



County of San Diego

NICK MACCHIONE, FACHE

AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES

3851 ROSECRANS STREET, MAIL STOP P-578

WILMA J. WOOTEN, M.D., M.P.H.

PUBLIC HEALTH OFFICER

HIV PLANNING GROUP (HPG) MEMBERSHIP COMMITTEE MEETING PACKET

Wednesday, February 08, 2023 11:00 AM

NOTE: This meeting is audio and video recorded.

Online meeting

A quorum for this committee is 3

Committee Members: Bob Lewis (Chair), Mikie Lochner, Regina Underwood, Rhea Van Brocklin, Freddy Villafan

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Effective October 1, 2021, a new law, AB 361, amends Government Code section 54953 to add subsection (e) (“Special Teleconferencing Rule”) which, under specific circumstances, will allow continued suspension of the General Teleconferencing Rule. A recent modification to the Brown Act (the rules regarding open meetings in California) allows the HPG and Committees to continue to meet virtually while a state of emergency is in effect. In - person meetings will return when the state of emergency is over.

Continuation of Remote Meetings for Brown Act Boards and Commissions

State law requires local agency legislative bodies (which includes the HPG) to comply with the state's open meeting law referred to as the Ralph M. Brown Act (also called the "Brown Act"). Since March 2020, most legislative bodies have been operating under Executive Orders which suspended certain Brown Act provisions on teleconferencing allowing members to participate remotely. That Executive Order ended on September 30, 2021.

As of October 1, 2021, AB 361 allows for a continuation of teleconference meetings in certain circumstances. Following is a summary of AB 361 and its impact on public meetings and the steps required to utilize the teleconferencing option offered in AB 361.

At the next meeting, the HPG or Committee will need to take the actions detailed below if the members desire to continue meeting remotely.

I. Ordinary Brown Act Rules for Teleconferencing ("General Teleconferencing Rule")

Under the ordinary operation of the Brown Act (Gov. Code §54953(b)) a legislative body may use teleconferencing under the following circumstances:

- a. Post agendas at all teleconference locations;
- b. All teleconferenced locations are listed in the notice and agenda of the meeting;
- c. At least a quorum of members are located within the jurisdiction of the legislative body; and
- d. Members of the public are allowed to speak at each teleconferenced location.

II. Governor's Executive Orders Authorized Simplified Teleconferencing Rules, But These Ended on Sept. 30, 2021.

The County and other legislative bodies throughout the state have been using a simplified teleconferencing method, authorized by the Governor's Executive Orders related to the COVID-19 pandemic. This allowed members of legislative bodies attend meetings remotely without following the General Teleconferencing Rule set forth above.

III. New Teleconferencing Method Available Effective October 1, 2021, and Actions HPG and Committees Can Take ("Special Teleconferencing Rule")

Effective October 1, 2021, AB 361 amends Government Code section 54953 to add subsection (e) which allows suspension of the General Teleconferencing Rule listed above if any of the following circumstances exist (underlining added):

- a. There is a proclaimed state of emergency and state or local officials have imposed or recommended measures to promote social distancing; or
- b. Legislative body, during a proclaimed state of emergency, holds a meeting for the purposes of determining by majority vote, that as a result of the emergency meeting in person would present imminent risks to the health or safety of attendees; or

- c. Legislative body, during a proclaimed state of emergency, has previously determined (by majority vote) that as a result of the emergency meeting in person would present imminent risks to the health or safety of attendees.

After the first meeting, to continue to suspend the General Teleconferencing Rule and use the Special Teleconferencing Rule, the legislative body must make findings, at least every 30 days after that first meeting. The specific findings required are: 1) that legislative body has reconsidered the circumstances of the state of emergency; and 2) i. the state of emergency continues to directly impact the ability of members to meet safely in person; or ii. state or local officials continue to impose or recommend measures to promote social distancing.

IV. Operation of the Special Teleconferencing Rule

If a Brown Act body suspends the General Teleconferencing Rule as allowed under subsection (e), then the legislative body must (underlining added):

- a. Notice the meeting as otherwise required by the Brown Act;
- b. Agenda must identify and include an opportunity for all persons to attend via a call-in option or an internet based service option;
- c. Allow members of the public to access meetings and an opportunity to address the legislative body directly as provided in the notice (call in or internet);
- d. Conduct teleconferenced meetings in a manner that protects the statutory and constitutional rights of the parties;
- e. In the event of a disruption that prevents broadcasting or call-in or internet based service; actions cannot be taken. Any action taken during a disruption may be challenged pursuant to 54960.1;
- f. If a legislative body provides a timed public comment period for each agenda item, it cannot close the public comment period for the agenda or the ability to register on that item until the timed public comment period has elapsed (not likely applicable);
- g. If a legislative body provides a general public comment period, public comment must remain open until public comment period closes; and
- h. If a legislative body provides public comment on each agenda item, it must allow a reasonable time to register and speak (so likely until the matter is voted on).

V. Dr. Wooten has Issued a Social Distancing Recommendation, So Findings Have Been Met In Order to Use the Special Teleconferencing Rule

As of October 1, 2021, the elements to meet under the Special Teleconferencing Rule have been met. There is currently a State of Emergency and Dr. Wooten, the County's Public Health Officer, released a health recommendation on September 23, 202, which stated that utilizing teleconferencing options for public meetings is an effective and recommended social distancing measure to facilitate participation in public affairs and encourage participants to protect themselves and others from the COVID-19 disease.

VI. Next Steps

Under AB 361, on or after October 1, 2021, the first meeting of a legislative body under AB 361 can occur under the Special Teleconferencing Rule without anything

in particular on the agenda. In this case, Staff should note to the board that it is meeting pursuant to the Special Teleconferencing Rule and staff will bring back any future findings the board may need to take to continue to operate under the Special Teleconferencing Rule (i.e. within 30 days).

Alternatively, if time allows and the Chair approves, when the HPG or Committee first meets, an item will be placed on the agenda to determine whether the board wants to utilize the Special Teleconference Rule and if so, to adopt the initial Resolution.



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HEALTH OFFICER TELECONFERENCING RECOMMENDATION

COVID-19 disease prevention measures, endorsed by the Centers for Disease Control and Prevention, include vaccinations, facial coverings, increased indoor ventilation, handwashing, and physical distancing (particularly indoors).

Since March 2020, local legislative bodies—such as commissions, committees, boards, and councils—have successfully held public meetings with teleconferencing as authorized by Executive Orders issued by the Governor. Using technology to allow for virtual participation in public meetings is a social distancing measure that may help control transmission of the SARS-CoV-2 virus. Public meetings bring together many individuals (both vaccinated and potentially unvaccinated), from multiple households, in a single indoor space for an extended time. For those at increased risk for infection, or subject to an isolation or quarantine order, teleconferencing allows for full participation in public meetings, while protecting themselves and others from the COVID-19 virus.

Utilizing teleconferencing options for public meetings is an effective and recommended social distancing measure to facilitate participation in public affairs and encourage participants to protect themselves and others from the COVID-19 disease. This recommendation is further intended to satisfy the requirement of the Brown Act (specifically Gov't Code Section 54953(e)(1)(A)), which allows local legislative bodies in the County of San Diego to use certain available teleconferencing options set forth in the Brown Act.

September 23, 2021


Wilma J. Wooten, M.D., M.P.H.
Public Health Officer
County of San Diego



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WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

SAN DIEGO HIV PLANNING GROUP MEMBERSHIP COMMITTEE

Wednesday, February 8, 2023

11:00 AM

WebEx

Committee Charge: *To recruit, interview, select and coordinate training for Planning Group Members.*

Quorum is Three (3)

Committee Members: Bob Lewis (Chair), Mikie Lochner, Regina Underwood, Rhea Van Brocklin, Freddy Villafan

Participants Requesting Spanish Translation: *Must notify support staff 96 hours in advance. They will receive an email with the number to call in.*

DRAFT AGENDA

1. Call to order, comments from the Chair
2. Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)
 - a. Find that the HPG has reconsidered the circumstances of the State of Emergency
 - b. Find that State and local officials continue to recommend measures to promote social distancing.
3. Public comment/ non-committee member comment
4. Review and approve February 8, 2023 meeting agenda
5. Review and approve meeting minutes from January 11, 2023 and Review follow-up items
6. Review the Application(s) and recommend moving forward with the interview: Tyra Fleming (new), Jen Lothridge, and Michael Wimpie (2nd term)
7. Membership Interview: Esteban Martin Duarte (new) and Abigail West (2nd term)

Due to the **Coronavirus disease (COVID-19)** public health emergency, the County of San Diego is making several changes related to Board of Supervisors meetings to protect the public's health and prevent the disease from spreading locally. California Governor Gavin Newsom issued Executive Order N-29-20 on March 17, 2020, relating to the convening of public meetings in response to the COVID-19 pandemic. Pursuant to the Executive Order, and to maintain the orderly conduct of the meeting, the County of San Diego will allow the HIV Planning Group members to attend the meeting via teleconference or phone conference and to participate in the meeting to the same extent as if they were present.

8. Old business:

- a. Focused Recruitment
 - i. Open seats
 - ii. Underrepresented groups (demographics)
 - iii. New committee members
- b. Terms expired dates

9. New business:

- a. Discuss bias and how to create a safe meeting environment
- b. Discuss the transit on meeting requirements

10. Review attendance:

- a. HPG attendance
- b. Committee attendance
 - i. Review the MSEC attendance policy

11. Routine Business:

- a. Getting to Zero (GTZ) 3-Year Action Plan
 - i. Membership Committee plan/strategy for recruitment (Dr. Jacobs)
- b. Mentor Appointments
 - i. Evaluation for Mentors/Prospective Mentors
 - ii. Continue discussion: 1. Whom to assign to new members, and 2. How to bring current members into the program.

12. Agenda items for future meetings

13. Announcements

14. Confirm the next meeting date/time: Wednesday, March 8, 2023 at 11:00 AM.

Location: **TBD**

15. Adjourn



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WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

SAN DIEGO HIV PLANNING GROUP (HPG) MEMBERSHIP COMMITTEE

Wednesday, January 11, 2023
11:00 AM – 1:00 PM Meeting via WebEx

DRAFT MINUTES

Quorum = Three (3)

Present: Mikie Lochner, Regina Underwood, Freddy Villafan, Bob Lewis (Chair), Rhea Van Brocklin

Agenda Item	Action	Follow-up
1. Call to order	Bob Lewis called the meeting to order at 11:00 AM and noted that a quorum was established.	
2. ACTION ITEM: Continuance of Teleconferencing Meeting Option Under Government Code Section 54953(e)	All votes at the meeting were taken by roll call. Committee members' names were called for each vote, and each member provided a verbal vote. Motion: Recognize that there is a constant proclaimed state of emergency, and State and local officials have imposed or recommended measures to promote social distancing authorizing teleconferenced meetings pursuant to Government Code section 54953(e). M/S/C: Lochner/Van Brocklin 4/0 Abstentions: Lewis Motion carries	
3. Public Comment/Non-committee members' comment	A member of the public commented that Implicit /internal biases and racism are still present in meetings and should be addressed.	
4. Action: Review and approve the January 11, 2023 agenda	Motion: Approve the January 11, 2023 meeting agenda as presented. Public comment: A member of the public questioned the rule requiring	Remove Amanda Duffle's interview from today's agenda

Agenda Item	Action	Follow-up
	<p>a membership application for a second term. In 2020 the Membership Committee approved Policies and Procedures, note an application is required to apply for a second term.</p> <p>M/S/C: Lochner/Villafan 4/0</p> <p>Abstentions: Lewis</p> <p>Motion carries</p>	<p>to next month's meeting.</p>
<p>5. Action: Review and approve the December 14, 2022 meeting minutes</p>	<p>Action: Approve the December 14, 2022 meeting minutes as presented.</p> <p>M/S/C: Lochner/Villafan 4/0</p> <p>Abstentions: Lewis</p> <p>Motion carries</p>	
<p>6. Review follow-up items</p>	<p>Reviewed by HPG Staff</p> <p>Esteban Duarte –application is ready for review.</p> <p>Abigail West –application is ready for review.</p> <p>Michael Wimpie –application has not been received.</p>	<p>HPG staff will follow up with Michael Wimpie regarding his application.</p> <p>HPG Staff will follow up with James Rucker to confirm he would like to continue with Mentee & Mentor Program.</p>
<p>7. Review Applications</p> <ul style="list-style-type: none"> i. Esteban Martin Duarte (new), ii. Abigail West (2nd term), iii. Michael Wimpie (2nd term) 	<p>Esteban Martin Duarte is applying for the Prevention Services Consumer/Advocate seat.</p> <ul style="list-style-type: none"> ▪ The committee recommends that an HPG Staff follow up with Esteban to have a complete application and require him to attend/participate in at least two committee meetings before continuing with an interview. ▪ The committee expressed concerns with responses to items C and D on the application. <p>Abigail West</p> <ul style="list-style-type: none"> ▪ The committee noted it is not stated in bylaws to allow that 	<p>Place Operating Guidelines after the agenda moving forward.</p> <p>HPG Staff will contact Esteban Duarte in preparation for an interview to clarify questions that may still need to be answered in the application will be asked in person.</p> <p>Add to the bylaws</p>

Agenda Item	Action	Follow-up
	<p>in a member's absence, they may have another representative vote/speak on their behalf.</p> <p>The Chair talked about the Public Comment rules; the Public cannot guide the discussion process; public comment can be given before the item happens and the discussion happens. The order of process should be:</p> <ol style="list-style-type: none"> 1. Motion/second 2. Public Comment 3. Discussion 4. Vote <p>The committee discussed the process of the Second Term application process.</p> <ul style="list-style-type: none"> • The operating procedures state that applications are reviewed for second terms before going forward to HPG. Committees make recommendations to the HPG before going to the Board of Supervisors. • Committees only make recommendations, and the HPG can only take action to recommend to the Boards of Supervisors. When members' term expires, they are no longer part of HPG per HRSA. <p>The committee discussed possibly modifying the second-term reapplication process.</p>	
8. Membership Interview i. Amanda Duffell Mirador	Amanda Duffell Mirador's interview was rescheduled for next month's meeting, February 8, 2023.	
9. Old Business		
a. Focused Recruitment i. Open Seats	Chair Lochner and Supervisor Vargas will meet to discuss potential candidates for the District 1 seat.	Chair Lochner will connect with Supervisor Nora Vargas and Jim

Agenda Item	Action	Follow-up
	<p>Mikie Lochner, Patrick Loose, and Bob Lewis will meet to discuss the Representative of State Gov- State Medicaid (Medi-Cal) Program seat.</p> <p>Two participants attended Peers Promoting Equity, Advocacy and Resources through Leadership Project (PEARL) and are interested in applying for HPG.</p> <p>A member asked if their recommendation to apply to the HPG represented a conflict of interest (COI). The committee felt this was something other than a COI.</p>	<p>Desmond to discuss potential candidates for the District 1 and 5 seats.</p> <p>HPG Staff will contact Rhea Van Brocklin regarding the Project PEARL participants interested in HPG membership.</p>
ii. Underrepresented groups (demographics)	HPG Staff reviewed the demographics with new changes of Jeffrey Weber, Recipient of other Federal HIV Programs -Veteran Administration, and James Rucker's seat changed to HIV Testing Representative.	
iii. New committee members	<p>Chair Lochner noted potential changes to some committees:</p> <ul style="list-style-type: none"> • There may be changes to members' choice assignments to address the other committees with few members. ▪ Members will submit their top 2 choices for committees and return to HPG support staff for the chair to review. 	
b. Terms expiration dates	<ul style="list-style-type: none"> • Abigail West - March 12, 2023 • Dr. Hernandez - March 12, 2023 • Michael Wimpie – May 21, 2023 	HPG Support Staff will follow up with Michael Wimpie regarding the Membership Application
10. New Business		
a) Action item: Approve the recommendation to remove Alfredo de Jesus from the HPG seat	<p>Motion: Approve the recommendation to remove Alfredo de Jesus from the HPG seat.</p> <p>M/S/C: Lochner/Van Brocklin 4/0</p> <p>Abstentions: Lewis</p> <p>Motion: carries</p>	HPG Staff will contact Alfredo de Jesus to remind him that he can still be a member of the Community Engagement Group

Agenda Item	Action	Follow-up
		and vote and that he is only being removed from the HPG seat.
11. Review Attendance		
a. HPG Attendance	Reviewed.	
b. Committee Attendance	Reviewed.	
i. Review the MSEC attendance policy		
12. Routine Business		
a. Getting to Zero (GTZ) 3-Year Action Plan <ul style="list-style-type: none"> i. Membership Committee plan/strategy for recruitment (Dr. Jacobs) 	<p>Dr. Jacobs discussed the GTZ goals related to the recruitment strategy.</p> <ol style="list-style-type: none"> 1. Enhanced communication: social media/messaging 2. Create an inviting culture in a more direct and welcoming fashion; Work with Community Engagement Group so that meetings occur in each of the six HHSA regions. 3. Membership Committee will work with Steering Committee to create a welcoming culture that is inclusive and safe as we move to in-person meetings <ul style="list-style-type: none"> a. What are we hoping to create? For example, will there be enhanced food options? Will there be opportunities to meet, ask questions, and review the agenda before the meeting? <p>The committee members recommend looking into a position dedicated to Leadership training and Community Engagement.</p> <p>The Spanish version of the Trifold HPG Brochure has been completed.</p>	<p>Add "Revised date" on both brochures before preparing for distribution.</p> <p>Bob Lewis, Mikie Lochner, and Dr. Jacobs to devise a timeline and list for the agenda to discuss Getting to Zero Action Plan items.</p> <p>HPG Staff will reach out to Patrick Loose's office about a possible position for Leadership training and Community Engagement</p> <p>Spanish Trifold HPG Brochure PDFs will be distributed to everyone via email, and staff will have printed copies available.</p>

Agenda Item	Action	Follow-up
	The idea is to create an Outreach strategy with the Community Engagement Group and staff from Christie's Place to work on getting individuals excited to join HPG.	
b. Mentor Appointments <ol style="list-style-type: none"> i. Evaluation for Mentors/Prospective Mentors ii. Brief discussion: <ol style="list-style-type: none"> 1. Whom to assign to new members, and 2. How to bring current members into the program. 	The committee reviewed the list of current mentor/mentee assignments.	HPG Support will: <ul style="list-style-type: none"> • Update the affiliation sections • Update the Mentee & Mentor list and Rhea Van Brocklin as a mentor to Allan Acevedo
13. Agenda items for future meetings	None	
14. Announcement	Outreach opportunity for Planning Group; Women's Conference on March 11, 2023, at the Handerly Hotel San Diego <ul style="list-style-type: none"> ▪ HPG is interested in tabling at this event. Information will be forwarded to Mikie Lochner. 	
15. Next Meeting Date	Wednesday, February 8, 2023, 11:00 a.m. via WebEx	
16. Adjournment	The meeting adjourned at 12:24 PM.	



San Diego County HIV Planning Group (HPG)

MEMBERSHIP APPLICATION

The mission of the HIV Planning Group is to plan for the delivery of HIV services to reduce the impact of HIV. To help us process your membership application to the HIV Planning Group, please provide all of the information requested. You may enter N/A (not applicable) where appropriate. **Please type or print clearly.** If there is any part of the application that you do not understand, please contact HIV planning group support staff at the HIV, STD and Hepatitis Branch (HSHB) of Public Health Services at: 619-403-8899.

Section 1: Contact Information

Name:

Home Address:

State:

ZIP Code:

Home Phone Number: ()

Current Employer (if applicable):

Work Address:

City:

State:

ZIP Code:

Work Phone Number: ()

Cell Phone Number:

Accept Text Messages?

☐ Yes

☐ No

E-mail Address:

(personal)

(work)

Fax Number (if available): ()

Please be aware that the HIV Planning Group is a public body. You will receive mail and phone calls from the HIV, STD and Hepatitis Branch and members of the HIV Planning Group. Would you prefer to receive phone calls, messages, and/or e-mail at home or at work?

I prefer to receive phone calls and messages at: ☐ Personal ☐ Work ☐ Cell

I prefer to receive email at: ☐ Personal ☐ Work

Section 2: Personal Information

The composition of the HIV Planning Group is required to (1) reflect the demographics of the HIV/AIDS epidemic in San Diego County, (2) include representation from a range of federally mandated categories and 3) include representation from impacted communities. The gender, race/ethnicity, and HIV status categories on this form are those required by our federal funding sources to monitor and measure reflectiveness and representation on the HIV Planning Group. By providing information for the following sections A-J, you will help ensure the HIV Planning Group reflects parity, inclusion and representation (PIR) of those impacted by HIV/AIDS in San Diego County.

A. I am:

- ☐ Male
 ☐ Transman
 ☐ Non-Binary
 ☐ Decline to Answer

☐ Female
 ☐ Transwoman
 ☐ Gender Non-Conforming

☐ Other: _____

C. My race is (please check most prominent):

- ☐ American Indian or Alaskan Native
 ☐ Black / African American
 ☐ Hispanic / Latino / Chicano
 ☐ More than one race
 ☐ Decline to Answer

☐ Asian
 ☐ Native Hawaiian / Other Pacific Islander
 ☐ White / Caucasian
 ☐ Unknown/Other

D. My ethnicity is:

- ☐ Hispanic or Latino
 ☐ Not Hispanic or Latino
 ☐ Unknown/Other
 ☐ Decline to Answer

E. My date of birth is: ____/____/____

F. I have an understanding of the process and procedures of the HPG: ☐ Yes ☐ No

G. Number of HPG meetings attended in the last 6 months: _____

H. Number of committee meetings attended in the last 6 months: _____ (It is suggested that you attend at least two (2) meetings prior to becoming a member: one (1) committee meeting and one (1) HIV Planning Group Meeting)

I. I am a currently a member of the following community liaison and/or affiliated groups, and/or have the following relevant experience: _____

J. I am interested in becoming a voting member on the following committees (participation in at least one of the committees is required):

- ☐ HIV Consumer Group
 ☐ Membership Committee

☐ Strategies & Standards Committee
 ☐ Priority Setting & Resource Allocation Committee

☐ Medical Standards and Evaluation Committee

K. I qualify to serve as an HPG member in one of the following seats (Please check all that apply):

<input type="checkbox"/> Unaffiliated Consumer <ul style="list-style-type: none"> are receiving HIV-related services” from Ryan White Part A funded providers are not officers, employees, or consultants to any providers receiving Ryan White Part A funds, and “do not represent any such entity;” 	<input type="checkbox"/> Rep of individuals who formerly were federal, state, or local prisoners who were released from custody of the penal system during the preceding 3 yrs. and had HIV/AIDS as of date of release.
<input type="checkbox"/> Healthcare Provider, including Federally Qualified Health Center (FQHC)	<input type="checkbox"/> Board of Supervisors Designee: Districts 1 - 5
<input type="checkbox"/> Community-based organization serving affected populations and AIDS service organization	<input type="checkbox"/> Recipient of other Federal HIV Programs – Prevention Provider
<input type="checkbox"/> Social Service Provider	<input type="checkbox"/> Recipient of other Federal HIV Programs – Part F, AIDS Education and Training center and/or Ryan White Dental Provider
<input type="checkbox"/> Mental Health Provider	<input type="checkbox"/> Recipient of other Federal HIV Programs – HOPWA / HUD
<input type="checkbox"/> Substance Abuse Treatment Provider	<input type="checkbox"/> Recipient of other Federal HIV Programs – Veterans Administration
<input type="checkbox"/> Local Public Health Agency: HHSA Director or Designee	<input type="checkbox"/> HIV Testing Representative
<input type="checkbox"/> Local Public Health Agency: Public Health Officer or Designee	<input type="checkbox"/> Prevention Intervention Representative
<input type="checkbox"/> Hospital Planning Agency or Health Care Planning Agency	<input type="checkbox"/> Affected community including people with HIV/AIDS, member of a federally recognized Indian tribe as represented in the population, individual co-infected with Hep B or C, and historically underserved group and/or subpopulation
<input type="checkbox"/> Non-elected Community Leader	<input type="checkbox"/> Prevention Services Consumer/Advocate
<input type="checkbox"/> Prevention Services Consumer	<input type="checkbox"/> State Government – State Medicaid
<input type="checkbox"/> State Government – CDPH Office of AIDS (OA) Part B	<input type="checkbox"/> Recipient of RW Part C
<input type="checkbox"/> Recipient of RW Part D	

Please list any agency affiliations (work and/or board member). If you need more space than provided, please attach a separate sheet of paper.

Section 3: Short Answer

Please respond briefly to the questions below. If you need more space than provided, please attach a separate sheet of paper.

1. The ability to work as a team member of a large and diverse group is crucial to the work of the HIV Planning Group. Teamwork allows the planning group to conduct business efficiently and to fulfill its mission successfully. **Please tell us about your ability to work as a member of a team.**

2. What special skills, knowledge, qualities, or life experience would you bring to the HIV Planning Group?

Please include a list of educational and professional degrees, certifications, credentials, or other experiences. You may attach a current resume and/or other documentation that you wish to provide.

3. Active member participation is vital to the work of the HIV Planning Group (HPG). The full board typically meets one time per month for two to three hours. HIV Planning Group members are also required to participate in at least one subcommittee which typically meets once per month, for two hours. **Please tell us about your ability to attend monthly planning group meetings and one committee meeting each month.**



4. Is there anything else you would like us to know about you?

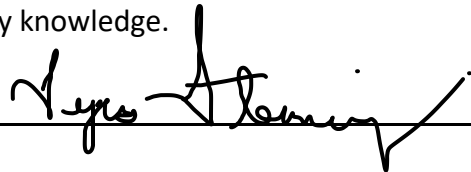
Section 4: Attachments

1. **Brief Biography**: Please write a brief biography (2-5 sentences) that describes your interests, accomplishments and experience related to the field of HIV/AIDS.
2. **Letter of Recommendation (optional)**: Please ask someone who knows you well (may be a colleague or personal) to write a letter of recommendation for you explaining how he/she knows you and describing your work in the area of HIV/AIDS and other issues, your community participations, your meeting skills, and any other personal qualities or experiences that you have.
3. **Were you referred by someone? If so, list the name of the individual (optional):**
4. **Do you have any limitations? (transportation, childcare, etc.):**

Section 5: Signature and Date

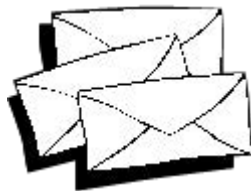
I agree that the information provided in this application, (including attachments), is true and correct to the best of my knowledge.

Signature



Date

If any information on your application changes, or if you wish to withdraw your application from consideration by the HIV Planning Group Membership Committee, please contact the HIV, STD & Hepatitis Branch as soon as possible. Please note, membership interviews will be conducted as needed. If you have any other questions or comments, call Support Staff at 619-293-4700.



Email your completed application to:

HPG.HHSA@sdcounty.ca.gov

**SAN DIEGO COUNTY HEALTH & HUMAN SERVICES AGENCY
HIV, STD and Hepatitis Branch
ATTN: HIV PLANNING GROUP SUPPORT
3851 Rosecrans Street, Suite #207, MS: P-505
San Diego, CA 92110**



San Diego County HIV Planning Group (HPG)

MEMBERSHIP APPLICATION

The mission of the HIV Planning Group is to plan for the delivery of HIV services to reduce the impact of HIV. To help us process your membership application to the HIV Planning Group, please provide all of the information requested. You may enter N/A (not applicable) where appropriate. **Please type or print clearly.** If there is any part of the application that you do not understand, please contact HIV planning group support staff at the HIV, STD and Hepatitis Branch (HSHB) of Public Health Services at: 619-403-8899.

Section 1: Contact Information

Name: **Jen Lothridge**

[Redacted Address Line]

City: San Diego, State: CA ZIP Code: **92174**

[Redacted Address Line]

[Redacted Address Line]

[Redacted Address Line]

City: San Diego, State: CA ZIP Code: **92142**

[Redacted Address Line]

[Redacted Address Line] Fax Number (if available): () N/A

Please be aware that the HIV Planning Group is a public body. You will receive mail and phone calls from the HIV, STD and Hepatitis Branch and members of the HIV Planning Group. Would you prefer to receive phone calls, messages, and/or e-mail at home or at work?

I prefer to receive phone calls and messages at: ☐ Personal ☐ Work ☒ Cell

I prefer to receive email at: ☒ Personal ☐ Work

Section 2: Personal Information

The composition of the HIV Planning Group is required to (1) reflect the demographics of the HIV/AIDS epidemic in San Diego County, (2) include representation from a range of federally mandated categories and 3) include representation from impacted communities. The gender, race/ethnicity, and HIV status categories on this form are those required by our federal funding sources to monitor and measure reflectiveness and representation on the HIV Planning Group. By providing information for the following sections A-J, you will help ensure the HIV Planning Group reflects parity, inclusion and representation (PIR) of those impacted by HIV/AIDS in San Diego County.

A. I am:

☐ Male☐ Transman☐ Non-Binary☐ Decline to Answer☒ Female☐ Transwoman☐ Gender Non-Conforming☐ Other: _____

C. My race is (please check most prominent):

☐ American Indian
or Alaskan
Native☒ Black /
African
American☐ Hispanic /
Latino /
Chicano☐ More than one
race☐ Decline to Answer☐ Asian☐ Native
Hawaiian /
Other
Pacific
Islander☐ White /
Caucasian☐ Unknown/Other

D. My ethnicity is:

☐ Hispanic or Latino☒ Not Hispanic or Latino☐ Unknown/Other☐ Decline to Answer

E. My date of birth is: 03 / [REDACTED] / 1971

F. I have an understanding of the process and procedures of the HPG:

☒ Yes☐ No

G. Number of HPG meetings attended in the last 6 months: 1

H. Number of committee meetings attended in the last 6 months: 2 (It is suggested that you attend at least two (2) meetings prior to becoming a member: one (1) committee meeting and one (1) HIV Planning Group Meeting)

I. I am a currently a member of the following community liaison and/or affiliated groups, and/or have the following relevant experience: Christie's Place

J. I am interested in becoming a voting member on the following committees (participation in at least one of the committees is required):

☒ HIV Consumer Group☐ Membership Committee☒ Strategies & Standards Committee☒ Priority Setting & Resource Allocation Committee☐ Medical Standards and Evaluation Committee

K. I qualify to serve as an HPG member in one of the following seats (Please check all that apply):

☒ Unaffiliated Consumer

- are receiving HIV-related services" from Ryan White Part A funded providers
- are not officers, employees, or consultants to any providers receiving Ryan White Part A funds, and "do not represent any such entity;"

☐ Rep of individuals who formerly were federal, state, or local prisoners who were released from custody of the penal system during the preceding 3 yrs. and had HIV/AIDS as of date of release.

☐ Healthcare Provider, including Federally Qualified Health Center (FQHC)

☐ Board of Supervisors Designee: Districts 1 - 5

☒ Community-based organization serving affected populations and AIDS service organization

☐ Recipient of other Federal HIV Programs – Prevention Provider

☒ Social Service Provider

☐ Recipient of other Federal HIV Programs – Part F, AIDS Education and Training center and/or Ryan White Dental Provider

☐ Mental Health Provider

☐ Recipient of other Federal HIV Programs – HOPWA / HUD

☐ Substance Abuse Treatment Provider

☐ Recipient of other Federal HIV Programs – Veterans Administration

☐ Local Public Health Agency: HHSA Director or Designee

☐ HIV Testing Representative

☐ Local Public Health Agency: Public Health Officer or Designee

☐ Prevention Intervention Representative

☐ Hospital Planning Agency or Health Care Planning Agency

☐ Affected community including people with HIV/AIDS, member of a federally recognized Indian tribe as represented in the population, individual co-infected with Hep B or C, and historically underserved group and/or subpopulation

☐ Non-elected Community Leader

☐ Prevention Services Consumer/Advocate

☐ Prevention Services Consumer

☐ State Government – State Medicaid

☐ State Government – CDPH Office of AIDS (OA) Part B

☐ Recipient of RW Part C

☐ Recipient of RW Part D

Please list any agency affiliations (work and/or board member). If you need more space than provided, please attach a separate sheet of paper.
N/A

Section 3: Short Answer

Please respond briefly to the questions below. If you need more space than provided, please attach a separate sheet of paper.

1. The ability to work as a team member of a large and diverse group is crucial to the work of the HIV Planning Group. Teamwork allows the planning group to conduct business efficiently and to fulfill its mission successfully. **Please tell us about your ability to work as a member of a team.**

Understanding that regardless of membership size or ethnic background we are all human beings standing for the same cause. My ability to work as a member of this team is by engaging others with respect, openness, kindness & clarity.

2. What special skills, knowledge, qualities, or life experience would you bring to the HIV Planning Group?

Please include a list of educational and professional degrees, certifications, credentials, or other experiences. You may attach a current resume and/or other documentation that you wish to provide.

Special skills are the ability to interact with others in a respectful way. The knowledge I bring is that while I don't know everything, I am teachable & always open to learning. Some of the many positive qualities that I bring to the table are confidence, user friendly communication skills, & a "think outside of the box" mindset. The life experience I am bringing to the HIV Planning Group is having almost 52 years on this planet living as an African American female. Four of those years & counting have been living with the diagnosis of HIV/AIDS. Currently I provide client care services to individuals seeking HOPWA services. See resume for professional & academic.

3. Active member participation is vital to the work of the HIV Planning Group (HPG). The full board typically meets one time per month for two to three hours. HIV Planning Group members are also required to participate in at least one subcommittee which typically meets once per month, for two hours. Please tell us about your ability to attend monthly planning group meetings and one committee meeting each month.

As an active member of the HPG, I have the ability & am committing within my power to be available to attend the required monthly planning group & committee meeting each month virtually &/or in person. Understanding that there may be periodic instances when additional gatherings are needed.

4. Is there anything else you would like us to know about you?

Among many things that can & will be learned along the way about me, know that I am a human being with the desire to be of service to others within the community that I live in & beyond!

Section 4: Attachments

1. **Brief Biography:** Please write a brief biography (2-5 sentences) that describes your interests, accomplishments and experience related to the field of HIV/AIDS.

Previously trained by the American Red Cross to be a HIV/AIDS instructor, my real life experience didn't kick in until receiving my very own HIV/AIDS diagnosis four years ago. In this time, I have successfully acquired HIV/AID PEER advocacy skills from The Lotus Project. My most recent accomplishment of completing Project PEARL has been gaining knowledge & understanding of the importance of the HPG & how I can be a voice for other consumers.

2. **Letter of Recommendation (optional):** Please ask someone who knows you well (may be a colleague or personal) to write a letter of recommendation for you explaining how he/she knows you and describing your work in the area of HIV/AIDS and other issues, your community participations, your meeting skills, and any other personal qualities or experiences that you have.

3. **Were you referred by someone? If so, list the name of the individual (optional):**

Rhea Van Brocklin, Executive Director of Christie's Place

4. **Do you have any limitations? (transportation, childcare, etc.):**

None

Section 5: Signature and Date

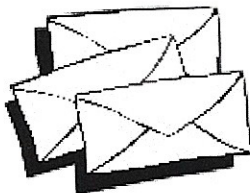
I agree that the information provided in this application, (including attachments), is true and correct to the best of my knowledge.

Signature

Date

01/30/2023

If any information on your application changes, or if you wish to withdraw your application from consideration by the HIV Planning Group Membership Committee, please contact the HIV, STD & Hepatitis Branch as soon as possible. Please note, membership interviews will be conducted as needed. If you have any other questions or comments, call Support Staff at 619-293-4700.



Email your completed application to:

HPG.HHSA@sdcounty.ca.gov

SAN DIEGO COUNTY HEALTH & HUMAN SERVICES AGENCY
HIV, STD and Hepatitis Branch
ATTN: HIV PLANNING GROUP SUPPORT
3851 Rosecrans Street, Suite #207, MS: P-505
San Diego, CA 92110

JENNIFER LOTHBRIDGE

San Diego, CA ~ Cell Phone ~ 202.553.7675/Email ~ jenhaslife@gmail.com

I offer myself as a supportive team member, with a "Can-Do" and "Growth Minded" attitude. Creative thinker capable of prioritizing, collaborating with others, or working individually with little to no supervision. Possessing a solid work ethic. Builder of productive professional relationships interacting with our diverse population from all walks and stages of life.

Education

Bachelor Degree Social Work / Gerontology ~ Starting Fall 2023 SDSU

Associate Degree Behavioral Science Social Work ~ Class of 2022 San Diego City College

Advance Project Management Certification ~ January 2022 San Diego Continuing Education

Project Management I&II Certification ~ December 2020 San Diego Continuing Education

Professional Skills (condensed)

Teachable.

PEER Advocate / Case
Management

Quality Customer Service

Data Collection & Management

Mastering Program Specific
Systems, MS Office Suite,
Outlook, iOS, Google Suite, ect.
Bilingual ~ English/Spanish
(Beginner/Intermediate)

BLS CPR/AED/First Aid

Employment

Client Care Specialist I ~ 08/2021 - Present

2-1-1 San Diego, San Diego, CA

Working with Individuals living with HIV/AIDS, At-Risk & Homeless population, landlords, pregnant women, & families with children ages 5 & under seeking resources & services to those living within the County of San Diego.

- Case Management, advocacy, conduct screenings & assessments to identify services &/or referrals.
- Use soft & motivational interviewing skills to establish professional working relationships.
- Provide training & support to fellow Navigation teammates. Especially with new teammates.
- Completing assigned tasks & properly documenting client interaction within a timely manner.
- Attend & speak publicly as a vender during special events such as the Military Baby Shower this past March. Responsible for vender table during community events. set up.

Coach ~ Facilitator, Motivator, & Fun Creator 04/2021 – 08/2021

Sports For Learning, San Diego, CA

Facilitated physical education classes with social-emotional curriculum at various schools for children in grades K-6. Facilitated, Motivated & Creator of fun

- Demonstrated, engaged, & participated in games.
- Exemplified as a positive & inspiring role model.
- Supported & collaborated with school faculty.

Medical Office Assistant II ~ Customer Service & Administrative 12/2018 – 06/2020 Project Enable Mental Health & Wellness Center, San Diego, CA

Provided exceptional customer service front desk and phone support to a diverse population seeking and providing healthcare services.

- Promptly responded to patient and provider requests received via phone, fax, email, in-person, and patient medical portal.
- Maintained provider schedules by accurately and efficiently scheduling patient appointments.
- Ensured accuracy and completeness of accounts by obtaining and verifying all patient information.
- Collected and processed upfront copays and outstanding fees.
- Completed other tasks & duties assigned.



San Diego County HIV Planning Group (HPG)

MEMBERSHIP APPLICATION

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Section 1: Contact Information

Name: **Esteban Martin Duarte**

Home Address: [REDACTED]

City: San Ysidro State: CA ZIP Code: 92173

Home Phone Number: () [REDACTED]

Current Employer (if applicable): **VIDA**

Work Address: [REDACTED]

City: San Ysidro State: CA ZIP Code: 92173

Work Phone Number: () [REDACTED] Cell Phone Number: () [REDACTED]
Accept Text Messages? ☒ Yes ☐ No

E-mail Address: (personal) [REDACTED] (work) [REDACTED] Fax Number (if available): ()

Please be aware that the HIV Planning Group is a public body. You will receive mail and phone calls from the HIV, STD and Hepatitis Branch and members of the HIV Planning Group. Would you prefer to receive phone calls, messages, and/or e-mail at home or at work?

I prefer to receive phone calls and messages at: ☒ Personal ☒ Work ☒ Cell

I prefer to receive email at: ☒ Personal ☒ Work

Section 2: Personal Information

The composition of the HIV Planning Group is required to (1) reflect the demographics of the HIV/AIDS epidemic in San Diego County, (2) include representation from a range of federally mandated categories and 3) include representation from impacted communities. The gender, race/ethnicity, and HIV status categories on this form are those required by our federal funding sources to monitor and measure reflectiveness and representation on the HIV Planning Group. By providing information for the following sections A-J, you will help ensure the HIV Planning Group reflects parity, inclusion and representation (PIR) of those impacted by HIV/AIDS in San Diego County.

A. I am:

☒

Male

☐

Transman

☐

Non-Binary

☐

Decline to Answer

☐

Other: _____

☐

Female

☐

Transwoman

☐

Gender Non-Conforming

C. My race is (please check most prominent):

☐

American Indian
or Alaskan
Native

☐

Black /
African
American

☒

Hispanic /
Latino /
Chicano

☐

More than one
race

☐

Decline to Answer

☐

Asian

☐

Native
Hawaiian /
Other
Pacific
Islander

☐

White /
Caucasian

☐

Unknown/Other

D. My ethnicity is:

☒

Hispanic or Latino

☐

Not Hispanic or Latino

☐

Unknown/Other

☐

Decline to Answer

E. My date of birth is: 01 / / 1969

F. I have an understanding of the process and procedures of the HPG:

☒

Yes

☒

No

G. Number of HPG meetings attended in the last 6 months: 0

H. Number of committee meetings attended in the last 6 months: 0 (It is suggested that you attend at least two (2) meetings prior to becoming a member: one (1) committee meeting and one (1) HIV Planning Group Meeting)

I. I am a currently a member of the following community liaison and/or affiliated groups, and/or have the following relevant experience: _____

J. I am interested in becoming a voting member on the following committees (participation in at least one of the committees is required):

☒

HIV Consumer Group

☐

Membership Committee

☒

Strategies & Standards Committee

☒

Priority Setting & Resource Allocation Committee

☒

Medical Standards and Evaluation Committee

K. I qualify to serve as an HPG member in one of the following seats (Please check all that apply):

<input type="checkbox"/> Unaffiliated Consumer <ul style="list-style-type: none"> are receiving HIV-related services" from Ryan White Part A funded providers are not officers, employees, or consultants to any providers receiving Ryan White Part A funds, and "do not represent any such entity;" 	<input type="checkbox"/> Rep of individuals who formerly were federal, state, or local prisoners who were released from custody of the penal system during the preceding 3 yrs. and had HIV/AIDS as of date of release.
<input type="checkbox"/> Healthcare Provider, including Federally Qualified Health Center (FQHC)	<input type="checkbox"/> Board of Supervisors Designee: Districts 1 - 5
<input checked="" type="checkbox"/> Community-based organization serving affected populations and AIDS service organization	<input type="checkbox"/> Recipient of other Federal HIV Programs – Prevention Provider
<input type="checkbox"/> Social Service Provider	<input type="checkbox"/> Recipient of other Federal HIV Programs – Part F, AIDS Education and Training center and/or Ryan White Dental Provider
<input type="checkbox"/> Mental Health Provider	<input type="checkbox"/> Recipient of other Federal HIV Programs – HOPWA / HUD
<input type="checkbox"/> Substance Abuse Treatment Provider	<input type="checkbox"/> Recipient of other Federal HIV Programs – Veterans Administration
<input type="checkbox"/> Local Public Health Agency: HHSA Director or Designee	<input checked="" type="checkbox"/> HIV Testing Representative
<input type="checkbox"/> Local Public Health Agency: Public Health Officer or Designee	<input checked="" type="checkbox"/> Prevention Intervention Representative
<input type="checkbox"/> Hospital Planning Agency or Health Care Planning Agency	<input type="checkbox"/> Affected community including people with HIV/AIDS, member of a federally recognized Indian tribe as represented in the population, individual co-infected with Hep B or C, and historically underserved group and/or subpopulation
<input type="checkbox"/> Non-elected Community Leader	<input type="checkbox"/> Prevention Services Consumer/Advocate
<input type="checkbox"/> Prevention Services Consumer	<input type="checkbox"/> State Government – State Medicaid
<input type="checkbox"/> State Government – CDPH Office of AIDS (OA) Part B	<input type="checkbox"/> Recipient of RW Part C
<input type="checkbox"/> Recipient of RW Part D	

Please list any agency affiliations (work and/or board member). If you need more space than provided, please attach a separate sheet of paper.

N/A

Section 3: Short Answer

Please respond briefly to the questions below. If you need more space than provided, please attach a separate sheet of paper.

1. The ability to work as a team member of a large and diverse group is crucial to the work of the HIV Planning Group. Teamwork allows the planning group to conduct business efficiently and to fulfill its mission successfully. **Please tell us about your ability to work as a member of a team.**
As part of my professional employment, I have managed cross functional teams around the world. I believe in empowering team members at all times.

2. What special skills, knowledge, qualities, or life experience would you bring to the HIV Planning Group?

Please include a list of educational and professional degrees, certifications, credentials, or other experiences. You may attach a current resume and/or other documentation that you wish to provide.

We received a grant from the CDCF to provide FREE HIV Self Test Kits.

VIDA was established in 2014.

Have been providing FREE HIV SELF TEST Kits since 2021.

3. Active member participation is vital to the work of the HIV Planning Group (HPG). The full board typically meets one time per month for two to three hours. HIV Planning Group members are also required to participate in at least one subcommittee which typically meets once per month, for two hours. Please tell us about your ability to attend monthly planning group meetings and one committee meeting each month.

I can attend and participate in the monthly meetings but preferably online.

4. Is there anything else you would like us to know about you?

NA

Section 4: Attachments

1. **Brief Biography:** Please write a brief biography (2-5 sentences) that describes your interests, accomplishments and experience related to the field of HIV/AIDS.

2. **Letter of Recommendation (optional):** Please ask someone who knows you well (may be a colleague or personal) to write a letter of recommendation for you explaining how he/she knows you and describing your work in the area of HIV/AIDS and other issues, your community participations, your meeting skills, and any other personal qualities or experiences that you have.

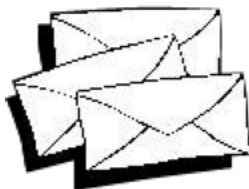
3. **Were you referred by someone? If so, list the name of the individual (optional):**
Karla Quezada-Torres
4. **Do you have any limitations? (transportation, childcare, etc.):**
NA

Section 5: Signature and Date

I agree that the information provided in this application, (including attachments), is true and correct to the best of my knowledge.

Signature Esteban M. Duarte Date 11/20/22

If any information on your application changes, or if you wish to withdraw your application from consideration by the HIV Planning Group Membership Committee, please contact the HIV, STD & Hepatitis Branch as soon as possible. Please note, membership interviews will be conducted as needed. If you have any other questions or comments, call Support Staff at 619-293-4700.



Email your completed application to:

HPG.HHSA@sdcounty.ca.gov

SAN DIEGO COUNTY HEALTH & HUMAN SERVICES AGENCY
HIV, STD and Hepatitis Branch
ATTN: HIV PLANNING GROUP SUPPORT
3851 Rosecrans Street, Suite #207, MS: P-505
San Diego, CA 92110



San Diego County HIV Planning Group (HPG)

MEMBERSHIP APPLICATION

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Section 1: Contact Information

Name:

Abigail West

Home Address:

City:

State:

ZIP Code:

Home Phone Number: ()

Current Employer (if applicable):

Work Address:

City:

State:

ZIP Code:

Sacramento

CA

Work Phone Number:

Cell Phone Number:

Accept Text Messages?



Yes



No

E-mail Address:

(personal)

(work)

Fax Number (if available): ()

Please be aware that the HIV Planning Group is a public body. You will receive mail and phone calls from the HIV, STD and Hepatitis Branch and members of the HIV Planning Group. Would you prefer to receive phone calls, messages, and/or e-mail at home or at work?

I prefer to receive phone calls and messages at:

☐

Personal

☐

Work

☒

Cell

I prefer to receive email at:

☐

Personal

☒

Work

Section 2: Personal Information

The composition of the HIV Planning Group is required to (1) reflect the demographics of the HIV/AIDS epidemic in San Diego County, (2) include representation from a range of federally mandated categories and 3) include representation from impacted communities. The gender, race/ethnicity, and HIV status categories on this form are those required by our federal funding sources to monitor and measure reflectiveness and representation on the HIV Planning Group. By providing information for the following sections A-J, you will help ensure the HIV Planning Group reflects parity, inclusion and representation (PIR) of those impacted by HIV/AIDS in San Diego County.

A. I am:

- | | | | |
|--|-------------------------------------|--|--|
| <input type="checkbox"/> Male | <input type="checkbox"/> Transman | <input type="checkbox"/> Non-Binary | <input type="checkbox"/> Decline to Answer |
| <input checked="" type="checkbox"/> Female | <input type="checkbox"/> Transwoman | <input type="checkbox"/> Gender Non-Conforming | <input type="checkbox"/> Other: _____ |

C. My race is (please check most prominent):

- | | | | | |
|--|---|--|---|--|
| <input type="checkbox"/> American Indian or Alaskan Native | <input checked="" type="checkbox"/> Black / African American | <input type="checkbox"/> Hispanic / Latino / Chicano | <input type="checkbox"/> More than one race | <input type="checkbox"/> Decline to Answer |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Native Hawaiian / Other Pacific Islander | <input type="checkbox"/> White / Caucasian | <input type="checkbox"/> Unknown/Other | |

D. My ethnicity is:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Hispanic or Latino | <input checked="" type="checkbox"/> Not Hispanic or Latino | <input type="checkbox"/> Unknown/Other | <input type="checkbox"/> Decline to Answer |
|---|--|--|--|

E. My date of birth is: 05 / [REDACTED] / 1970

F. I have an understanding of the process and procedures of the HPG:

- | | |
|---|-----------------------------|
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
|---|-----------------------------|

G. Number of HPG meetings attended in the last 6 months: 4

H. Number of committee meetings attended in the last 6 months: 0 (It is suggested that you attend at least two (2) meetings prior to becoming a member: one (1) committee meeting and one (1) HIV Planning Group Meeting)

I. I am a currently a member of the following community liaison and/or affiliated groups, and/or have the following relevant experience: _____

J. I am interested in becoming a voting member on the following committees (participation in at least one of the committees is required):

- | | |
|---|---|
| <input type="checkbox"/> HIV Consumer Group | <input type="checkbox"/> Membership Committee |
| <input type="checkbox"/> Strategies & Standards Committee | <input type="checkbox"/> Priority Setting & Resource Allocation Committee |
| <input type="checkbox"/> Medical Standards and Evaluation Committee | |

K. I qualify to serve as an HPG member in one of the following seats (Please check all that apply):

<input type="checkbox"/> Unaffiliated Consumer <ul style="list-style-type: none"> are receiving HIV-related services" from Ryan White Part A funded providers are not officers, employees, or consultants to any providers receiving Ryan White Part A funds, and "do not represent any such entity;" 	<input type="checkbox"/> Rep of individuals who formerly were federal, state, or local prisoners who were released from custody of the penal system during the preceding 3 yrs. and had HIV/AIDS as of date of release.
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<input type="checkbox"/> Local Public Health Agency: Public Health Officer or Designee	<input type="checkbox"/> Prevention Intervention Representative
<input type="checkbox"/> Hospital Planning Agency or Health Care Planning Agency	<input type="checkbox"/> Affected community including people with HIV/AIDS, member of a federally recognized Indian tribe as represented in the population, individual co-infected with Hep B or C, and historically underserved group and/or subpopulation
<input type="checkbox"/> Non-elected Community Leader	<input type="checkbox"/> Prevention Services Consumer/Advocate
<input type="checkbox"/> Prevention Services Consumer	<input type="checkbox"/> State Government – State Medicaid
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<input type="checkbox"/> Recipient of RW Part D	

Please list any agency affiliations (work and/or board member). If you need more space than provided, please attach a separate sheet of paper.

Section 3: Short Answer

Please respond briefly to the questions below. If you need more space than provided, please attach a separate sheet of paper.

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2. What special skills, knowledge, qualities, or life experience would you bring to the HIV Planning Group?

Please include a list of educational and professional degrees, certifications, credentials, or other experiences. You may attach a current resume and/or other documentation that you wish to provide.

3. Active member participation is vital to the work of the HIV Planning Group (HPG). The full board typically meets one time per month for two to three hours. HIV Planning Group members are also required to participate in at least one subcommittee which typically meets once per month, for two hours. **Please tell us about your ability to attend monthly planning group meetings and one committee meeting each month.**

4. Is there anything else you would like us to know about you?

Section 4: Attachments

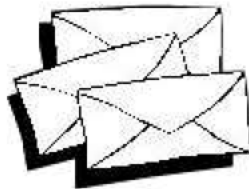
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2. **Letter of Recommendation (optional):** Please ask someone who knows you well (may be a colleague or personal) to write a letter of recommendation for you explaining how he/she knows you and describing your work in the area of HIV/AIDS and other issues, your community participations, your meeting skills, and any other personal qualities or experiences that you have.
3. **Were you referred by someone? If so, list the name of the individual (optional):**
4. **Do you have any limitations? (transportation, childcare, etc.):**

Section 5: Signature and Date

I agree that the information provided in this application, (including attachments), is true and correct to the best of my knowledge.

Signature A. West Digitally signed by A. West
Date: 2023.01.10 09:39:35 -08'00' Date 1/10/22

If any information on your application changes, or if you wish to withdraw your application from consideration by the HIV Planning Group Membership Committee, please contact the HIV, STD & Hepatitis Branch as soon as possible. Please note, membership interviews will be conducted as needed. If you have any other questions or comments, call Support Staff at 619-293-4700.



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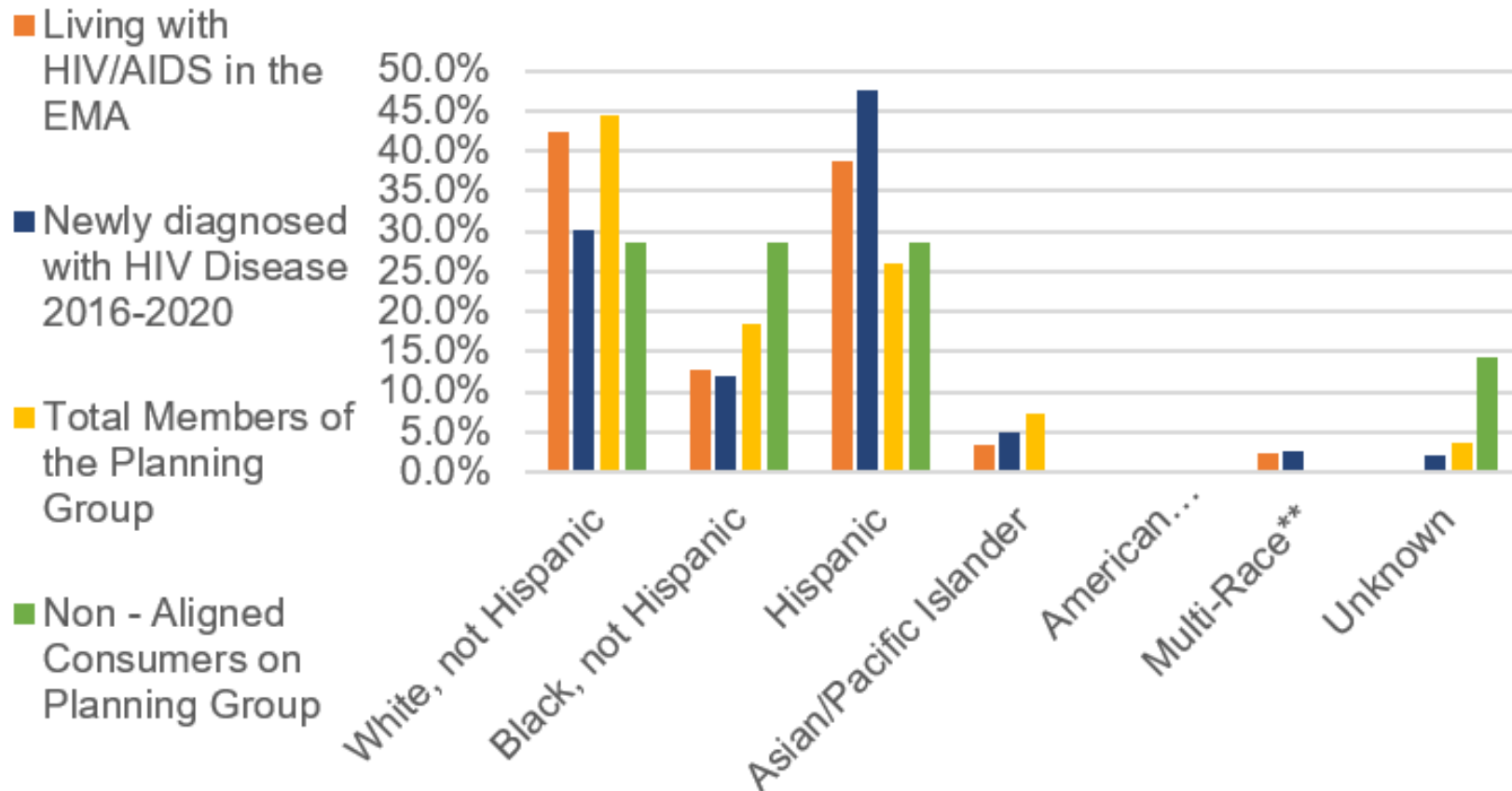
**SAN DIEGO COUNTY HEALTH & HUMAN SERVICES AGENCY
HIV, STD and Hepatitis Branch
ATTN: HIV PLANNING GROUP SUPPORT
3851 Rosecrans Street, Suite #207, MS: P-505
San Diego, CA 92110**

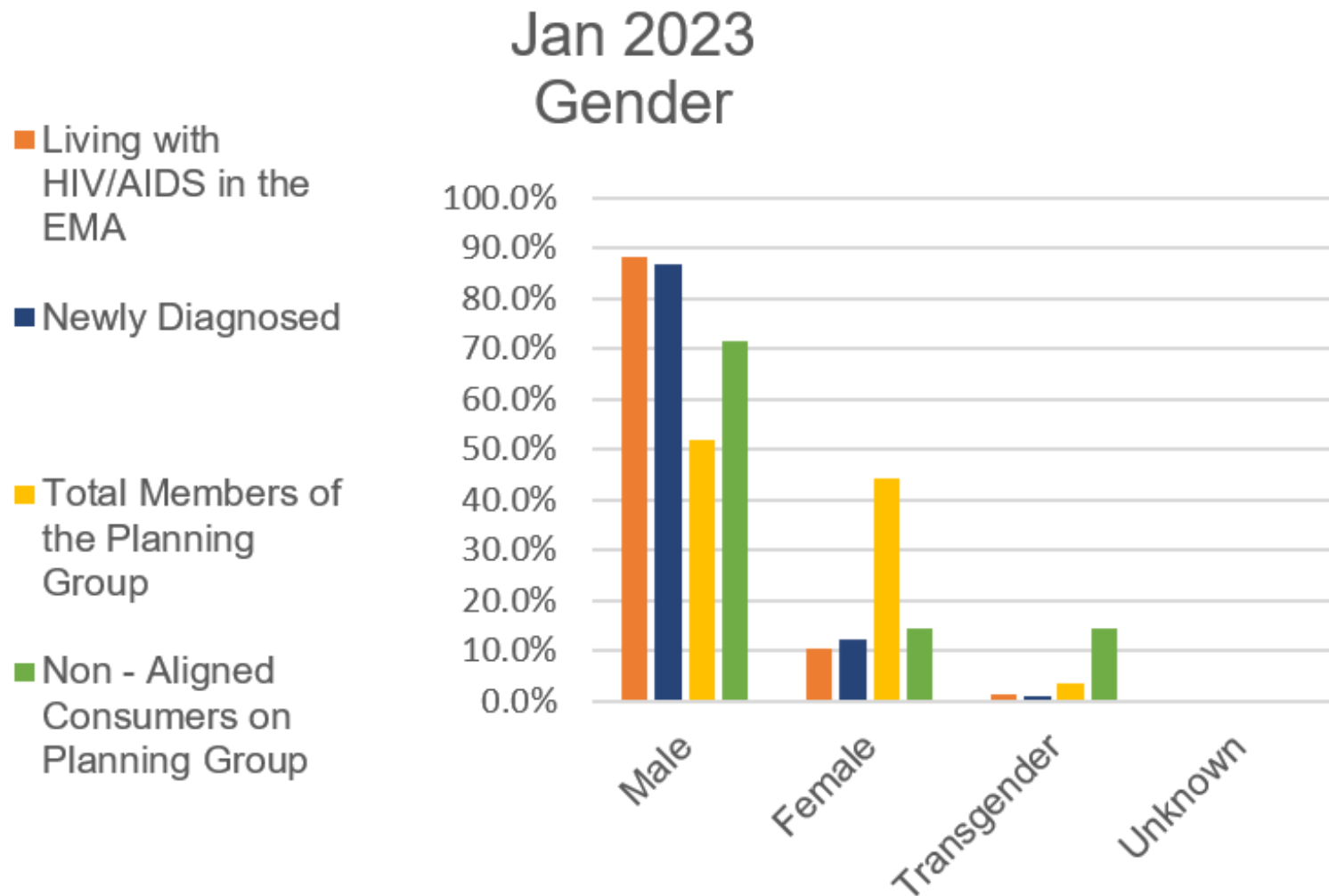
The following HIV Planning Group membership seats are currently open:

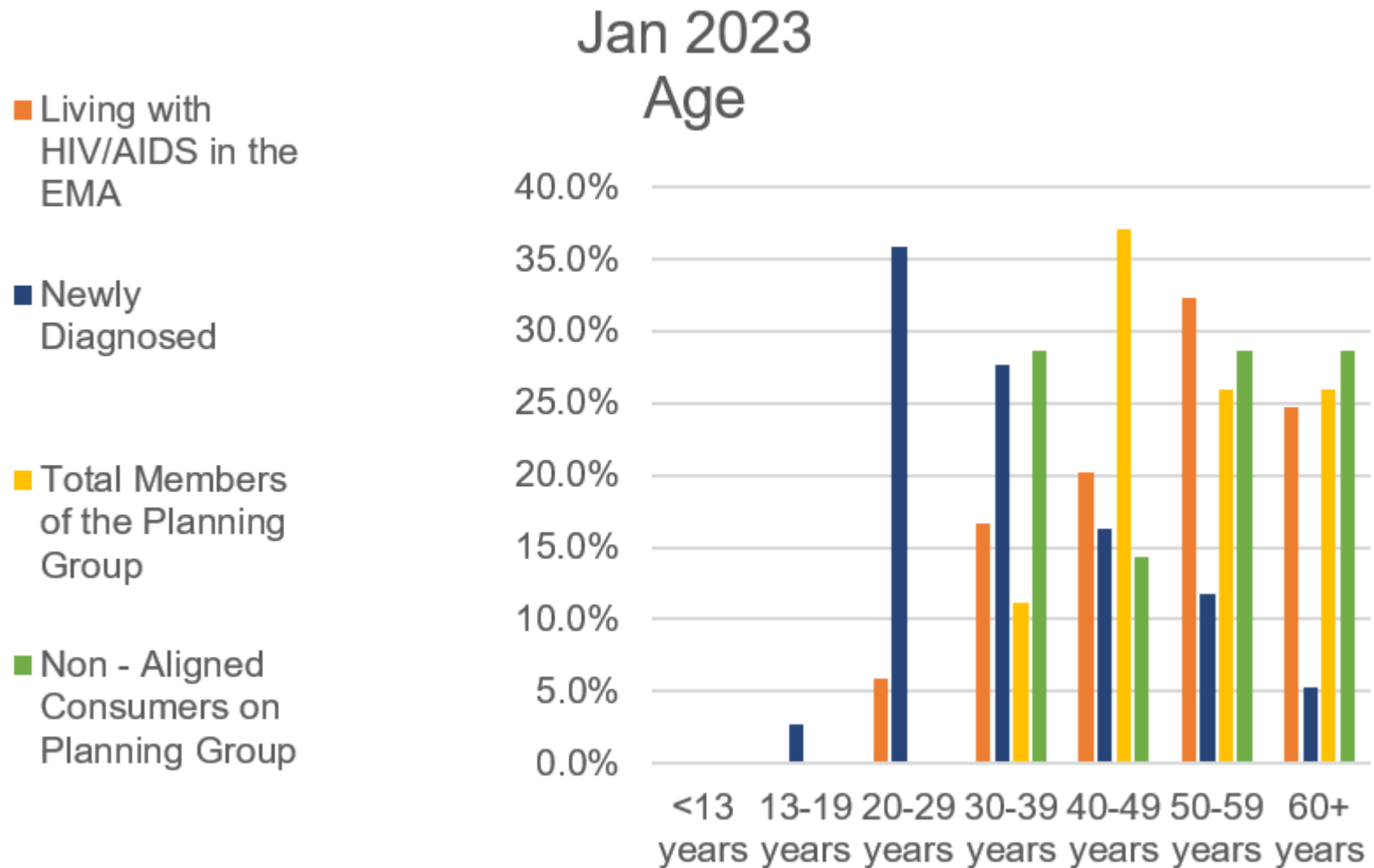
- Persons Living with HIV/AIDS who use Ryan White Part A service (employees or board members of a Ryan White funded service provider not eligible for this category) – 10 open seats
- Prevention Services Consumer (Person who uses HIV Prevention services such as PrEP or PEP)
- Prevention Services Consumer/Advocate
- Representative appointed by the Board of Supervisors District 1
- Representative appointed by the Board of Supervisors District 5
- Representative of the Hospital Planning Agency or Health Care Planning Agency
- Representative of State Government- State Medicaid (Medi-Cal) program



Jan 2023 Race/Ethnicity







	Name	SEAT NAME	Member Term Expires:	Term 1&2
1	Michael Wimpie	Unaffiliated consumer 1	5/21/2023	1
2	Afredo De Jesus	Unaffiliated consumer 2	1/26/2025	1
3	VACANT	Unaffiliated consumer 3		
4	Cinnamen Kubricky	Unaffiliated consumer 4	11/2/2025	1
5	VACANT	Unaffiliated consumer 5		
6	VACANT	Unaffiliated consumer 6		
7	Raul Robles	Unaffiliated consumer 7	9/13/2024	2
8	Allan Acevedo, JD	Unaffiliated consumer 8	4/6/2025	1
9	VACANT	Unaffiliated consumer 9		
10	VACANT	Unaffiliated consumer 10		
11	VACANT	Unaffiliated consumer 11		
12	VACANT	Unaffiliated consumer 12		
13	VACANT	Unaffiliated consumer 13		
14	VACANT	Unaffiliated consumer 14		
15	VACANT	Unaffiliated consumer 15		
16	Mikie Lochner	Chairperson	6/23/2024	1
17	Robert Lewis	Healthcare Provider, including Federally Qualified Health Center (FOHC)	9/13/2024	2
18	Rhea Van Brocklin	Community-based organization serving affected populations and AIDS service organization	10/15/2023	1
19	Regina Underwood	Social Service Provider, including providers of housing and homeless services	9/13/2024	2
20	Dr. Delores Jacobs, PhD	Mental Health Provider Formerly a combined seat; now just Mental Health	9/13/2024	2
21	Pamela Highfill	Substance Abuse Treatment Provider Formerly a combined seat; now just Substance Abuse	2/8/2026	1
22	Dr. Elizabeth Hernandez, PhD	Local Public Health Agency: HHSA Director or Designee	3/12/2023	1 (+18 mo on prior term)
23	Dr. Winston Tilghman	Local Public Health Agency: Public Health Officer or Designee	10/18/2024	2
24	VACANT	Hospital Planning Agency or Health Care Planning Agency		
25	Karla Quedaza-Torres	Non-Elected Community Leader	9/13/2024	2
26	VACANT	Prevention Services Consumer/Advocate		
27	VACANT	Prevention Services Consumer		
28	VACANT	State Government-State Medicaid		
29	Abigail West	State Government-CDPH Office of AIDS (OA) Part B	3/12/2023	1
30	Dr. David Grelotti	Recipient of RW Part C	3/10/2024	1
31	Dr. Stephen Spector	Recipient of RW PART D	1/14/2024	1

32	Amy Applebaum	Rep of individuals who formerly were federal, state, or local prisoners who were released from custody of the penal system during the preceding 3 yrs. and had HIV/AIDS as of date of release	9/13/2024	2
33	VACANT	Board of Supervisors Designee: District 1		
34	Alberto Cortes	Board of Supervisors Designee: District 2	7/19/2024	2
35	Beth Davenport, PhD	Board of Supervisors Designee: District 3	2/9/2025	1
36	Shannon Ransom (Hansen)	Board of Supervisors Designee: District 4	9/13/2024	2
37	VACANT	Board of Supervisors Designee: District 5		
38	Felipe Garcia-Bigley	Recipient of other Federal HIV Programs- Prevention Provider	10/11/2026	1
39	Maira Mar-Tang	Recipient of other Federal HIV Programs- Part F, AIDS Education and Training center and/or Ryan White Dental Provider	9/13/2024	2
40	Freddy Villafan	Recipient of other Federal HIV Programs- HOPWA / HUD	1/11/2026	1
41	Jeffrey Weber	Recipient of other Federal HIV Programs- Veterans Administration	12/13/2026	1
42	James Rucker	HIV Testing Representative	6/23/2024	1
43	VACANT	Prevention Intervention Representative Formerly: Risk Reduction Activities Representative		
44	Venice Price	Affected community including people with HIV/AIDS, member of a federally recognized Indian tribe as represented in the population, individual co-infected with Hep B or C, and historically underserved group and/or subpopulation	8/17/2025	1

HIV PLANNING GROUP
12-MONTH ATTENDANCE TRACKING
Feb 2022- Jan 2023

HPG Member	1	1	1	1	1	1	1	1	1	1	1	0	0	1	12
	Feb	Mar	Apr	May	Jun	Jul	3-Aug	10-Aug	24-Aug	28-Sep	28-Oct	27-Nov	21-Dec	25-Jan	TOTAL
Acevedo, Allan ^U , 8	*	*	*	1	*	*	*	*	1	1	*	NM	NM	*	2
Applebaum, Amy, 32	*	*	*	*	*	*	1	*	1	*	*	NM	NM	1	1
Cortes, Alberto, 34	*	1	*	*	*	*	1	*	*	*	1	NM	NM	*	2
Davenport, Elizabeth, 35	*	1	*	*	*	*	*	1	*	1	*	NM	NM	*	2
De Jesus, Alfredo ^U , 2	*	*	*	1	1	1	1	1	*	1	1	NM	NM	1	7
Garcia-Bigley, Felipe											1	NM	NM	*	1
Grelotti, David, 30	1	*	*	*	*	*	*	*	*	*	*	NM	NM	*	1
Hernandez, Elizabeth, 22	*	*	*	*	*	1	1	1	*	1	*	NM	NM	*	2
Highfill, Pamela, 21	1	1	1	*	1	1	*	*	*	*	*	NM	NM	*	5
Jacobs, Delores, 20	*	*	*	*	*	*	*	*	*	*	*	NM	NM	*	0
Kubricky, Cinnamen ^U , 4	1	*	*	1	*	*	*	1	*	1	1	NM	NM	*	4
Lewis, Bob, 17	*	1	*	*	*	*	*	*	*	*	1	NM	NM	*	2
Lochner, Mikie ^U , 16	*	*	*	*	*	*	*	*	*	*	*	NM	NM	*	0
Mar-Tang, Moira, 39	*	*	*	*	*	*	1	*	*	1	*	NM	NM	1	2
Price, Venice ^U , 44	*	*	*	*	*	*	*	*	*	*	*	NM	NM	*	0
Quezada-Torres, Karla, 25	1	*	*	*	*	*	*	1	*	*	*	NM	NM	1	2

1 = Absence

U = Unaffiliated Consumer

NM= No Meeting P=Pending (absence not counted)

= number of absences

Absence from all weekly meetings in a month= Absence for the month

HIV PLANNING GROUP
12-MONTH ATTENDANCE TRACKING
Feb 2022- Jan 2023

	Feb	Mar	Apr	May	Jun	Jul	3-Aug	10-Aug	24-Aug	28-Sep	28-Oct	27-Nov	21-Dec	25-Jan	TOTAL
Ransom, Shannon, 36	*	*	*	*	*	*	*	*	*	*	*	NM	NM	*	0
Reyna, Ivann										1	1	NM			
Robles, Raul ^U 7	*	1	*	1	*	*	1	1	*	*	*	NM	NM	*	2
Rucker, James ^U , 42	*	*	*	*	1	1	*	*	*	*	*	NM	NM	*	2
Spector, Stephen 31	*	*	1	*	1	*	1	1	*	1	*	NM	NM	*	3
Tilghman, Winston, 23	1	*	*	*	*	*	*	*	*	*	*	NM	NM	*	1
Underwood, Regina, 19	*	*	*	*	*	*	1	*	*	*	*	NM	NM	*	0
Van Brocklin, Rhea, 18	*	*	*	*	*	*	*	1	*	*	*	NM	NM	*	0
Villafan, Freddy 40	1	*	*	*	*	*	*	*	*	*	*	NM	NM	*	1
West, Abigail, 29	*	*	*	*	1	*	1	1	1	1	*	NM	NM	1	4
Wimpie, Michael ^U , 1	*	*	*	*	*	*	*	*	*	*	*	NM	NM	*	0
To remain a member of the HPG, a member may															

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HIV PLANNING GROUP
12-MONTH COMMITTEE TRACKING
Feb 2022 - Jan 2023

MEMBERSHIP	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	#
Total meetings	1	1	1	1	1	1	0	1	1	1	1	1	11
Member													
Lewis, Bob	*	*	1	*	*	*	NM	*	*	1	*	*	2
Lochner, Mikie	*	*	*	*	*	*	NM	*	*	*	*	*	0
Underwood, Regina	*	*	*	*	*	*	NM	*	*	*	*	*	0
Rhea Van Brocklin									*	1	*	*	1
Villafan, Freddy		*	*	*	*	*	NM	1	*	*	*	*	1

To vote, a member may not miss 4 consecutive meetings or 6 total meetings in a 12 month period.

U = Unaffiliated Consumer

= number of absences

C = Co-Chair

HIV PLANNING GROUP
12-MONTH COMMITTEE TRACKING
Feb 2022 - Jan 2023

Community Engagement Group	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	#
Total Meetings	1	1	1	0	1	0	0	1	1	0	1	1	8
Member													
Acevedo, Allan ^{UC}	*	*	*	NM	*	NM	NM	*	*	NM	*	*	0
De Jesus, Alfredo ^U	1	1	*	NM	*	NM	NM	1	1	NM	*	*	4
Donovan, Michael	*	*	*	NM	*	NM	NM	*	*	NM	*	*	0
Lochner, Mikie ^U	*	*	*	NM	*	NM	NM	*	*	NM	*	*	0

To vote, a member may not miss 4 consecutive meetings or 6 total meetings in a 12 month period.

U = Unaffiliated Consumer

= number of absences

C = Chair

HIV PLANNING GROUP
12-MONTH COMMITTEE TRACKING
Feb 2022 - Jan 2023

STRATEGIES	Feb	Mar	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	#
Total meetings	1	1	1	1	1	1	0	1	1	1	1	0	11
Member													
Acevedo, Allan ^{U,CC}	*	*	*	1	*	*	NM	*	1	*	1	NM	3
Applebaum, Amy	*	*	*	*	1	*	NM	*	*	*	*	NM	1
Davenport, Beth	*	*	1	1	1	*	NM	*	*	*	*	NM	3
Franco, Lucia ^N	*	*	1	*	1	1	NM	*	*	1	*	NM	4
Johnson, Liz ^N	*	*	1	*	*	*	NM	*	*	1	1	NM	3
Mora, Joseph ^N	1	*	*	*	*	1	NM	*	*	*	*	NM	2
Mar-Tang, Moira	*	*	*	*	*	1	NM	*	1	*	*	NM	2
Price, Venice ^U	*	*	1	*	1	1	NM	*	*	*	*	NM	3
Ransom, Shannon ^C	*	*	*	*	*	*	NM	*	*	*	*	NM	0
Tilghman, Dr. Winston	*	1	*	*	*	1	NM	*	*	*	1	NM	3
Weber, Jefferery							NM	*	*	*	*	NM	0
Wimpie, Michael ^U	1	*	*	*	*	1	NM	*	*	*	*	NM	2

To vote, a member may not miss 4 consecutive meetings or 6 total meetings in a 12 month period.

U = Unaffiliated Consum NM = Committee did not meet

= number of absences * = present

C = Chair

CC = Co-Chair

HIV PLANNING GROUP
12-MONTH COMMITTEE TRACKING
Feb 2022 - Jan 2023

PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE																				Total
PSRAC	Feb	Mar	Apr	May	2-Jun	9-Jun	16-Jun	23-Jun	30-Jun	7-Jul	14-Jul	21-Jul	28-Jul	4-Aug	8-Sep	13-Oct	Nov	Dec	Jan	
Total meetings	1	1	1	1	1	1	1	1	0	1	1	1	1	1	1	1	0	1	1	11
Member																				
Jacobs, Dr. Delores ^C	*	*	*	*	*	*	*	*	NM	*	1	*	*	*	*	*	NM	*	*	0
Cortes, Alberto	*	*	*	1	1	1	*	*	NM	*	*	1	*	*	1	*	NM	*	*	2
Davenport, Beth	*	*	*	1	1	*	1	*	NM	*	*	*	*	*	*	*	NM	*	*	1
Garcia-Bigley, Felipe															*	*	NM	*	*	0
Highfill, Pam		1	*	*	*	*	*	1	NM	*	*	*	*	*	*	*	NM	*	*	1
Kubricky, Cinammon ^U	*	*	1	*	*	*	*	1	NM	*	*	*	*	*	*	*	NM	1	*	2
Mueller, Chris	*	*	*	1	*	*	*	*	NM	*	*	1	*	*	*	1	NM	*	1	3
Robles, Raul	1	*	1	*	*	1	1	1	NM	*	1	1	1	*	*	*	NM	1	*	3
Rucker, James	*	1	*	*	*	*	*	1	NM	*	*	*	*	*	1	*	NM	*	*	2
Quezada-Torres, Karla	*	1	*	*	*	*	*	*	NM	*	*	*	*	1	*	*	NM	*	*	2
Underwood, Regina	*	*	*	*	*	*	*	*	NM	*	*	*	*	*	*	*	NM	*	*	0
Van Brocklin, Rhea	*	1	*	*	*	*	*	*	NM	*	*	*	*	*	*	*	NM	*	*	1
Villafan, Freddy															*	*	NM	*	*	0

Absence from all weekly meetings in a month = absence for the month

To vote, a member may not miss 4 consecutive months or 6 total months in a 12 month period.

U = Unaffiliated Consumer

= number of absences

CC = Co-Chair

HIV PLANNING GROUP
12-MONTH COMMITTEE TRACKING
Feb 2022 - Jan 2023

STEERING

	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	#
Total Meetings	1	1	1	1	1	1	0	1	1	0	0	1	9
Community Engagement Group	*	*	*	*	*	1	NM	*	*	NM	NM	1	2
Medical Standards	*	*	*	*	*	*	NM	1	1	NM	NM	*	2
Membership	*	*	1	*	*	*	NM	*	1	NM	NM	*	2
Priority Setting and Resource Allocation	*	*	*	*	*	*	NM	*	*	NM	NM	*	0
Strategies & Standards	*	*	*	1	1	*	NM	*	*	NM	NM	*	2
Chair- Mikie Lochner	*	*	*	*	*	*	NM	*	*	NM	NM	*	0
Vice Chair - Rhea Van Brocklin	*	1	*	*	*	*	NM	*	*	NM	NM	*	1

To vote, a member may not miss 4 consecutive meetings or 6 total meetings in a 12 month period.

NA - no HPG member co-chair

U = Unaffiliated Consumer NM = Committee did not meet

= number of absences * = present

C = Co-Chair

HIV PLANNING GROUP
12-MONTH COMMITTEE TRACKING
Feb 2022 - Nov 2022

Medical Standards & Evaluation Committee

MSEC

	Feb	May	Sep	Nov	#
Total Meetings	0	1	1	0	2
Member					
Tilghman, Dr. Winston ^C	NM	*	*	NM	0
Aldous, Dr. Jeannette ^{NCC}	NM	*	1	NM	1
Bamford, Dr. Laura	NM	1	*	NM	1
Bowen, Samantha	*	*			
Grelotti, Dr. David	NM	*	*	NM	0
Lewis, Robert	NM	*	1	NM	1
Little, Dr. Susan	NM	1	1	NM	2
Lochner, Mikie	NM	*	1	NM	1
Penninga, Katherine	NM	*	*	NM	0
Ransom, Shannon	NM	*	*	NM	0
Spector, Dr. Stephen	NM	*	*	NM	0
Stangl, Lisa ^N	NM	*	*	NM	0
Quezada-Torres, Karla	NM	*	*	NM	0
Zweig, Dr. Adam ^N	NM	1	*	NM	1

NM = Committee did not meet

HIV PLANNING GROUP:
MENTOR-MENTEE ASSIGNMENTS

<u>(Less than 2yr tenure)</u>	<u>Assigned mentor?</u>	<u>Affiliation</u>	<u>Mentor</u>	<u>Dates Met</u>
Allan Acevedo	No	Unaffiliated Consumer	Rhea Van Brocklin	
Beth Davenport	Yes	District 3	Shannon Ransom	
Alfredo De Jesus	Yes	Unaffiliated Consumer	Mikie Lochner	
Cinnamen Kubricky	Yes	Unaffiliated Consumer	Mikie Lochner	
Felipe Garcia-Bigley	Yes	Recipient of other Federal HIV Programs- Prevention Provider	Bob Lewis	
James Rucker	Yes	HIV Testing Representative	Mikie Lochner	
Jeffery Weber	Yes	Recipient of other Federal HIV Programs- Veterans Administration	Rhea Van Brocklin	
Venice Price	Yes	Unaffiliated Consumer	Mikie Lochner	
Freddy Villafan	Yes	Recipient of other Federal HIV Programs- HOPWA / HUD	Bob Lewis	
Pamela Highfill	Yes	Substance Abuse Treatment Provider	Dr. Delores Jacobs	

Pending members who will need mentors:

None

Appointed more than 2 years ago