

CORRESPONDENCE

FROM

JUNE 15, 2015

COUNCIL MEETING

June 10, 2014

To the Honorable Mayor Terry Tornek
and Honorable Council Members of the City of Pasadena
100 North Garfield Avenue
Pasadena, CA 91109

Dear Honorable Mayor and Council Members:

I am a client of the Andrew Escajeda clinic ("Escajeda clinic") at the Pasadena Department of Public Health having been inflicted with the HIV virus. I am one of many utilizing the wonderful services that the compassionate, knowledgeable and hard working staff members of the Escajeda clinic provide.

I did volunteer work in Africa in the early 1990's working with doctors and nurses in remote villages to help victims of the HIV virus. I was moved by many of the victims' stories and as exhausting as the work was, I left Africa with a satisfied feeling that I had contributed to their well-being and brought hope to their future. Many years passed and then in late 2007, I fell victim to the pneumonia, was admitted to the Huntington Hospital, and began the fight for my life (and I still do everyday). Three months later, I relapsed, again fighting for my life, and at that time, the doctor took a biopsy of my lung and gave me the dreaded diagnosis that I was HIV. Shocked, confused and utterly bewildered, I had no idea how being careful in my volunteer work that I had contacted HIV. At first, I was in denial as I had to concentrate on survival since I was a full-time employee and being that my job was stressful, I had to carry on. Finally, after many strenuous years of working and with my health deteriorating, I had to leave my job. You see, stress contributes to the struggles of living with HIV even more so than people without HIV. Now, at 68 years old and finding refuge at the Escajeda clinic, I still struggle but I know that the Escajeda clinic is there to help me with my continuous battle with HIV.

I have kept my HIV affliction a hidden secret for the most part dreading being labeled as a piece of dirt or even worse. HIV has many stereotype faces and is a disease that carries a high negative stigma; however, I am a normal senior citizen that you would see on the streets of Pasadena. I do not have a close family and I am basically alone fighting this disease. Some days are good, some days not so good. I have skin cancer, among other things, and my health is generally fair, but not good. I attend women's group at the Escajeda clinic to find comfort and have met many people, both staff employees and those inflicted with HIV, and we all have become one big supportive family. There are many HIV stories and many HIV faces at the Escajeda clinic, but we all have a common focus: to hope there will be a vaccine to cure HIV but knowing that we are fighting each and every day a virus that will be a burden to us the rest of our lives.

As a result of my HIV, I have become somewhat reclusive since I am consumed by this horrible virus. For instance, I have lost a lot of friends. Am I being stigmatized for trying to make a difference in the world back in the 1990's? What other horrible health issue might befall me since the HIV virus leaves me vulnerable to kidney failure, liver problems, cancers, and possible malignancies? Fighting HIV is not easy; the medications are hard on my body; and day-to-day tasks are incredibly hard to maintain. I have worked hard all my life to be a good citizen and do the right thing and then the blow of having HIV has not sat well with who I am. I continue to make mortgage payments and pay taxes on my social security check. It is not an easy life nor is it one that I envisioned as a young adult looking forward to my later years. Being human, I could ask "why me?", "how could my volunteer work lead to this horrific ending," etc., but I can't for it would drive me to a deeper canyon of anguish. Yes, I am for the most part angry that I am permanently sick and have the HIV virus but positively, I wake up each day with faith and hope and prayer.

The Escajeda clinic, the adjacent Michael D. Antonovich Dental Clinic ("Dental Clinic") and the food pantry have been life-saving utilizations. The staff members have been wonderful never condoning and never putting me down for my disease. They are a blessing and not only have helped me, but have helped all of us who walk in the door at the Escajeda clinic, the Dental Clinic and the food pantry.

It is with great humbleness and humility that I urge you to not close the Escajeda clinic, the adjacent Dental Clinic and the food pantry. Many clients commute long distances, some without a car depending on public transportation, to seek help and services at the Escajeda clinic. Many staff members have mortgages just like me and most are raising families and are good people feeling that their jobs may soon become non-existent. As a side note, I was at the Dental Clinic today and one employee told me that she quit her 13-year job to work at the Dental Clinic. She further told me that she might have thought differently if she knew she was going to lose her job three years later.

Thank you from the bottom of my heart for your consideration and understanding of my story, one of many, to ensure that the Escajeda clinic, the Dental Clinic and food pantry are sustained for us to live a normal life that we are deserving of as all San Gabriel Valley residents are. The City of Pasadena has been a vision of leadership in the San Gabriel Valley and has taken steps to make it a great and growing city. We, associated with the Escajeda clinic, the Dental Clinic and the food pantry, are all worthy of that continuing relationship with the City of Pasadena.

With gratitude and sincerity,

/s/ Paula L. Adams
Pasadena, CA

P.S. I live in Council Member Margaret McAustin's district.



Healthy people. Strong communities.

June 15, 2015

The Honorable Terry Tornek, Mayor of Pasadena
and Members of the Pasadena City Council
Pasadena City Hall
100 N. Garfield Avenue
Pasadena, CA 91109

Dear Mayor Tornek and Members of the City Council:

RE: Commitment of Community Health Alliance of Pasadena (ChapCare) to Integrate, Expand and Enhance its Current HIV/AIDS Services into a Ryan White Look-Alike Health Center Program

In response to the City of Pasadena Public Health Department's (PPHD) decision to eliminate its direct clinical services effective September 30, 2015 in order to stem the loss of the City's financial resources, ChapCare is committed to integrate PPHD's current program of HIV/AIDS Services into a ChapCare -Ryan White Look-Alike program which will mirror the services and programs of the Andrew Escajeda Clinic.

Background

ChapCare is a Federally Qualified Health Center serving the marginalized, uninsured and vulnerable populations of the greater Pasadena area for over 20 years. During this time, we have provided 5,798 unduplicated patients with HIV testing, counseling and care as recommended by the best practices guidelines for primary care centers under the supervision of our medical staff. Through our testing program, we have identified HIV infected patients and managed them into the care appropriate to their needs. Some of this care has been in partnership with the PPHD who has paid for it through their various HIV care contracts and general funds from the City.

As presented in the PPHD's FY 2016 Operating Budget Memorandum to the Pasadena City Council and City Manager dated June 8, 2015, the Patient Protection and Affordable Care Act (ACA) has provided insurance to many low to moderate income people who were formerly precluded from accessing insurance and needed health services. ChapCare has been able to pursue the opportunities afforded through ACA and has seen a three (3) fold increase in insured patients coming to us for services since it was instituted over the last five (5) years. Part of that increase included HIV positive patients who were formerly uninsured but are now enrolled in Medi-Cal Managed Care insurance programs and Covered

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California (Insurance Exchange) as mandated by ACA. Since PPHD elected not participate in managed care and/or insurance exchange for primary care assigned was made to ChapCare to take care of regular chronic disease conditions like diabetes, hypertension, or hyperlipidemia or episodic issues like coughs, influenza, muscle strains, etc. As is recommended by the best practice guidelines for HIV management, ChapCare would refer them back to PPHD periodically for their specialty care needs related to the HIV disease and they were seen by PPHD under contract as a HIV Specialist for assigned patients. Now that the Affordable Care Act is in place, and there are various programs being considered under immigration reform that may extend insurance coverage to those who were formerly uninsurable, it is expected that Ryan White funding will morph and/or disappear within 5 years.

ChapCare also provides oral health care for its patients including any HIV positive patients in need of dental care in our dental health centers. ChapCare has over 14 years of experience serving these populations in its current dental center and maintains dental contracts in fee-for-service and managed care insurance dental plans, as well as, a contract for uninsurable patients with the County of Los Angeles Department of Health Services.

Issue

We have been in discussion with City Manager, Michael Beck, Assistant City Manager Steve Mermell, PPHD Health Officer and Director Dr. Ying-Ying Goh, PPHD AIDS program staff Angelica Palmeros, and Financial Analyst Manuel Carmona about PPHD's decision to extricate selected Los Angeles County Ryan White contracts and assign them to ChapCare. The Ryan White program is a federal pass through program to Los Angeles County contracted to PPHD. The County of Los Angeles programs serves HIV positive clients and families in need of medical, dental, psychosocial and support services to sustain their quality of life while living with this disease. In recent years, some of the contracts and services have been limited to serving only the uninsurable clients themselves.

The PPHD staff has contacted Los Angeles County regarding their plan of extricating from these contracts whether the contracts can be reassigned to ChapCare. The Los Angeles County AIDS program staff has indicated that the County will not execute the re-assignment unless the new entity has 5 years of direct Ryan White experience in managing the contracts. Although ChapCare could have completed this contracting requirement over the years it has been operating next door to PPHD, we made a deliberate decision not to compete for this funding due to the existence of the Andrew Escajeda Clinic. Since ChapCare did not secure these contracts, we are now unqualified for the re-assignment. ChapCare does lack Ryan White HIV specialty care and the "wrap-around" support services, but does provide similar services as part of the Patient Centered Medical Home (PCMH) and Integrated Behavioral Health models for all our patients. Although we are disappointed that the County has taken such a position, ChapCare is committed to continue to serve the HIV positive patients it currently serves for its MediCal and Covered California managed care clients enrolled at our centers and has the capacity to expand its service delivery model to encompass the services for other persons affected by the disease currently receiving services at PPHD.

ChapCare was given access to the City's contracts and financial data for the remainder of the contracted years which end on February 2017. After careful review, analysis, deliberation and conversation with PPHD staff we provided 3 scenarios through which there could be collaboration around the taking over of services by ChapCare where PPHD would either keep or divest its contracts with the County and determined the financial risk involved in each approach. We also made assumptions in these scenarios that were contrary to City staff's original proposals and acknowledge their willingness and patience in considering the pros and cons of these different models.

Proposal

After the exhaustive review, there is one viable alternative for ChapCare— integrate, expand and enhance the ChapCare HIV service model to be a Ryan White "Look-Alike" with a scope of service which mirrors the desired services the City and the Escajeda patients expect.

This scope of service includes:

- 1) Medical Outpatient Services-Primary and specialty care services to all clients regardless of their ability to pay.
- 2) Mental Health Services-Both psychotherapy and psychiatry to all clients regardless on their ability to pay.
- 3) Medical Care Coordination-Linkages and referrals to external resources to complement the medical care received to all clients regardless on their ability to pay.
- 4) AIDS Drug Assistance Program (ADAP)-Eligibility determination for the life-saving medications that these patients take every day to all clients regardless on their ability to pay.
- 5) Coordination in partnership with PPHD for additional Support Services, Pasadena Housing Department and other AIDS service agencies-Medical transportation; food distribution; housing vouchers/case management.
- 6) Incorporate the Michael D. Antonovich Dental Clinic-Provides dental care to HIV positive patients along with other special populations such as the homeless and elderly.

ChapCare will commit to consolidating its HIV medical, psychotherapy, pharmacy and supportive services onto the first floor of the 1855 N. Fair Oaks building which it leases from the City. It also proposes to lease the Michael D. Antonovich Dental Clinic located at 1845 N. Fair Oaks from the City in order to serve the HIV, homeless, elderly and general public clients with needed oral health care. ChapCare will advocate for the assignment of the Ryan White and other county dental funding to the Dental Clinic.

In order to support the patient advocacy and feedback into services that exists currently, we would invite the Client Advisory Board to participate in the same activities for the ChapCare HIV clinic.

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Mayor Tornek and Members of the City Council

ChapCare understands that due to the cancellation of the County contracts, there will be no cost reimbursement for this service delivery model. Rather, ChapCare will use its current resources to defray the costs of care including its federal grant from Health Resources Service Administration, the County of Los Angeles My Health LA program, the state MediCal program, Covered California insurance fees and targeted fundraising for this effort. As the Ryan White services are offered free of charge for eligible patients for designated contract services, this same arrangement will be put in place for these clients.

ChapCare recognizes that experienced staff are needed to mirror the Escajeda clinical program, therefore we would open vacancies in the HIV program positions for which affected Pasadena City staff can apply.

Lastly, to maintain the years of history and recognition that have been cultivated by the City of Pasadena through the Andrew Escajeda Comprehensive Care Services Center, we would be honored to preserve the name at the new location if so desired by the City of Pasadena and the Client Advisory Board.

Next Steps

The ChapCare Board will hear the program proposal as a recommendation to adopt from the Strategy and Planning Committee at its Annual Meeting tomorrow evening. Still outstanding in our process is the final fiscal presentation which will be incorporated into our FY 2016 Budget approval slated over the next 2 weeks. At that point, you will have ChapCare's full programmatic and financial commitment to this endeavor in order to keep these valuable HIV/AIDS support services in our community with hopefully the same providers and staff currently delivering the care now.

Thank you for hearing our proposal for services and we are available to answer questions at your convenience. I can be reached at (626)993-1227 or mmartinez@chapcare.org.

Sincerely,



Margaret B. Martinez, MPH
Chief Executive Officer

Hello,

My name is Tiffany Bass and I have been diagnosed with HIV. I've been aware of my condition for the past 18 years. The doctor that diagnosed me referred me to a clinic in the Los Angeles area that dealt with HIV cases. As time progressed I joined Huntington Memorial Hospital, which had HIV clinics and other programs associated with my condition. As a result of going to Huntington Memorial I had all my medical records transferred there.

The clinics that I attended referred me to ACS, which was across the street from Huntington Memorial. In the beginning they provided me with counseling, which was very much needed, they also provided me with financial assistance, food programs, and gift certificates that allowed me to purchase food items of my own choice.

ASC then was able to move to a larger facility on Fair Oaks in Pasadena. At that location we were able to begin support groups that allowed us to share our various experiences and provided us with emotional support and we were able to share with each other our own experiences that each one of us had to deal with.

When I was diagnosed with HIV, I already had several pre-existing conditions. Because of these pre-existing conditions I had been told by my doctors that I wouldn't live to see adulthood, which left me somewhat traumatized. Each year I celebrate another birthday I am very thankful.

As a result of being diagnosed with HIV you are ostracized and people don't want to touch you or be close to you for fear they may contract the illness somehow. ASC has provided me with the mental and emotional support I needed to keep on going forward and try to live my life to the fullest.

It was my fiancé, now my husband, that took me to the doctor when I was first diagnosed 18 years ago. Because of ACS and their support, it gave

me the confidence I needed to get married and to live a normal life just like people that don't have HIV.

In the beginning I didn't need housing support because my husband provided it for me. But now, we have been separated for almost two years and I need ASC and the housing program and other programs that they provide.

Because of ACS's connection with various programs I was able to get dental assistance. The average dentist doesn't know how to treat patients with HIV. Therefore, my teeth were in serious need of dental care.

Approximately six years ago ACS moved to an even larger facility which allowed them to provide more of their services in one location rather than patients having to go to different facilities to receive help and treatment.

Through the years doctors and science have made remarkable breakthroughs to provide medications that have helped many HIV patients to live longer and more productive lives. The death rate is almost null and void due to these wonderful medications. However, new cases of HIV are presented every day and these people will need the assistance that ACS, APLA, CHAP, 5P21 and JWCH can provide them. These programs will be helpful and beneficial for future victims of HIV.

Thank you for your attention.

COALITION FOR INCREASED CIVILIAN OVERSIGHT OF THE PASADENA POLICE

Independent Police Auditor Proposal

1. Title of the position: Independent Police Auditor
2. Position reports to: Public Safety Committee
3. Employment status: Independent Contractor
4. Possible duties:
 - Accept complaints of misconduct against Pasadena police officers and forward to Professional Standards Unit for investigation
 - Review and assess Professional Standards Unit investigations conducted by the Pasadena Police Department, with a special emphasis on reviewing investigations into allegations of unnecessary or excessive force, racial profiling, sexual orientation bias, unlawful detention or arrest, illegal search, sexual harassment, or discrimination
 - Develop an alternative dispute resolution process for resolving some complaints
 - Respond to the scene of all officer-involved shooting incidents and monitor the ensuing Pasadena Police Department investigation
 - Real-time review of investigations and recommendations for internal findings on all uses of deadly force, in-custody death investigations, significant force investigations, and any other internal investigation selected by the City Council, Public Safety Committee, City Manager, or Chief of Police
 - Develop recommendations to improve Pasadena Police Department policies and procedures, training, and management and supervision practices
 - Engage in regular community outreach and receiving community input
 - Statistical tracking of risk factors and management initiatives
 - Prepare annual reports for the public and City Council, Public Safety Committee, City Manager, and Chief of Police

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Submitted by Kris Ockershauser

COALITION FOR INCREASED CIVILIAN OVERSIGHT OF THE PASADENA POLICE (CICOPP)

CICOPP GOALS FOR INCREASED CIVILIAN OVERSIGHT IN PASADENA

Goal #1: *Ensure that Pasadena Police Department officers continue to have the proper tools, guidance, training, and supervision to carry out their law enforcement responsibilities safely and in accordance with individuals' constitutional rights.*

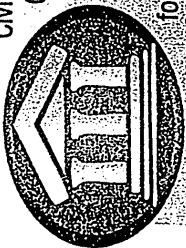
Goal #2: *Make constitutional policing a core value of the Pasadena Police Department and work with the Department to build systems of accountability to carry out that value to support the many PPD officers who strive to and do uphold their oaths, engendering greater trust and confidence in PPD from the community.*

Goal #3: *Ensure the Pasadena Police Department continues to function as a part of the community; that it continues to work to cultivate legitimacy by engaging with the community fairly, impartially, and respectfully; that it increases the transparency with which it operates; and that it becomes more directly responsive to the community.*

Goal #4: *Improve the quality and integrity of the Pasadena Police Department's disciplinary system, including, but not limited to, investigations of complaints of misconduct—both internally and externally generated complaints—and police uses of force, while vigilantly safeguarding the rights of officers.*

Goal #5: *Identify and help resolve underlying systemic problems within the Pasadena Police Department, with a primary focus on reducing and preventing misconduct and developing recommendations for positive organizational change.*

Protects Civil Rights



Civilian oversight is a developing area of civil rights protection. Oversight practitioners are at the forefront of investigating, reviewing, and auditing individual cases or patterns of potential civil rights violations in areas such as racial profiling, biased policing, the use of deadly force, illegal searches, excessive force, and unlawful arrests.

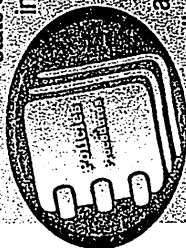
Supports Effective Policing



Mutual trust and respect between police and communities are critical to effective law enforcement. Civilian oversight increases public trust in police by assuring the public that investigations have been done fairly, thoroughly, and objectively. This improved trust leads to greater public cooperation with law enforcement, and in turn, improves public safety.

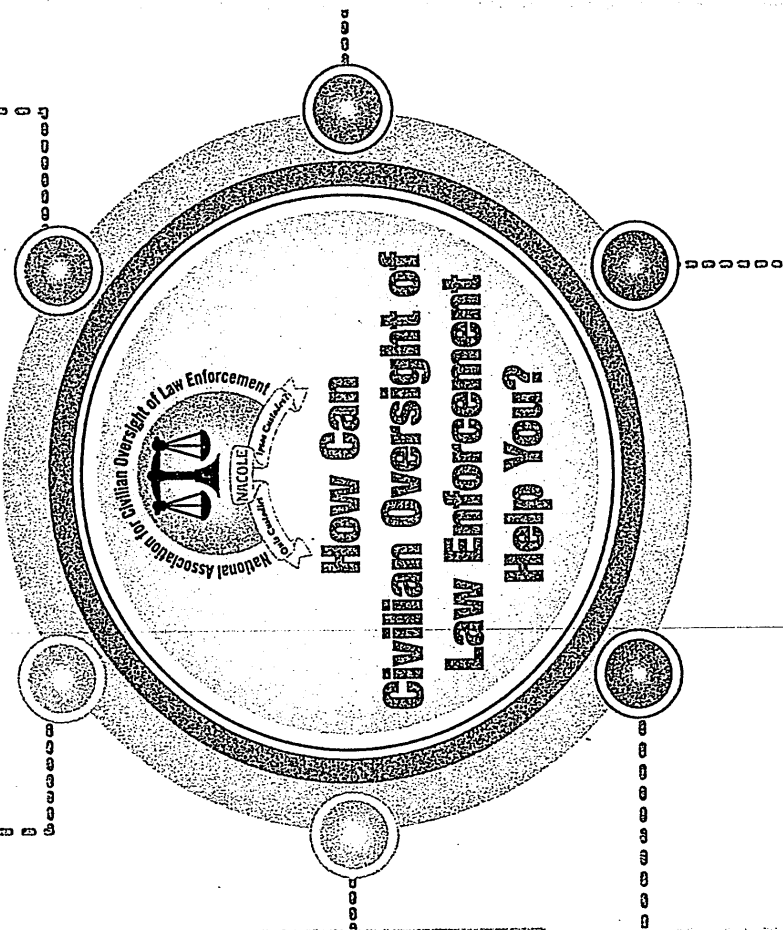
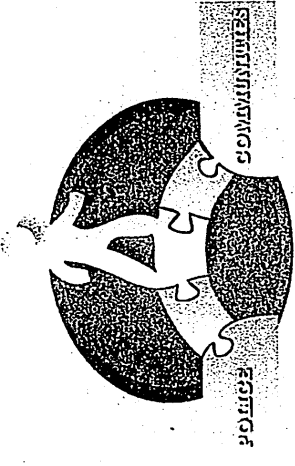
Ensures Greater Accountability

One of the primary goals of civilian oversight is to advance fair and professional law enforcement that is responsive to community needs. This is accomplished, in large part, by promoting constitutional policing. Oversight focuses on assessing officer and departmental compliance with local policies as well as state and federal law, and institutionalizing and preserving important reforms. It also aids in evaluating the integrity and effectiveness of internal police accountability systems.



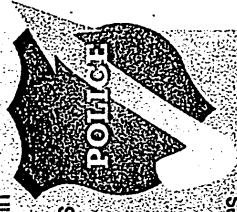
Builds Bridges

Effective policing must be responsive to community standards, values, and needs. Civilian oversight builds bridges between communities and the police forces that serve them by: communicating and cooperating with community and civic leaders before and after major incidents; by assuring the public that investigations of police misconduct have been completed fairly, thoroughly, and objectively; and by conducting independent investigations and reviews to ensure constitutional policing practices. Civilian oversight further acts as a bridge by conveying the concerns and needs of the community to the police, and reporting to the community how the police are performing, which allows the public to trust the police department and its officers and to view them as honest, reliable, and trustworthy. Civilian oversight practitioners are generally not currently-serving police officers, but trained and educated lawyers, investigators, researchers, analysts, and volunteers in your community.



Increases Confidence in Police

Civilian oversight works to increase public trust and confidence in the police. By conducting independent reviews and audits of police policies and practices, and by ensuring that investigations of police misconduct or uses of force are handled fairly and objectively, oversight helps a community to trust that issues are resolved in a way that maximizes the public interest. This trust translates to higher confidence in a police force and greater cooperation in a department's efforts to prevent and solve crimes.



Helps Manage Risk

Civilian oversight is critical to managing a municipality's exposure to risk from lawsuits claiming unlawful actions by individual officers or departmental failures to supervise or train officers. Oversight accomplishes this by ensuring that individual officers who engage in misconduct are effectively investigated and disciplined; by evaluating and proposing improvements to police management and supervision and training; and by reporting publicly on a department's progress in implementing such improvements.

