Oakland TGA Planning Council
Serving Alameda and Contra Costa Counties

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Quality Services Committee Meeting

Megan C. & Damon P. |Chair and Co-Chair

Minutes

Date: July 20, 2026 **Time:** 1:00 PM - 3:00 PM

Physical Location(s)	Remote Address	Landline Access
• ACPHD 1100 San Leandro Blvd, Oak Room, San Leandro, CA 94577 • 2500 Bates, Suite B, Concord, 94520- Lassen RM	Click Here **Zoom Meeting ID**:817 3687 1155 **Passcode:** 2026	**To call into the meeting:** • 1(408)-961-3929 • 1(408)-961-3927 **Zoom Meeting ID**:817 3687 1155# **Passcode:** 2026#

In person = IP | Remote = R | Not Present = NP | Excused = E

Present: Megan C. (IP), Ilana N. (IP), Damon P. (IP), Duran R.(R), Rob N-N.(R), Ji-Sook O. (IP).

Staff: Camisha N. (IP), Stephanie C.(R), Edgard E. (R).

Mission: The Oakland Transitional Grant Area Planning Council will provide comprehensive planning, prioritization, and education regarding HIV services in Alameda and Contra Costa Counties that are inclusive, equitable, compassionate, and respectful of human rights.

I. **Call to Order - 1:00 PM** **1:00 PM**
   a. Moment of Silence
   b. Roll Call
   c. Read Mission Statement

II. **Review and Approve Agenda – 1:03 PM** **1:10 PM**
   Motion: Rob
   Second: Ilana
   Action: The agenda was approved

III. **Review and approve June minutes** **1:15 PM**
   Motion: Damon
   Second: Rob
   Action: Approved with suggested edits

Members reviewed the June meeting minutes and identified two corrections. Rob requested that the language on page three regarding the Los Angeles and Boston AAM examples be checked to confirm whether those tools do or do not focus on contracting, RFP, and invoicing. He also clarified the name of the Bay Area HIV and Infant Feeding Implementation (HIFI) Conference referenced in his Member Spotlight.

IV. Assessment of Administrative Mechanism (AAM) - 1:09 PM 1:30 PM

a. Sub-recipient Survey

The committee reviewed the annual Assessment of Administrative Mechanism (AAM) survey. Megan thanked Rob and Damon for providing written feedback on the prior-year surveys and explained that she had incorporated proposed edits into tracked-change versions of the Subrecipient Survey and Office of HIV Care (OHC) Survey. Members agreed to focus first on the Subrecipient Survey because it requires more lead time for distribution and follow-up.

The committee finalized its earlier tentative decision not to administer a separate Planning Council survey as part of the AAM. Members noted that a Planning Council survey is not required for the AAM and that feedback is already collected through meeting evaluations. Although response rates to meeting evaluations can be limited, members observed that the prior Planning Council AAM survey also had a low response rate. Members agreed that the Executive Committee could consider other methods of gathering Planning Council feedback in the future if desired, but that a separate Planning Council survey would not be included in this year's AAM.

Members discussed the Subrecipient Survey distribution timeline. Staff stated that once questions are finalized, the survey can be programmed and distributed the following Monday after the meeting. The committee supported providing approximately two weeks for the initial response period, followed by a short buffer period to contact agencies that have not responded. Members preferred setting an earlier formal deadline and then following up with late respondents rather than initially providing a longer response window. The final deadline will be confirmed at the next QSC meeting. Staff will also verify the current list of subrecipient agencies and contacts with OHC before distribution.

The committee discussed how to improve the completeness of agency responses. Members agreed to request one response per agency and to ask the designated respondent to confer with colleagues so that answers reflect the relevant information from across the agency. Members emphasized that the person responsible for the Ryan White grant should ensure the response is complete and accurate, even if another staff member fills out the survey. OHC will assist with confirming appropriate primary and secondary agency contacts. The committee also supported including a field identifying the best contact person for any follow-up regarding an agency's responses.

For the question concerning wait time for a first appointment for new clients, the committee agreed to retain multiple-choice response categories rather than convert the item to an open-text field. Members noted that standardized categories will make responses easier to analyze and compare across agencies.

Members reviewed proposed questions regarding the effect of potential Part A funding reductions on service categories. The committee discussed whether agencies should identify specific reduction percentages or describe the point at which services would be significantly affected. Members noted that responses may be difficult to interpret consistently because agencies have different funding mixes, service portfolios, and financial circumstances. The committee agreed that the survey should focus on information that is directly useful to Planning Council priority setting and resource allocation and supported clearer wording such as “significantly impacted” rather than “most impacted.”

The committee reaffirmed the goal of shortening and streamlining the survey. Members discussed distinguishing among information that is required for the AAM, information that directly supports Planning Council decision-making, and information that may be interesting but does not serve an actionable purpose. Members agreed that questions in the latter category should generally be removed to reduce respondent burden and improve completion rates.

Members discussed how to assess the timeliness of invoice payments. Stephanie explained that OHC finance records can identify when complete invoices are received and when payments are issued. Members agreed that OHC data would be more reliable than subrecipient perceptions because payment delays can result from incomplete or incorrect invoices that require correction. The committee therefore moved the invoice-payment timeliness item from the Subrecipient Survey to the OHC Survey and requested information regarding the percentage of invoices paid within the applicable 30-day timeframe.

The committee reviewed a question about culturally sensitive care and decided to delete it. The OHC monitors language access, but does not necessarily collect all information contemplated by the survey item, such as sexual orientation, gender identity, or culturally specific values. Members questioned whether the item is required for the AAM or directly informs allocation decisions.

The committee reviewed questions concerning contracting, invoicing, and reimbursement and discussed consolidating several items. Members considered whether satisfaction-rating scales should be retained or replaced by open-ended prompts that allow agencies to describe meaningful contracting or reimbursement challenges. Examples from AAM reports in Los Angeles and Boston were referenced as possible models, and members were encouraged to review the Los Angeles example before the next meeting, particularly its approach to contracting, reimbursement, budget modifications, and technical assistance.

Members also discussed reorganizing questions concerning OHC training and technical assistance. The committee supported first identifying the training and technical assistance opportunities offered during the prior year, then asking whether those services support agency needs and what additional support agencies would like OHC to provide. The group tentatively revised the question to: “Does the technical assistance and training provided by OHC support your agency's needs to achieve desired outcomes? Please describe any additional support you would like OHC to offer.”

The members will start on question number 12 of the Subrecipient Survey and the OHC Survey were deferred to the next meeting. Members agreed that both surveys should be finalized at the next QSC meeting in order to preserve the planned distribution and September review timeline.

b. Recipient Survey

V. Review Utilization Data - 2:46 PM 2:40 PM

The committee reviewed utilization data presented by Stephanie. Members noted that one-third of the contract year had elapsed and focused on service categories with utilization percentages substantially above or below expectations. OHC staff indicated that several highlighted figures were already on the recipient's radar but that additional review would be needed before explanations could be provided.

Members discussed the difference between Unduplicated Clients (UDC) and Units of Service (UOS). Because clients are counted only once for UDC but may receive multiple units of service throughout the year, members expected UDC percentages to rise more quickly than UOS. However, members identified UDC figures well over 100 percent as requiring explanation and also requested review of unusually low UOS percentages, figures below approximately 10 percent and large discrepancies between UDC and UOS.

Members noted that delayed contract execution, interruption of invoicing systems, and delayed data entry could explain some low utilization figures. The committee also discussed apparent differences between Minority AIDS Initiative (MAI) utilization and standard Part A utilization for similar service categories and requested additional explanation regarding how MAI-funded and non-MAI services are reported and differentiated.

The MAI Outpatient/Ambulatory Health Services data received particular attention because reported utilization appeared very low. Stephanie noted that one agency provides the service under MAI, that the agency is generally timely with data entry, and that it was already close to expending its funding. She agreed to review the data more closely to determine whether the reported percentage reflects a reporting or data-entry issue. Members requested that significant utilization outliers be explained at the Planning Council meeting.

VI. Review Workplan 2:50 PM

The committee reviewed the Workplan and updated completed activities. Members checked the July utilization-data review. AAM work for June and July was also recognized as completed or in progress, with additional AAM milestones expected to be completed in August and September. The committee clarified the status of the resource inventory. Members noted that the resource inventory is expected to inform the next triennial needs assessment. If it is shared with the full Planning Council before then, it should be clearly identified as an internal, non-public document.

VII. Member Spotlight Discussion 2:55 PM

Because of time constraints, the scheduled Member Spotlight was deferred. Members agreed to return to the spotlight at a future meeting.

- July: Damon
- August: Ji Sook

VIII. **Announcements, Evaluation link**

IX. **Adjourn** **3:00 PM**

The meeting was adjourned at 3:00 PM.

GROUP NORMS:

1. Be a welcoming body to all.
2. Respect each other as leaders.
3. Exhibit patience with each other.
4. Be anchored in our mission.
5. Agree to disagree.
6. Step up Step back.
7. Active, intentional, attentive, listening/eyes, ears, head, & heart.
8. No retribution for what gets said here.
9. Be present, prepared and engaged.
10. No judgement/Take a breath & set it aside.
11. Everyone's effort & time is valued.
12. Encourage clarifying questions
13. Be creative & efficient in deliberations.
14. Be on time.
15. Be mindful of your actions and assume good intentions.
16. Avoid using acronyms and abbreviations or explain what they stand for.

The **Vibe Monitor** (Chairs and/or Planning Council Staff) can enforce the above ground rules in situations of disruptive behavior. Pursuant to the OTGA Bylaws members can be removed from the meeting and/or council for disruptive conduct or conduct affecting the council's integrity of the community's confidence.