decision Technologies	Nicole LaPointe, HIV/AIDS & STD Program
	Vivian Eger, HIV/AIDS & STD Program
Call to Order & Icebreaker	<p>Teri Leichenger, Co-chair and Food Bank, called the meeting to order at 10:05am. The meeting began with a moment of silence to remember those individuals that we have lost to HIV/AIDS.</p> <p>Next, introductions were made along with an icebreaker question of everyone's summer highlight.</p> <p>Teri made the motion to approve the July minutes. Angela Moore, CCIH, seconded the motion. Meeting minutes were approved.</p>
System of Care Update	<p>Jessica Osorio, Co-chair and HIV/AIDS & STD Program Director, provided a staffing update:</p> <p>Anjuli Clopper is our new Deputy Director. We have hired a new Clerk Supervisor to oversee the administrative team who will be starting at the end of the month. We have a Medical Social Worker position that is pending being filled. We are looking for an Experienced Clerk. We have a Senior Disease Intervention Technician (DIT) position open that includes PrEP navigation and syphilis investigation. The county is putting together a list for a DIT in the next few weeks or months. The Community Health Worker (CHW) I position has been changed to a CHW II position which we are looking to fill.</p>

	<p>Jessica provided a budget update:</p> <p>We received the full notice of award for Part A for \$1,879,649 which includes MAI and ambulatory care.</p> <p>There is a Prevention program augmentation that will help build the PrEP Navigation Program and roll out the PrEP-AP program in Contra Costa County. In addition, we will organize provider and prevention symposiums heavily focused on PrEP. The STD augmentation funds we received will include three-site testing and data and investigation around best practices for HIV and STD testing in school-based clinics and juvenile detention facilities. We want to ensure that the entire county is following the best practices for STD testing and that youth are being served. For example, if an individual tests positive for one STD then they should be tested for other STDs. Also, for three-site testing, we want to ensure that in addition to testing the urine, that throat and rectal swabs are also collected so we do not miss cases of gonorrhea, chlamydia, and syphilis in those areas of the body.</p>
<p>Changes to Consortium Discussion</p>	<p>Jessica provided an overview of the Oakland Transitional Grant Area Planning Council (OTGAPC). The Consortium was created many years ago to act as Contra Costa’s voice in the OTGAPC. It has acted as a subcommittee to the OTGA. We have conducted our own allocations process, needs assessments, and other activities and reported back to the OTGAPC.</p> <p>Health Resources and Services Administration (HRSA) is the federal branch of the government that oversees all Ryan White funding for the country. The 2017 HRSA site visit to the OTGA resulted in findings that the Planning Council was not in compliance in terms of membership, allocations process, and subcommittee status of the Consortium. Another finding was monitoring of Contra Costa County needs to include site visits and allocations discussions need to move to the OTGAPC. We have been receiving technical assistance to address these issues.</p> <p>Currently, only Jessica and Anjuli are members of the OTGAPC representing Contra Costa. In the past, they only required one representative to report back recommendations from the Consortium. That is no longer sufficient and the Consortium can no longer operate the same way as in the past. OTGAPC membership needs to reflect the gender, race/ethnicity, and age distributions of the epidemic in our TGA. OTGAPC membership also has mandated categories of representation and should also have a third of the representation be PLWHA. Contra Costa receives approximately 30% of the funds but we only have 5% of the representation on the OTGAPC. We are looking for service providers and community members to join as representatives of Contra Costa</p>

County.

Jessica discussed some ways to remove barriers in order to achieve better Contra Costa representation in the OTGAPC. She has recommended technological options, transportation vouchers, and 30% of the meetings be held in Contra Costa County. She proposed an idea for the Consortium to meet in person as a group and teleconference together to the meeting.

Loris Mattox, HEPPAC, shared that she was on the OTGAPC in the past and it has been challenging. She explained that conference calls into the meeting helped. She also recommended that the group prioritize holding community events in Contra Costa which helps to recruit new members.

Jessica said that our main priority is to make Contra Costa's voice be heard during the allocations process since in the past we have conducted a thorough review of our services and data and would present to the OTGAPC for approval. Now that the entire process is shifted to Alameda County, we need people at the meetings representing our community and providers to make those recommendations.

Teri asked if we can have the OTGAPC teleconference into the Consortium process. Jessica replied that Alameda County is interested in helping Contra Costa members of the OTGA telecommute into the meetings.

Nicole LaPointe, Outreach Worker, asked if evening times were ever considered for the meetings. Jessica responded that they have held meetings in the evening but that membership was not improved. The OTGA has surveyed people for the best times to hold the meeting and people have historically agreed on the 1pm time slot. The meetings held in the evening had low attendance and presented issues such as transportation problems, safety concerns, lack of childcare, and difficulty booking a meeting space.

We find it valuable to have community providers and community members review the data and provide advice and feedback on the quality of services. Just because we are no longer a formal subcommittee does not mean we will dissolve the Consortium. This is now an exciting opportunity for the Consortium and its members to re-envision what we want and its usefulness for everybody. We no longer have the challenges associated with acting as a formal subcommittee of the OTGAPC. Some possible ideas for the purpose of future meetings could be for the group to maintain advisory status, provide educational updates, and to conduct needs assessments.

Jessica asked everyone to share what the group found most useful about the Consortium meetings and what they want from the meetings. Jessica shared that it was a valuable way to hear feedback from the community and service providers. Teri shared that it was valuable to connect with other service providers in-person and get in touch with people whose services overlap with yours. Thandi Harris, WORLD, shared that it is nice to check in, get in touch with providers, and has been a resource bank for someone who is positive. She shared that if she was not encouraged to attend the Consortium then she would not have known about a lot of resources and access to these resources. Thandi recommended advertising the OTGAPC to people in the community to help increase membership.

Janice Lipnisky, Community Member, shared that there are no support services in Antioch. She has to drive to Concord in order to attend a support group at Rainbow Community Center (RCC). She expressed disappointment at the lack of resources in Antioch and the lack of support from the city. She feels that there is no support for people with special needs or PLWHA.

Nicole shared that RCC has plans to expand their women's programming starting early next year. She started a women's support group at Brentwood Health Center but had poor attendance. She shared her support for women's support groups and is willing to donate her time and work with Janice to make it happen. Natalia Tocino, Planned Parenthood, shared that Planned Parenthood is looking to expand their services into East County and would also like to connect.

Jessica shared that there is a Gilead grant available for community agencies to apply for that is focused on supporting elderly people and people aging with HIV. She also shared that psychosocial support services are not currently funded in the county and the current support services we use are with existing resources to staff those groups. The difficulty is that the psychosocial support services have to be conducted through an agency and the funds do not allow us to employ one person as a subcontractor to run the support groups. Every year the county gets feedback that support groups are something the clients want but it is hard to implement due to these limitations.

Thandi shared that WORLD is expanding to Contra Costa and is interested in running the support groups and applying for those funds if they are available.

Aaronique Gordon, LMCHD, shared that their agency's HIV/AIDS

	<p>Prevention Program has been conducting outreach and are looking to expand. They have reached over 250 people across two days and are in need of more prevention supplies.</p>
<p>Presentations</p>	<p>Obiel Leyva, Community Education & Testing Manager, introduced the agencies who provide HIV prevention services in Contra Costa County. Representatives from RCC, HEPPAC, CalPEP, and the County’s prevention team shared the work they do in HIV prevention.</p> <p>Vance Drouillard, RCC, presented on the agency’s services.</p> <p>Key Points from RCC’s Presentation:</p> <ul style="list-style-type: none"> • Calendar of events are on the website and all of the programs run monthly: https://www.rainbowcc.org/monthly-calendars • Services include counseling for LGBT, legal counseling for name and gender change, working with general practitioners, support groups, youth programming, counseling with families, and socializing for older individuals. • Contract with the County to conduct HIV testing and outreach and using social media sites to advertising testing and PrEP. Testing is conducted at both the Concord and El Cerrito RCC locations. Testing is also conducted at Club 1220 on the last Friday of every month. • Referring people to PrEP Assistance Program (PrEP - AP) which helps with insurance copays while Gilead pays for the PrEP medication. People without documentation can get on PrEP. • Some services use a sliding scale fee but are free for people who are low-income. • Services for PLWHA also include support groups and food pantry. <p>Loris Mattox, HEPPAC, presented on the agency’s services.</p> <p>Announcements:</p> <ul style="list-style-type: none"> • Hiring for a Contra Costa County Community Health Promoter and have revamped personnel with a Harm Reduction Services Manager. • Conducting a Narcan Awareness Campaign with a free poster distribution. Provide free Narcan distribution to people who use drugs, recipients report their utilization, and have had hundreds of reversals since the program was implemented. • Receives free harm reduction supplies from the CA State Clearinghouse.

- AB186: Skinner – SCS Authorization moves to the Gov.’s desk.
 - National Harm Reduction Conference in October in New Orleans.
- Key Points from HEPPAC’s Presentation:
- Responsible for harm reduction services in Contra Costa.
 - Harm reduction is a range of behaviors and practices designed to lessen the negative social and/or physical consequences associated with various human behaviors, both legal and illegal.
 - Examples of known public health based harm reduction strategies include fluoride in the water, vaccination, seat belts, condom distribution, syringe access, Narcan distribution to people who use drugs, public syringe disposal system, fentanyl strips access, smoke pipe distribution, safer drug consumption spaces (overdose prevention sites), medical assisted treatment (methadone, suboxone, Naltrexone, etc.), community based screening and linkage, and mobile medical services.
 - HEPPAC’s services in Contra Costa County include condom distribution, mobile medical services, community based screening and linkage, syringe access services, Narcan distribution to people who use drugs, fentanyl strips access, and MAT services.
 - Harm reduction service gaps include smoke pipe distribution which helps decrease Hepatitis C, MAT services that are mobile and non-clinical based, increased mobile medical services, safer drug consumption spaces, and public syringe disposal system.
 - Primary population is people who use drugs. Since other PrEP materials are focused on MSM, they have created their own PrEP ads that are IDU specific.

Leslie Carminer & Rosie Taylor, CalPEP, presented on the agency’s services.

Key points from CalPEP’s Presentation:

- Rosie Taylor’s job duties as a “Buddy” include outreaching in the community, making condom packets, and driving the med van.
- They provide transportation to doctor’s appointments, food pantry, pharmacy, and other places needed to maintain health. Clients can call the med van 24 hours in advance, fill out release of information form, and provide proof of income. The service area is Hayward/Berkeley to Alameda but can extend the services to other areas. The van runs Mondays, Wednesdays, and Thursdays and can extend to other days as needed.
- Buddies also service clients that are threatened to fall out of care to support them at doctor’s appointments.
- They outreach late at night and set up at many locations such as an encampment in Antioch.

	<ul style="list-style-type: none"> • They provide information on where to receive services, set up housing applications, and provide a drop-in center for youth 18-24 who need a safe space to hang out and eat food. • Youth are given incentives for HIV and Hepatitis C testing. • They currently distribute condoms at ten sites. • They are work with transgender clients and have a drop-in center for MSM of color. • Other services include case management, HIV and Hepatitis C education, life skills training, counseling, PrEP referrals, various workshops, and other resources. <p>Roberto Montes, Derail Hill, and John Johnson, Contra Costa County HIV/AIDS & STD, presented on their role in the County:</p> <p>Key points from Contra Costa County HIV/AIDS & STD staff:</p> <ul style="list-style-type: none"> • Provide HIV and Hepatitis C testing in the mobile van in West, Central, and East Contra Costa County. Also provide testing at locations such as Familias Unidas and Native American Health Center. They also provide testing at special events. • Implement the Line List Intervention which consists of calling individuals who have a diagnosed reportable STD (HIV, syphilis, gonorrhea, and/or chlamydia), follow-up with their treatment, provide PrEP education, and advertise testing sites. • The role of the Health Educator is to do a wellness check with PLWHA who have fallen out of care and have high viral loads. Many of these clients are not adherent to their HIV medication and the Health Educator works with the Medical Case Managers to find a client and address their barriers to medication adherence. • Many people go to Alameda County or San Francisco to receive care so there is work to do to help people feel like they can get good care in Contra Costa. • The state is requiring counties to focus their core activities to do more PrEP education and data supported work such as our Line List Intervention. The state wants to eliminate health inequities but they also want us to eliminate testing sites that have not produced a positive test result. We are committed to continue with some of our testing sites. • Contra Costa will also have enrollment sites for PrEP Assistance Program.
<p>Committee Updates</p>	<p>Client Committee Updates: Angel Mateo, Client Committee Co-chair and LifeLong, shared that the committee/support group is going very well. They had 15-20 people in attendance at the last meeting. The group continues to meet twice a month on 1st and 3rd Fridays of the month from 1-2:30pm. Many of the</p>

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	meetings include presentations from service providers.
Services Discussion	Aaronique shared that LMCHD has been conducting health fairs and are hoping to provide mammograms for women. They are formalizing their health fair schedule and they will be held on the last Sunday of each month beginning in 2019.
Public Comment	None.
Announcements	None.
Adjourned	Teri made the motion to adjourn the meeting. Thandi seconded the motion. The meeting adjourned at 11:50am.
Next Meeting	November 5, 2018, 10am-12pm County Facility- Yellowstone Training Room 2500 Bates Ave. Concord 94520