## Sacramento County Department of Health Services HIV Health Services Planning Council Executive Committee

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Meeting Agenda September 14, 2023, 3:00 p.m. to 5:00 p.m.

#### Meeting Location –

4600 Broadway, Sacramento, CA 95820 2<sup>nd</sup> Floor Conference/Community Room 2020

Facilitator:	Richard Benavidez – Council Chair
Scribe:	Angelina Olweny– Council Staff

#### Meeting Invitees:

Richard Benavidez – Council Chair
Kristina Kendricks-Clark – Vice Chair & QAC Chair
Melissa Willett – AdAC Chair
Zach B. - ACC Chair
Chelle Gossett – Recipient
Jake Bradley-Rowe – PAC Chair
Ronnie Miranda - NAC Chair
Michael Ungeheuer – Gov Chair
Open to the Public

Public Comment: This provides opportunities for the public to address the Council as a whole in order to listen to opinions regarding matters within the jurisdiction of the Council during Regular meetings and regarding items on the Agenda at all other meetings. Public Comment time limit is three (3) minutes.

\*Action Items

Торіс	Presenter	Start Time and Length
Welcome and Introductions	Benavidez	3:00 pm
Announcements	All	
Public Comments-Agenda Items	Benavidez	
September 2023 Agenda*	Benavidez	

## HIV HEALTH SERVICES PLANNING COUNCIL Executive Committee

### **Meeting Minutes**

June 8th, 2023, 3:00 p.m. to 5:00 p.m.

### Meeting Location:

Sacramento Sexual Health Center, 4600 Broadway, Conference Room 2020, Sacramento, CA 95820

Facilitator: Richard Benavidez – Council Vice-Chair

Scribe: Angelina Olweny – Council Staff

### Committee Member Attendees:

Zach B. – ACC Chair, Jake Bradley-Rowe – PAC Chair, Chair, Kristina Kendricks-Clark – Vice Chair, Richard

Benavidez – Council Chair, Ronnie Miranda – NAC Chair, Michael Ungeheuer – Governance Chair, Melissa Willett – AdAC

Excused: Chelle Gossett- Recipient

County Staff: Danielle Caravella

Guests: Alan Lange

Members Absent: N/A

EL DORADO COUNTY - July 2023	Approved	Current	Cumulative		Percentage	Remaining
Service Category	Budget	Month	Expenses	% Shade	Used	Balance
Ambulatory/Outpatient Care	\$1,568	\$0	\$0		0.0%	\$1,568
Oral Health	\$5,285	\$160	\$491		9.3%	\$4,794
Health Insurance Premium & Cost Sharing Asst.	\$1,955	\$61	\$306		15.6%	\$1,649
Mental Health Services	\$14,131	\$0	\$0		0.0%	\$14,131
Medical Case Management	\$133,642	\$11,336	\$51,822		38.8%	\$81,820
Medical Transportation Services	\$9,284	\$1,293	\$4,483		48.3%	\$4,802
Emergency Financial Assistance	\$30,750	\$2,640	\$12,256		39.9%	\$18,494
Sub-Total El Dorado Counties	\$196,615	\$15,489	\$69,357		35.3%	\$127,258

PLACER COUNTY - July 2023	Approved	Current	Cumulative		Percentage	Remaining
Service Category	Budget	Month	Expenses	% Shade	Used	Balance
Ambulatory/Outpatient Care	\$1,540	\$0	\$0		0.0%	\$1,540
Oral Health	\$2,530	\$0	\$0		0.0%	\$2,530
Health Insurance Premium & Cost Sharing Asst.	\$115	\$0	\$323		281.1%	-\$208
Mental Health Services	\$6,925	\$0	\$0		0.0%	\$6,925
Medical Case Management	\$137,654	\$11,415	\$56,444		41.0%	\$81,210
Medical Transportation Services	\$20,891	\$1,573	\$6,935		33.2%	\$13,956
Emergency Financial Assistance	\$30,000	\$2,860	\$17,259		57.5%	\$12,741
Sub-Total Placer County	\$199,655	\$15,848	\$80,961		40.6%	\$118,694

**Priority Number** 

SACRAMENTO COUNTY - July 2023 Service Category	Approved Budget	Current Month	Cumulative Expenses	% Shade	Percentage Used	Remaining Balance
1 Ambulatory/Outpatient Care	\$465,341	\$23,277	\$158,660		34.1%	\$306,681
SS: Ambulatory/Outpatient Medical Care	\$405,903	\$23,277	\$134,715		33.2%	\$271,188
SS: Vendor paid viral/load resistance lab test	\$59,438	\$0	\$23,946		40.3%	\$35,492
2 ADAP/Prescription Medications	· · ·		Not Funded at	This Time		·
3 Health Insurance Premium & Cost Sharing Asst.	\$7,154	\$0	\$2,877		40.2%	\$4,277
4 Oral Health	\$275,801	\$4,953	\$51,948		18.8%	\$223,853
5 Medical Case Management	\$1,040,785	\$84,942	\$375,272		36.1%	\$665,513
SS: MAI	\$188,634	\$17,761	\$95,942		50.9%	\$92,692
SS: Office Based Services	\$417,094	\$33,121	\$158,420		38.0%	\$258,673
SS: Field/In-Home Services	\$412,375	\$33,823	\$119,615		29.0%	\$292,760
SS: Pediatric Treatment Adherence	\$1,070	\$46	\$289		27.0%	\$781
SS: Case Mgmt Child Care	\$21,612	\$192	\$1,006		4.7%	\$20,606
6 Case Management (Non-Medical)	\$61,504	\$3,902	\$27,776		45.2%	\$33,728
7 Food Bank/Home Delivered Meals	\$34,654	\$3,249	\$5,905		17.0%	\$28,749
8 Mental Health Services	\$441,683	\$34,226	\$195,309		44.2%	\$246,374
9 Psychosocial Support			Not Funded at	This Time		. ,
10 Medical Transportation Services	\$80,487	\$893	\$31,252		38.8%	\$49,235
11 Substance Abuse Services - Outpatient	\$188,815	\$16,122	\$55,553		29.4%	\$133,262
12 Substance Abuse Services - Residential	\$65,562	\$0	\$0		0.0%	\$65,562
13 Housing Assistance	\$24,015	\$6,067	\$9,620		40.1%	\$14,396
14 Child Care Services	\$22,154	\$1,056	\$4,096		18.5%	\$18,058
15 Emergency Financial Assistance	\$22,543	\$220	\$1,860		8.3%	\$20,683
16 Medical Nutritional Therapy	\$12,374	\$1,060	\$8,347		67.5%	\$4,027
17 Health Education/Risk Reduction	+ <b>,</b> - · · ·	+_,	Not Funded at	This Time		+ .,
18 Outreach Services			Part B Fund			
19 Outreach Services MAI			Part B Fund			
20 Linguistic Services			Not Funded at	•		
21 Home & Community Based Health Services			Not Funded at			
22 Home Health Care			Not Funded at			
23 Hospice			Not Funded at			
24 Legal Services			Not Funded at			
25 Permanency Planning			Not Funded at			
26 Referral for Health Care and Support Services			Not Funded at			
27 Rehabilitation Services			Not Funded at			
28 Respite Care			Not Funded at			
29 ADAP/Prescription Medications			Not Funded at			
30 Early Intervention Services			Not Funded at			
Sub-Total Sacramento County	\$2,742,872	\$179,966	\$928,474		33.9%	\$1,814,398
Sub-Total TGA Direct Service Expenditures	\$3,139,142	\$211,304	\$1,078,792		34.37%	\$2,060,350
Sub-Iotal IGA Direct Service Expenditures	<i>ф3</i> ,137,142	φ <b>211,3</b> 04	φ <b>1,070,792</b>		J <b>4.</b> J170	¢2,000,350
Recipient - Grantee Admin	\$369,311	\$13,243	\$98,995		26.81%	\$270,316
Recipient - Quality Mgmt	\$184,654	\$5,668	\$43,141		23.36%	\$141,513
Grand- Total Direct Services, Recipient	\$3,693,107	\$230,215	\$1,220,928		33.06%	\$2,472,179
Missing Invoices						Julv

Missing Invoices		July
March: Oral Health	Under 5%	0-35%
April: Oral Health	Within 5%	36-46%
May: Oral Health, MCM	Over 5%	47% - Over
June: Oral Health, MCM		
July: Oral Health, MCM		

TGA Direct Service Expenditures by \$ Source	Approved Budget	Current Month	Accumulative Expenditures	% Shade	% Used	Remaining Balance
Part A	\$2,950,508	\$193,543	\$982,851		33.31%	\$1,967,657
Part A MAI	\$188,634	\$17,761	\$95,942		50.86%	\$92,692
					% Current	% Cumulative
	A 11	G (	Communitations	O/ C A 11	E 114	
Total Part A: 75/25 Expenditure Requirement	Allocations	Current	Cumulative	% of Alloc.	Expenditure	Expenditure
Core Services (Does not include MAI MCM)	\$2,548,664				87.7%	Expenditure 87.6%

YOLO COUNTY - July 2023	Approved	Current	Cumulative		Percentage	Remaining
Service Category	Budget	Month	Expenses	% Shade	Used	Balance
Oral Health	\$7,500	\$0	\$2,540		33.9%	\$4,960
Medical Case Management	\$100,000	\$6,306	\$33,860		33.9%	\$66,140
Foodbank/Home Delivered Meals	\$10,000	\$739	\$4,627		46.3%	\$5,373
Medical Transportation Services	\$2,500	\$100	\$351		14.1%	\$2,149
Housing	\$1,000	\$0	\$0		0.0%	\$1,000
Emergency Financial Assistance	\$1,500	\$0	\$46		3.1%	\$1,454
Sub-Total YOLO County	\$122,500	\$7,145	\$41,425		33.8%	\$81,075

	SACRAMENTO COUNTY - July 2023 Service Category	Approved Budget	Current Month	Cumulative Expenses	% Shade	Percentage Used	Remaining Balance			
1	Ambulatory/Outpatient Care	\$355,000	\$20,410	\$108,590		30.6%	\$246,410			
	SS: Ambulatory/Outpatient Medical Care	\$355,000	\$20,410	\$108,590		30.6%	\$246,410			
	SS: Vendor paid viral/load resistance lab test			Part A Fu	nded					
2	ADAP/Prescription Medications	Not Funded at This Time								
3	Health Insurance Premium & Cost Sharing Asst.			Part A Fu						
	Oral Health	\$221,000	\$19,214	\$65,039		29.4%	\$155,96			
	Medical Case Management	\$59,311	\$5,763	\$26,169		44.1%	\$33,14			
	SS: MAI	+ ,	+=,: ==	Part A Fu	nded					
	SS: Office Based Services	\$3,559	\$0	\$0		0.0%	\$3,55			
	SS: Field/In-Home Services	\$55,753	\$5,763	\$26,169		46.9%	\$29,58			
	SS: Pediatric Treatment Adherence	\$55,155	\$5,705	Part A Fu	nded	40.970	φ29,50			
	SS: Case Mgmt Child Care			Part A Fu						
	Case Management (Non-Medical)	\$86,000	\$6,902	\$30,256	nucu	35.2%	\$55,74			
	Food Bank/Home Delivered Meals	\$18,000	\$0,902 \$0	\$30,230 \$0		0.0%	\$18,00			
	Mental Health Services	\$18,000	\$9.391	\$38,173		38.8%	\$10,00			
	Psychosocial Support	\$98,400	\$9,391	Not Funded at	This Time	38.8%	\$00,28			
		¢111.200	\$12.054	\$42,717	This Time	29.40/	¢ ( 0, 4 0			
	Medical Transportation Services	\$111,200	\$12,054	. /	1.1	38.4%	\$68,48			
	Substance Abuse Services - Outpatient	Part A Funded Part A Funded								
	Substance Abuse Services - Residential									
	Housing Assistance			Part A Fu						
	Child Care Services			Part A Fu						
	Emergency Financial Assistance			Part A Fu	nded					
	Medical Nutritional Therapy	\$3,450	\$0	\$3,390		98.3%	\$6			
	Health Education/Risk Reduction			Not Funded at	This Time	-				
	Outreach Services	\$21,000	\$1,750	\$6,390		30.43%	\$14,61			
	Outreach Services MAI	\$37,192	\$2,540	\$10,423		28.02%	\$26,76			
	Linguistic Services			Not Funded at	This Time					
	Home & Community Based Health Services			Not Funded at	This Time					
	Home Health Care			Not Funded at	This Time					
3	Hospice			Not Funded at	This Time					
	Legal Services			Not Funded at	This Time					
	Permanency Planning			Not Funded at	This Time					
5	Referral for Health Care and Support Services			Not Funded at	This Time					
	Rehabilitation Services			Not Funded at						
				Not Funded at						
7	Respite Care									
7	Respite Care ADAP/Prescription Medications			Not Funded at	This Time					
3	ADAP/Prescription Medications			Not Funded at						
7	ADAP/Prescription Medications Early Intervention Services	\$1.010.613	\$78.023	Not Funded at		32.8%	\$679.46			
7 8 9	ADAP/Prescription Medications Early Intervention Services Sub-Total Sacramento County	\$1,010,613	\$78,023	Not Funded at \$331,146		32.8%				
7	ADAP/Prescription Medications Early Intervention Services	\$1,010,613 \$1,133,113	\$78,023 \$85,168	Not Funded at		32.8% 32.88%				
7 8 9	ADAP/Prescription Medications Early Intervention Services Sub-Total Sacramento County Sub-Total TGA Direct Service Expenditures	\$1,133,113	\$85,168	Not Funded at \$331,146 \$372,571		32.88%	\$760,54			
7	ADAP/Prescription Medications Early Intervention Services Sub-Total Sacramento County	. , ,	: /	Not Funded at \$331,146			\$679,46 \$760,54 \$92,27 \$47,28			

Missing Invoices

None

	July
Under 5%	0-28%
Within 5%	29-38%
Over 5%	39% - Over

Se	ervice Category		FY23 Part A pplication F	Request	FY23 Part A Allocatio	ons	FY23 Part A t Allocations carryov	s with ver	FY24 Part A Application	Request	
FY24 Priority			Amount	Percent of Direct	Amount	Percent of Direct	Amount	Percent of Direct	Amount	Percent of Direct	Conflicts
	EL DORADO COUNTY	\$	194,461	6.6%	\$196,615		\$206,615		\$203,115		SFAF
	Ambulatory Care				\$1,568	0.1%	\$1,568	0.1%	\$1,568	0.1%	
	Oral Health				\$5,285	0.2%	\$5,285	0.2%	\$5,285	0.2%	
	Health insurance				\$1,955	0.1%	\$1,955	0.1%	\$1,955	0.1%	
	Mental Health Services				\$14,131		\$14,131	0.5%	\$14,131	0.5%	
	Medical Case management				\$133,642		\$143,642	4.6%	\$137,642		
	Medical Transportation				\$9,284		\$9,284		\$9,784		
	Emergency Financial										
	Assistance				\$30,750		\$30,750		\$32,750		SFAF
	PLACER COUNTY	\$	197,501	6.7%	\$199,655	6.8%	\$219,655	7.0%	\$213,155	6.9%	5174
	Ambulatory Care				\$1,540	0.1%	\$1,540	0.0%	\$1,540	0.0%	
	Oral Health				\$2,530	0.1%	\$2,530	0.1%	\$2,530	0.1%	
	Health insurance Mental Health				\$115	0.0%	\$115	0.0%	\$115	0.0%	
	Services				\$6,925	0.2%	\$6,925	0.2%	\$6,925	0.2%	
	Medical Case management				\$137,654	4.7%	\$147,654	4.7%	\$143,654	4.6%	
	Medical Transportation				\$20,891	0.7%	\$20,891	0.7%	\$22,391	0.7%	
	Emergency Financial Assistance				\$30,000	1.0%	\$40,000	1.3%	\$36,000	1.2%	
	YOLO COUNTY										
	(Sacramento County Breakdown ONLY)	ç	\$2,554,882	86.7%	\$2,554,238	86.6%	\$2,704,317	86.4%	\$2,681,763	86.6%	
1	Ambulatory/Outpat ient Medical Care	\$	461,261	15.7%		15.8%		14.9%		15.0%	OCH, UCD
	1.a.Ambulatory Care	\$	403,863	13.7%	\$405,903		\$405,903		\$405,903		
	1.b.Viral Load/ Resistance Testing	\$	57,398	1.9%	\$59,438	2.0%	\$59,438	1.9%	\$59,438	1.9%	
2	AIDS Pharmaceutical	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
3	Health Insurance Premiums	\$	5,000	0.2%	\$7,154		\$22,154	0.7%	\$19,904	0.6%	ОСН
4	Oral Health Care	\$	291,147	9.9%	\$275,801		\$275,801	8.8%		8.9%	ОСН
	Medical Case		•								HRS, OCH,
5	Management 5.a. Child Care	\$	850,000	28.8%	\$852,151	28.9%	\$927,230	29.6%	\$902,151	29.1%	SP, UCD
	Medical Case 5.b. Office-based		20,895	0.7%	\$21,612	0.7%	\$21,612	0.7%	\$21,612	0.7%	
	Medical CM Services 5.c. Field/In-Home	\$	417,447	14.2%	\$418,164	14.2%	\$418,164	13.4%	\$418,164	13.5%	
	Medical CM Services 5.d. Minority AIDS	\$	411,658	14.0%	\$412,375	14.0%	\$412,375	13.2%	\$412,375	13.3%	
	Initiative Medical CM Non-Medical Case			0.0%		0.0%		0.0%		0.0%	GRS, OCH,
6	Management	\$	54,582	1.9%	\$61,504	2.1%	\$101,504	3.2%	\$101,504	3.3%	SP
7	Food Bank/Home Delivered Meals	\$	32,500	1.1%	\$34,654	1.2%	\$34,654	1.1%	\$34,654	1.1%	OCH, HRS, SP
8	Mental Health Services	\$	439,752	14.9%	\$441,683	15.0%	\$441,683	14.1%	\$469,458	15.2%	OCH, SP
1	Psychosocial Support Services	\$									N/A

	Medical					1					OCH, HRS,
10	Transportation	\$	78,333	2.7%	\$80,487	2.7%	\$80,487	2.6%	\$80,487	2.6%	SP
	Substance Abuse	\$	201 / / 1	6.8%	¢400.045	6.4%	¢100.015	6.0%	¢100.015	6.1%	OCH
11	Services - Substance Abuse	⊅	201,661	0.8%	\$188,815	6.4%	\$188,815	6.0%	\$188,815	0.1%	
12	Services –	\$	63,408	2.2%	\$65,562	2.2%	\$65,562	2.1%	\$45,562	1.5%	OCH
13	Housing Assistance	\$	21,861	0.7%	\$24,015	0.8%	\$24,015	0.8%	\$24,015	0.8%	ОСН
10	nousing resistance	Ψ	21,001	0.770	<i>\\</i>	0.070	\$24,010	0.070	\$24,010	0.070	SP
14	Child Care Services Emergency	\$	20,000	0.7%	\$22,154	0.8%	\$22,154	0.7%	\$22,154	0.7%	JF
15	Financial Assistance	\$	20,389	0.7%	\$22,543	0.8%	\$22,543	0.7%	\$22,543	0.7%	SP, HRS
	Medical Nutritional										ОСН
16	Therapy Health Education	\$	10,220	0.3%	\$12,374 Moved to	0.4%	\$32,374 Moved to	1.0%	\$29,374	0.9%	
17	Risk Reduction	\$	4,768	0.2%	NMCM by PC	0.0%	NMCM by PC	0.0%		0.0%	
18	Outreach Non-MAI			0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	OCH
10				0.078	¥ -	0.0 %	¥ -	0.078	¥ -	0.076	GRS, OCH
19	MAI Outreach	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	GRS, UCH
20	Linguistic Services	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
21	Home and										
21	Community Based	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
22	Home Health Care	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
23	Hospice	¢		0.0%	*	0.00/	¢	0.0%	¢	0.00	
		\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
24	Legal Services	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
25	Permanency Planning	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
26	Referral for Health	¥		0.070	¥ -	0.070	Ψ -	0.070	¥ -	0.070	
20	Care and Support	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
27	Rehabilitation Services	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
28	Respite Care	4							•		
	•	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
29	ADAP	\$	-	0.0%	\$-	0.0%	\$-	0.0%	\$-	0.0%	
30	Early Intervention Services		о	0.0%	\$0	0.0%	\$0	0.0%	\$0	0.0%	
G	GRAND TOTAL DIRECT										
	SERVICES Direct Services Target		2,946,844	100.0% Target	\$ 2,950,508	100.0% Target	\$ 3,130,587	100.0%	\$ 3,098,033 \$	100.0%	
	Recipient Admin Recipient Quality Management	\$	346.688 173,344		\$ 347.119 \$ 173,558	-			\$ 364.474 \$ 182,237		
	Direct Services w/o MAI	5	3.466.875		\$ 3.471.185 \$ 3.471.185	L			\$ <u>3.644.744</u> \$ <u>3.644.744</u>		
	MAI Total both Direct and MAI Direct			75/25	\$ 221,922 \$ 3.693.107				\$ 233,018 \$ 3.877.762		
		\$ \$	2.259.041 295,841	75/25 88.4% 11.6%	\$ 401,844	86.3% 13.7%			\$ 2.666.189 \$ 431,844	86.1% 13.9%	
		\$	2.554.882		\$ 2.929.452				\$ 3.098.033		
			FY24	Admin	\$23,302				\$ 3.644.744 \$ 364,474	total	\$ 3.877.762 \$ 387,776
				CQM Direct	\$11.651 \$198,065				\$ 182.237 \$ 3,098,032		\$ 193.888 \$ 3,296,097

#### HIV Health Services Planning Council Sacramento TGA

#### HIV Health Services Planning Council Overview

#### HIV Health Services Planning Council (Council)

The HIV Health Services Planning Council is responsible for planning how Ryan White CARE Act funds will be used in the local Transitional Grant Area (TGA), which consists of Sacramento, El Dorado, and Placer Counties. To properly plan, the Council is responsible for assessing the needs of people living with HIV in the TGA, developing a comprehensive plan that defines short and long term goals for delivering HIV services, setting priorities for which service categories are most needed, allocating resources to prioritized services, coordinating service delivery with other programs and funders, assessing the effectiveness and efficiency in which CARE Act funds are being used, and evaluating how well funded services are meeting community needs. In order to accomplish all of these tasks, the Council has established several working committees that perform specific tasks.

#### **Executive Committee (Exec)**

The Executive Committee is the only standing committee specified in the by laws of the HIV Health Services Planning Council (Council). The purpose of the Executive Committee is to "act for the Council between meetings under parameters set by the Council and to provide guidance for the Council in fulfilling its responsibilities and reaching its goals." The chairs of all other standing committees are members of the Executive Committee. Other committee members are Council members appointed to represent specific required categories (such as Placer and El Dorado counties).

#### **Governance Committee (Gov)**

The Governance Committee is an ad-hoc committee formed by the Council to address issues of policy, procedure and bylaws modification. Originally formed to recommend a governance structure to the Council, it now addresses questions central to how the Council functions. Some examples include development of conflict of interest policies, committee operation policies and procedures, member absence policies, as well as changes to bylaws as they are needed. Governance Committee work is generally reviewed in various settings forwarded to the full Council for approval and implementation. Members include the Executive Committee and any council members with interest in the topic(s).

#### Affected Communities Committee (ACC)

The Affected Communities Committee is a standing committee that addresses issues facing the HIV/AIDS community and advises the Planning Council on the affairs of the community. The mission of the committee is to recruit, empower and involve people living with HIV/AIDS in the strategic planning and advocacy of HIV/AIDS care and services. These goals will be accomplished with the assistance of the Council support staff toward the fulfillment of its mission. The committee encourages an environment of trust and safety in achieving its mission.

#### **Priorities and Allocations Committee (PAC)**

This standing committee performs some of the most vital work for the Council. The primary responsibilities of the PAC are to review information, data and the updated Needs Assessment, in order to establish funding priorities and service allocations for the upcoming fiscal year. The work of the committee, when accepted by the Council, serves as the directive for issuance of proposal requests and determination of contractors to provide services throughout the TGA, tasks that are competed by the Recipient. Membership on PAC must be balanced to represent consumers, providers, government agencies and other diversity factors specified within PAC and general committee policies.

#### Needs Assessment Committee (NAC)

This standing committee is charged with re-evaluating and updating Needs Assessment for the TGA. Seeking data, information and opinion from a variety of sources, NAC identifies the service categories that are most needed by people with HIV infection throughout the region. Recommendations are made to the Council and the PAC, which help to focus the development of priorities and allocations for the upcoming funding period. Members are recruited to reflect specific areas of expertise (such as technology and research), as well as consumers and key service category providers.

#### Administrative Assessment Committee (AdAC)

The Administrative Assessment Committee is a standing committee established to assess the efficiency and effectiveness of the administrative mechanisms for rapidly disbursing CARE Act funds to the areas of greatest need within the transitional grant area (TGA). The AdAC will conduct a bi-annual (twice yearly) assessment of the Fiscal/Administrative mechanisms with the intent of providing feedback and recommendations to the Council and to the Recipient to continually improve such administrative policies and procedures.

#### **Quality Advisory Committee (QAC)**

The Quality Advisory Committee is a standing committee that develops service standards to be utilized by providers when delivering services paid for through Ryan White funds. Such standards may include policies, procedures, guidelines, and other information pertinent to the effectiveness and efficiency in which consumers are treated and Ryan White funding is spent. To ensure that standards are appropriate for all stakeholders, members are drawn from providers and consumers of Ryan White services, as well as others interested in health and human services.

#### Prevention Committee

The Prevention Committee is a standing committee whose purpose is to promote community involvement in the prevention of HIV infection. The Committee provides guidance and direction for prevention strategies with HIV-infected and affected communities; and, to provide community input to Sacramento County HIV/STD Prevention Program to ensure allocations are judiciously and fairly reflective of the priorities set by the Prevention Committee.

Signed:

Richard Benavidez, Chair

Date: 05/25/22

# Sacramento County Department of Health Services HIV Health Services Planning Council

www.sacramento-tga.com

## Meeting Agenda

September 27, 2023, 10:00 AM - 12:00 PM

#### Meeting Location -

#### 4600 Broadway, Sacramento, CA 95820 2<sup>nd</sup> Floor Conference/Community Room 2020

Facilitator: Richard Benavidez, Council Chair

Scribe: Angelina Olweny, Council Staff

#### Meeting Invitees:

- HIV Health Services Planning Council Members
- Open to the Public

Public Comment: This provides opportunities for the public to address the Council as a whole in order to listen to opinions regarding matters within the jurisdiction of the Council during Regular meetings and regarding items on the Agenda at all other meetings. Public Comment time limit is three (3) minutes.

#### \*Action Items

Торіс	Presenter	Start Time and Length
Welcome, Introductions, & Housekeeping	Benavidez	10:00 am
Announcements	All	
Public Comments-Agenda Items 3 Minute Time Limit	All	As
September 2023 Agenda*	Benavidez	Needed
Minutes of August 2023*	Benavidez	

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County of Sacramento - Ryan White CARE Program Sacramento TGA HIV Health Services Planning Council Executive Committee

Meeting Date:

6/8/2023

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