



County of San Diego

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DRAFT AGENDA
SAN DIEGO HIV PLANNING GROUP
PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)

Thursday, March 9, 2023 3:00 PM

County Operations Center (COC)
5500 Overland Ave. (Training Room 120) San Diego, CA 92123

To participate remotely via WebEx (click the following link):
<https://sdcountycal.webex.com/sdcountycal/j.php?MTID=m4bfdd3a6688a008b444f74f4ebc8fa49>

Meeting Number/Access Code: 133 857 8395

Password: PSRAC.20

Join the meeting via phone: 1-470-238-5742 US Toll / 52-55-6722-5298 Mexico Toll

Participantes que solicitan traducción al español: (Deben notificar al personal de apoyo con 96 horas de anticipación). Recibirán un correo electrónico con el número para llamar.

This meeting is audio and video recorded.

The Charge of the Priority Setting and Resource Allocation Committee: To review, analyze and consider available data and make recommendations to the HIV Planning Group based upon that data regarding service priorities, service delivery, and funding allocation by service category, including the commitment to addressing racial/ethnic disparities for Black/African American MSM (retention in care, viral load suppression), Latinx MSM (late and simultaneous diagnoses) and transgender/Non-Binary persons (lack of data and non-representative participation).

A quorum for this committee is seven (7)

Committee members: Beth Davenport, Reginal Carroll, Alberto Cortes, Felipe Garcia-Bigley, Pam Highfill, Dr. Delores Jacobs (Chair), Cinnamon Kubricky, Chris Mueller, Raul Robles, James Rucker (co-chair), Karla Quezada-Torres, Regina Underwood, Rhea Van Brocklin, Freddy Villafan

1. Call to order; introductions; comments from the Chair
2. Reminders:
 - **Review of committee charge**
 - **Committee members' Conflicts of interest:** disclose areas of financial interest (e.g., employment); refrain from participation in related votes
 - **Areas that are NOT the purview of this committee:** selection of contractors; contract details; how contractors implement contracted services (staff salaries, etc.) These are the

- sole purview of the Recipient.
 - **Focus on service priorities, not on specific service providers**
 - **Rules for the meeting** (as necessary): committee members are limited to 2 minutes per comment and limited to two comments per item; public comments are welcome at the beginning and prior to each agenda item, limited to two minutes so that all have an opportunity to participate
3. Public comment on non-agenda items (for members of the public)
 4. Sharing our concerns (for committee members)
 5. Approve the meeting agenda for March 9, 2023 [Click or tap to enter a date.](#)
 6. Approve the meeting minutes from February 9, 2023 and review follow-up items from the minutes
 7. Review committee attendance
 8. Old Business:
 - a) Getting to Zero (GTZ) Community Action Plan:
 1. Return to in-person meetings.
 2. Discussion and **Action**: consider suggestions regarding adjusting the times committee meets and frequency of meetings.
 3. Expand Ryan White funded mental health services capacity: Increasing rapid access to regional availabilities, decreasing wait times
 4. Explore the feasibility and cost of creating walk-in medical services, mental health services, and substance use treatment services
 - b) Process for review of the previous year's reallocations and data upon which they were based compared to the approved budget for the upcoming (FY23) year and accompanying data to address potential needs/changes which may be required. Recipient reallocations reviewed and approved by HPG
 - c) Review data on **co-occurring conditions, poverty, and insurance** and discuss findings.
 9. New Business
 - a) **Action Item**: Approve the recommendation(s) for the reallocation of Part A funds in FY 23 (March 1, 2023 – February 28, 2024)
 - b) UCSD - TRIUMPH Community Survey – Dr. Kiyomi Tsuyuki, UCSD
 - a) Review Integrated (Comprehensive) Plan/Getting to Zero Plan goals related to PSRAC
 - b) Address change in FY 23 Part A funding (if needed)
 - c) PARS Report
 - d) Presentation: Housing services – HOPWA and Housing Resources by Freddy Villafan
 10. Routine Business
 - a) Review Monthly and YTD expenditures and examine for any recommended reallocations.
 - i. Review of over/under spending
 - b) Review Monthly and YTD service utilization report
 - c) COVID-19/Monkeypox update
 - d) Affordable Care Act (ACA) update
 - e) HIV Prevention update
 - f) Review the PSRAC FY 23 Work Plan
 11. Suggested items for the PSRAC agenda
 12. Next Meeting: Thursday, **April 13, 2023**. Location: **County Operations Center (COC), Training Room 124: 5530 Overland Ave San Diego, CA 92123**
 13. Announcements
 14. Adjournment

Principles for PSRA Decision-Making process	Criteria for the PSRA Decision-Making process
<p>Principles Guiding Decision Making (Priorities should reflect the Principles)</p> <ol style="list-style-type: none"> 1. Decisions are made in an open, transparent process 2. Decisions are based on documented needs (Needs assessment, etc.) 3. Decisions are based on overall needs within the service area, not narrow single focus concerns 4. Decisions include reports from the Needs Assessment committee of the HIV Planning Group. 5. Services should be responsive to the epidemiology of HIV in San Diego, including demographics and region 6. Services must be culturally and linguistically appropriate and responsive 7. Services should focus on the needs of low-income, underserved, and disproportionately impacted populations 8. Services should minimize disparities in the availability and quality of treatment for HIV/AIDS 9. Equitable access to services should be provided across subpopulations and regions 	<p>Criteria for Priority Setting</p> <ol style="list-style-type: none"> 1. Documented Need based on: <ol style="list-style-type: none"> a. Epidemiology of San Diego epidemic (Epi data) b. Needs and unmet needs expressed in needs assessment, including the needs expressed by consumers, not in care and/or from historically underserved communities (Needs assessment data) 2. Minimize disparities in the availability and quality of treatment for HIV/AIDS (Demographic service utilization data compared to HIV/AIDS demographic) 3. Quality, outcome effectiveness, and cost-effectiveness of services (Measured by service category outcomes, CQM, and client satisfaction data by service category) 4. Consumer preferences or priorities for interventions or services, particularly for populations with severe need, historically underserved communities, or those who know their status but are not in care 5. Consistency with the continuum of care

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