

PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)



*Thursday, July 24, 2025, 1:00 PM – 4:00 PM
Southeastern Live Well Center.
5101 Market St, San Diego, CA 92114.
Tubman Chavez Room A*

A quorum for this meeting is six (6)

Committee Members Present: Marco Aguirre Mendoza | Tyra Fleming (Co-Chair) | Felipe Garcia-Bigley | Dr. Delores Jacobs | Sergio Luna | Eva Matthews | Chris Mueller | Cinnamen Kubricky | Dr. Beth Davenport | Rhea Van Brocklin (Chair)

MEETING MINUTES

Agenda Item	Action	Follow-up
1. Call to order	Rhea Van Brocklin called the meeting to order at 1:10 PM and noted an in-person quorum was established.	
2. Reminders	None	
3. Public Comment on non-agenda items (for members of the public)	A member of the public stated <ul style="list-style-type: none">• Request for the county to distribute service eligibility criteria updates (suggested biannually) to all agencies due to staff turnover.• Medical Case Management Shortage: Long-term clients shared an inability to access case management at Christie's Place despite significant health needs.• Transportation and Childcare Barriers: Emphasis on the need for transportation and childcare to facilitate participation, especially for women with children.	
Sharing our concerns (for committee members)	<ul style="list-style-type: none">• Reminder that current times are unique; data may not fully reflect situational realities.• Calls for reflective, mindful decision-making considering	

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	broader present-day challenges	
4. Action: Review and approve the agenda for July 24, 2025	Motion: Approve the July 24, 2025 Meeting agenda as presented. Motion/Second/Count (M/S/C): Kubricky/ Fleming 8/0 Abstentions: Van Brocklin Motion carries	
5. Routine Business		
a. Review Monthly and Year-to-Date expenditures and assess for recommended reallocations	No New Reallocations since prior meeting. Recent funding increases: <ul style="list-style-type: none"> • Oral health (most significant increase, specific dollar amounts not given). • Psychiatric medication management. Recent funding decreases: <ul style="list-style-type: none"> • Medical and non-medical case management (only unspent funds from March–June; does not affect future services). • Watch List (Potential Underspending) Medical Specialty: <ul style="list-style-type: none"> • \$190,000 budgeted, only \$20,000 spent; medium risk of underspending. • podiatry, gynecology, and oncology. May result in substantial savings. EIS Regional: <ul style="list-style-type: none"> • Medium underspending risk; sources under investigation for causes. Substance Use Treatment (Outpatient): <ul style="list-style-type: none"> • Small risk of underspending; no changes recommended at this time. Home-Based Care Coordination: <ul style="list-style-type: none"> • Medium risk: service is episodic (post- 	

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	<p>hospitalization, to prevent readmission).</p> <p>Peer Navigation:</p> <ul style="list-style-type: none"> • Small risk of insufficient funding. <p>Oral Health:</p> <ul style="list-style-type: none"> • An additional \$100,000 allocated; being monitored. <p>Psychiatric Medication Management:</p> <ul style="list-style-type: none"> • Slight risk of shortfall (\$5,000–\$10,000); manageable via routine adjustments 	
<p>b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update</p>	<p>No update</p>	
<p>c. Review the Monthly and Year-to-Date service utilization report</p>	<p>Overall Client Numbers:</p> <ul style="list-style-type: none"> • Approximately 10% decrease in clients served compared to last year. • Notable increases in: • Women, children, family: +20% clients. • Medical nutrition therapy: +39% clients. • Other categories have decreased uptake, indicating clients are accessing fewer services. <p>Possible Causes of Decline:</p> <ul style="list-style-type: none"> • Reported increased client fear of accessing in-person services (cited by providers and community). • A need to explore data on fear and potential solutions to increase client sense of safety. <p>Data System Transition:</p> <ul style="list-style-type: none"> • Statewide change from ARIES to HIV Care Connect as data system. • Possible incomplete data transfer during transition 	

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	noted as partial explanation for observed declines.	
6. Old Business		
a. Review Additional Data Requested	None	
7. New Business		
a. ACTION: Recommendations for reallocations for FY 25 (the current fiscal year, March 1, 2025 – February 28, 2026) (if needed)	None	
b. ACTION: Summarize/Finalize Key Findings data on HIV Epidemiology	<p>Motion: Approve Key Findings data on HIV Epidemiology.</p> <p>Motion/Second/Count (M/S/C): Garcia-Bigley/ Jacobs 8/0</p> <p>Abstentions: Van Brocklin</p> <p>Motion carries</p> <p>Discussion: Key Findings: HIV Care Continuum Data</p> <p>Importance: Guides program funding/resource distribution. Identifies gaps by age, race, gender, and risk. Tracks progress toward ending the HIV epidemic.</p> <p>Care Continuum Steps Reviewed:</p> <ul style="list-style-type: none"> • Diagnosed, linked to care, retained in care, viral suppression. <p>Retention in Care:</p> <ul style="list-style-type: none"> • 70% of people living with HIV accessed care. • 47% remained in care (as defined by 2 visits/12 months, 3+ months apart). • Concerns raised about this metric’s validity; it reflects older standards and may not account for stable clients only needing 1 annual visit. • Suggestion to adjust or clarify the metric for future reporting. <p>Viral Suppression:</p>	

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	<p>County-wide: ~58% (limitations acknowledged in comparison data). Ryan White clients: 93–95% (significantly higher). Noted the need for increased outreach/education on U=U (“Undetectable equals Untransmittable”). Extended Discussion: Retained in care measure is problematic, may not truly indicate engagement in care. The distinction between Ryan White and county-wide data was discussed, with an emphasis on benchmarking but not conflating for service allocation.</p>	
<p>c. ACTION: Summarize/Finalize Key Findings data on HIV Care Continuum</p>	<p>Motion: Approve Key Findings data on HIV Care Continuum. Motion/Second/Count (M/S/C): Luna/Mueller 8/0 Abstentions: Van Brocklin Motion carries Discussion: Data sources clarified: Epidemiological data lags due to reporting; Ryan White uses ARIES/Care Connect; epidemiology uses eHARS (state report). There is a recognized need for more recent and comparable data across reporting systems. Importance of focusing on the out-of-care population; targeted strategies needed.</p>	
<p>d. ACTION: Recommendations with justifications to the HIV Planning Group for service priority ranking and how services should be organized and delivered in FY 26 (March 1, 2026 – February 28, 2027)</p>	<p>Motion: Approve FY26 priority rankings as Outpatient Ambulatory Health Services: Primary Care Ranking #1/ Outpatient Ambulatory Health Services: Medical Specialty Ranking #2/ Oral Health Ranking #3</p>	

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	<p>Motion/Second/Count (M/S/C): Abstentions: Van Brocklin/ Garcia/Bigley/ Mueller 6/0 Motion carries</p>	
	<p>Motion: Housing: Partial Assistance Rental Subsidy (PARS) Ranking #4/ Housing Location, Placement and Advocacy Services Ranking #5/ Mental Health: Counseling/Therapy / Substance Use Treatment Services: Outpatient Ranking #7 Motion/Second/Count (M/S/C): Jacobs/Kubricky 4/0 Abstentions: Van Brocklin/ Davenport/ Garcia-Bigley/ Mueller Motion carries</p>	
	<p>Motion: Approve FY26 priority rankings: Mental Health: Psychiatric Medication Management Ranking #8/ Mental Case Management Ranking #9 / Non-Medical Case Management Ranking #10 / Non-Medical Case Management for Housing Ranking #11/ Housing Location, Placement and Advocacy Services Ranking #12 Motion/Second/Count (M/S/C): Jacobs/ Luna Abstentions: Kubricky/ Davenport/ Mueller Van Brocklin Motion carries</p>	
	<p>Motion: Approve FY26 priority rankings: Coordinated HIV Services for Women, Infants, Children, Youth, and Families (CHS: WICYF) Ranking 13/ Childcare services (subcategory of CHS: WICYF) Ranking #13a/ Peer Navigation (Referral for Health Care and Support Services) Ranking #14/ Outreach Services (subcategory of EIS:RS) Ranking #15b/ Early Intervention Services: Regional Services Ranking #15a/ Referral Services (subcategory of</p>	

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	<p>EIS) Ranking #15c/ Health Education & Risk Reduction (stand-alone) Ranking #16 Motion/Second/Count (M/S/C): Fleming/ Jacobs 4/0 Abstentions: Matthews/ Garcia-Bigley/ Mueller / Davenport /Van Brocklin Motion carries</p>	
	<p>Motion: Approve FY26 priority rankings: Psychosocial Support Services #17/Substance Use Treatment Services: Residential Ranking #18 / Home-based Health Care Coordination ranking # 19 Motion/Second/Count (M/S/C): Jacobs/ Mueller 7/0 Abstentions: Garcia-Bigley / Van Brocklin/ Mueller/ Davenport Motion: Failed Motion: Approve FY26 priority rankings: Psychosocial Support Services #17/Substance Use Treatment Services: Residential Ranking #18 /Home-based Health Care Coordination ranking #19 Motion/Second/Count (M/S/C): Jacobs/ Matthews 5/0 Abstentions: Garcia-Bigley / Mueller/ Van Brocklin Motion: carries</p>	
	<p>Motion: Approve FY26 priority rankings: Transportation Assisted and Unassisted Ranking #20 (M/S/C): Jacobs/ Luna 6/0 Abstentions: Garcia-Bigley/ Mueller / Van Brocklin Motion: carries</p>	
	<p>Motion: Approve FY26 priority rankings: Food Services: Food Bank/Home-Delivered Meals at</p>	

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	priority #21; Medical Nutrition Therapy at priority #22; Legal Services at priority #23; Emergency Financial Assistance at priority #24; Home Health at priority #25; Early Intervention Services: HIV Counseling and Testing at priority #26; Cost-Sharing Assistance at priority #27; and Hospice at priority #28 (M/S/C): Jacobs/ Davenport 5/0 Abstentions: Matthews, Kubricky, Mueller, Van Brocklin Motion: carries	
e. ACTION: Complete recommendations with justifications for changes in funding allocations in level and reduction-funding scenarios for FY 26 (March 1, 2026 – February 28, 2027).	None	
8. Suggested items for the PSRAC agenda		
9. Announcements		
10. Next Meeting:	Date: Thursday, July 31, 2025, 1:00 PM - 4:00 PM Location: Southeastern Live Well Center 5101 Market St, San Diego, CA 92114. Tubman Chavez Room A	
11. Adjournment	The meeting adjourned at 4:02 PM.	