

RETREAT

HIV Health Services Planning Council

Meeting Date: February 2nd, 2002
Meeting Place: Laurel Heights Conference Center
Meeting Time: 4:30pm - 6pm
Members Present: Felicia Elizondo; Sam Kaplan; Brad Hume; Catherine Geanuracos; Mjay Sanders; Susan Shea; Cecilia Chung; Dirk Doepfner; Sam Kaplan; Kevin Johnson; Margot Antonetty; Charlene Pugh; David Gant; Elyse Graham; John Conley; Karen Wuopio; Ken Pearce; Larry Cruz; Jim Mitulski
Others Present: Eric Whitney (Council Coordinator); Laura Thomas (SFDPH HIV Health Services); Michelle Long Dixon (SFDPH HIV Health Services); Robert Owens (Council Admin. Asst. - Minutes); Monika Hudson (Facilitator)

Introductions

Monika Hudson reviewed the agenda and outlined the following goals of the retreat:

- to have fun
- to clarify prioritization's timeline & process for this year
- to get to know each other better
- to review and confirm the committee structure

Honoring Our Differences and Similarities - Group Exercise

The group then participated in a group exercise, ranking the three sub-cultures that influence them the most, i.e. Sexual Orientation, Gender, etc.

Prioritization Planning

Monika Hudson then led the group in a discussion of prioritization processes. *Catherine Geanuracos* gave a brief description about last year's prioritization with attention to large group process verses small group process, the difficulty of soliciting new member participation during the process, and the steps required in prioritization. *Catherine Geanuracos* also proposed that the council meet twice a month during the prioritization process. Then *the group* focused on their need for different types of information for prioritization, including reports on different service categories, having enough time to make informed decisions, enough time to review the amount of information that is presented, and the role of, and participation of, the AIDS office in the process.

Review of Prioritization 2001

Monika Hudson then led the group in a discussion about Prioritization 2001, focusing on the pros and cons of the process.

Out of the groups discussion, the following concerns where noted:

- Increased number of meetings causes loss of participation.
- There is a need for small and large group participation
- The council needs to be informed about the constraints and needs concerning funding from service providers
- Gathering consumer input should occur year-round
- Mental health and substance abuse issues had a low priority last year and should be focused on this year
- The council would like to preview the presentations and have presentation binders organized with tabs
- Have program managers know in advance what they will need in their presentation, so they are able to incorporate the information into their presentation
- There is a need for on-going education for council members and a mentoring program for new members to assist them in the process of prioritization
- Clear indicators of what constitutes success for planning
- Having clear meanings for all service categories
- Try not to bring new council members onto the council during prioritization
- How to help providers make their presentations more informative
- Issues concerning Quality Assurance
- Educate the council on Robert's Rules of Order
- Possibly have a final retreat day to close out prioritization
- Information from consumers about their needs and services

Prioritization Agreements

After a great deal of discussion the following agreements were made about prioritization:

- Use small groups and task force committees when appropriate.
- Use large groups process to finalize priority decisions.
- Use Steering Committee to determine priority schedule and process.
- Priorities should be consumer focused.

The group came to a consensus that further discussion on this topic will be required.

Committee Structure

Monika Hudson outlined the goals for the discussion on committee structure.

- Compare structure to By-laws.
- Review last years Prioritization.
- Use some of the decisions from the previous discussion to assure that the committees structure facilitates the council's goals.

Monika Hudson and the group reviewed the current committees and structure:

- Membership Committee
- PWA Caucus Committee
- Steering Committee
- Housing Committee
- Implementation & Evaluation Committee (before 2/4/02, not functioning)
- Needs Assessment Task Force

The group discussed the committees mentioned in the council's By-laws:

- PWA Caucus - committee structure and function is defined by the By-laws.
- Membership - reference in the By-laws.
- Implementation & Evaluation - the evaluation part is mentioned in the By-laws.
- Needs Assessments Task Force

Monika Hudson and the group then discussed the function, need and standing of each committee. Implementation & Evaluation was discussed at great length concerning the role of committee, why the committee has not been functioning, how the past focus of the committee has been on the mostly on implementation and not evaluation, and its role in prioritization.

The following suggestions were made concerning the Implementation & Evaluation committee:

- Break I & E into two separate committees
- Use sub-committee groups under Implementation & Evaluation, i.e. Housing sub-committee, mental health sub-committee, substance abuse sub-committee, etc.
- Keep housing separate from the Implementation & Evaluation committee, but other service category-specific sub-committees under I & E
- Create a separate Evaluation Committee

The group discussed the pros and cons of each proposed suggestion. *Monika Hudson and the group* decided that this discussion should continue with the full council and at the Implementation & Evaluation committee, already scheduled to meet on Monday, February 4th, 2002.

Adjournment