PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)



Thursday, October 10, 2024, 3:00 PM – 5:00 PM Southeastern Live Well Center 5101 Market St, San Diego, CA 92114 Tubman Chavez Room C

To participate remotely via Zoom:

https://us06web.zoom.us/j/82979385521?pwd=ucUoVVtBupxbdBxothszYHHIP2luoC.1

Join the meeting via phone: 1-669-444-9171 United States Toll Meeting ID: 829 7938 5521 Password: PSRAC

Language translation services are available upon request at least 96 hours prior to the meeting. Please contact HPG Support Staff at 619-403-8809 or via e-mail at <u>hpg.hhsa@sdcounty.ca.gov</u>.

A quorum for this meeting is five (5)

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

ORDER OF BUSINESS

- 1. Call to order, roll call, comments from the chair
- 2. Reminders
 - a. Review of Committee Charge
 - b. **Committee members' Conflicts of Interest:** Disclose areas of financial interest (e.g., employment); Refrain from participation in related votes.
 - c. Areas NOT the purview of this committee: Selection of contractors; contract details; how contractors implement contracted services (e.g., staff salaries). These are the sole purview of the Recipient.
 - d. Focus on service priorities, not on specific service providers.
 - e. **Rules for the meeting** (as necessary): Committee members are limited to two (2) minutes per comment and limited to two (2) comments per item; public comments are welcome at the beginning and prior to each agenda item, limited to two (2) minutes so that all have an opportunity to participate.
- 3. Public comment on non-agenda items (for members of the public)
- 4. Sharing our concerns (for committee members)
- 5. ACTION: Approve the PSRAC agenda for October 10, 2024
- 6. **ACTION:** Approve the PSRAC meeting minutes for June 6, June 13, July 11, July 18, and July 25, 2024
- 7. Old Business:
 - a. **ACTION:** Recommendations for how services should be delivered (service delivery recommendations/service directives) in FY 25 (March 1, 2025 February 28, 2026)

8. New Business:

- a. Debrief the FY 25 priority setting and budget allocation process.
- b. **ACTION:** Review and approve the 2025 PSRAC work plan

9. Routine Business:

- a. Committee Attendance
- b. Review Monthly and Year-to-Date expenditures and assess for recommended reallocations
- c. 2024 Needs Assessment Survey of HIV Impact Update
- d. Partial Assistance Rent Subsidy Program (PARS) and Emergency Housing update
- e. Review Monthly and Year-to-Date service utilization report
- 10. Suggested items for the future committee agenda
- 11. Announcements

Next meeting date: November 14, 2024, from 3:00 PM - 5:00 PM

Location: Southeastern Live Well Center 5101 Market Street, San Diego, CA 92114 (Tubman Chavez Room A)

12. Adjournment

Principles for PSRA Decision-Making Process		Criteria for the PSRA Decision-Making Process		
Principles Guiding Decision Making (Priorities should reflect the		Criteria for Priority Setting		
Principles)		1. Documented Need based on:		
1.	Decisions are made in an open, transparent process		а.	Epidemiology of San Diego epidemic (Epi data)
2.	Decisions are based on documented needs (Needs		b.	Needs and unmet needs expressed in needs
	assessment, etc.)			assessment, including the needs expressed by
3.	Decisions are based on overall needs within the service			consumers, not in care and/or from historically
	area, not narrow single focus concerns			underserved communities (Needs assessment
4.	Decisions include reports from the Needs Assessment			data)
	committee of the HIV Planning Group.	2.	Minimize	disparities in the availability and quality of
5.	Services should be responsive to the epidemiology of HIV in		treatmen	t for HIV/AIDS (Demographic service utilization data
	San Diego, including demographics and region		compare	d to HIV/AIDS demographic)
6.	Services must be culturally and linguistically appropriate and	3.	Quality, o	outcome effectiveness, and cost-effectiveness of
	responsive		services	(Measured by service category outcomes, CQM,
7.	Services should focus on the needs of low-income,		and clien	t satisfaction data by service category)
	underserved, and disproportionately impacted populations	4.	Consume	er preferences or priorities for interventions or
8.	Services should minimize disparities in the availability and		services,	particularly for populations with severe need,
	quality of treatment for HIV/AIDS		historical	ly underserved communities, or those who know
9.	Equitable access to services should be provided across		their stat	us but are not in care
	subpopulations and regions	5.	Consiste	ncy with the continuum of care

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