

# HIV PREVENTION PLANNING COUNCIL

## Minutes

June 08, 2006

The next HPPC business meeting will be held on **Thursday, July 13, 2006**

3:00 - 6:00 PM

Quaker Meeting House, 65 Ninth St, San Francisco

### **Members Present:**

Gayle Burns  
Edward Byrom  
Chadwick Campbell  
Michael Cooley  
Thomas Ganger  
Isela Gonzalez  
Dee Hampton  
Emalie Huriaux  
Matt Jennings  
Janetta Johnson  
Billie-Jean Kanios  
Tom Kennedy  
Thomas Knoble  
Derrick Mapp  
John Newmeyer  
Tei Okamoto  
Tracey Packer  
Colin Partridge  
Ken Pearce  
Perry Rhodes III

### **continued...**

Chandra Sivakumar  
Gwen Smith  
Frank Strona  
Abbie Zimmerman

### **Members Absent:**

Angie Baker\*  
William Bland\*  
Michael Discepola, Emeritus  
Weihaur Lau\*  
Joani Marinoff, Emeritus  
Gail Sanabria\*

### **Harder + Co.:**

Aimee Crisostomo  
Clare Nolan  
David Weinman (Minute-taker)

### **Process Evaluation Team:**

Kevin Roe

### **Guests:**

Michelle Bakken, TARC & CARE Council  
Travis Barrick, Parliamentarian  
Steffanie Goodman, UCSF - Staying  
Well Study  
Nikki Humes  
Fred Lopez, SF LGBT Community  
Center  
Eiko Sugano, UCSF - CZP

### **HIV Prevention Section (HPS):**

Dara Coan  
Art De Guzman  
Vincent Fuqua  
Alice Heimsoth  
Ju Lei Kelly  
Betty Chan Lew  
Israel Nieves-Rivera  
Lisa Reyes  
Marise Rodriguez

- \*These members informed the Chair in advance of their absences.

### **Welcome, Introductions, and Announcements**

Co-Chair Perry Rhodes III called the meeting to order at 03:05 PM. After welcoming attendees he observed that 06/05/2006 was the 25<sup>th</sup> anniversary of the first diagnosed case of AIDS. He asked attendees to join him in a moment of silence commemorating those who are no longer present. He then asked attendees to introduce themselves and make announcements.

- Matt Jennings asked if any attendees would object to Alice Heimsoth taking photographs for use on the HPPC's website. No objections were offered.
- Thomas Knoble announced a Town Hall meeting at the Lesbian, Gay, Bisexual & Transgender (LGBT) Center regarding serostatus disclosure later that evening 06/08/06.
- Frank Strona announced that the California HIV/AIDS Planning Group (CHPG) will meet in SF on the 06/21-22/2006, and that public comment will be heard on the 22nd.
  - ⇒ He explained that this is an opportunity for members to express personal, community, or organizational concerns to this statewide group and encouraged members to participate.
  - ⇒ More information can be found at '[www.cahivplanninggroup.org](http://www.cahivplanninggroup.org)'.

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- Derrick Mapp distributed packages of information from Shanti entitled, "*An Evaluation of the L.I.F.E. Program*," copies of which are available to absent members upon request.
  - ⇒ The information included are the results of two evaluation studies, the first in conjunction with the State Office of AIDS and the second done internally looking at the effectiveness of the project as a Prevention With Positives (PWP) program.
  - ⇒ These are early releases of the studies. Currently the CDC is reviewing it as a Diffusion of Effective Behavioral Interventions (DEBI) program to be rolled out nation-wide.
  - ⇒ He asked that questions and suggestions be directed to him.
- Emalie Huriaux announced that on 06/28/06 there will be a free training to help drug users know their rights when dealing with the law and law enforcement.
- Chandra Sivakumar announced that Larkin Street Youth Services is launching a social marketing campaign, copies will be made available at the next Council meeting (07/13/06).
- Michael Cooley announced that the Stop AIDS Project will conduct the African-American PLUS program this coming weekend (06/10-11/06).
  - ⇒ Members should contact him for information about future programs.
- Janetta Johnson distributed flyers announcing the, "*7<sup>th</sup> Annual TRANNY WEEK Celebration*," 06/12-16/06, copies of which are available to absent members upon request.
  - ⇒ She highlighted that on Wednesday 06/14/06 there will be a Job / Educational Fair.
  - ⇒ She asked members to encourage their Transgender clients to participate.
- Billie Jean Kanios announced as a result of the recent HIV Prevention Leadership Summit (HPLS) in Dallas a national Task Group has formed for dissemination of Best Practices for HIV prevention among Transgender populations.
- She then announced a fundraising event with Assembly Member Mark Leno, State Senator Carole Midgen, Supervisor Tom Ammiano, and others Sunday 06/11/06.
- She also announced the Trans March 06/23/03 at around 3:00PM beginning at Dolores Park.
  - ⇒ Volunteers are needed, contact her for more information.
- Perry Rhodes III noted a correction to the agenda, the Points of Integration meeting should read as scheduled for 07/11/06. The correction will be posted on the HPPC website.
- Lisa Reyes distributed cards from the Pharmacy Syringe Access Program entitled, "*You Can Buy Syringes Without a Prescription*," copies are available to absent members upon request.
- Susan Latham from the San Francisco HIV Health Services Planning Council (the CARE Council) announced a Community Forum the Metropolitan Community Church (MCC) 06/22/06 from 5:00-7:00PM, more information available at the website '[www.sfcarecouncil.org](http://www.sfcarecouncil.org).'

### **Review and Approval of Minutes of May 11th**

Motion was made and seconded to approve the minutes of the 05/11/06 meeting. Israel Nieves-Rivera noted the correct spelling of Michelle Bakken's name and noted that the final version will reflect this correction. No other changes were offered. The minutes were approved.

### **General Public Comment**

Steffanie Goodman from the UCSF Staying Well program distributed a flyer and cards entitled, "*Are you HIV+ and not taking meds, but trying to STAY WELL?*" copies are available to absent members upon request. She also provided some background on the program including the following.

- The program is looking at how medications affect people's health and their quality of life.
- There will be a free informational evening event 06/28/06 at 7:00-8:30PM.

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### Member Response to Public Comment

There was no member response to Public Comment.

### HPPC Co-Chairs/Steering Committee Written Report

Perry Rhodes III asked for comments and questions regarding the written report that was sent to all members in advance of the meeting. He then noted that there is new leadership at the CDC and expressed cause for encouragement.

### Robert Rules of Order Training

Perry Rhodes III introduced Travis Barrick who provided information on his background including:

- He has been a professional Parliamentarian since 1997;
- He has been an attorney since 2003;
- He specializes in Roberts Rules of Order for boards and councils; and
- He works primarily with the group decision-making process; a difficult task, however, there is a magic moment when a group reaches consensus and moves forward.

His introductory remarks also highlighted the following.

- Roberts Rules of Order are meant to facilitate action, not to regulate/restrain the process.
- His goal in providing an understanding of Roberts Rules is to help the HPPC perform the tasks and make the decisions it is charged with.

He distributed a document entitled, "*Robert's Rules of Order - Basic Definitions and Rules*," copies of which had previously been sent to all members. His additional comments included the following.

- Quorum - premise of which is that the majority rules and is empowered to make decisions.
  - ⇒ The minority is given the right to argue its position.
  - ⇒ When a decision is reached, the minority is "*morally obligated*" to support it.
    - Individuals disagreed by the decision should not disparage it, but rather work to change the majority's view for future decisions.
  - ⇒ Respect for the rule of the majority tends to downplay factionalism.
- Abstention - and '*Recusal*' do not count in the vote total.
  - ⇒ Recusal only makes a difference in a judicial body.
  - ⇒ There is no effective difference between recusal and abstention in a body such as HPPC.
  - ⇒ An abstention is counted in the same way as an absent member whose vote is not part of the total cast in regards to a motion.
    - Contrary to some conceptions, an abstention is not counted as a 'No' vote.
  - ⇒ The only valid purpose of an abstention is when there is conflict of economic interest.
  - ⇒ According to Barrick, if one wasn't present for part of the debate rather than abstaining the member should do her/his homework and vote.
    - Abstention is a way of "*Chickening out*" of group decision making process, as it means that the member is either irrelevant, or hasn't done his/her work.
  - ⇒ It is permissible to vote on Council minutes even when the member was absent, as the member should have reviewed, and questioned were necessary, the minutes.
  - ⇒ It was noted that it is appropriate to vote "No" on any motion that one has reservations about, or doesn't have enough information on.

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Conflict of Interest - was not discussed and it was suggested that where there are questions an attorney representing either the Council or the members' interest should be consulted.

[Note: The HPPC has a policy on conflict of interest.]

### Main Motion

- Members' role in Council should be to say, "Yes," "No," or "Go back to committee."
  - ⇒ Discussion's purpose is to clarify issues and to attempt to sway other members' votes.
  - ⇒ Brainstorming is not appropriate at Council meetings and wastes members' time.
  - ⇒ The real incubator for the direction, and vision of the Council takes place in committees.
    - Committees are better suited to brainstorming, "*slug things out*," and make compromises so that the proposal brought to the Council has a likelihood of passage.
- Main Motions largely come from Committees' reports.
  - ⇒ When the committee has done its work the Main Motion is ready to be voted.
- The purpose of Seconding a Motion is to ensure that a single individual doesn't hijack the Council, and ensures that Motions have support of more than just that member.
  - ⇒ If a Motion is raised that members don't want to discuss, don't Second it.
  - ⇒ Main Motions brought from committees do not need Seconding.

### Amendment to a motion

#### Friendly Amendments:

- ⇒ There is no such thing as a "*Friendly Amendment*."
- ⇒ Once a Main Motion is brought and Seconded it belongs to the whole Council, not to the person, or committee, making the motion.
  - Therefore, only the Council can accept an Amendment and does so by voting on it without regard to how small, subtle, or nuanced the change may be.
- ⇒ The concept of a Friendly Amendment is flawed for a number of reasons, including that they tend to cause confusion because it is not clear what is being discussed.

#### Making Amendments:

- ⇒ Only one thing can be done at a time, and in this order:
  - Motion is made, by an individual or committee;
  - It is Seconded (unless brought by a committee);
  - The Motion is then on the floor for discussion
    - \* And only issues relating to the Motion should be discussed;
  - During discussion Amendments may be offered
    - \* Amendments must be Seconded
    - \* When an Amendment is on the floor (Moved and Seconded) it, and only it, is discussed until voted on
    - \* The Amendment must be disposed of (accepted or rejected by vote) before the Council returns to discussion and disposal of the Main Motion; and
  - When discussion is completed, the Main Motion is voted on.
- ⇒ Even when an Amendment proposes to change only a single word of the Main Motion the Amendment must be Seconded, discussed, and voted on (as above).
- ⇒ Discussing only what is on the floor -- the Main Motion, or an Amendment -- helps maintain the Council's focus, avoids confusion, and uses members' time efficiently.
- ⇒ There can never be more than one Amendment on the floor at a time, it must be disposed of before another Amendment is made.

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- ⇒ The Chair (or Co-Chair) must ensure that the matter on the floor is discussed and disposed of before entertaining another matter.
- ⇒ Every member has the right to make and Second Amendments, but they should be used sparingly as the purpose of committees is to get things done, work out differences, reach consensus, and bring an acceptable proposal to the Council.

### Guiding Principles of Robert's Rules of Order

- There are four principles of parliamentary rules of order, all of which relate to mutual respect of the individual members; including their time, interests, values and intellect:
  - ⇒ Majority Rule - all votes are equal;
  - ⇒ Minority Rights - can not strip members of their rights, except under extraordinary circumstances and with a very high vote threshold;
  - ⇒ Absentees are protected - their rights won't be stripped, and decisions won't be made unless the absent member is made aware of it; and
  - ⇒ The process must be fair.

### Point of Order/Point of Information

- A Point of Order is raised when a member sees some action (as opposed to opinion) that she/he objects to, believes isn't right, or violates the accepted Council process.
- Every member is empowered to raise a Point of Order or a Point of Information.
  - ⇒ It can be raised at any time during the discussion of a Motion, but must be timely and raised at the occurrence of the alleged inappropriate action.
    - If one waits rather than objecting the member has waived her/his rights.
  - ⇒ It can be made outside of the order of a Speakers' List (as below).
  - ⇒ The member raising the Point of Order may explain her/his Point of Order.
- Raising a Point of Information, or a Point of Order stops all other business until the point is clarified or ruled on by Chair (the presiding officer).
  - ⇒ The Chair's duty is to keep the Council on task, and its decision-making timely and fair.
  - ⇒ The Chair makes the determination (the ruling) of whether a Point of Order is germane to the discussion and the decision-making process.
- If a member offers a "Friendly Amendment," other members should raise a Point of Order.

### Call the Question & Speakers' List

- All members recognized by the Chair are empowered to Call the Question.
  - ⇒ Calling the Question must be seconded.
  - ⇒ Once moved and seconded it is voted on immediately, there is no discussion.
  - ⇒ The Question being voted on is, "Shall the Council halt discussion and proceed to a vote on the Motion -- Yes or No."
  - ⇒ The Question requires a 2/3rds majority to be approved.
    - Abstentions and recusals are not counted in the calculation of the vote.
  - ⇒ If the Question is approved, the Motion on the floor is immediately voted on, and there is no further discussion on the Motion.
  - ⇒ If the Question fails, discussion continues on the Motion with the next speaker.
- The Chair can establish a Speakers' List by asking who wishes to address the Motion.
  - ⇒ The Chair can then close the list by announcing its closure at completion of the Speakers' List.

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- A disadvantage of a Speakers' List is that a member may feel compelled to comment on another's comment, but can't if her/his name isn't on that list and so will tend to put their names on the list to ensure they have an opportunity to speak, if needed.
- ⇒ Or, the Chair can keep the discussion open beyond a Speakers' List, closing discussion late at his or her discretion.
- Similar to the Calling the Question process, discussion can be reopened by a Seconded Motion to extend discussion. A 2/3rds majority is required for approval.
- ⇒ When the last speaker is finished the Question is automatically called, and a vote on the motion follows immediately.
- If a member wishes to Call the Question without circumventing other members' opportunity to speak, that member should "Pass" when called upon, and call the Question when re-called.

### Other Comments and Questions

- Frank Strona observed that there hasn't been as much contention in Council deliberations over the past few years, especially compared to several years ago. As a result small changes in Motions have been handled somewhat informally, quickly and easily.
  - ⇒ Last month, he noted, was an exception when the Council attempted to rewrite a Main Motion as a group.
  - ⇒ Due to the rarity of contention members have become resistant to sending a proposal back to committee, and discovered the inefficiency of rewriting a proposal in Council.
- In response to a question from Thomas Knoble, Travis Barrick explained that there are other systems of procedure, but none are as simple and streamlined, nor do they employ more accessible terminology than Robert's Rules.
  - ⇒ He added that the Council is empowered to pass its own rules (Standing Rules), including use of other terminology, but he strongly recommends against it.
  - ⇒ He noted that Robert's Rules are proven to streamline and be time-efficient.
- In response to a question Travis Barrick explained that good leadership in the committees would result in making better proposals to the Council.
- He also pointed out that although Committees are more relaxed, and suited to discussion and debate, the principles of Robert's Rules should also be used to keep the process moving.

The attendees expressed their appreciation for Travis Barrick's presentation with applause.

### Need Assessment Discussion

Perry Rhodes III introduced Clare Nolan of Harder & Company to discuss the 2006 Needs Assessment as a follow-up to the discussion at the 05/11/06 Council meeting on this topic. Clare Nolan drew members' attention to copies of the presentation entitled, "2006 Needs Assessment," which had been sent to members in advance of the meeting. In way of background she reminded members that that the agreed upon process was:

- ⇒ Members would be polled on their priorities for the assessment by SurveyMonkey,
- ⇒ Steering Committee would review the results of the poll and develop a motion.

The Steering Committee moved: The HPPC approve late testers as the population for a needs assessment. There was no need for a second.

- Clare Nolan reviewed the definition of late testers, and the results of the poll.

Discussion ensued, including the following.

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- Michael Cooley asked for the number of people who fit into the definition of late testers.
  - ⇒ Clare responded that approximately 830 (40%) of those diagnosed with AIDS had their first positive HIV test result within 12 months of that diagnosis.
- Thomas Knoble asked what percentage are 'fast progressors,' as opposed to late tester.
  - ⇒ Ken Pearce said that very few people actually progress quickly from seroconversion to an AIDS diagnosis; including fast progression due to resistant strains of HIV.
  - ⇒ Colin Partridge noted that the exception is with transfusion-acquired HIV and those born with HIV, adding that it is very unlikely for an adult to have exposure and progress to symptomatic HIV within one year.
- Tracey Packer said that finding out why people aren't getting tested and what the barriers are would help get people into services more quickly as well as improve overall prevention. Billie Jean Kanios Called the Question, Ed Byrom seconded. The Question was approved without dissent.

Motion was read again. The vote was by show of hands. There were no objections or abstentions. The motion passed.

### HIV Prevention Funding 2006

Perry Rhodes III introduced Tracey Packer to provide background on the planning process. She drew members' attention to the presentation entitled, "*The HPPC and the Planning Process*," copies of which had been sent to all members in advance of the meeting. She highlighted that the Planning Process is at the heart of what the Council does. Her explanation also included the following.

- **Slide 2** - A gap may not be immediately obvious, and Committees look at the Resource Inventory and Gap Analysis data and compared that to previously set priorities.
  - For instance, in 2005 Committees identified gaps in Substance Use and services to Youth and made recommendations that are currently being implemented.
  - ⇒ The HPPC and HPS are partners in the planning cycle.
    - The HPPC sets priorities in its Prevention Plan.
    - The HPS implements the priorities by issuing the RFP(s).
    - Providers apply for funding based on the criteria in the RFP(s).
    - An independent process reviews the Plan, priorities, RFP, and the proposals to determine funding.
- **Slide 3** - The document entitled, "*Exhibit 2 Summary of Funding Priorities...*" (from Chapter 4 of the 2004 Plan) was distributed for quick reference.
  - ⇒ The HPS is working on evaluation methods to compare what programs have accomplished relative to what they said they would do in response to the RFP.
    - That information, when available, will be reported to the Council.

### Questions and Comments

- Michael Cooley asked if the Council was going to be able to look at preliminary information, including monitoring data, regarding actual services as part of the current review.
  - ⇒ Tracey Packer explained that the current phase of the process is to review providers' plans, what they said they were going to do.
  - ⇒ She noted that when programs don't reach their planned objectives, the HPS' goal is to support agencies in reaching their objectives and/or adjusting their plans.

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- ⇒ Israel Nieves-Rivera noted that monitoring data would only show activities through the first half of the contract year, which may not be representative of the whole year.
- Thomas Knoble asked about evaluation's impact on renewal of contracts.
  - ⇒ Tracey Packer explained that renewal is based on monitoring, and at renewal contract parameters may change based on agencies' results.
    - She added that more typically, when objectives aren't reached programs tend to successfully find new and other ways to meet their plans.
  - ⇒ Marise Rodriguez observed that the HPS is working with agencies on making their plans more accurate and achievable.
- Ken Pearce asked what happens when assumptions about BRPs are shown to be inaccurate in resource allocation recommendations, is there a mechanism to change priorities.
  - ⇒ Tracey Packer noted that assumptions used were based on the information available when the RFPs were written, that while newer information may indicate some populations are smaller than anticipated those may be populations that are difficult to reach, and so funding levels may still be appropriate.
  - ⇒ She also pointed out that part of the planning cycle process involves the HPPC comparing priorities to actual allocated funding and make recommendations to the DPH.
  - ⇒ Israel Nieves-Rivera noted that some prioritized populations, such as MSM-IDU, also have services from outside HIV prevention funding stream.

Tracey Packer introduced Marise Rodriguez of the HPS. Copies of her presentation entitled, "*San Francisco 2005 HIV Prevention*," had been sent to all members in advance of the meeting. Her additional comments included the follow. **Please Note:** Explanations of acronyms used in the presentation are provided below (alphabetically by slide) and setoff in text boxes.

- **Slide 3** - HPS is working on breaking down the funding by HERR and PWP.

CTR (Counseling, Testing & Referral), HERR (Health Education and Risk Reduction), PWP (Prevention With Positives).

- **Slide 4** - Groups includes single, multiple session workshops, and drop-in groups.

CTRPCRS(Counseling, Testing & Referral and Partner Counseling and Referral Services), PCM/IRRC (Prevention Case Management/ Individual Risk Reduction Counseling), NE (Needle Exchange), SM(Social Marketing), TA (Technical Assistance).

- **Slide 7** - Includes male and female within each ethnic group by BRP.

⇒ NA funding is rounded by the computer to 0%, some funding nonetheless is in place.

AA (African American), API (Asian Pacific Islander), L/H (Latina(o)/Hispanic), MRE (Mixed Race Ethnicity), NA (Native American), W (White).

- **Slide 10** - As a result of direction from the HPPC the rate of funding to the Asian Pacific Islander Transgender population has increased and is now at the highest percentage.
- **Slide 12** - The increase in funding for African-American female injectors is a result of the HPPC and HPS' work.
- **Slide 16** - African-American MSF is a prioritized population, and the percentage is in line with this priority from the 2004 Plan.
- **Slide 18** - The \$37 cost per contact may be lower than actual experience and agencies should review and document the true operating cost.
- **Slide 19** - IRRC is similar to a triage and is a portal to other services.
  - ⇒ The numbers and types of program responding is in accord with the incidence.



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CD (Condom Distribution), CTL (Counseling, Testing & Linkages, formerly CTR [Counseling, testing & Referral]), MSW (Multiple Session Workshop), SM/M (Social Marketing and small Media), SSG (Single Session Groups), VBGO (Venue Based Group Outreach)
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- **Slide 28** - Contacts made regarding MSM Drug Use (not IDU), Internet use, and Speed use reflects co-factors that have been updated by the HPPC as priorities since the 2004 Plan.
- **Slide 29** - The focus on Speed use among MSM-IDU highlights agencies' response to the new HPPC prioritized co-factors.
- **Slide 33** - The "Other" neighborhood category is too large and should be more specific.

### Comments and Questions

- Ken Pearce asked if the data shows an increase in MRE over time.
  - ⇒ Marise Rodriguez said that on the old data collection form most people tended to choose one or the other, but the new PEMS forms has more options/detail.
- Gayle Burns asked where the ethnicity data comes from.
  - ⇒ Marise Rodriguez explained that it comes from the programs' reporting.
- Gayle Burns then asked about the origin of the definitions of Race and Ethnicity.
  - ⇒ Marise Rodriguez explained the definition comes from the CDC, which defined: African-American, Asian Pacific Islander, Native American, and White as races; and Latina(o)/Hispanic as ethnicity.
- Derrick Mapp noted that there is a known gap in data about the FTM population.
  - ⇒ Marise Rodriguez responded that relatively little data has been collected on this group; nonetheless, agencies haven't reported much incidence among FTM.
  - ⇒ Frank Strona noted that the lack of data may be because agencies are not asking the right questions, and that the FTM who have sex with men population self-identify as Gay men and are reported as MSM.
    - He added that this lack of data is an embarrassment.
  - ⇒ Tracey Packer noted that some information has been collected, but that the data doesn't indicate a spike in incidence among FTM as it does among the MTF population.
  - ⇒ Michael Cooley added that there is also a shortage of data on Intersex people whose risk behavior correlates to their gender identity.
  - ⇒ Tracey Packer suggested FTM and Intersex be added to the Parking Lot.
  - ⇒ Billie Jean Kanios noted that FTM tend to be at a higher economic level than MTF and suggested getting information from Kaiser and others in the private sector.
- Abbie Zimmerman observed that grant writers tend to exaggerate the numbers of contacts, which may skew the costs per contacts shown on Slide 18.
- Michael Cooley pointed out that his agency has several sources of funding and that DPH funding covers only part of the programs' costs.
  - ⇒ He added that costs per contact should be calculated based on total funding.
  - ⇒ Marise Rodriguez suggested that because the DPH is not aware of all of the funding sources agencies rely on that an agency be used as an example for modeling purposes.
  - ⇒ Emalie Huriaux suggested costs per contact be on the Parking Lot for future discussion.
  - ⇒ Thomas Knoble suggested that costs per contact be communicated to the community.
  - ⇒ Dee Hampton said that as the epidemic changes agencies need to respond, and that the adjustment period takes time and will impact costs per contact.

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- Dara Coan observed that certain interventions involve multiple contacts and so cautioned against misinterpreting the graphs (Slides 21-27); they could be mistakenly read as showing some populations being over or under serviced.
  - ⇒ Derrick Mapp pointed out that the number of contacts isn't reflective of contact hours.
- Ken Pearce noted the difference between dollars allocated to Asian Pacific Islander TSM (Slide 10 [27% of total]) and Asian Pacific Islander TSM-IDU (Slide 14 [7% of total]).
  - ⇒ He noted that these percentages would indicate that about 1/3<sup>rd</sup> of this population is likely to be IDU, and asked if this is correct.
  - ⇒ Marise Rodriguez indicated that this most likely shows a gap in services.
  - ⇒ Tracey Packer pointed out that the numbers are from agencies providing services and their focus is based on their experience.
    - She added that non-IDU to IDU among TSM ethnicities could be modeled on existing, albeit old research data.
- Emalie Huriaux noted that among FSM-IDU there are co-factors other than sex-work.
  - ⇒ Tracey Packer explained that sex work was prioritized by the HPPC from available data that shows it is the only co-factor with higher risk than in the population as a whole.
  - ⇒ She added that agencies provide services to other non-prioritized subpopulations.
- Gwen Smith asked if prevention contracts count *unduplicated* contacts.
  - ⇒ Marise Rodriguez said that identifying duplicate contacts is nearly impossible for many prevention providers, and is not part of the contract.
  - ⇒ She added that the new PEMS form may determine which contacts are duplicate.
  - ⇒ Tracey Packer added that prevention often takes multiple contacts and that the number of contacts has validity unlike when evaluating medical/care services.

Perry Rhodes III asked the members if the discussion should continue among the whole Council, or if members would rather reconvene into small groups. The group's consensus was to remain whole.

- Michael Cooley noted the difficulty of doing prevention in jails where inmates are not allowed to talk about sex, and so the HPPC model might not fit the incarcerated population.
  - ⇒ Isela Gonzalez noted that although difficult, IRRRC could be done if focused on cofactors, such as substance use, noting that results are not easily measured.
  - ⇒ She added that incarcerated people often don't disclose all of their risk behaviors.
  - ⇒ Frank Strona added that the same challenges exist in residential treatment, and that both require a good deal of repetition and acuity on the part of the staff.
- Emalie Huriaux observed that after being released from incarceration or residential treatment many people revert to substance use to lose weight.
- Abbie Zimmerman noted among some populations people come in for services other than HIV prevention, and it requires training on the part of staff to get them into testing.
- Janetta Johnson noted that it is also difficult to discuss what is high-risk behavior to MST and they don't want to disclose all of their behaviors.
- Isela Gonzalez asked how an agency goes about getting more funding, if needed, for a successful intervention, and was told that agencies should ask although there are more requests than resources.
  - ⇒ Tracey Packer also noted that Technical Assistance is available.
- Israel Nieves-Rivera asked for clarification on the presentation's use of "Neighborhood."
  - ⇒ Marise Rodriguez said it is what agencies say they will do in their applications' narrative.
  - ⇒ She added that in the future data would be collected on residents' Zip Code.

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- ⇒ Marise Rodriguez said that she, Tracey Packer and Dara Coan are working on collecting data from ELI and comparing it to programs' 2004 projections.

The attendees expressed appreciation for Marise Rodriguez's presentation with applause.

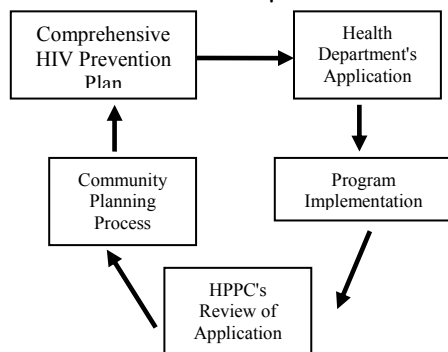
### Cooperative Agreement Overview

Tracey Packer provided background on the Cooperative Agreement, including the following.

- Collecting information on actual contacts compared to projected, as Marise Rodriguez discussed, is becoming increasingly important from the national level.
- The Cooperative Agreement is one of the most important things the HPPC does.
- The CDC mandates that the HPPC:

*"Review the health dept application to CDC for federal HIV prevention funds, including the proposed budget, and develop a written response that describes whether the health department application does or does not, and to what degree, agree with the priorities set forth in the comprehensive HIV prevention plan."*

- The process consists of these components:



- HPPC's current five-year Cooperative Agreement application is based on the 2004-08 HIV Prevention Plan with annual Interim Progress Reports (IPR) including:
  - ⇒ Progress Report for January - June 2006;
  - ⇒ Reports on CDC Performance Indicators, including projected versus actual performance;
  - ⇒ Priorities for 2007 from the 2004 Plan, the epidemiology and community values; and
  - ⇒ The SF-DPH's budget for 2007.
- Timeline for the IPR/Cooperative Agreement Letter:
  - ⇒ July - Guidance published by CDC;
  - ⇒ July - an HPPC Working Group to be established reviewing the Guidance, Performance Indicators, epidemiology, the Plan, and priorities for 2007;
  - ⇒ July - the entire HPPC membership reviews the application/IPR, and provides input;
  - ⇒ August - the Council authorizes a Letter of Concurrence, Concurrence with Reservations, or Nonconcurrence as per the CDC's direction (as above)
    - A Letter of Nonconcurrence would not stop the funding, but rather triggers conflict resolution.

### Comments and Questions

- Michael Cooley noted that it is a big document and members should dedicate time to read it.
- Tracey Packer asked for suggestions to make the process easier to read.
- Abbie Zimmerman suggested:
  - ⇒ A committee review the whole document and publish a summary in bullet points; or

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## Minutes

June 08, 2006

- ⇒ Dividing the application and have groups review the section(s) which they have the greatest expertise in and then have each group report back to the whole.
- In response to Isela Gonzalez, Tracey Packer said members would have about two-weeks to review the application, although there would be advanced drafts available.
- Frank Strona suggested using existing Committees to review the agreement.
  - ⇒ He also suggested assigning parts to Committee members based on their expertise, where appropriate, but in any event to divide up the task.
  - ⇒ He added that members shouldn't feel they have to read the entire document and should be able to respect other members' expertise on specific parts.
  - ⇒ He also suggested that members should be able to opt-out of this process.
- Israel Nieves-Rivera noted that last year the Guidelines came so late that it was nearly impossible to respond to, and that the CDC has indicated that it will change (streamline) the Guidance again this year, which may delay its publication.
  - ⇒ He suggested reviewing last year's application, as they rarely change much year to year.

### **Summary, Evaluation, and Closure of Meeting**

Perry Rhodes III reminded members to fill in their evaluations. The meeting adjourned 6:01 PM.

Minutes prepared by David Weinman.

Minutes reviewed by Lisa Reyes and Tracey Packer.

**Reminders: The next HPPC business meeting, will be Thursday, July 13, 2006  
Location: Quaker Meeting House, 65 Ninth Street, SF**