

**Sacramento County
Department of Health Services
HIV Health Services Planning Council
Executive Committee**
www.sacramento-tga.com

Meeting Agenda
May 9, 2024, 3:00 p.m. to 5:00 p.m.

Meeting Location –
4600 Broadway, Sacramento, CA 95820
2nd Floor Conference/Community Room 2020

Facilitator: Kristina Kendricks-Clark– Council Vice Chair
Scribe: Angelina Olweny– Council Staff

Meeting Invitees:

- Kristina Kendricks-Clark- Council Vice Chair
- Kelly Gluckman – 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

Topic	Presenter	Start Time and Length
Welcome and Introductions	Kendricks-Clark	3:00 pm
Announcements	All	
Public Comments-Agenda Items	Kendricks-Clark	
May 2024 Agenda*	Kendricks-Clark	

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Minutes of March 2024*	Kendricks-Clark	
Committee/Work Group Updates <ul style="list-style-type: none"> ➤ Administrative Assessment Committee <ul style="list-style-type: none"> ➤ FY23 AdAC Mid Year-End Review 06/13/2024 ➤ AdAC Scoring Criteria Document ➤ Affected Communities Committee <ul style="list-style-type: none"> ➤ Community Outreach ➤ Reflectiveness ➤ Priorities and Allocations <ul style="list-style-type: none"> ➤ FY25 Priorities* ➤ FY24 Workplan ➤ Quality Advisory Committee <ul style="list-style-type: none"> ➤ Service Standard Discussion ➤ Needs Assessment Committee ➤ Ad-Hoc Workgroup ➤ Governance 	Willett Zach B. Bradley-Rowe Gluckman Miranda Basler Ungeheuer	As Needed
Set Planning Council Agenda for May 29, 2024*	All	
Public Comments-Non-Agenda Items	All	As Needed
Technical Assistance	Kendricks-Clark	
Adjournment	Kendricks-Clark	5:00 pm

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Attachments:

- Minutes of March 2024*
- AdAC Monitoring Tool
- FY25 Priorities*
- FY24 Work Plan
- Planning Council Agenda for May 29, 2024* Draft

Next Meeting: June 13, 2024
September 12, 2024

HIV HEALTH SERVICES PLANNING COUNCIL Executive Committee

Meeting Minutes

March 14, 2024, 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 Chair

Scribe: Angelina Olweny – Council Staff

Committee Member Attendees:

Chelle Gossett – Recipient, Richard Benavidez – Council Chair, Jake Bradley-Rowe – PAC Chair, Kelly Gluckman – QAC Chair, Melissa Willett – AdAC Chair, Zach Basler – ACC Chair

County Staff: Danielle Caravella

Members Excused: Kristina Kendricks-Clark – Vice Chair, Ronnie Miranda – NAC Chair, Michael Ungeheuer – Governance Chair

Members Absent: N/A

Topic	Minutes
Welcome, Introductions, and Announcements	<p>The meeting began at 3:07 p.m.</p> <p>Zach Basler joined the Continuum of Care (COC) board. He shared that the City and County adopted and approved a homeless plan that will be implemented beginning on April 1. The action plan has provisions for medical respite beds and more beds and housing for youth under the age of 24 years.</p> <p>The HIV Community Conversation yesterday on Women and Girls on March 13 highlighted that women and girls are not educated on STIs and HIV during their medical visits. Additionally, women don't openly talk about their HIV status. The data also shows that the majority of women don't use PrEP.</p>
Public Comments-Agenda Items	N/A
March 2024 Agenda Review*	<p>The March agenda was presented for review and approval. Jake Bradley-Rowe motioned to accept the agenda as presented and Zach Basler seconded the motion. The motion passed with a majority.</p> <p>Accept: Chelle Gossett, Jake Bradley-Rowe, Kristina Kendricks-Clark, Melissa Willett, Richard Benavidez, Zach Basler. Oppose: N/A Abstain: N/A</p>
January 2024 Minutes Review*	<p>January minutes were presented for review and approval. Jake Bradley-Rowe motioned to accept the minutes as presented and Melissa Willett seconded the motion.</p> <p>On page five, under Committee Updates, Priorities and Allocation Committee,</p>

Topic	Minutes
	<p>the statement reads “The committee recommended that Chelle Gossett should have full authority to reallocate funds across service categories and the TGA for the remainder of FY23. Jake Bradley-Rowe motioned to accept minutes with the changes made and Kelly Gluckman seconded the motion. The motion passed with a majority.</p> <p>Accept: Chelle Gossett, Jake Bradley-Rowe, Kristina Kendricks-Clark, Melissa Willett, Richard Benavidez, Zach Basler Oppose: N/A Abstain: N/A</p>
Self-Assessment	<p>The Self-Assessment should be completed by committee members and submitted to Danielle Caravella. The word “Fiscal Agent” needs to be replaced by “Recipient” in the first and seventh bullet on page four.</p>
<p>Committee/Work Group Updates</p> <ul style="list-style-type: none"> ➤ Administrative Assessment Committee ➤ Affected Communities Committee ➤ Reflectiveness 	<p>The next meeting is on June 13th. Austin Green is interested in joining the AdAC committee. Any seated member can be added to the AdAC. New members need to sign a confidentiality agreement and attend new member orientation before attending the meeting.</p> <p>HIV Community Conversation March 13 focused on Women and Girls. The conversation highlighted that Women and Girls were not educated on STIs and HIV testing during medical visits. The next Community Conversation is on June 12. It will be on PrEP and pEP.</p> <p>Reflectiveness is at 32%.</p>

Topic	Minutes
<ul style="list-style-type: none"> <li data-bbox="205 305 541 451">➤ Priorities and Allocations (PAC) FY24 General Directives* <li data-bbox="205 963 548 1036">➤ Quality Advisory Committee (QAC) <li data-bbox="205 1154 569 1227">➤ Needs Assessment Committee (NAC) <li data-bbox="205 1346 562 1383">➤ Ad Hoc Workgroup 	<p data-bbox="604 305 1873 570">PAC met in January. The committee reviewed expenditures in the most recent FY23 monthly report. The FY24 General and Service Directives were presented for review and approval. Zach Basler motioned to accept the FY24 General Service Directives that were approved by PAC and Melissa Willett seconded the motion. The motion passed with a majority.</p> <p data-bbox="604 613 1850 760">Accept: Chelle Gossett, Jake Bradley-Rowe, Kristina Kendricks-Clark, Melissa Willett, Richard Benavidez, Zach Basler. Oppose: N/A Abstain: N/A</p> <p data-bbox="604 803 1787 914">The committee also created subcommittees to revise the language in the Housing, Oral Health and Emergency Financial Assistance (EFA) service directives.</p> <p data-bbox="604 963 1873 1109">QAC approved FY24 Work Plan. The postcard survey return rate is at 33%. QAC will review service standards for oral healthcare, housing and Emergency Financial Assistance (EFA). There will be further discussion at the meeting in May.</p> <p data-bbox="604 1154 1854 1300">Lili Joy shared the first draft of the Needs Assessment. The committee was asked to review the draft and share any feedback with Paula. Paula will then share the feedback with Lili Joy. The Needs Assessment Committee will meet on May 7.</p> <p data-bbox="604 1346 1808 1383">The Ad Hoc committee is investigating whether dental schools can provide</p>

Topic	Minutes
<p>➤ Governance</p>	<p>dental procedures that Ryan White funding cannot cover. Zach Basler stated that the Sacramento Steps Forward and the Continuum of Care (COC) are implementing an action plan to address homelessness on April 1. The action plan will have provisions for respite housing and medical housing. The action plan was approved by the City and County of Sacramento and the Continuum of Care (COC).</p> <p>The bylaws governance document was reviewed. Committee members agreed to create a temporary committee to update the language in the bylaws. Richard Benavidez will create a temporary committee to update the language in the bylaws.</p>
<p>Set Planning Council Agenda for March 27, 2024</p>	<p>The draft planning council agenda was presented for review and approval. Zach Basler motioned to accept the agenda as presented and Melissa Willett seconded the motion. The FY23 Self-Assessment should be an agenda item. The recipient reports will be titled FY23 Part and FY23 Part B updates. Kelly Gluckman motioned to accept the agenda with the changes made and Melissa Willett seconded the motion. The motion passed with a majority.</p> <p>Accept: Chelle Gossett, Jake Bradley-Rowe, Kristina Kendricks-Clark, Melissa Willett, Richard Benavidez, Zach Basler Oppose: N/A Abstain: N/A</p>
<p>Technical Assistance</p>	<p>Please reach out to Richard Benavidez or Kristina Kendricks-Clark if you need technical assistance.</p>
<p>Public Comment</p>	<p>There was a suggestion to have uniform standards when distributing vouchers</p>

Topic	Minutes
	to consumers. For example, all agencies distributing gas vouchers should have the same dollar amount on the voucher. The uniform standards will ensure that there is consistency in services provided that new and current providers can reference.
Adjournment	The meeting adjourned at 5:00 p.m.

SACRAMENTO TGA
ASSESSMENT OF THE ADMINISTRATIVE MECHANISM: FY 2023-2024

RECIPIENT REPRESENTATIVE:

COMMITTEE MEMBERS / OTHER STAFF / CONSULTANTS INVOLVED:

DATE OF ASSESSMENT:

QUARTER/FISCAL YEAR REVIEWED: FY23 3rd and 4th Quarter

SCORING TOOL COMPLETED BY:

SACRAMENTO TGA
FY23 ADMINISTRATIVE MECHANISM ASSESSMENT TOOL

Following is a summary of the rating scale for assessing the efficiency and effectiveness of the administrative mechanisms for the Sacramento Ryan White CARE Act (RWCA) Program. The assessment will determine the proportion of standards met and exceeded, the proportion of standards met at minimum, and the proportion of standards met and not met for each rating category, and determine an overall assessment based upon the proportion of standards met and exceeded, the proportion of standards met at minimum, and the proportion of standards not met across all categories.

Several standards on the following pages are followed by a number in brackets. This number denotes the weight that the standard carries in relation to the other standards in that category. For example, if a standard is followed by [2], the rating for that standard will be counted twice when determining the proportion of standards met and exceeded, met at minimum, or not met. If there is no number following the standard, the standard carries a weight of 1. The weight of each standard applies when determining the proportion of standards met and exceeded, met at minimum, met or not met.

QUANTITATIVE ANALYSIS

Each standard on the scoring tool is written to measure compliance with an outcome that can be measured in quantifiable terms. These standards are written to answer the following questions: “was the task accomplished; to what extent was the task accomplished?” Recipient compliance with each standard is assessed using the following rating scale:

Rating	Compliance Measure	Description of Rating
+	<i>Standard Met and Exceeded</i>	<i>The intent of the standard is consistently met and exceeded, and the processes are not in need of significant improvement.</i>
=	<i>Standard Met</i>	<i>The standard is met and processes are in place to ensure continued achievement. This rating indicates that the panel considered the standard as measurable solely on accomplishment or failure.</i>
√	<i>Standard Met at Minimum</i>	<i>The intent of the standard is primarily met, but the processes could still be improved. Recommendations should be provided.</i>
-	<i>Standard Not Met</i>	<i>The intent of the standard is primarily not met, and the processes should be given the majority of the resources for improvement. Recommendations should be provided.</i>

QUALITATIVE ANALYSIS

In addition to the quantitative analysis of outcome measures, a narrative summary will be included in the assessment report to provide a qualitative analysis of the processes used to address each standard. This qualitative analysis will answer the following questions: “how was the task accomplished; were the processes used efficient, were the processes fair, were the processes comprehensive, what were the barriers or external factors to accomplishing the standard, could the processes be improved?” The qualitative analysis will be summarized in the narrative report under the following sections for each Rating Category: (a) strengths, (b) weaknesses, (c) external factors, and (d) comments/recommendations for improvement.

FY23 Recipient – AdAC Monitoring

#	Rating Category	Standards	FY23 1 st & 2 ND Quarter Score (Unless Otherwise Noted)	FY23 3 rd and 4 th Quarter Scores	Overall FY23 Final Score
1	PROCUREMENT PROCESS	A. Procurement process consists of standardized steps and format across all potential applicants.			
		B. Dissemination of information regarding availability of funds and request for proposal (RFP) process includes multiple media sources across TGA to solicit new applicants.			
		C. Proposed procurement start and end dates are adhered to.			
		D. Appropriate vendors for each priority are targeted and provided notice regarding the availability of funds and RFP process.			
		E. All requirements for HRSA Policies and Procedures, Council Directives, Standards of Care, Outcome Measures, and Performance Indicators are included in the RFP and discussed at the Bidders Conference.			
		F. A standardized process with timeframes is in place for the renewal of contracts.			
		G. Contract renewal is completed in accordance with the written, standardized contract renewal process.			
		H. The contract renewal process includes an analysis of each provider's ongoing compliance with contractual obligations, including review of quantitative and fiscal issues.			
		I. The annual contract renewal process includes an analysis of each provider's ongoing compliance with quality management plans.			
		J. The Recipient completes and submits the grant application, in coordination with the Planning Council, for the procurement of Part A funds by the applicable deadline.			
		K. Weaknesses identified by HRSA in the prior year's Part A application are specifically addressed by the Recipient in developing the Part A application for the current year.			
		L. The Recipient completes and submits the grant application, in coordination with the Planning Council, for the procurement of State RW Part B funds by the applicable deadline.			
		M. The Recipient completes and submits the application for carryover funds, in coordination with the Planning Council, by the applicable deadline.			
		N. In an RFP year, the Recipient provides monthly RFP status updates to the Council.			

Comments: None noted.

FY23 Recipient – AdAC Monitoring

#	Rating Category	Standards	FY23 1 st & 2 nd Quarter Score (Unless Otherwise Noted)	FY23 3 rd and 4 th Quarter Scores	Overall FY23 Final Score
2	FISCAL MONITORING	A. Monthly invoices and other fiscal information is tracked through a standardized system.			
		B. Contractual requirements define the various types of corrective action that can be implemented by the Recipient if invoices are not submitted on time.			
		C. Ongoing fiscal reviews are conducted and completed for all Contractors and include the following: <ul style="list-style-type: none"> ▪ Monthly contract analysis reports ▪ Monthly claim reports ▪ Monthly invoice summary reports ▪ Individual client analysis reports, as needed ▪ Review of agency audits. 			
		D. On-site fiscal reviews are conducted and completed annually for all Contractors.			
		E. A written report is provided to each Contractor no later than 90 days from the date of the site visit.			
		F. Standardized On-Site Fiscal Monitoring Tool is used consistently and comprehensively across all contracted service providers.			
		G. The person(s) conducting fiscal site visits have documented training and/or experience in fiscal evaluation and use of the on-site fiscal monitoring tool.			
		H. Technical assistance is provided to each contractor as requested and as deemed necessary from fiscal review.			
		I. Recipient implements Corrective action for each contractor as deemed necessary from fiscal review, on-site fiscal monitoring and as defined by contractual requirements.			
		J. Fiscal audits are conducted for each contractor as deemed necessary from fiscal review and as defined by HRSA and /or Sacramento County DHS policies and procedures.			

Comments: None noted.

FY23 Recipient – AdAC Monitoring

#	Rating Category	Standards	FY23 1 st & 2 nd Quarter Score (Unless Otherwise Noted)	FY23 3 rd and 4 th Quarter Scores	Overall FY23 Final Score
3	PROGRAM MONITORING	A. Formal program monitoring site visits to assess overall quality and components of service delivery are conducted and completed in accordance with HRSA’s RW National Monitoring Standards for all Contractors, and written results are forwarded to contractors.			
		B. Formal Quality Management monitoring site visits to assess continuous quality improvement efforts are conducted and completed in accordance with HRSA’s RW National Monitoring Standards for all contractors, and written results are forwarded to contractors.			
		C. Standardized On-Site Program Monitoring Tool is used consistently and comprehensively across all contracted service providers.			
		D. The person(s) conducting program monitoring site visits have documented training and/or experience in program evaluation and use of the on-site program monitoring tool.			
		E. Contractual requirements define the various types of potential corrective action that can be implemented by the Recipient.			
		F. Technical assistance is provided to each contractor as requested and as deemed necessary from program monitoring site visits and/or Providers Caucus meetings.			
		G. Written site visit reports will be completed within 90 days of a site visit			
		H. Recipient monitors that corrective action is conducted by contractors, as deemed necessary from program monitoring site visits and as defined by contractual requirements.			
		I. Contractor compliance with Standards of Care is monitored through site visits, client satisfaction surveys, grievance requests, and outcome measures.			
		J. Contractor compliance with outcome measures and performance indicators are monitored through site visits and annual outcome indicators applicable to each service provided.			
		K. Contractors are monitored for compliance with service utilization objectives on an ongoing basis through monthly contract analysis reports.			
		L. Assessment of client satisfaction at all service sites is conducted annually.			

Comments: None noted.

FY23 Recipient – AdAC Monitoring

#	Rating Category	Standards	FY23 1 st & 2 ND Quarter Score (Unless Otherwise Noted)	FY23 3 rd and 4 th Quarter Scores	Overall FY23 Final Score
4	TRACKING SYSTEMS	A. HRSA Conditions of Award are in compliance on an ongoing basis.			
		B. Service utilization, demographics and contract compliance are tracked through a standardized system.			
		C. Requests for and response to technical assistance from Contractors are tracked with dates included.			
		D. Outcomes of technical assistance are tracked.			
		E. Unspent and unobligated funds, inclusive of Direct Services, Recipient Administrative Agent, and Quality Management funding categories, are tracked and reported to the Council, on a minimum of a quarterly basis, and included in a year-end report.			

Comments: Suggestion: Survey providers on their perceptions of TA received from Recipient. Added “on a minimum of” to item 4E.

FY23 Recipient – AdAC Monitoring

	<i>Rating Category</i>	<i>Standards</i>	<i>FY23 1st & 2ND Quarter Score (Unless Otherwise Noted)</i>	<i>FY23 3rd and 4th Quarter Scores</i>	<i>Overall FY23 Final Score</i>
5	CONTRACT DEVELOPMENT	A. Contracts include requirements that service providers must comply with all HAB/HRSA and CARE Act policies and procedures, including all changes to such requirements that may occur during contract year.			
		B. Contracts include clauses to ensure compliance with any established and approved “directives” from the Council, including service delivery models on how to best meet the needs of the EMA/TGA.			
		C. Contracts include requirements for contractor compliance with Ryan White program web-based data collection system.			
		D. Contracts include clauses to ensure compliance with Council adopted Standards of Care.			
		E. Contracts include language, which holds subcontractors accountable to the same contractual requirements of the lead agency.			
		F. Contracts include language, which holds the lead agency liable for subcontractor compliance with contractual obligations.			
		G. Outcome measures and performance indicators are included in all service contracts for those categories with adopted outcome measures and performance indicators.			
		H. Contract language defines and assures the Recipient’s method and ability to terminate any contract when Contractor performance is unsatisfactory.			
		I. Service contracts between the Recipient and contracting agencies are negotiated <u>initiated</u> for each Contractor within 90 days of “notice of grant award” from the Federal Government.			
		J. Service contracts between the Recipient and contracting agencies are signed by the Recipient and Contractor and implemented within 120 days of “notice of grant award” from the Federal Government. <i>(Signed Memorandum of Agreements between county governments may serve as operational contracts for the purposes of compliance with this standard.)</i>			

Comments: 5I: Updated from negotiated to initiated as it relates more to Contracting Department rather than Recipient. The Recipient initiates the process but has no control beyond initiating contract.

FY23 Recipient – AdAC Monitoring

#	Rating Category	Standards	FY23 1 st & 2 ND Quarter Score (Unless Otherwise Noted)	FY23 3rd and 4th Quarter Scores	Overall FY23 Final Score
6	ALLOCATION, PRIORITY SETTING, REALLOCATION AND CARRYOVER	A. The Recipient disseminates in accordance with the Planning Council’s PAC 01, Priority Setting and Resource Allocation Process for each Council approved service priority allocation amount including Direct Services, Planning Council Support, Recipient Administrative and Quality Management.			
		B. The Recipient provides the Council with a summary of approved service category allocations compared to actual contracted funds, including identification of the Recipient use of the 10% margin for Recipient adjustments.			
		C. Summary of priorities and allocations is available at each Council meeting and is adjusted to reflect changes due to reallocations or carryover funds.			
		D. The Recipient ensures that all direct service contractors, Recipient Administrative and Quality Management funding categories submit a budget justification detailing utilization projections and plans to spend the balance of their contract within the remaining program year.			
		E. The Recipient ensures that all direct service contractors, Recipient Administrative and Quality Management funding categories contractors submit revised Scopes of Work and revised budgets when contracts are reduced or increased during the budget year.			
		F. Summaries of budget justifications for all direct service categories, Recipient Administrative and Quality Management funding categories are reported to the Council as part of the reallocation process.			
		G. The Recipient assesses contractor spending patterns, analyzes trends by agency, summarizes contractor requests and budget justifications, and prepares recommendations to the PAC for the use of reallocation funds.			
		H. All stages of the reallocation process, including the processing of contracts , are completed within the timeframes as required by the Council approved PAC 002 Policies and Procedures.			
		I. Request for carryover funds is developed in coordination with the PAC, and the request is submitted in advance of the deadline announced by HRSA.			

Comments: Updated 6H wording to reflect what is actually monitored by AdAC.

FY23 Recipient – AdAC Monitoring

#	<i>Rating Category</i>	<i>Standards</i>	<i>FY23 1st & 2ND Quarter Score (Unless Otherwise Noted)</i>	<i>FY23 3rd and 4th Quarter Scores</i>	<i>Overall FY23 Final Score</i>
7	COMMUNICATION AND REPORTING	A. Standardized expenditure reports are provided to the Council monthly, quarterly and at year-end.			
		B. Standardized reports with descriptive narrative of aggregate client demographics and service utilization by service category are provided to the Council quarterly.			
		C. Standardized expenditure, demographics and service utilization reports as provided by the Recipient are accurate.			
		D. Reports are provided by the Recipient to the Council on a quarterly basis regarding contractor Technical Assistance requests, follow-up and outcomes.			
		E. Recipient will develop a timeline identifying site visit scheduling, occurrences, and completion of corrective action reports.			
		F Summary reports regarding site visits and required follow up are provided to the Council through the Administrative Assessment Committee (AdAC).			
		G The findings of the assessment of client satisfaction surveys are provided to the Council annually.			
		H Contact information for Contractors is provided to the Council.			
		I. The Recipient follows the procedures adopted by the Council and Recipient regarding information requests from the Council to the Recipient.			

Comments: None noted.

FY23 Recipient – AdAC Monitoring

#	Rating Category	Standards	<i>FY23 1st & 2ND Quarter Score (Unless Otherwise Noted)</i>	<i>FY23 3rd and 4th Quarter Scores</i>	<i>Overall FY23 Final Score</i>
8	BARRIERS AND CONCERNS	A. The Recipient provides comprehensive written reports regarding concerns or barriers to accomplishing Recipient tasks, and possible solutions or action steps taken to overcome those concerns, augmented by verbal reports as needed, to the Executive Committee of the Council, which forwards the Recipient reports to the full Council.			
		B. The Recipient provides reports regarding any sanctions on Contractors to the Executive Committee of the Council, which forwards the Recipient reports to the full Council.			
		C. The Recipient attends Council, Executive Committee and Priorities and Allocations Committee meetings.			
		D. Requested Recipient reports are provided at Council, Executive Committee and PAC meetings when Recipient staff is unable to attend meeting in person.			
		E. The Recipient attends any additional Council Committee meetings where Recipient representation is necessary for completion of Committee business.			
		F. Recipient makes recommendations for changes to directives when directives cause observed barriers to care for the client population or have been deemed to violate state or federal laws or regulatory policies.			

Comments: So many of these are standardized reports, include types of source/documentation to be reviewed.

FY23 Recipient – AdAC Monitoring

#	Rating Category	Standards	FY23 1 st & 2 ND Quarter Score (Unless Otherwise Noted)	FY23 3 rd and 4 th Quarter Scores	Overall FY23 Final Score
9	TIMELINESS	A. Payment for services is made initiated to each Contractor within 30 days of receiving an accurate and complete invoice once contracts are executed.			
		B. Notification of potential corrective action is provided to Contractors within 30 days of monthly invoice becoming overdue.			
		C. Corrective action is provided to Contractors within 45 days of monthly invoices becoming overdue.			
		D. Notification of spending trends is provided to the Council in the Recipient’s monthly reports.			
		E. Standardized Recipient financial and data reports are provided to the Council within 30 days of Council requests.			
		F. The Recipient provides monthly and quarterly reports to the Executive Committee for review, which forwards the Recipient reports to the full Council for approval.			
		G. Recipient reports are sent in pre-meeting packets to Committee and Workgroups when a minimum of 3 weeks notice of an information request is provided to Recipient.			
		H. A standardized system is in place to require Contractors to submit accurate and complete invoices, client intake forms and narrative reports in a timely manner.			
		I. Notification to the Council of the amount of funds projected to be available for carryover is reported as outlined in PAC 002 timeline.			

Comments: 9A. The Recipient initiates the payment of services but has no control over the process once initiated.

FY23 Recipient – AdAC Monitoring

#	<i>Rating Category</i>	<i>Standards</i>	<i>FY23 1st & 2ND Quarter Score (Unless Otherwise Noted)</i>	<i>FY23 3rd and 4th Quarter Scores</i>	<i>Overall FY23 Final Score</i>
10	FLEXIBILITY	A. Recipient modifies existing systems as necessary to ensure continuous delivery of service to clients using CARE Act funds.			
		B. Recipient considers advances to Contractors of up to 10% of each individual total contract award.			
		C. Recipient implements, monitors, and enforces Council directives.			

Comments: 10B: The recipient considers “advances”, however the Director of the Sacramento County Department of Health Services has to approve advances. If there is a risk the contract could be terminated prior to being paid back, the Director can deny the request.

Service Priority Historical Data for FY10 - FY24 with Planning for FY25

SERVICE CATEGORY	Core	Support	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24	FY25
Ambulatory/Outpatient Medical Care	X		1	1	1	1	1	1	1	1	1	1	3
AIDS Pharmaceutical Assistance	X										2	2	18
Health Insurance Premium Payments	X		3	3	3	3	3	3	3	3	3	3	10
Oral Health Care	X		4	4	4	4	4	4	4	4	4	4	4
Medical Case Management Services (including Pediatric Treatment Adherence Counseling)	X		6	6	6	5	5	5	5	5	5	5	1
Case Management (Non-Medical)		X	7	7	7	6	6	6	6	6	6	6	2
Food Bank/Home Delivered Meals		X				14	14	14	14	14	7	7	6
Mental Health Services	X		5	5	5	7	7	7	7	7	8	8	5
Psycho-Social Support		X					Part B				9	9	16
Medical Transportation Services		X	8	8	8	8	8	8	8	8	10	10	8
Substance Abuse Services - Outpatient	X		9	9	9	9	9	9	9	9	11	11	11
Substance Abuse Services – Residential		X	17	17	17	10	10	10	10	10	12	12	15
Housing Assistance		X	Part of DEFA		10	11	11	11	11	11	13	13	7
Child Care Services		X	11	11	11	12	12	12	12	12	14	14	14
Emergency Financial Assistance		X	12	12	12	13	13	13	13	13	15	15	9
Medical Nutritional Therapy	X		13	13	13	15	15	15	15	15	16	16	12
Health Education Risk Reduction		X	14	14	14	16	16	16	16	16	17	17	17
Outreach Services		X	15	15	16	18	18	18	18	18	18	18	13
Outreach MAI Services		X	16	16	15	17	17	17	17	17	19	19	
Treatment Adherence - Pediatric	X		10	10	Now Part of MCM								
Linguistic Services		X									20	20	19

Home & Community Based Health Services	X										21	21	20
Home Health Care	X										22	22	21
Hospice	X										23	23	22
Legal Services		X									24	24	23
Permanency Planning		X									25	25	24
Referral for Health Care & Support Services		X									26	26	25
Rehabilitation Services		X									27	27	26
Respite Care		X									28	28	27
ADAP/Prescription Medications	X		2	2	2	2	2	2	2	2	29	29	28
Early Intervention Services	X										30	30	29

**HIV Health Services Planning Council
 Priorities and Allocations Committee
 FY 2024-25 WORK PLAN**

MEETING DATE	ACTIVITY	MATERIALS
March 2024	<ul style="list-style-type: none"> • Part A Grant Award Notice Update • FY24 Allocation Updates If Needed • Update PAC Work Plan • FY24 General Directives 	<ul style="list-style-type: none"> • Grant Award Notice • Allocation and Reduction Scenarios • FY24 PAC Work Plan • FY24 Service Directives • FY24 General Directives
May 2024	<ul style="list-style-type: none"> • Part A Grant Award Notice Update • FY24 Allocation Updates If Needed • Begin Work on FY25 Grant Application and Reduction Scenarios • PAC Process Training • Begin Work on FY25 Service Priorities 	<ul style="list-style-type: none"> • Grant Award Notice • Historical Prior-Year Utilization Documents • Historical Allocation Scenarios • Allocation and Reduction Scenarios • Service Priority Ranking Historical Data • Service Priorities Worksheet
June 2024	<ul style="list-style-type: none"> • Continue/Finalize Work on FY25 Grant Application and Reduction Scenarios • Finalize FY25 Service Priorities • Begin Work on FY25 Service Allocations • FY24 Service Directives • FY23 to FY24 Carryover 	<ul style="list-style-type: none"> • Historical Prior-Year Utilization Documents • Historical Allocation Scenarios • Allocation and Reduction Scenarios Worksheet
September 2024	<ul style="list-style-type: none"> • FY24 Reallocation 	<ul style="list-style-type: none"> • FY24 Recipient Reallocation Recommendations

January 2025	<ul style="list-style-type: none"> • Second re-allocation (if needed) • FY25 General Directives • FY25 Service Directives • PAC Training 	<ul style="list-style-type: none"> • FY24 Recipient Reallocation Recommendations
STRATEGIES (from the CA Integrated HIV Surveillance, Prevention and Care Plan)		

The following Strategies from the California Integrated HIV Prevention and Care Plan CY 2022-2026, apply to the ongoing work conducted by the Affected Communities Committee in the Sacramento Transitional Grant Area:

2022-2026 Goals and Objectives

Impact Area 1: Racial Equity

- *Strategy 1b. Racial/Ethnic Data Collection and Stratification:* Identify, collect, analyze, and publicly share data that reflect the specific trends, needs, and outcomes of HIV, HCV, and STIs for BIPOC communities, to inform resource allocation and identify community-based strategies and solutions.
- *Strategy 1c. Equitable Distribution of Funding and Resources:* Review all CDPH OA and STD Control Branch contracts, budgets, guiding service formulas, policies, and program decisions with a racial justice lens, to advance equitable delivery of resources and opportunities to BIPOC.
- *Strategy 1d. Community Engagement:* Forge strategic partnerships to ensure more diverse public outreach, involvement, and engagement processes to reframe the structure, funding, and policies of HIV, HCV, and/or STI services and messaging to all Californians.

Impact Area 6: Stigma Free

- *Strategy 6a. Nothing About Us Without Us:* Meaningfully and consistently involve people living with HIV, HCV, and STIs in state and local planning, decision-making, and service delivery.
- *Strategy 6b. Reframe Policies and Messaging:* Work with communities to reframe the structure and policies of HIV, HCV, and STI services and associated messaging, so they do not stigmatize people or behaviors.

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Meeting Agenda

May 29, 2024, 10:00 AM – 12:00 PM

Meeting Location –

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

Facilitator: Kristina Kendricks-Clark, Council Vice 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**

Topic	Presenter	Start Time and Length
Welcome, Introductions, & Housekeeping	Kendricks-Clark	10:00 am
Announcements	All	As Needed
Public Comments-Agenda Items 3 Minute Time Limit	All	
May 2024 Agenda*	Kendricks-Clark	
Minutes of April 2024*	Kendricks-Clark	

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State Office of AIDS May 2024 Update	Pulupa	As Needed
Department of Homelessness and Housing Presentation	Rodriguez	
CPG/HIV/STI Prevention Updates	All	
Recipient Report: <ul style="list-style-type: none"> ➤ FY23 Part A Year End Report* ➤ FY23 Part B Fiscal Report Update ➤ SOA Ending the HIV Epidemic Update ➤ HRSA Ending the Epidemic Update 	Gossett	
Committee/Work Group Updates <ul style="list-style-type: none"> ➤ Administrative Assessment Committee <ul style="list-style-type: none"> ➤ Next Meeting Thursday, June 13, 2024 ➤ Affected Communities Committee <ul style="list-style-type: none"> ➤ Community Presentations ➤ Reflectiveness ➤ Priorities and Allocations <ul style="list-style-type: none"> ➤ FY25 Priorities* ➤ FY24 PAC Workplan ➤ Executive Committee ➤ Quality Advisory Committee <ul style="list-style-type: none"> ➤ FY24 QAC Workplan ➤ Needs Assessment Committee <ul style="list-style-type: none"> ➤ FY24 NAC Workplan ➤ Ad Hoc Workgroup ➤ Governance 	Willett Zach B. Bradley-Rowe Kendricks-Clark Gluckman Miranda Basler Ungeheuer	
Binder Updates	Caravella	
Public Comments-Non-Agenda Items	All	

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Technical Assistance	Kendricks-Clark	
Adjournment	Kendricks-Clark	12:00 pm

Attachments:

- Minutes of April 2024*
- May 2024 OA Voice Update
- FY23 Part A Fiscal Year End Report
- FY23 Part B Fiscal Report Update

**NEXT MEETING: June 26, 2024
August 28, 2024
September 25, 2024**