

STRATEGIES AND STANDARDS COMMITTEE



Tuesday, February 3, 2026, 3:00 PM – 4:30 PM
County Operations Center
5530 Overland Ave, San Diego, CA 92123
(Training Room 124)

The Charge of the Strategies & Standards Committee: To oversee the Integrated Plan and make recommendations to adjust objectives, strategies, and activities to promote Getting to Zero (GTZ).

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Meeting Location & Directions:

Strategies and Standards Committee

Tuesday, February 3, 2026
3:00 PM - 4:30 PM

County Operations Center
5530 Overland Ave
San Diego, CA 92123
(Training Room 124)



FROM I-163 SOUTH:

1. Take I-163 North to Exit 8 for Kearny Villa Road.
2. Keep right, follow signs for Kearny Villa Road.
3. Turn right onto Chesapeake Dr.
4. County Operations Center will be on your right.

FROM I-15 SOUTH:

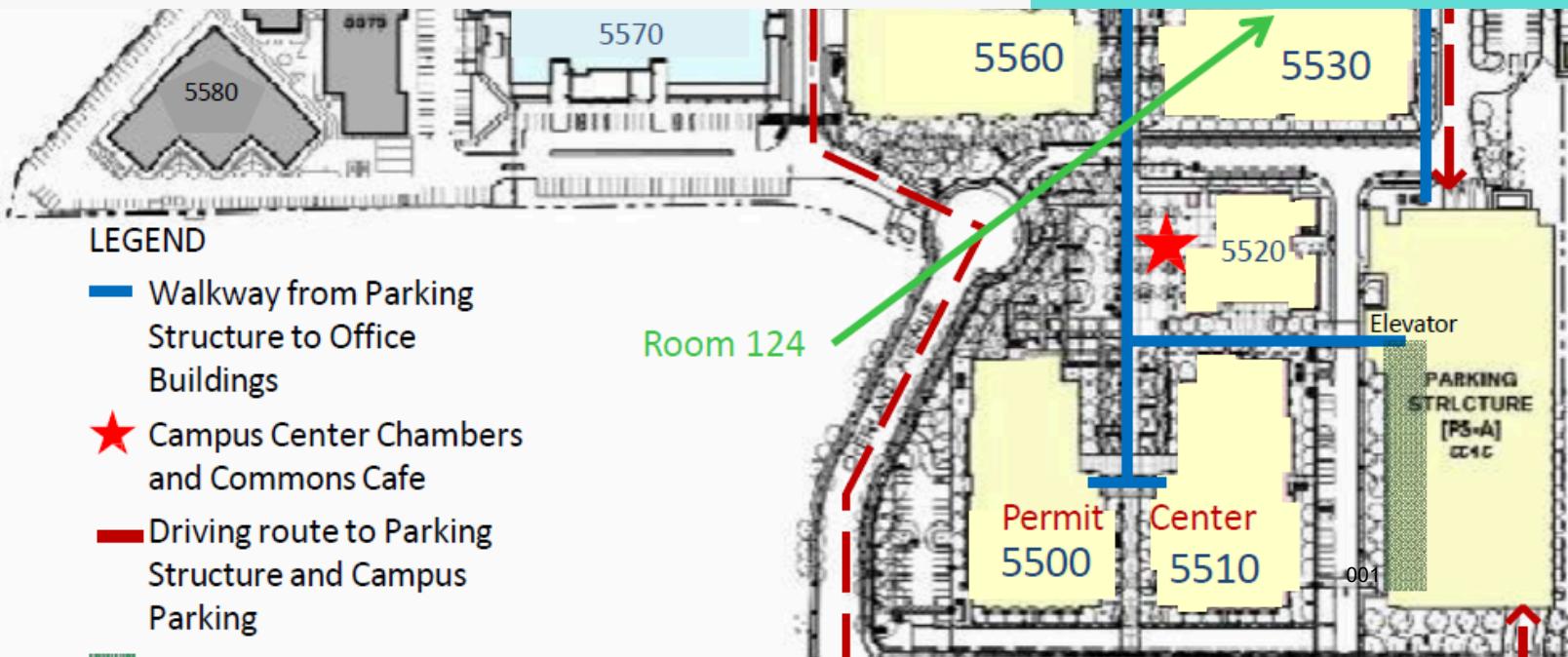
1. Take I-15 North to Exit 10 for Clairemont Mesa Blvd.
2. Turn left onto Clairemont Mesa Blvd.
3. Turn right onto Overland Ave.
4. Continue straight to stay on Overland Ave.



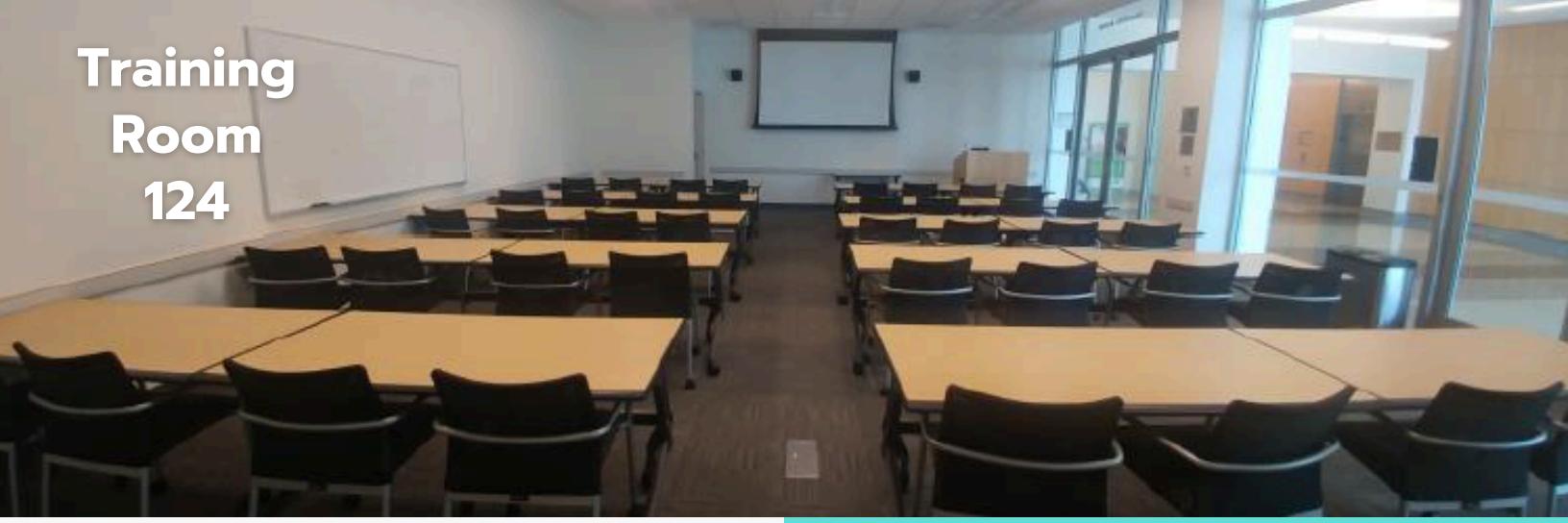
PUBLIC TRANSPORTATION

MTS Bus Routes:

25, 235, 928



Training Room 124



FROM TROLLEY & BUS:

1. Take the Blue Trolley Line to the Balboa Avenue Transit Center.
2. Walk to Balboa Ave & Moraga Ave bus stop (about 7-minute walk, 0.3 miles).
3. Take Route 27 bus from Balboa Ave & Moraga Ave to Complex Dr & Clairemont Mesa Blvd.
4. Head north on Complex Dr.
5. Cross the street and turn right on Clairemont Mesa Blvd (after U.S. Bank Branch on the right).
6. Cross the street and turn left onto Overland Ave. and head north.
7. Enter east through County Operations Center entrance/black gate. **Building 5530** will be on your left.

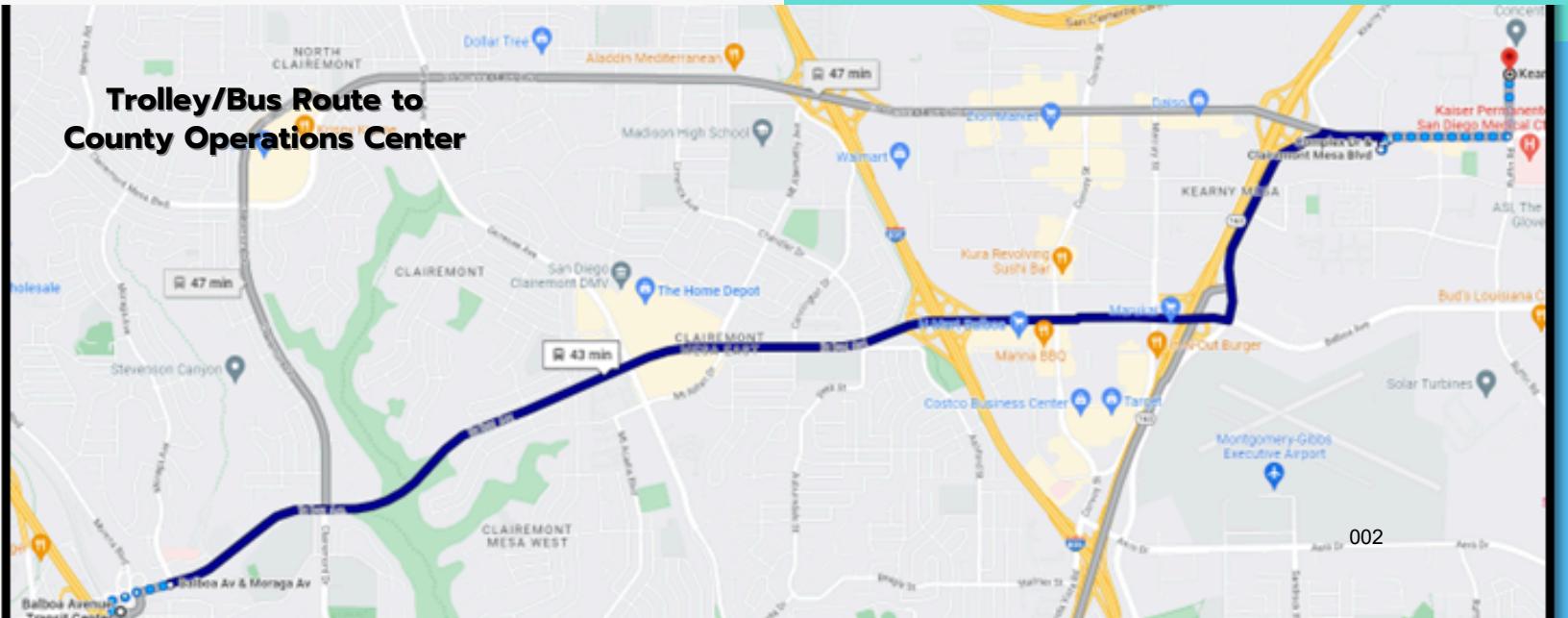
FROM BUS:

From Ruffin Road:

1. Walk north towards Ruffin Road.
2. Turn left on Hazard Way.
3. Enter through County Operations Center entrance/black gate and head further west. Access to County Operations Center buildings will be on your **left**.

From Overland Ave.:

1. Walk north on Overland Ave.
2. Enter east through County Operations Center entrance/black gate.
3. Turn left on pedestrian walkway. **Building 5530** will be on your **left**.



STRATEGIES & STANDARDS COMMITTEE



Tuesday, February 3, 2026, 3:00 PM – 4:30 PM
County Operations Center
5530 Overland Ave, San Diego, CA 92123
(Training Room 124)

To participate remotely via Zoom:

<https://us06web.zoom.us/j/85772860296?pwd=Ym1jWit6cWhnL05BOTlyR25LbWhqQT09>

Call in: +1 (669) 444-9171

Meeting ID (access code): 857 7286 0296

Password: 630634

Language translation services are available upon request at least 96 hours prior to the meeting.

Please contact HPG Support Staff via e-mail at hpq.hhsa@sdcounty.ca.gov.

A quorum for this meeting is seven (7)

Committee Members: Nicole Aguilar | Amy Applebaum | Juan Conant | Beth Davenport | Michael King | Skyler Miles | Joseph Mora | Veronica Nava | Ivy Rooney | Dr. Winston Tilghman | Jeffery Weber | Michael Wimpie (Chair)

ORDER OF BUSINESS

1. Call to order, introductions, comments from the chair, and a moment of silence
2. Public comment (for members of the public)
3. Sharing our concerns (for committee members)
4. **ACTION:** Approve the Strategies & Standards Committee agenda for February 3, 2026
5. **ACTION:** Approve the Strategies & Standards minutes for October 7, 2025
6. Review follow-up items from last meeting
7. Old Business:
 - a. **Discussion:** Additional clarification on the extension requirements for the PARS enrollment (*per 10/22/25 HPG meeting recommendation*)
 - b. **Discussion:** Continue to discuss additional changes to the Case Management Standards (*per 10/22/25 HPG meeting recommendation*)
8. New Business:
 - a. **Discussion:** Criteria for ongoing food vouchers
 - b. **ACTION:** Approve additional Service Standards Introduction updates
 - c. **ACTION:** Approve a Strategies and Standards Committee co-chair
9. Routine Business:
 - a. Review: Committee Work Plan
 - b. Review: Committee attendance
 - c. Recommendations from Priority Setting & Resource Allocation Committee
 - d. Recommendations to the HIV Planning Group, HIV Planning Group committees, and requests of recipient
 - e. Suggested items for the future committee agenda
10. Announcements
11. Next meeting date: April 7, 2026 at 3:00 PM – 4:30 PM
Location: County Operations Center, 5560 Overland Ave, San Diego, CA 92123 (Training Room 172) and online via Zoom
12. Adjournment

STRATEGIES AND STANDARDS COMMITTEE



*Tuesday, October 7, 2025, 3:00 PM – 4:30 PM
County Operations Center
5530 Overland Ave, San Diego, CA 92123
Training Room 124*

A quorum for this meeting is seven (7)

Committee Members: Nicole Aguilar | Amy Applebaum | Beth Davenport | Michael King | Ivy Rooney | Dr. Winston Tilghman | Jeffery Weber | Michael Wimpie (Chair)

Members Absent: Juan Conant | Skyler Miles | Joseph Mora | Veronica Nava

ORDER OF BUSINESS

Agenda Item	Discussion/Action	Follow-Up
1. Call to order, introductions, comments from the chair, and a moment of silence	Michael Wimpie called the meeting to order at 3:00 PM. Introductions were had. A moment of silence was observed. The Anti-Racism statement was read. The chair had no comments.	
2. Public comment (for members of the public)	The following comments were made: <ul style="list-style-type: none">- A reminder that Housing Opportunities for Persons with AIDS (HOPWA) is a similar program to Partial Assistance Rental Subsidy (PARS) program.- A recommendation that Emergency Assistance cover all utilities.	
3. Sharing our concerns (for committee members)	None	
4. ACTION: Approve the Strategies and Standards Committee agenda for October 7, 2025	Motion: Approve the Strategies and Standards Committee agenda for October 7, 2025 Motion/Second/Count (M/S/C): Rooney/Aguilar/7-0 Discussion: none Abstentions: none Motion carries	
5. ACTION: Approve the Strategies and Standards Committee meeting minutes from August 5, 2025	Motion: Approve meeting minutes for August 5, 2025 M/S/C: King/Tilghman/7-0 Discussion: none Abstentions: none Motion carries	

STRATEGIES AND STANDARDS COMMITTEE

Agenda Item	Discussion/Action	Follow-Up
6. Review follow-up items from last meeting	<ul style="list-style-type: none"> • HPG Support Staff (HPG SS) will bring the revised Action Item to the September HPG meeting. Completed • HPG SS will follow up with the final draft of the Case Management Standards for the October meeting. Completed 	
7. Old Business		
a. ACTION: Review and approve the combined Medical/Non-Medical Case Management Standards	<p>Motion: Approve Case Management Standards M/S/C: Davenport/King/7-0</p> <p>Discussion: The following discussion took place:</p> <ul style="list-style-type: none"> - Housing Case Management is a standalone item, not part of these standards. <p>Abstentions: none Motion carries</p>	The Standards will be forwarded to the October HPG meeting for the review and approval
b. ACTION: Review and approve the committee meeting attendance policy	<p>Motion: Approve the committee meeting attendance policy as such: committee members are expected to attend all meetings. To remain in good standing and eligible to vote, the committee member may not miss more than two (2) meetings within 12 months.</p> <p>M/S/C: Davenport/Aguilar/7-0</p> <p>Discussion: The policy aligns with the Medical Standards and Evaluation Committee (MSEC).</p> <p>Abstentions: Weber Motion carries</p>	The attendance policy will be brought to the Membership Committee for their review and approval
c. ACTION: Review and approve Service Standards Introduction	<p>Motion: Approve Service Standards Introduction M/S/C: Applebaum/Weber/8-0</p> <p>Discussion:</p> <p>Abstentions:</p> <p>Motion carries</p>	The Standards will be forwarded to the October HPG meeting for the review and approval
d. ACTION: Review and approve Emergency Financial Assistance and Housing Standards	<p>Motion: Approve Emergency Financial Assistance and Housing Standards with the change to the PARS definition M/S/C: Davenport/Rooney/8-0</p>	The Standards will be forwarded to the October HPG meeting for the review and approval

STRATEGIES AND STANDARDS COMMITTEE

Agenda Item	Discussion/Action	Follow-Up
	<p>Discussion:</p> <ul style="list-style-type: none"> - Case managers take the lead in implementing the standards. - Suggestion to revise the PARS definition under the housing section. <p>Abstentions: none</p> <p>Motion carries</p>	
8. New Business		
a. None		
9. Routine Business		
a. Review: Committee Work Plan	<ul style="list-style-type: none"> - Change the December date 2. The prevention contract is currently in procurement. A recommendation to add it to spring of 2026. 	
b. Review: Committee Attendance	The committee reviewed attendance.	
c. Discussion: Recommendations from Priority Setting & Resource Allocation Committee (PSRAC)	None	
d. Recommendations to the HIV Planning Group (HPG), HPG committees, and requests of recipient	<p>The following comments were made:</p> <ul style="list-style-type: none"> - A recommendation to discuss strategies for clients to stay connected in the system. - How do we engage consumers/members to feel more empowered to participate in decision making more. - The staff are currently engaging the communities in various regions as part of the regional planning meetings. It will continue to take some effort to involve. - Barriers for subject matter experts who are conflicted. - HPG will be choosing new vice-chairs, and a partnership with consumers who express 	

STRATEGIES AND STANDARDS COMMITTEE

Agenda Item	Discussion/Action	Follow-Up
	<p>disagreement would be a good initiative.</p> <ul style="list-style-type: none"> - Revisit the way the summer meetings are scheduled and conducted so they don't feel rushed, giving community members an opportunity to disagree. 	
e. Suggested items for future committee agenda	None	
10. Announcements	<ul style="list-style-type: none"> - The annual Dr. A. Brad Truax Award Ceremony and Reception will be held on Monday, December 1, 2025. - The deadline for the Truax nominations has been extended to October 19, 2025. 	
11. Next meeting date	<p>Date: Tuesday, December 2, 2025 Time: 3:00 PM – 4:30 PM Location: County Operations Center, 5530 Overland Ave, San Diego, CA 92123 (Training Room 124) and online via Zoom</p>	
12. Adjournment	Meeting adjourned at 3:51 PM.	

**SAN DIEGO HIV PLANNING GROUP (HPG)
STRATEGIES AND STANDARDS COMMITTEE**

**ACTION ITEM INFORMATION SHEET
RECOMMENDATION TO APPROVE CHANGE IN PARTIAL ASSISTANCE RENTAL
SUBSIDY (PARS) ENROLLMENT PERIOD**

DATE: August 5, 2025

ITEM: Approve change in PARS enrollment period

BACKGROUND:

PARS has two primary purposes. The first is to provide short-term financial support to Ryan White clients to stabilize housing during an unexpected but short-term financial emergency, such as the loss of a roommate or an unexpected car repair. The expectation is that once the short-term emergency has been addressed, the client will be able to transition off PARS and maintain housing stability. The second purpose of PARS is to provide housing stability to clients who can no longer afford their current housing situation while they find more affordable housing.

Under Ryan White legislation, all support for housing must be temporary; ongoing or indefinite support is not allowed. The Health Resources and Services Administration's (HRSA) current recommendation for the duration of housing programs is 24 months, and PARS, while temporary, exceeds what is recommended. It currently provides up to 48 months of rental assistance to eligible Ryan White clients. During a discussion at the Strategies and Standards Committee on August 5, 2025, the members discussed the value in aligning PARS with federal guidance and reducing the amount of time clients might be on the waiting list.

Based upon these discussions, the Strategies and Standards Committee recommended modifying PARS enrollment to a period of 24 months and allowing clients to extend their enrollment if they are taking steps to find more affordable housing but have been unable to find affordable housing. Clients would be able to extend their enrollment in six-month increments up to four (4) times as long as they are otherwise actively working with their case manager to find more affordable housing.

RECOMMENDATION:

1. Change the enrollment period for PARS to 24 months, allowing up to four (4) optional extension periods of six (6) months each for clients who are actively working with their case manager to find more affordable housing.

This recommendation comes to the HPG as a seconded motion, open for discussion.

Case Management Service Standards

Service Category Definition

Case management, both medical and non-medical, helps clients navigate and manage needs, including medical and mental health care, benefits programs, housing and rental assistance, food assistance, and emergency financial assistance. Medical and non-medical case management differ only in their goals. Medical case management focuses on helping clients achieve optimal health outcomes related to HIV, including engagement in medical care, treatment adherence, and achievement of viral suppression. Non-medical case management is for clients who require coordination, guidance and assistance in improving access to and retention in needed medical and support services, including support in eliminating barriers.

Care managers often work with an interdisciplinary team that includes medical providers, specialty care providers, mental health providers, substance use treatment providers, and medical advocates. Case management services include one-on-one meetings between the case manager and the client, and these meetings can take place in-person or via virtual platforms or phone calls. Services also include significant activities outside of these meetings, such as efforts of the case manager to identify services for their clients or participate in treatment team meetings regarding their clients.

Purpose and Goals

The goal of case management services is to provide clients with support to sustain or improve their abilities to live and function optimally.

Intake

Clients may be referred to case management by primary care providers, mental health providers or any other provider of services. Clients are also able to self-refer. Case managers shall determine eligibility for services based upon an initial, documented assessment of immediate needs. Clients whose needs might be better met by other services, such as Peer Navigation, will be referred to those services. When clients are denied services for any reason other than what is described below under "Exclusions," the provider must document the reasons for the denial of service, document attempts to link the client to other service providers and notify the County of the number of clients denied services and the reasons why in their monthly progress reports.

Exclusions

Clients who can access case management or care coordination services through Medi-Cal or other public or private payers (other than VA or HIS) are not eligible for this service.

Key Service Components and Activities

Case management ensures timely and coordinated access to health and support services through ongoing assessment of the needs and personal support systems of the client. Case management can include the provision of treatment adherence counseling to ensure readiness for and adherence to complex HIV/AIDS treatments.

Key activities include:

- Initial assessment of service needs
- Development of a comprehensive, individualized service plan
- Timely and coordinated access to medically appropriate levels of health and support services and continuity of care

- Client monitoring to assess the efficacy of the plan
- Periodic reevaluation and adaptation of the plan, at least every 6 months
- Ongoing assessment of client needs and personal support systems
- Coordination and follow up of medical treatments
- Treatment adherence counseling to ensure readiness for and adherence to ART, nPEP and PrEP
- Client-specific advocacy and/or review of utilization of services
- Coordination and linkage to services required to implement the plan such as:
 - Health care
 - Psychosocial services
 - Benefits/entitlement counseling and other services
- Referrals assisting clients to access other public and private programs for which they may be eligible (e.g., Medi-Cal, Medicare, AIDS Drug Assistance Program (ADAP), Pharmaceutical Manufacturers' Patient Assistance Programs, and other State or local health care and supportive services)

Personnel Qualifications

Case management services are provided by staff who meet one or more of the following requirements:

- Master's in Social Work or related field or a registered nurse with a minimum of one-year experience working in the field of HIV/AIDS, or a medical setting, or related field; or
- Bachelor's degree in social work or related field and a minimum of two years of experience working in the field of HIV/AIDS; and/or
- Work, volunteer experience or lived experience in the field of HIV that demonstrates competency to provide case management to persons living with or vulnerable to HIV.

Assessment and Service Plan

At the initiation of case management services, providers must conduct a comprehensive assessment of each client, including:

- Health status
- Medical care and providers
- Activities of daily living
- Mental health status
- Substance use assessment/screening
- Income, benefits and health insurance status
- Employability and/or employment status
- Family/social support system
- Current housing status, quality of housing, and housing needs
- Partner services needs and options
- Disability
- Other factors affecting ability of client to access health and social services

During the initial assessment, providers must also ensure that they assess both income and health care supports for clients:

- **Income Supports:** An evaluation for income support benefits that includes consideration of all public, private and community resources, such as the following:

- Wages
- Monetary support from family, partner or spouse, or friends
- General Relief
- CalFresh (Food stamps)
- Unemployment
- State Disability Insurance
- Supplemental Security Income
- Social Security Disability Income
- Private short-term disability insurance
- Private Long-Term Disability insurance
- Housing

The Income Support assessment includes reviewing the impact of employment on benefits. Case managers refer clients to state vocational rehabilitation and other employment readiness programs as appropriate.

- **Health Care Supports:** An evaluation for health care benefits includes but is not limited to the following:
 - Medi-Cal
 - Medicare
 - Private medical insurance, including but not limited to HMOs, PPOs, etc.
 - OA HIPP (Health Insurance Premium Payment Program)
 - AIDS Drug Assistance Program (ADAP)
 - Covered California

Food Bank/Home Delivered Meals

Service Category Definition

Food Bank/Home Delivered Meals refers to the provision of actual food items, hot meals, or a voucher program to purchase food.

Purpose and Goals

The goal of this service category is to improve and promote better health in clients living with HIV by ensuring they can obtain food items, personal hygiene products (toilet paper, tampons/pads, incontinence products), and household cleaning supplies through the use of food vouchers. For clients who are unable to prepare their own food due to documented medical reasons, this program will provide three pre-prepared meals per day, seven days per week.

Intake

The determination for eligibility for these services will be made by case managers.

The need for food vouchers will be based upon the following:

- Assessment of all sources of income available to client
- Assessment of eligibility for programs and services available to client to obtain food, including SNAP and Medi-Cal.
- Assessment of actual expenses in the following categories:
 - Food
 - Childcare
 - Medical expenses
 - Housing and utilities
 - Transportation costs
 - Internet and mobile phone costs
 - Household expenses, cleaning supply costs, and clothing
 - Education expenses
- Comparison of actual expenses with published average or median expenses for these categories in San Diego County

When client's estimated necessary expenses exceed client's available income and resources, clients will be deemed eligible for food vouchers. Clients who are eligible for food benefits under any program (for example, SNAP or Medi-Cal), they must enroll and

use those benefits. Ryan White Food Vouchers can only supplement but not replace other benefits available to clients. Further, any monetary benefit received from other programs will be deducted from the weekly or monthly Food Voucher amount provided to clients under Ryan White.

The need for home-delivered meals will be made based upon diagnosed medical conditions that interfere with grocery shopping and preparation of food items.

Key Service Components and Activities

This service provides food items to clients, including hot meals or a voucher program to purchase food. The service also includes the provision of essential non-food items that are limited to the following:

- Personal hygiene products
- Household cleaning supplies

Unallowable costs include:

- Permanent water filtration systems for water entering a home
- Household appliances
- Pet foods
- Other non-essential products

The amount of food vouchers will be based upon published guidelines regarding cost of food for residents of San Diego County and will be adjusted every few years based upon changes in the cost of living. The value of food vouchers will be adjusted to include dependent adults and children living in the client's household, as well as any food benefits received through other programs, like SNAP.

Personnel Qualifications

Providers will possess the appropriate licensure/certification for food banks and home delivered meals in accordance with California regulations.

Assessment and Service Plan

Case managers will assess each client's need for services, and they will repeat that assessment at least every 12 months or when there are changes in client's income or health status. For clients enrolled in home-delivered meals, meal plans will be approved by a registered dietitian. Each client's food distribution plan will be determined at the time of the initial intake/assessment.

Service Standards Introduction

The purpose of The Ryan White HIV/AIDS Program (Ryan White) is to find people with Human Immunodeficiency Virus (HIV) who are not receiving primary care, link them to primary care and services, and keep them linked over time. Two primary benefits result. The first is the personal health benefit. Those adherent to the antiretroviral therapy (ART) can achieve viral suppression, at which point the virus can no longer do additional damage to their immune system. The second is a public health benefit. Those who are virally suppressed cannot transmit HIV sexually to others.

The Ryan White Service Standards are minimum expectations for the quality, accessibility, and core components of services provided to people with HIV, ensuring clients receive consistent, high-quality care, regardless of their location. The Standards cover aspects like intake, client confidentiality, trauma-informed system of care, cultural humility, and continuity of care. By setting clear expectations, the Service Standards help improve health outcomes, such as sustained viral suppression, and reduce the spread of HIV.

STRATEGIES AND STANDARDS COMMITTEE

2026 WORK PLAN

MEETING DATE	OBJECTIVES
February 3, 2026	<ul style="list-style-type: none">• Continue to review and update:<ul style="list-style-type: none">○ Service Standards Introduction○ Case Management Standards• Discuss and further refine PARS enrollment criteria
April 7, 2026	<ul style="list-style-type: none">• Review:<ul style="list-style-type: none">○ Data on newly funded service categories○ Prevention-Outreach Standards• Update and approve:<ul style="list-style-type: none">○ Food Bank/Home-Delivered Meals service category• Develop Standards for Medical Advocacy
June 2, 2026	<ul style="list-style-type: none">• Approve:<ul style="list-style-type: none">○ Prevention-Outreach Standards
August 4, 2026	<ul style="list-style-type: none">•
October 6, 2026	<ul style="list-style-type: none">•
December 1, 2026	<ul style="list-style-type: none">•

HIV PLANNING GROUP
12-MONTH COMMITTEE TRACKING
Feb 2025 - Jan 2026

Strategies and Standards Committee																
	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	#	# of JC Starting Jan 2026		
Total meetings	1		0	0	1		1		1		0		4			
(12) Members																
Aguilar, Nicole	*		NM	NM	*		1		*		NM		1			
Applebaum, Amy	*		NM	NM	*		*		*		NM		0			
Conant, Juan	*		NM	NM	1		1		1		NM		3			
Davenport, Beth	1		NM	NM	*		1		*		NM		2			
King, Michael					*		*		*		NM		0			
Miles, Skyler					*		*		1		NM		1			
Mora, Joseph	*		NM	NM	*		*		1		NM		1			
Nava, Veronica					*		1		1		NM		2			
Rooney, Ivy	*		NM	NM	1		*		*		NM		1			
Tilghman, Winston	1		NM	NM	*		*		*		NM		1			
Weber, Jeffery	*		NM	NM	*		*		*		NM		0			
Wimpie, Michael ^c	*		NM	NM	*		*		*		NM		0			

Committee members are expected to attend all meetings. To remain in good standing and eligible to vote, the committee member may not miss more than two (2) meetings within

* = Present

1 = Absent for the month

1 = Absence when there are multiple meetings that month. Member needs to attend at least one (1) meeting for attendance to count for that month.

JC = Just Cause

NM = No Meeting

NQ = No Quorum