
**LOS ANGELES COUNTY
HIV PREVENTION PLANNING COMMITTEE (PPC)
A Select Committee of the Commission on HIV Health Services
600 South Commonwealth Avenue, 6th Floor- Los Angeles CA 90005-4001**

MEETING SUMMARY

Thursday, July 5, 2001
1:00 p.m.-5:00 p.m.

*Excused Absence

St. Anne's Foundation Conference Room
155 North Occidental Boulevard-Los Angeles, CA

MEMBERS PRESENT

ABSENT

Mario Perez	Richard Zaldivar
Jeff Bailey	Ricky Bluthenthal
Sandra Cargill	Mark Etzel
Juan Carlos Ledesma	Cleo Manago
Edric Mendia	Vicky Ortega
Keisha Paxton	Frank Roque
Vanessa Talamantes	Kellii Trombacco
Nancy Wongvipat	Ric Loya

Maria Perez	Chi-Wai Au
*Sergio Avina	Rosetta Chamberlain
Ramon Flores	*Danielle Glenn-Rivera
Kevin Kindlin	James Miller
*Veronica Morales	Ricki Rosales
*Gail Sanabria	Gordon Bunch
Tony Bustamante	Tiffany Horton

STAFF PRESENT

Gabriel Rodriguez	Dean Goishi	Magdalena Esquivel
Oscar Garcia	Elizabeth Escovedo	

I. ROLL CALL - Roll call was conducted. A quorum was present.

II. CHIPTS COLLOQUIA SERIES:
HIV Prevention in Health Provider Settings - Marguerita Lightfoot, Ph.D.
A copy of the Presentation was made available.

III. PPROVAL OF AGENDA
The committee approved the agenda with changes. Item #6, The Multi-Cultural Asian Pacific HIV/AIDS Community presentation was postponed until August. A presentation by the Gaps Analysis was moved to item number 6. Item # 7 will be CDC Application.

IV. APPROVAL OF MEETING SUMMARY
The committee approved the meeting summary for June7, 2001.

V. PUBLIC COMMENT
David Rodriguez passed out flyers with information on Latin Pride. The event will take place in downtown Los Angeles August 5, 2001.
Kelly Gilmore from THE Clinic passed out a flyer inviting everyone to a community rally. The target is women at sexual risk with focus on women and youth.

VI. PRESENTATION: Gaps Analysis Report

Orenda Warren, co-chair of the Gaps Analysis ad hoc committee reported that the committee is in the process of developing a resource inventory matrix. It is not complete as of today. She presented the background process, the summary information related to the origination and development of activities

conducted by the Gaps Analysis ad hoc committee. She also presented the objectives related to the gaps analysis ad hoc committee. The charge of the Gaps Analysis ad hoc committee was to identify gaps in the services to existing BRG's, to look at the intent of the plan, the application process, and to look at the recommendations from OAPP to determine whether or not gaps still exist.

Orenda Warren passed out a report from the Gaps Analysis Ad Hoc committee including recommendations offered in good faith based on the Principles of HIV Prevention and Community Planning and in the spirit of community involvement:

1. The Gaps Analysis ad hoc committee should be a standing committee of the PPC. This will ensure identification and rectification of gaps in services, populations and changes in the AIDS epidemic in a timelier manner.
2. The Gaps committee should be formed to support ongoing gaps analysis activities and should also consider secondary gaps as well as funding and administrative systemic deficiencies.
3. By-laws and objectives of the committee should be established as an open participatory process.
4. Fifty percent of the members should be non-aligned with a service provider.
5. Fifty percent should be consumers and service providers.
6. Administrative support should be provided the same as other standing committees.
7. Recommendations from the committee should be considered at the next scheduled Executive sub-committee.
8. Executive sub-committee should determine the urgency of the recommendations with gaps analysis representatives.
9. The Prevention Plan should be structured to accommodate changes and additions to priorities and emerging populations.
10. The Prevention Plan should allow for the formation of a gaps system to be structured that will overall strengthen the strategic aspect of the plan.
11. Gap Analysis committee needs to clearly define priorities and not waiver from identifying and putting forth recommendations.
12. BRG's need to be addressed on an annual basis.
13. Careful and thoughtful strategic planning need to be a priority for all HIV services.

In Conclusion:

These recommendations may result in additional objectives for the community-planning group in the upcoming year and in updating the Plan.

Discussion on the Gaps Analysis presentation

In response to a suggestion that Gaps Analysis be merged into the Evaluation sub-committee, **Orenda Warren** stated that the Gaps Analysis ad hoc committee is opposed to being merged. They do not want the activities that they started to take a back burner. She stated that, they would like to have the activities of gap analysis continue to function. She also stated that she had asked for technical assistance from the Evaluation sub-committee and none was provided.

Nancy Wongvipat invited the Gaps Analysis ad hoc committee to be part of the Evaluation sub-committee. She stated that at the Retreat they included in their work plan the Gaps Analysis as a potential collaborator.

Mario Perez explained that annually OAPP submits an application to the CDC for Federal prevention funding. One of the requirements of the application to conduct a resource inventory on an annual basis. Another important piece is to prioritize intervention strategies. Currently a number of community providers are funded by OAPP to provide prevention services using different intervention types. It is important for us to identify those interventions based on science and research, which prove to be most efficacious in reducing risk behaviors. The Gaps Analysis ad hoc committee was given a charge to

complete a resource inventory and to prioritize interventions. It was given a timeline through June 30, 2001.

He stated as former co-chair of the Resource Allocation sub-committee of the Prevention Planning Committee. The committee was charged with looking at the impact of the epidemic of this county and how resources were to be allocated. Based on the information provided to them by the HIV epidemiology program the BRG model was developed. The BRG model articulates that HIV impact is greater among some groups than others. The BRG model shifted resources from areas that were least impacted in comparison to other groups by behaviors engaged by groups at highest risk.

Cleo Manago commented that there are people that are at risk where much research has not been done and that there are still existing groups that are impacted that need to be served. He stated that if planning and priorities is going to be completed based on existing science and not based on what is going on in the community, a gap is left open in accessing HIV prevention in the community.

Mark Etzel commented that there is always a review to see what models have been proven efficacious. Another part of evaluation is applying research techniques using epidemiology to forecast where the epidemic is moving so that prevention priorities that are responsive can be set.

Orenda Warren stated that as part of this process we have to accept as a body that our qualitative anecdotal information is a valid method of research and analysis. We cannot define the needs of all communities based on quantitative analysis. She stated that the Gaps Analysis ad hoc committee agreed to identify and analyze new or overlooked BRGs, priorities data based on evidence, data, and trends, not only quantitative trends, but also qualitative information based on anecdotal information. She stated that they were not required to do a needs assessment; however, they had a forum where a needs assessment was conducted within the Second District Coalition.

Mario Perez commented that the Evaluation sub-committee can take different forms including an evaluation of current services, current resources, and it could also include evaluation of the impact of prevention programs.

Nancy Wongvipat commented that the technical assistance for the ad hoc Gaps Analysis committee was to look at resource inventory. She clarified that about a year and a half ago the Evidence and Needs ad hoc committee folded into the Evaluation sub-committee. Part of the work of the Evidence and Needs committee was to gather needs assessment data, through focus groups and that is part of qualitative research. That data was included in the plan.

Mark Etzel stated that qualitative information is important since this body is charged with doing evidence base planning. He stated that it is important to acknowledge that all data are not equal. Different types of data have different utility. Key informant interviews and focus groups are good analytical frameworks where you can go to people impacted by HIV.

Gabriel Rodriguez stated that the some of the work of the Gaps Analysis overlaps the Standard and Best Practice sub-committee, Operations sub-committee and Evaluation sub-committee.

A PPC member suggested examining how the Evaluation and Standards and Best Practice sub-committees would fulfill the nine steps to community planning.

Richard Zaldivar stated his concern that due to lack of a quorum this issue will need to be revisited at the August PPC meeting.

Carrie Broadus requested that two written document dated July 4, 2001 be entered into the record. Both letters are from the Los Angeles County Second District HIV/AIDS Community Coalition and addressed to the PPC co-chairs. One letter signed by co-chair, Carrie Broadus, recommends to the PPC

- ◆ A new category of Men at Sexual Risk (MSR)
- ◆ Supports the thirteen recommendations made by the gaps Analysis Ad hoc Committee. The thirteen recommendations were attached.

Carrie Broadus read the second letter signed by co-chairs Carrie Broadus and Malcolm Harris. The letter express concerns and requests data from the PPC as follows:

Concerns :

Non-selection of a Heterosexual African American Youth

Lack of representation of an African American Youth on the LAC PPC.

Request:

1. Provide in writing the selection process that demonstrates that it was an open process
2. Provide in writing the locally established criteria for selecting candidates within an open process.
3. Published demographic breakdown of past and recently elected PPC membership. Including age, gender race/ethnicity, socioeconomic status, geographic and metropolitan statistical area, and risk for HIV infection.

Malcolm Harris commented about the letter included in the packet from Dr. Helene Gayle. He also stated that the Second District Coalition is requesting documentation indicating the makeup of the PPC, the current and previous makeup of the PPC, and whether or not the demographics reflect the epidemiological data of the epidemic.

Carrie Broadus expressed a concern of how PPC members provide information to the community and bring those issues and concerns to the PPC. She challenged the PPC members to develop a mechanism where PPC members would connect and communicate with the population they are serving and representing. She discussed in detail the request as indicated in the letter. She requested a breakdown of PPC members by SPA. She stated that they would hold those individuals who are within their SPA accountable. She commented that the Second District Coalition would be sending out a letter to invite those PPC members to the Second District Coalition meetings to gather information and to ensure that there is more accountability by PPC members. She stated that it is their understanding that there is no young African American male sitting on this body.

Loretta Jones commented that there is good data out there on science on African American. She stated that prevention strategy research for women is needed to inform us what is going on out in the community.

Karen, commented that she thought that the problem was a lot of community agencies did not get the funding needed for the services that they are already providing.

Jeff Bailey commented that the purpose of the resource inventory is to identify the source of prevention funding to Los Angeles County. The CDC application noted as a weakness that non-public funds coming into Los Angeles County were not noted. The PPC is waiting for that matrix.

Elaine Waldman provided copies and a cover letter of the focus group findings from the Latina Adult Women. The community wishes to identify a gap and share it with the PPC. She shared the focus group findings for continuing discussion with the PPC.

Jeff Bailey thanked the Gaps Analysis ad hoc committee for their work and contribution. He explained that the Policies and Procedures outlined membership criteria and nomination. In the packet there is a grid that provides demographics of the current PPC members with reference to gender, race ethnicity sexual orientation, and HIV status. He commented that it is important to hold accountable those PPC

members who are not present today who do represent these demographics. He also commented that the PPC members around this body are planners. They are not here to represent an agency.

Sandra Cargill stated that there are several recommendations mentioned and many can be addressed by different committees, such as membership will go to Operations sub-committee.

VII. BREAK

VIII. CDC APPLICATION PROCESS

Gabriel Rodriguez explained the main points that need to be covered in preparation for the CDC application. An outline of the application guidance was passed out. The application asks that core objectives of community planning be addressed. He asked the PPC members to assist with the completion of corresponding sections of the CDC application. He stated that we need to ensure:

- ◆ That the PPC reflects the diversity of the epidemic in Los Angeles County
- ◆ That expertise in EPI behavioral science, health planning and evaluation are included in the process, this includes quantitative as well as qualitative information and how that is gathered. That the priority HIV Prevention needs are determined based on EPI Profile and Needs Assessment. Much of this has been discussed in the prevention plan and much of it can be rolled over.
- ◆ That interventions are prioritized based on explicit consideration of priority needs, outcome effectiveness, cost effectiveness, social and behavioral science theory and community norms and values.
- ◆ That the PPC address fostering strong logical linkages between the planning process, the prevention plan, the application, and the allocation of HIV prevention resources through the RFP.

The following is needed:

- ◆ A copy of the Prevention Plan, and any updates.
- ◆ Gaps analysis should be included.
- ◆ A Letter of Concurrence stating that the application reflects the community process of the plan.
- ◆ To describe the recruitment methods and membership criteria.
- ◆ A Resource Inventory
- ◆ The final draft should be completed by July 31, 2001. The Application is due September 17, 2001.

A special PPC meeting to work on the CDC application was scheduled for either July 16 or July 19 at 12:00 noon to 3:00 PM.

Jeff Bailey encouraged individuals attending the Gaps Analysis adhoc committee to continue to participate by attending the Evaluation sub-committee meeting until a formal decision is made about the Gaps Analysis adhoc committee.

ACTION: The Evaluation sub-committee should formally invite those individuals to attend the Evaluation sub-committee.

Copies of the Request for Proposals for Evaluation Technical Assistance and Coordination of for Coordinated HIV/STD Substance Abuse Prevention Networks in Los Angeles County #2001-003 were made available

IX. OAPP REPORT

CDC Application Overview CDC Young Men's survey

Mario Perez commented that the letter by Dr. Helene Gayle, from CDC, provided some preliminary evidence around the impact of HIV among young MSMs of color. Los Angeles was one of the 6 cities studied. Mr. Perez commented on the success of the annual At The Beach, Black Gay Pride event. Rapid testing was available for this event. Testing results were available within an hour.

PPP members were referred to a letter included in the packet from Mr. Henry articulating his disappointment that on the first day of Counseling and Testing Day, the State AIDS Hot Line was shut down. PPC members were encouraged to share their frustration with the State Office of AIDS and to ensure this is avoided next year.

Mario Perez commented that the office currently contracts with about 41 providers. Their contracts include requirements to have evaluation plans and to complete monthly reports. He stated that not everyone has submitted the required forms and this has caused significant concern internally. OAPP has to make sure that appropriate plans are in place to ensure the quality of the prevention programs.

The Prevention Services Division along with the unit responsible for quality improvement and the Evaluation Division will hold a meeting on July 31, 2001, to go over contract requirements. All OAPP contractors have been invited to attend this meeting.

Previously he had made a commitment to visit all agencies funded by OAPP, but due to the scheduling and new commitments, he has postponed those visits.

X. CO-CHAIRS REPORT

Strategic Planning Update

Jeff Bailey commented that there is much work that the PPC needs to address with regards to the Strategic Plan. **Mark Etzel** commented that the different aspects of the Strategic Planning process have been unrolled using the 7 lenses as the framework. The Strategic Planning efforts were discussed. The two public policy committees of the PPC and Commission are meeting jointly to accomplish a set of tasks relative to strategic planning. Three additional tasks have emerged and they are:

1. **Needs assessment.** The task is to look at the needs of care and prevention more broadly. The commission has identified its counterpart committee, which will be the Priorities Planning and Evaluation committee. Dr. Melanie Sovine and her staff will be convening meetings of these sub-groups.
2. **Quality Assurance and Evaluation of the Service Planning Process.** Neither the Commission nor the PPC have identified a committee for this task.
3. **Financial Needs Assessment.** This is comparable to the resource inventory. The commission's counterpart committee will be finance.

It was decided that the co-chairs would meet after the meeting to decide which sub-committees would be involved with those tasks.

ACTION: Richard Zaldivar commented that one of the action items was to have the PPC vote and approve Emma Robins and Clay Allen for membership to the PPC. But due to a lack of quorum, this will be voted on next month.

XI. STANDING SUBCOMMITTEE REPORTS

Evaluation

Nancy Wongvipat was happy to announce that they have another co-chair, Edric Mendia.

Operations

Sandra Cargill reported that Operations sub-committee now has the responsibility for membership. They will be evaluating the necessary steps to collect, maintain and analyze the data of the PPC membership. They are reviewing the information received from the community input. **Jeff Bailey** stated that as new members come on board they would be assigned to the Operations sub-committee.

Standards and Best Practices

Kellii Trombacco reported that the Standards and Best Practice would be submitting the final draft of the work plan to the Executive sub-committee for their approval.

Youth Leadership

Frank Roque reported they are reviewing the presentations from the sub-committees to assessment the type of feedback they can provide to contribute to the work plans. They have been establishing criteria and they are in the process of drafting an application for membership to a core group to represent the Youth Leadership sub-committee.

XII. ANNOUNCEMENTS

Jeff Bailey commented that an RFP from CDC, due on July 10, 2001, targeting young men of color is available. There is also a SAMSA grant due on July 10, 2001, targeting substance use in HIV in communities of color.

Gabriel Rodriguez commented the OAPP Webb site ww.lapublichealth.org/AIDS, is available for those interested on RFP update information.

PPC members were informed to submit their names to the co-chairs if they were interested in attending the National HIV Prevention conference in Atlanta, Georgia, from August 12 to 15, 2001.

Mark Etzel reported that the CHHS and the PPC Public Policy Committee began to meet jointly this month.

Gail Sanabria was in a car accident and could not attend the PPC. PPC members were encouraged to call the co-chairs to inform them if they are running late or if they will not be attending a meeting

Jeff Bailey commented that in response to the breakout sessions and public comment feedback, they have scheduled a new member orientation. It is open for new PPC members and to the community. Tentative date is July 30, from 9:00 am to 12:00 PM. The orientation includes EPI update, going over the CDC guidance, and the Policy and Procedures. PPC members were encouraged to participate and facilitate some of the discussion.

OAPP is having an all day quality assurance meeting on July 31, 2001

Richard Zaldivar stated that PPC members, both current and past members, and OAPP staff, have worked very hard to ensure that the process is fair and equitable and have put countless hours into fighting the virus. He wanted to make sure that everybody knows that we are doing a good job and to remember that we are on the same page. That is to be planners and to end this epidemic.

Mark Etzel stated in the packet there is a poster for IMH conference Family in HIV. The first day will be held at Charles drew on Wednesday July 25. Dr. David Thatcher the Surgeon General is the keynote presenter.

Nancy Wongvipat announced two job openings at APLA. She also announced that they have an editor for their Spanish publication, which is new Impacto. Omar Banos is the new editor.

XIII. ADJOURNEMENT

The meeting was adjourned.

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