

SAN DIEGO HIV PLANNING GROUP (HPG)



Wednesday, February 25, 2026, 3:00 PM – 5:00 PM
Chula Vista Live Well Center
690 Oxford Street, Chula Vista, CA 91911
South Conference Room

The Charge of the HIV Planning Group: The HIV Planning Group Committee Charge is to set priorities & allocate funds to provide services for people living with HIV/AIDS.

TABLE OF CONTENTS

Document	Page Number(s)
Directions and Parking Instructions	001 – 002
Procedure for Public Requests During HPG Meetings	003
HPG Member Conflict of Interest (COI) Sheet	004
HPG Agenda 2/25/2026	005 – 006
HSHB Report (as of February 2026)	007 – 009
FY25 Expenditure Report (through December 2025)	010 – 012
FY25 Utilization Report (QR code)	013
Food Bank/Home Delivered Meals Service Category (DRAFT)	014 – 015
Presentation: Housing Case Management, NAMI San Diego	016 – 019
Presentation: Integrated Prevention and Care Plan, County of San Diego	020 – 027
Meeting Minutes (HPG and Committees)	028 – 051
Office of AIDS Summary (February 2026)	052 - 053

Meeting Location & Directions:

HIV Planning Group (HPG)

Wednesday, February 25, 2026

3:00 PM - 5:00 PM

Chula Vista Live Well Center

690 Oxford Street

Chula Vista, CA 91911

South Conference Room



Visitor/Employee parking available in the back of the building. All visitors must check in with security at the **main entrance** of the building to be escorted to employee areas. Visitors include County employees who do not work in the building.

FROM I-15:

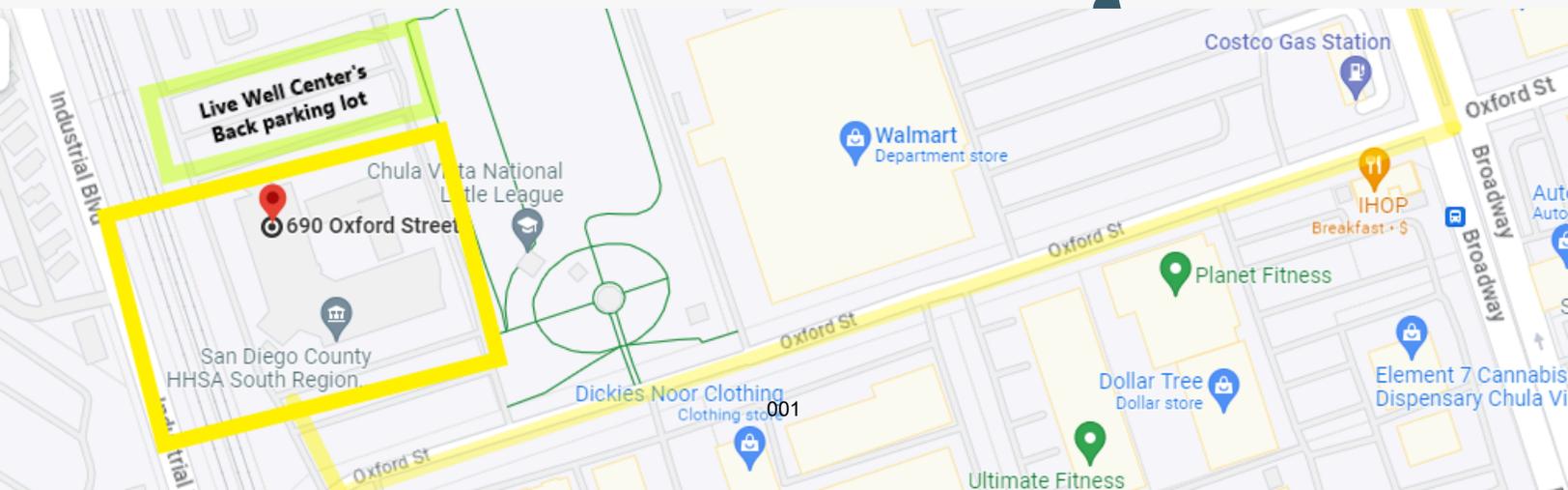
1. Take I-15 South.
2. Take exit 1C to merge onto I-5 towards National City/Chula Vista.
3. Take exit 7A toward L Street.
4. Keep right at the fork and merge onto Bay Blvd.
5. Turn right onto L Street.
6. Turn right onto Broadway.
7. Turn right onto Oxford St.
8. At the end of the cul-de-sac the destination is on the right.



PUBLIC TRANSPORTATION

MTS Trolley:
Blue Line

MTS Bus Routes:
932





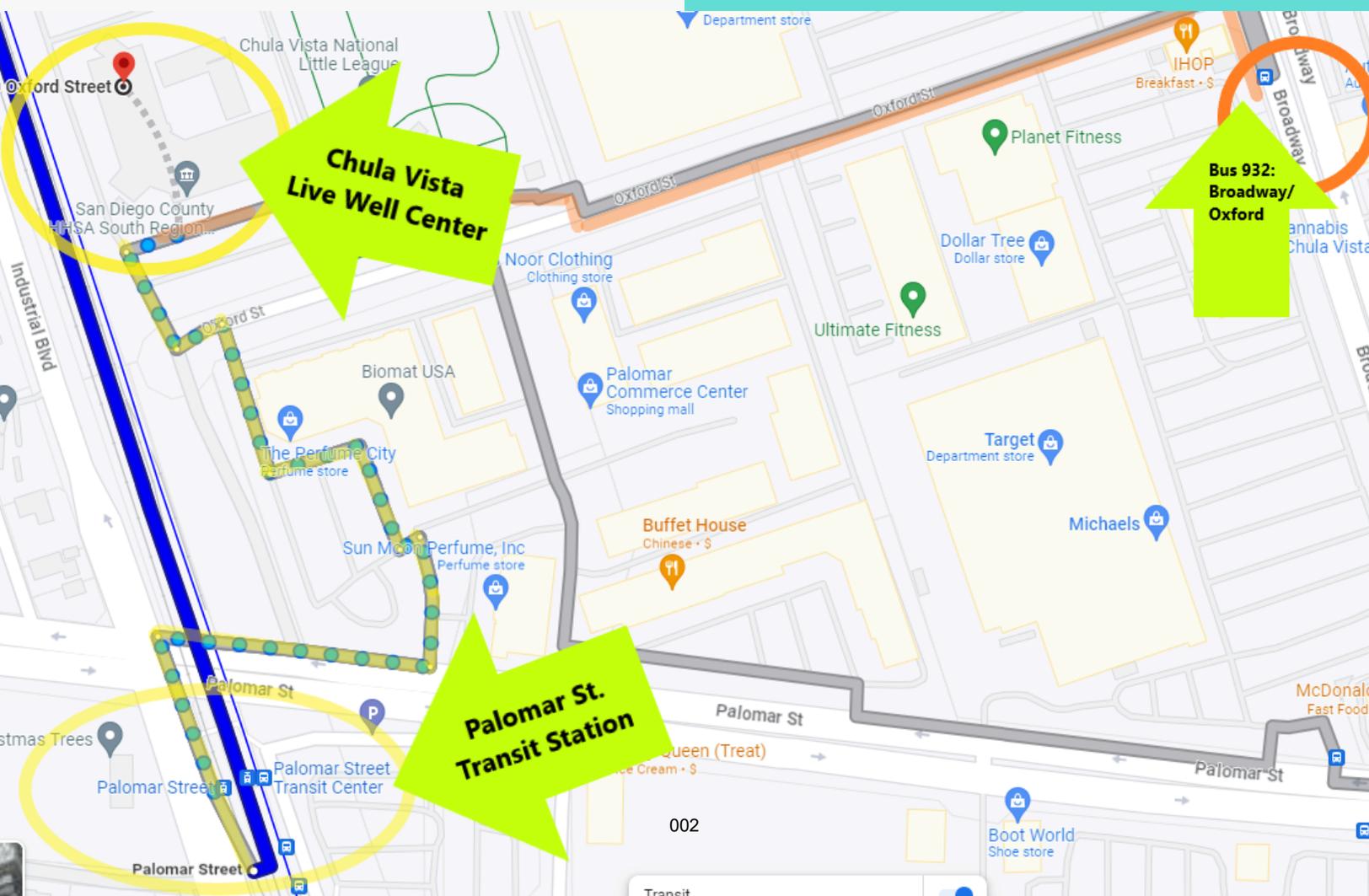
FROM TROLLEY & BUS:

1. Take the Blue Trolley Line towards San Ysidro.
2. Exit at Palomar Street Transit Center.
3. Turn right onto Palomar Street.
4. Turn left toward Oxford Street and follow path until you reach Chula Vista Live Well Center ahead.

FROM BUS:

From Broadway/Oxford St.:

1. Head north on Broadway toward Oxford St.
2. Turn left onto Oxford St. (Pass by IHOP on the left).
3. Destination will be on the right at the end of the cul-de-sac.



Procedure of HPG Public Requests During HPG Meetings

During public comment periods of HPG meetings, public members sometimes request a variety of things directly or indirectly in their comments (e.g., information/clarification, data, investigation of a circumstance, etc. or may assert circumstances that require clarification to address either in 1:1 communication or in a subsequent meetings).

The process/procedure for responding is as follows.

During each HPG meeting (including the one in which the direct or indirect request is made), the chair or vice-chair will:

Explain the process for a response and indicate that:

1. HPG Support Staff has placed their email and phone number in the chat so that the speaker can contact the staff to discuss and clarify the request. The staff will obtain contact information for any needed follow-up (name, email address, phone number, and preference for communication).
2. When the speaker contacts HPG Support, staff will respond within one business day via email or phone call to obtain contact information and the basic details of the request.
3. The day following the HPG meeting, an internal debrief meeting will be held which includes the review of follow-up items. Follow-up items are discussed and assigned to appropriate personnel to respond further to obtain the required information/clarification. The requestor will be contacted the same business day as the meeting is held. *Items that involve or require provider contract information are assigned to Recipient staff.*
4. If the situation requires further research or data gathering, Support Staff will inform the requestor and provide a good faith estimate of the time required for the research and when the requestor may expect a fuller response from the staff.
5. Every attempt will be made to obtain and communicate the requested information within a 10-day period.
6. When a full response is provided, the follow-up item will be recorded as completed.

HPG CONFLICT OF INTEREST (COI) SHEET

	Conant, Juan	Davenport, Beth	Garcia-Bigley, Felipe	Grelotti, David J.	King, Michael	Matthews, Eva	Nava, Veronica	Paugh, Shannon	Spector, Stephen A.	Van Brocklin, Rhea
CHS: WICYF*										
Early Intervention Services: Regional Services										
Early Intervention Services: Minority AIDS Initiative										
Emergency Financial Assistance										
Food Services: Food Bank/Home Delivered Meals										
Home-Based Health Care Coordination										
Medical Case Management										
Medical Nutrition Services										
Mental Health: Counseling / Therapy										
Mental Health: Psychiatric Medication Management										
Non-Medical Case Management										
Oral Health										
Outpatient Ambulatory Health Services: Medical Specialty										
Outpatient Ambulatory Health Services: Primary Care										
Outreach Services										
Peer Navigation**										
Substance Use Disorder Treatment: Outpatient										
Substance Use Disorder Treatment: Residential										
Transportation: Assisted and Unassisted										

*Coordinated HIV Services for Women, Infants, Children, Youth and Families

**Referral for Healthcare and Support Services

No Conflicts

Aguilar, Nicole
Aguirre Mendoza, Marco
Donovan, Michael
Garcia, Rosemary

Fleming, Tyra
Ignalino, Ben
Jones, Lori
Kubricky, Cinnamen

Lochner, Michael
Lothridge, Jen
Miles, Skyler
Rooney, Ivy

Weber, Jeffery
Wimpie, Michael
Yancey, Adrienne

SAN DIEGO HIV PLANNING GROUP (HPG)



Wednesday, February 25, 2026, 3:00 PM – 5:00 PM
Chula Vista Live Well Center
690 Oxford Street, Chula Vista, CA 91911
South Conference Room

To participate remotely via Zoom:

<https://us06web.zoom.us/j/85368987291?pwd=KnO1bBlgoyR53sVY04E8ymyNo6OUq4.1>

Call in: +1 (669) 444-9171

Meeting ID (access code): 853 6898 7291

Password: SDHPG

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

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

A quorum for this meeting is thirteen (13)

HPG Members: Nicole Aguilar | Marco Aguirre Mendoza | Juan Conant | Beth Davenport | Michael Donovan | Tyra Fleming | Rosemary Garcia | Felipe Garcia-Bigley | David Grelotti | Ben Ignalino | Lori Jones | Michael King | Cinnamen Kubricky (*Vice-Chair*) | Michael Lochner (*Chair*) | Jen Lothridge | Eva Matthews | Skyler Miles | Veronica Nava | Shannon Paugh | Ivy Rooney | Stephen Spector | Rhea Van Brocklin | Jeffery Weber | Michael Wimpie | Adrienne Yancey

ORDER OF BUSINESS

1. Call to order and roll call (3:00-3:05)
2. Welcome, moment of silence, matters from the Chair (3:05-3:15)
3. Public comment (for members of the public) – concerns/questions/suggestions for future training topics/agenda items (3:15-3:20)
4. HPG Member Open Forum – concerns/questions/suggestions for future training topics/agenda items (3:20-3:25)
5. **ACTION:** Approve the HPG agenda for February 25, 2026 (3:25-3:30)
6. HIV, STD, and Hepatitis Branch (HSHB) Report (3:30-3:45)
7. Routine Business: (3:45-3:55)
 - a. **ACTION:** Approval of consent agenda for February 25, 2026 which includes:

- i. Approval of HPG minutes from January 28, 2026
- ii. Acceptance of the following committee minutes:

Steering Committee	None
Membership Committee	November 5, 2025
Priority Setting and Resource Allocation Committee	None
Medical Standards and Evaluation Committee	November 4, 2025
Community Engagement Group	December 10, 2025; January 21, 2026
Strategies and Standards Committee	October 7, 2025

(The following is for HPG information, not for acceptance):

SAN DIEGO HIV PLANNING GROUP (HPG)

CARE Partnership

December 8, 2025

- iii. (*Membership Committee*): HPG appointments/reappointments – none
- b. Report Outs (Office of AIDS, Housing Committee, other committees)
- 8. Old Business: (N/A)
 - a. None
- 9. New Business: (3:55-4:45)
 - a. **Presentation**: Housing Case Management program, NAMI San Diego – Carlos Acevedo
 - b. **Presentation**: Integrated Plan – Felipe Ruiz
 - c. **Discussion**: Strategies to continue food vouchers within the Food Bank/Home Delivered Meals service category
 - d. **ACTION**: Approve HPG Vice-Chair
- 10. HPG Support Staff Updates (4:45-4:50)
- 11. Announcements (4:50-5:00)
- 12. Adjournment (5:00)

Next Meeting Date: **Wednesday, March 25, 2026, at 3:00 PM – 5:00 PM**

Location: Southeastern Live Well Center, 5101 Market Street, San Diego, CA 92114
(Tubman Chavez Room C) and via Zoom

HSHB Report to HPG

February 2026



COUNTY OF SAN DIEGO
HEALTH AND HUMAN SERVICES AGENCY

LIVE WELL
SAN DIEGO

PHAB
Accredited Health Department
Advancing Public Health
Performance
Public Health Accreditation Board

1

February 2026 HSHB Report



Overview

- Report includes expenses through *December* (83.3% of year for most categories)

2

February 2026 HSHB Report



Service Categories to Note:

- Emergency Housing - (risk of underspending)
- Emergency Financial Assistance- (risk of underspending)
- Non-Medical Case Management for Housing: risk of underspending

3

February 2026 HSHB Report



Service Utilization

- Overall, we are about 5% below last year in terms of clients served
- Viral suppression is at 94%

4

February 2026 HSHB Report



The following service categories (1/2026 YTD) show change in utilization, compared to the same timeframe from the previous fiscal year (1/2025 YTD):

- Primary care (↓ 6% fewer clients)
- Oral health (↓ 29%)
- WCF (↑ 24%)
- Medical Case Management (↓ 6%)
- Non-Medical Case Management (↓ 7%)
- Mental Health Services (↓ 28%)
- Home-Delivered Meals (↓ 12%)

5

February 2026 HSHB Report



PARS REPORT – AS OF 2/19/2026

Waiting List

- 71 currently on the waitlist
 - 26 on waitlist previously enrolled in PARS
 - 45 are new applicants
 - Demographics of clients on the waitlist:
 - Gender: 50 male, 15 female, 6 transgender
 - Race/ethnicity: 17 Black, 35 Hispanic/Latino, 17 white, 1 Asian, 1 American Indian
 - Age: 49 over 45, 20 ages 31-44, 2 ages 18-30
 - Regions: Central 48, East 11, South 6, North 6

Current Clients

- 81 currently enrolled
 - Demographics of clients currently enrolled:
 - Gender: 57 male, 16 female, 8 transgender
 - Race/ethnicity: 10 Black, 47 Hispanic/Latino, 21 white, 2 Asian, 1 American Indian
 - Age: 53 over 45, 26 ages 31-44, 2 ages 18-30
 - Regions: Central 46, East 13, South 17, North 5

6

RW 2025-26 PART A AWARD INFORMATION	
Funding Source	Total RW 2025-26 Award
Part A	11,867,256.00
Part A MAI	886,480.00
TOTAL AWARD AMOUNT	12,753,736.00

RW 2025-26 YEAR TO DATE EXPENDITURE AND SAVINGS BREAK-DOWN Through December 2025

FY25-26 ALLOCATION BREAK DOWN								
Funding Source	Admin. \$	Admin. %	CQM \$	CQM %	RW 2025-26 Service dollars	Total	CORE Medical Services	Support Services
Part A	1,149,330	10%	335,660	3%	10,382,266	11,867,256	40.49%	59.51%
Part A MAI	81,248	9%	34,092	4%	771,140	886,480		
TOTAL	1,230,577.80		369,752.07		11,153,406.13	12,753,736.00	49%	51%

Ryan White Part A Allocations												
											% Elapsed	83%
Service Categories	HRSA Ranking	Priority Ranking	RW 2025-26 HPG Initial Allocation	%	HPG & Recipient Approved Actions +/-	RW 2025-26 HPG Adjusted Allocation	%	RW 2025-26 Year to Date Expenditure	RW 2025-26 Year-to-Date - % Expenditure/Budget)	RW 2025-26 Balance	Comments	
Outpatient Ambulatory Health Services: Primary Care	1l	1	1,102,630.00	11%	29,157.00	1,131,787.00	11%	1,237,048.20	109%	(105,261.20)		
Outpatient Ambulatory Health Services: Medical Specialty	1l	2	195,000.00	2%	50,532.00	245,532.00	2%	120,407.29	49%	125,124.71		
Psychiatric Medication Management	1j	12	6,000.00	0%	7,500.00	13,500.00	0%	7,164.14	53%	6,335.86		
Oral Health	1k	3	160,940.00	2%	97,847.00	258,787.00	2%	158,932.00	61%	99,855.00		
Medical Case Management	1h	4	1,151,853.00	12%	(128,369.00)	1,023,484.00	10%	858,952.79	84%	164,531.21		
Non-Medical Case Management for Housing		6	200,000.00	2%	(50,532.00)	149,468.00		51,474.94	34%	-		
Housing: Emergency Housing	2e	9	1,183,515.00	12%	203,717.00	1,387,232.00	13%	786,463.53	57%	600,768.47		
Housing: Location, Placement and Advocacy Services		8	100,000.00	1%	(100,000.00)	-		-	0%	-		
Housing: Partial Assistance Rental Subsidy (PARS)	2e	7	850,507.00	9%	104,000.00	954,507.00	9%	968,850.15	102%	(14,343.15)		
Non-Medical Case Management	2h	5	392,021.00	4%	(85,000.00)	307,021.00	3%	273,855.75	89%	33,165.25		
Coordinated HIV Services for Women, Infants, Children, Youth, and Families (WICYF)	1c	13	993,157.00	10%	64,400.00	1,057,557.00	10%	795,924.12	75%	261,632.88		
Childcare Services	2a		-	0%	-	-	0%	-	0%	-		
Early Intervention Services: Regional Services	1c	14	790,000.00	8%	(35,631.00)	754,369.00	7%	567,467.81	75%	186,901.19		
Health Education & Risk Reduction	2d	14a	-	0%	-	-	0%	-	0%	-		
Outreach Services	2j	14b	-	0%	-	-	0%	-	0%	-		
Referral Services	2l	14c	-	0%	-	-	0%	-	0%	-		
Referral to Health and Supportive Services (Peer Navigation)		16	260,000.00	3%	(61,148.00)	198,852.00	2%	131,958.62	66%	66,893.38		

Ryan White Part A Allocations											
Service Categories	HRSA Ranking	Priority Ranking	RW 2025-26 HPG Initial Allocation	%	HPG & Recipient Approved Actions +/-	RW 2025-26 HPG Adjusted Allocation	%	% Elapsed		RW 2025-26 Balance	Comments
								RW 2025-26 Year to Date Expenditure	RW 2025-26 Year-to-Date - % Expenditure/Budget)		
Mental Health: Counseling/Therapy	1j	10	810,000.00	8%	(230,000.00)	580,000.00	6%	431,674.66	74%	148,325.34	
Psychosocial Support Services		17	46,744.00	0%	-	46,744.00	0%	40,644.84	87%	-	
Substance Use Services: Outpatient	1m	11	313,127.00	3%	41,010.00	354,137.00	3%	305,346.92	86%	48,790.08	
Substance Abuse Services: Residential	2o	18	-	0%	-	-	0%	-	0%	-	
Home-based Health Care Coordination	1e	19	228,500.00	2%	(10,741.02)	217,758.98	2%	178,862.24	82%	38,896.74	
Transportation: Assisted and Unassisted	2g	20	151,830.00	2%	(60,000.00)	91,830.00	1%	67,383.63	73%	24,446.37	
Food Services: Food Bank/Home-Delivered Meals	2c	21	536,073.00	5%	70,090.00	606,163.00	6%	380,761.63	63%	225,401.37	
Medical Nutrition Therapy	1i	22	35,542.00	0%	-	35,542.00	0%	28,675.41	81%	6,866.59	
Legal Services	2i	23	285,265.00	3%	-	285,265.00	3%	239,697.05	84%	45,567.95	
Emergency Financial Assistance	2b	24	61,856.00	1%	694,850.00	756,706.00	7%	282,169.50	37%	474,536.50	
Home Health Care	1f	25	-	0%	-	-	0%	-	0%	-	
Early Intervention Services: HIV Counseling and Testing	1c	26	-	0%	-	-	0%	-	0%	-	
Cost-Sharing Assistance	1d	27	-	0%	-	-	0%	-	0%	-	
Hospice	1g	28	-	0%	-	-	0%	-	0%	-	
Subtotal			9,854,560.00	100%	601,681.98	10,456,241.98	99%	7,913,715.22	76%	2,542,526.76	
Ryan White Part A Minority AIDS Initiative (MAI)			RW 2025-26 HPG Initial Allocation		HPG & Recipient Approved Actions +/-	RW 2025-26 HPG Adjusted Allocation	%	RW 2025-26 Year to Date Expenditure	RW 2025-26 Year-to-Date - % Expenditure/Budget)	RW 2025-26 Balance	Comments
Multi-Disciplinary Team			593,182.00		-	593,182.00	86%	371,494.88	63%	221,687.12	
Housing: Emergency Housing			100,000.00		-	100,000.00	14%	56,874.98	57%	43,125.02	
Subtotal			693,182.00		-	693,182.00	100%	428,369.86	62%	264,812.14	
TOTAL			10,547,742.00		601,681.98	11,149,423.98		8,342,085.08	75%	2,807,338.90	

CORE and Support Services Allocation Breakdown						
	Total Allocation	% Allocated	Total Expenditure	% Spent	Total Balance	% Balance
CORE Medical Services	4,234,128.93	40.49%	3,623,140.44	85.57%	610,988.49	14.43%
Support Services	6,222,111.55	59.51%	4,290,574.78	68.96%	1,931,536.77	31.04%
TOTAL	10,456,240.48		7,913,715.22		2,542,525.26	

Other funding info

Month: Dec-25 Part A & Part B Prevention Comp A/C HRSA 20-078

YEAR TO DATE EXPENDITURE AND SAVINGS BREAK-DOWN THROUGH SEPTEMBER 2025						
RW 2025-26 SERVICE DOLLAR ALLOCATIONS AND EXPENDITURES						
Funding Source	RW 2025/2026 Service Dollars	Contract YTD Expenditure	% of Year Invoiced	% Spent	Balance	Comments
Ryan White Part B						
Outpatient Ambulatory Health Services (Medical)	\$ -	-	67%	0.00%	\$ -	Part A Payment Summary (Part B funding)
Early Intervention Services (Expanded HIV Testing)	\$ -	-	67%	0.00%	\$ -	Part A Payment Summary (Part B funding)
Early Intervention Services (Focused Testing)	\$187,900	\$131,415.17	67%	69.94%	\$ 56,485	Part B Payment Summary
Medical Case Management (Emergency Financial Assistance)	\$403,510	\$92,295.98	67%	22.87%	\$ 311,214	Part B Payment Summary
Housing (Substance Abuse Services-Residential)	\$421,512	\$534,071.01	67%	126.70%	\$ (112,559)	Part B Payment Summary
Non-medical Case Management (Rep Payee)	\$38,098	\$26,552.07	67%	69.69%	\$ 11,546	Part B Payment Summary
CoSD Medical Case Management	\$416,150	272,019.90	67%	65.37%	\$ 144,130	Part B Cost Report
CoSD Early Intervention Services	\$285,044	189,153.55	67%	66.36%	\$ 95,890	Part B Cost Report
Ryan White Part B Total	\$ 1,752,214	\$ 1,245,508			\$ 506,706	
Prevention (27-0047) - HIP						
<i>Counseling and Testing</i>	\$ 105,482.46	\$ 96,104.61	58%	91.11%	\$ 9,378	Payment Summary
<i>Evaluation/ Linkage Activities/ Needs Assessment</i>	\$ 531,178.89	\$ 514,154.69	58%	96.80%	\$ 17,024	Payment Summary
Prevention Total	\$ 636,661	\$ 610,259			\$ 26,402	
HRSA Ending the HIV Epidemic (EHE) - 25-063 FY25-26						
<i>HRSA EHE</i>	\$ 4,072,711.00	\$ 1,961,368.05	83%	48.16%	\$ 2,111,343	Payment Summary
EHE Total	\$ 4,072,711	\$ 1,961,368			\$ 2,111,343	
TOTAL	\$ 6,461,586	\$ 3,817,135			\$ 2,644,451	

Ryan White Utilization Report

Summary of Services for FY 25

(March 1, 2025 - February 28, 2026)

HIV, STD and Hepatitis Branch



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.



1



- Non-medical case management focused solely on housing needs.
- Services include:
 - Locating & moving into affordable housing
 - Finding suitable roommates/shared living settings
 - Eviction prevention support
 - Emergency financial assistance
 - Money management guidance
- All PARS clients must also enroll in Housing Case Management.

2

Purpose of Housing Case Management:

- Develop self-sufficiency for housing
- Help Ryan White clients secure affordable housing
- Support money management and financial stability
- Identify support systems for housing stability
- Ensure engagement in HIV outpatient care & viral suppression



3

Intake Process

- Case managers use a standardized assessment tool approved by the Recipient.
- Assessment includes:
 - Client goals (location, environment)
 - Income & monthly expenses
 - Rental history, credit rating, legal barriers
 - Self-sufficiency assessment (with 3 reliable contacts)
- Clients must also apply to housing waitlists: Section 8, HOPWA, TBRA.
- **Medical/disability needs & transportation**

4

Housing Transition Plan

Since Ryan White housing support is temporary, every client must have a housing transition plan to help them stay housed after assistance ends.

The plan is created from the initial assessment and is reviewed at every in-person visit.

The plan must include:

- Priority areas (e.g., finding a roommate, more affordable housing, or permanent housing).
- Referrals to services for any support needs.
- Clear goals with action steps, timelines, and responsibilities for both client and case manager.
- Outcomes and goals agreed upon by both client and case manager.
- **Timeline:**
 - Plan must be created within 60 days of entering housing case management, and no later than 90 days after starting PARS.
 - Plan should be reviewed regularly, at least once every quarter.

5

How to Refer a Client

- To refer a client, please ensure:
- Completion of the Housing Case Management referral form
- Client provides required documents:
 -  Proof of residency
 -  Proof of income
 -  Valid ID
 -  Insurance card
 -  Diagnosis letter

6

Com
informa

Carlos Acevedo He/Him/His
Lead Housing Case Manager
NAMI San Diego & Imperial Counties

 Carlosacevedo@namisd.org
 858-275-8990

7

Integrated Prevention and Care Plan



Virginia Suarez, Community Health Program Specialist

SANDIEGOCOUNTY.GOV/HHSA



1

Agenda



- ✓ Integrated Plan Overview and Background
- ✓ Deliverables + HPG Involvement
- ✓ Overview of Community Engagement Activities
- ✓ Timeline to Completion
- ✓ Key Components Walkthrough
- ✓ Considerations
- ✓ Closing



SANDIEGOCOUNTY.GOV/HHSA

2

Integrated Plan Overview

- Health Resource Services Administration (HRSA) and Center for Disease Control and Prevention (CDC) joint requirement every five years
- Local jurisdictions can choose to make their own plan or adopt the plan put out by their state – in our case, by the California Department of Public Health
- In previous years, HSHB has adopted California’s plan; beginning in 2025, HSHB began preparing for development of a plan specific to County of San Diego
- Integrated Plan for 2027-2031 must include:
 - Community Engagement + Jurisdictional Planning Process
 - Contributing Data Sets (epi snapshot, resource inventory, needs assessment)
 - Situational Analysis Overview
 - Goals and Objectives
 - Integrated Plan Workplan
 - Signed letters of concurrence from Planning Bodies



SANDIEGOCOUNTY.GOV/HHSA

3

Deliverables + HPG Involvement

Deliverable	HPG Involvement
A CY 2027 – 2031 Integrated Plan that includes all components outlined in the guidance	HPG to review full plan 03/11-03/25
A completed CY 2027 – 2031 Integrated Prevention and Care Plan Guidance Checklist detailing where CDC and HRSA may find each of the required elements.	HPG to review checklist 03/11-03/25
A signed letter from all jurisdictional HIV planning groups/bodies indicating concurrence, concurrence with reservations, or non-concurrence with the plan	HPG Chair to sign on behalf of HPG by 04/10



SANDIEGOCOUNTY.GOV/HHSA

4

Community Engagement



- Conducted town halls with community members
- Conducted key informant interviews
- Incorporated recent needs assessment
- Incorporated feedback from existing community engagement contracts
- Conducted individual stakeholder interviews with staff, providers, and other partners



SANDIEGOCOUNTY.GOV/HHSA

5

Timeline



- 03/11 – Send full Integrated Plan to HPG
- 03/11-03/25 – HPG Review and Compile Feedback
- 03/25 – HPG Meeting, will discuss feedback
- 03/26-04/09 – HSHB Incorporate Feedback
- 04/10 – Send Plan to HPG Chair with checklist and letter of HPG concurrence for signature
- 04/10-04/17 – Package final plan, letters, checklist, etc.
- 04/17– Send to COSD Executives for final signatures



SANDIEGOCOUNTY.GOV/HHSA

6

Key Components



Diagnose	Treat	Prevent	Respond	Engage
3 Objectives	5 Objectives	4 Objectives	3 Objectives	4 Objectives
11 strategies	19 strategies	13 strategies	8 strategies	16 strategies
8 key measures	17 key measures	14 key measures	6 key measures	8 key measures

5 pillars, 19 Objectives, 67 Strategies

SANDIEGOCOUNTY.GOV/HHSA

7

Pillar 1 – Diagnose



Diagnose
3 Objectives
11 strategies
8 key measures

Conduct an assessment of the effectiveness of providing comprehensive HIV/HCV/STI tests completed in a single appointment by 2031

Increase the number of point-of-care testing locations within communities not currently served from one to two by 2028

Increase the number of HIV and HCV tests conducted through County harm reduction services by 20% annually through 2031, from 177 to 367

SANDIEGOCOUNTY.GOV/HHSA

8




Pillar 2 - Treat

Treat
5 Objectives
19 strategies
17 key measures

Increase linkage to HIV treatment from 34% to 50% of newly diagnosed patients within 10 days of diagnosis by 2029

Implement one re-engagement in care quality improvement project by 2029

Maintain a viral suppression rate of at least 95% among Ryan White clients through 2031

Expand support groups to reduce social isolation among people aging with HIV (age 50+) and long-term survivors by 3 by 2031

100% of Ryan White primary care providers report HCV screening, confirmatory RNA results, and treatment status for all RW clients to the Clinical Quality Management team by 2027

SANDIEGOCOUNTY.GOV/HHSA

9




Pillar 3 - Prevent

Prevent
4 Objectives
13 strategies
14 key measures

By 2031, develop a countywide evaluation plan to assess a whole-person approach to HIV prevention services

By 2031, increase to 80% the rate of individuals who adhere to PrEP within 90 days of initiation

Increase access to PrEP to 100% of individuals attending County harm reduction services by 2031

Increase the amount of status neutral housing support services provided annually by 5% beginning in 2027 through 2031

SANDIEGOCOUNTY.GOV/HHSA

10




Pillar 4 - Respond

Respond
3 Objectives
8 strategies
6 key measures

Train 100% of staff required by Epidemiology and Immunization Services Branch's HIV Cluster and Outbreak Detection and Response committee by 2027

Participate in one tabletop simulation exercise by 2028 to assess the capacity to respond to HIV clusters and outbreaks using proper policies and procedures

Collaborate with Surveillance Coordinator to maintain one up-to-date cluster and outbreak response plan annually through 2031

SANDIEGOCOUNTY.GOV/HHSA

11




Pillar 5 - Engage

Engage
4 Objectives
16 strategies
8 key measures

Establish three partnerships with County programs and community-based organization (CBOs) service providers for referral pathways by 2031

Expand outreach visibility by participating in 12 events, including but not limited to three in North Central, three in Inland, and three in South Bay regions, as well as three youth-focused events by 2028

Build consumer recruitment by leveraging the local leadership development program for people living with HIV to initiate eight program graduates into the HPG by 2028

Increase awareness of HPG by expanding contracting language related to education and outreach for Ryan White providers and conducting two orientation sessions per year for providers and clients by 2028

SANDIEGOCOUNTY.GOV/HHSA

12

Considerations



- Due to evolving federal guidance (e.g., executive orders) and plan submission requirements (e.g., page limitations), [the plan reflects a distilled version of planned projects and activities.](#)
- Objectives and strategies reflect [ongoing community needs](#). The majority of the planned projects and activities reflect continuation and expansion of current initiatives.
- The plan reflects a [flexible and adaptable approach](#) for the incorporation of future initiatives.
 - This integrated plan is not the end-all plan for the next five years. HSHB will continue to consult and engage with HPG and community stakeholders to ensure that the plan reflects emerging and future needs.

SANDIEGOCOUNTY.GOV/HHSA

13

Closing



- We want your feedback!
 - 03/11-03/25 – HPG review of full Integrated Plan to compile feedback
 - 03/25 – HPG Meeting to discuss feedback
- Our expectation is not that you need to provide feedback on every page or section (it will be 100 pages long).
- We will send a Microsoft Form with specific questions and corresponding page ranges from the Integrated Plan to facilitate your review.
- On 03/25, we will review the feedback provided and gather any remaining feedback not shared by HPG or the community prior to the meeting.
- Thank you for your ongoing partnership and collaboration!

SANDIEGOCOUNTY.GOV/HHSA

14

Diagnose	Treat	Prevent	Respond	Engage
Conduct an assessment of the effectiveness of providing comprehensive HIV/HCV/STI tests completed in a single appointment by 2031.	Increase linkage to HIV treatment from 34% to 50% of newly diagnosed patients within 10 days of diagnosis by 2029.	By 2031, develop a countywide evaluation plan to assess a whole-person approach to HIV prevention services.	Train 100% of staff required by Epidemiology and Immunization Services Branch's HIV Cluster and Outbreak Detection and Response committee by 2027	Establish three partnerships with County programs and community-based organization (CBOs) service providers for referral pathways by 2031.
Increase the number of point-of-care testing locations within communities not currently served from one to two by 2028.	Implement one re-engagement in care quality improvement project by 2029.	By 2031, increase to 80% the rate of individuals who adhere to PrEP within 90 days of initiation.	Participate in one tabletop simulation exercise by 2028 to assess the capacity to respond to HIV clusters and outbreaks using proper policies and procedures.	Expand outreach visibility by participating in 12 events, including but not limited to three in North Central, three in Inland, and three in South Bay regions, as well as three youth-focused events by 2028.
Increase the number of HIV and HCV tests conducted through County harm reduction services by 20% annually through 2031, from 177 to 367.	Maintain a viral suppression rate of at least 95% among Ryan White clients through 2031.	Increase access to PrEP to 100% of individuals attending County harm reduction services by 2031.	Collaborate with Surveillance Coordinator to maintain one up-to-date cluster and outbreak response plan annually through 2031.	Build consumer recruitment by leveraging the local leadership development program for people living with HIV to initiate eight program graduates into the HPG by 2028.
	Expand support groups to reduce social isolation among people aging with HIV (age 50+) and long-term survivors by 3 by 2031.	Increase the amount of status neutral housing support services provided annually by 5% beginning in 2027 through 2031.		Increase awareness of HPG by expanding contracting language related to education and outreach for Ryan White providers and conducting two orientation sessions per year for providers and clients by 2028.
	By 2027, 100% of Ryan White primary care providers report HCV screening, confirmatory RNA results, and treatment status for all RW clients to the Clinical Quality Management team by 2027.			

MEMBERSHIP COMMITTEE



*Wednesday, November 5, 2025, 10:00 AM – 12:00 PM
County Operations Center,
5560 Overland Ave, San Diego, CA 92123.
Conference Room 172*

A quorum for this meeting is three (3)

Committee Members: Felipe Garcia-Bigley (Chair) | Lori Jones | Rhea Van Brocklin | Michael Wimpie

ORDER OF BUSINESS

Agenda Item	Discussion/Action	Follow-Up
1. Call to order	Felipe Garcia-Bigley called the meeting to order at 10:00AM and noted the presence of an in-person quorum.	
2. Public Comment on non-agenda items (for Members of the public)	None	
3. Sharing our concerns (for committee members)	None	
4. ACTION: Review and approve the November 5, 2025 meeting agenda	Motion: Approve the Membership agenda for November 5, 2025, with the following correction: remove item 6c Motion/Second/Count (M/S/C): Van Brocklin/Wimpie/3-0 Abstentions: Garcia-Bigley Motion carries	
5. ACTION: Review and approve the September 10, 2025 Membership minutes	Motion: Approve the Membership minutes for September 10, 2025, with the following correction: list Garcia-Bigley as absent M/S/C: Wimpie/ Van Brocklin/3-0 Abstentions: Garcia-Bigley Motion carries	HPG SS will update correction.
6. New Business		
a. ACTION: Approve Pamuela Halliwell for Seat #20	Motion: Approve HPG Appointment, Pamuela Halliwell, Seat #20, Mental Health Provider M/S/C: Van Brocklin/Jones/3-0 Abstentions: Garcia-Bigley Motion carries	
b. ACTION: Approve Joseph Westcott for Seat #21	Motion: Approve HPG Appointment, Joseph Westcott, Seat #21, Substance Abuse Treatment Provider. M/S/C: Jones/ Wimpie/3-0	

MEMBERSHIP COMMITTEE

Agenda Item	Discussion/Action	Follow-Up
	<p>Abstentions: Garcia-Bigley Motion carries</p>	
<p>c. ACTION: Approve Esteban Duarte for Seat #27</p>	<p>Tabled</p>	
<p>d. ACTION: Approve Appointment, Sergio Luna, for Seat #42</p>	<p>Motion: Approve HPG Appointment, Sergio Luna, Seat #42 HIV Testing Representative with the following correction: Seat #27 Prevention Services Consumer M/S/C: Jones/ Wimpie/3-0 Abstentions: Garcia-Bigley Motion carries</p>	
<p>e. Review and Discussion: 2026 Membership workplan</p>	<p>Workplan to remain a "living document" adaptable to unforeseen needs or requests. Draft timeline includes: January–February: <ul style="list-style-type: none"> • Review and revise seat descriptions (focus on recruitment and clarity). • Remove unnecessary internal references to make them more user-friendly for outreach. March–May: <ul style="list-style-type: none"> • Review and update membership guidelines (attendance policy, process clarifications). • Staggered to avoid overloading members with concurrent major revisions. June: <ul style="list-style-type: none"> • Review/update membership expectations document. July–August: <ul style="list-style-type: none"> • Review membership application packet and interview questions. October: <ul style="list-style-type: none"> • Review mentoring processes, evaluate effectiveness, and make revisions. November–December: <ul style="list-style-type: none"> • Develop a work plan for the following calendar year 2027. Monthly Standing Items: Process applications for appointment, recruitment, and committee assignment.</p>	

MEMBERSHIP COMMITTEE

Agenda Item	Discussion/Action	Follow-Up
f. Review and Discussion: Develop HPG member Seat description and Responsibilities	<ul style="list-style-type: none"> • Remove the “Discussion and References” column. • Add seat number under “Membership Category”. 	HPG SS will bring edits to next meeting.
7. Old Business		
a. HPG Member recruitment update	<p>As of November 5, 2025, we have 24 members.</p> <p>Updates:</p> <ul style="list-style-type: none"> • Applications Received in 2025: 15 <ul style="list-style-type: none"> ○ 8 in process ○ 4 incomplete ○ 3 new applications <p>Term Expired:</p> <ul style="list-style-type: none"> • Cinnamen Kubricky: Seat 4 - General Member 11/02/25- Pending HPG Meeting minutes approval 	
i. Vacant Seats	<p>As of November 5, 2025, there are 20 vacant seats</p> <ul style="list-style-type: none"> • 10 General Member seats • 20- Mental Health Provider • 21- Substance Abuse Treatment Provider • 24- Hospital Planning Agency or Health Care Planning Agency • 27- Prevention Services Consumer • 28- State Government-State Medicaid • 34- Board of Supervisors Designee: District 2 • 42- HIV Testing Representative • 44- 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 	
ii. New Committee Members	<ul style="list-style-type: none"> • Ben Ignalino is interested in Strategies and Standards. • Sergio Luna is interested in Community Engagement Group. 	
b. HPG Membership Demographics	Current HPG Demographics: reviewed and recruitment efforts were discussed.	
Routine Business		

MEMBERSHIP COMMITTEE

Agenda Item	Discussion/Action	Follow-Up
a. HIV Planning Group Attendance	HPG Support Staff sends reminders to members who have missed three (3) consecutive or six (6) meetings within 12 months.	
b. Committee Attendance	None	
c. Getting to Zero (GTZ) Community Engagement Project i. Review Outreach and Event Engagement Efforts	<p>Reviewed 2025 HPG Outreach Calendar:</p> <ul style="list-style-type: none"> • Outreach paused for the holidays. • December Event: <i>Come Home for the Holidays</i>. <p>Community Engagement Group updates:</p> <ul style="list-style-type: none"> • Share CEG flyer with provider offices to increase participation. • Prefer presentations from community partners rather than County staff; emphasize a whole person’s approach. • CEG members will attend CARE in December to meet participants. • Explore hosting CEG meetings at facilities outside County buildings. • Align presentations with HIV Awareness Days to boost attendance. • Plan a Resource Tabling Event for 2026. 	
8. Future agenda items for consideration	None	
9. Announcements	<ul style="list-style-type: none"> • The 36th Dr. A. Brad Truax Award Ceremony and Reception is taking place on Monday, December 1, 2025 at 3:00 PM – 5:00 PM. It will be held at The Center. 	
10. Next Meeting Date	<p>Date: Wednesday, December 10, 2025 Time: 11:00 AM –1:00 PM Location: County Operations Center, 5530 Overland Ave, San Diego, CA 92123 Conference Room 124</p>	
12. Adjourn	The meeting adjourned 12:37pm.	

MEDICAL STANDARDS AND EVALUATION COMMITTEE (MSEC)



Tuesday, November 04, 2025, 4:00 PM – 5:30 PM
County Operations Center
5530 Overland Ave, San Diego, CA 92123 (Room 124)

A quorum for this meeting is seven (7).

Committee Members Present: Dr. Jeannette Aldous (Co-Chair) | Dr. Fadra Whyte | Dr. Rosemary Garcia | Mikie Lochner | Shannon Paugh | Karla Quezada-Torres | Edith Saville | Dr. Stephen Spector | Dr. Winston Tilghman

Committee Members Absent: Dr. Laura Bamford | Dr. David Grelotti (Chair) | Yessica Hernández | Dr. Martha Rodriguez

Agenda Item	Action	Follow-up
1. Welcome and moment of silence, comments from the Chair	<p>The chair called the meeting to order at 4:03 PM and introductions were done. A moment of silence was observed.</p> <p>Motion: Approve Dr. Tilghman to chair the November 04, 2025, MSEC meeting. Motion/Second/Count (M/S/C): Lochner/Spector/7-0 Discussion: Abstentions: Tilghman Motion Carries</p>	
2. Public Comment	None	
3. Sharing our Concerns	<ul style="list-style-type: none"> A committee member encouraged all service providers to notify patients in advance of any changes to their medical insurance. 	
4. Action: Approve the consent MSEC agenda (which includes the November 04, 2025 agenda and the September 09, 2025 minutes)	<p>Motion: Approve the consent MSEC agenda (which includes the November 04, 2025 agenda and the September 09, 2025 minutes)</p> <p>M/S/C: Lochner/Saville/7-0 Discussion: Abstentions: Tilghman Motion Carries</p>	
5. Old Business:		
a. None.		

MEDICAL STANDARDS AND EVALUATION COMMITTEE (MSEC)

Agenda Item	Action	Follow-up
6. New Business:		
<p>a. Discussion: Review Ryan White Quality Assurance Chart Review tool</p>	<p>Jeanette Johnson presented the Ryan White Quality Assurance Chart Review tool. The committee reviewed the tool and the following discussion occurred:</p> <ul style="list-style-type: none"> • The only change to the review tool was to Question 13, which was revised to better capture dental visits or referrals occurring up to six months before or after the review period by adding “If yes, date(s)___”. A claims check will be used to verify documentation and credit providers accordingly. • Aside from this dental-related update, the review tool remains unchanged from last year. <p>Discussion: Committee members..</p> <ul style="list-style-type: none"> • Discussed challenges in capturing dental data due to separate EHR systems at many sites. • Requested clarification of the definition of viral suppression and recommended that the definition be added directly to the review tool, not only included in the report. • Confirmed for question 14 that it is to clarify if the two screenings were completed. 	<p>HPG SS will follow up regarding a presentation for February meeting.</p>
<p>b. Discussion: Ryan White Part A Mental Health and Psychiatric Medication Management Services</p>		
<p>i. Mental Health Service Utilization Report</p>	<p>Maritza Herrera presented on the Mental Health Service Utilization Report and the following discussion occurred:</p> <ul style="list-style-type: none"> • A clarification that there was not a lack of services provided, but rather a lack of utilization, and that COVID may have impacted this shift in data. 	

MEDICAL STANDARDS AND EVALUATION COMMITTEE (MSEC)

Agenda Item	Action	Follow-up
	<ul style="list-style-type: none"> • A clarification that the data reflected Ryan White consumers only and did not include individuals receiving care from other sources; therefore, clients accessing services through Medi-Cal may impact the utilization data. • A confirmation through a quick analysis that the clients that are in service seem to be getting the same level of service over time. • A question regarding whether there is a way to capture individuals who are seeking mental health services but are not reporting this to their primary care provider. • A suggestion to examine the current service landscape to better understand availability and identify gaps that have not yet been fully addressed. • A clarification that the complexity of accessing mental health services is very high, highlighting challenges such as navigating multiple programs, referrals, and barriers, and emphasizing the importance of asking the correct questions to accurately capture data. • A recommendation to consider adding key access factors to the standards, such as transportation, response times, and other logistical barriers. • A suggestion to add clear expectations to the standards for both providers and patients, including timelines and an explanation of how the process works. • A clarification that many clients and patients prefer not to go to multiple locations for services, 	

MEDICAL STANDARDS AND EVALUATION COMMITTEE (MSEC)

Agenda Item	Action	Follow-up
	<p>which can lead to discomfort and missed appointments or referrals.</p> <ul style="list-style-type: none"> • A clarification from County staff that the needs assessment did include questions related to access, with common responses including not knowing where to find services, lack of financial resources, housing instability, and feeling healthy. 	
<p>ii. Mental Health and Psychiatric Medication Management Service Standards</p>	<p>Tabled</p>	
<p>iii. Establish plan to review current service landscape and identify data, stakeholders, and subject matter experts to inform service standard revisions</p>	<ul style="list-style-type: none"> • A suggestion to reference the Hospital Association of San Diego and Imperial County (HASIC) community needs assessment, conducted every three years and involving all 14 hospitals and approximately 1,200 community members, to help identify community concerns. • A suggestion to consider creating a working group or task force through HPG with a defined timeline to review recipient office data and potential surveys to better understand the service landscape. • A caution to avoid making changes or “fixing” perceived issues before fully understanding the problem and determining what actions would be most helpful. • A concern regarding potential survey fatigue and a suggestion to invite consumers to meetings to provide feedback as an alternative. • A clarification that many clients report the issue is not with the standards themselves but with access to services. 	<p>HPGSS will send out HASIC survey, Ryan White annual survey, service standards document and request for individuals to find SME to attend the next meeting and reach out to consumers to attend the next meeting.</p>

MEDICAL STANDARDS AND EVALUATION COMMITTEE (MSEC)

Agenda Item	Action	Follow-up
	<ul style="list-style-type: none"> • A question regarding whether the goal of the mental health services standards is to define the standard of care once patients are accessing services, similar to dental standards, or to address barriers preventing access to care. • A suggestion to have the committee complete the standards first and then form a working group to address access and implementation issues. • A suggestion to utilize the existing Ryan White patient survey by service category to better understand access issues, while remaining mindful of barriers to participation in working groups. 	
7. Other Updates:		
<p>a. STD and Mpox Update (Dr. Tilghman)</p>	<p>The committee reviewed the County of San Diego Monthly STD Report in packet.</p> <ul style="list-style-type: none"> • 2024 STI surveillance data is still in development. An update will be provided once the data is finalized. • Three recent, unconnected cases of Clade I Mpox were identified in Los Angeles County (one in Long Beach and two managed by LA County). All 3 California cases were hospitalized and are recovering. Public health investigations were conducted, and general public risk is currently considered low. • The vaccine remains effective against both Clade I and Clade II. Currently, no booster doses are recommended for those who have completed the series. 	
<p>b. Committee member updates</p>	<p>None</p>	
<p>8. Future agenda items for consideration</p>	<p>None</p>	

MEDICAL STANDARDS AND EVALUATION COMMITTEE (MSEC)

Agenda Item	Action	Follow-up
9. Announcements	<ul style="list-style-type: none">The Center will be hosting a Thanksgiving Day dinner for those who do not have a place to go to enjoy a warm meal with community.	
10. Next meeting date:	Date: February 10, 2026, Time: 4:00 PM – 5:30 PM Location: TBD	
11. Adjournment	The meeting was adjourned at 5:34	

COMMUNITY ENGAGEMENT GROUP



Wednesday, December 10, 2025, from 3:00 PM – 5:00 PM
Mission Valley Branch Library
2123 Fenton Pkwy, San Diego, CA 92108

A quorum for this meeting is three (3).

Committee Members Present: Michael Donovan (Chair) | Jen Lothridge (Co-Chair) | Veronica Nava

Committee Members Absent: Sergio Luna

MEETING MINUTES

Agenda Item	Discussion/Action	Follow-Up
1. Call to order, roll call, comments from the chair, and a moment of silence	<p>The chair called the meeting to order at 3:03PM and noted the presence of an in-person quorum.</p> <p>Chair Comments: The chair wished everyone happy holidays this month.</p>	
2. Review Background, Mission Statement, Goals, and Agreement of Meeting Decorum	Committee members read the Mission Statement, the Community Engagement Group (CEG) Charge, and meeting decorum.	
3. Introductions (Name, Role with HPG/Consumer, Pronouns), Icebreaker	Members and participants introduced themselves.	
4. Public comment (for members of the public)	<p>The following comments were made...</p> <ul style="list-style-type: none"> • A concern that allowing public voting in past meetings increased participation and stated that the current format may discourage community involvement. • An interest in re-engaging after reduced participation during the pandemic and a desire to become active again. • A question regarding the process of capturing public comments during HPG committee meetings. • Support staff member clarified that meeting minutes are approved by HPG before being posted publicly, with action items and follow-ups tracked in 	

COMMUNITY ENGAGEMENT GROUP

Agenda Item	Discussion/Action	Follow-Up
	separate columns.	
5. Sharing our concerns (for committee members)	<ul style="list-style-type: none"> A committee member thanked attendees of all ages for participating, expressed appreciation for the strong turnout, and encouraged continued involvement in future meetings. 	
6. ACTION: Approve the consent CEG agenda (which includes the December 10, 2025 agenda and the November 12, 2025 minutes)	<p>Motion: Approve the consent CEG agenda (which includes the December 10, 2025 agenda and the November 12, 2025 minutes)</p> <p>Motion/Second/Count (M/S/C): Nava/Lothridge/2-0</p> <p>Abstention(s): Donovan</p> <p>Motion carries</p>	
Follow-Up Items from minutes:	None.	
7a. Committee Updates		
I. HIV Planning Group (HPG)	The committee’s December meeting was canceled. January, the committee will introduce new members and discuss the 12-month schedule for all committees.	
II. Strategies and Standards Committee	The committee’s December meeting was cancelled due to conflict with the annual Truax Awards Ceremony. Their next meeting is scheduled for February 3 rd , 2026.	
III. Steering Committee	The committee’s next meeting is January 9 th , 2026.	
IV. Membership Committee	The committee is recruiting new general members; four (4) applications pending Clerk of the Board approval. They will meet again in January a week late on the 21st.	
V. Priority Settings and Resource Allocation Committee (PSRAC)	The committee did not meet in December; next meeting is scheduled for January 8 th , 2026.	
VI. Medical Standards and Evaluation Committee (MSEC)	The committee is reviewing mental health service standards and psychiatric medication management. Consumers are encouraged to participate, with an online option available. Their next meeting will be held on February 10 th , 2026.	
7b. Community Updates		
I. CARE Partnership	The committee held a holiday self-care activity emphasizing mindfulness. 2026 meeting schedule flyers available for attendees.	

COMMUNITY ENGAGEMENT GROUP

Agenda Item	Discussion/Action	Follow-Up
II. HIV Housing Committee/Housing Opportunities for Persons with AIDS (HOPWA)	The next meeting will be held on January 21, 2026, at 11:00 AM in the Sycamore Room at Housing and Community Development Services (HCDS), 3989 Ruffin Road, San Diego, CA 92123. Meetings occur on the 3rd Wednesday of every other month.	
8. New Business		
a. Review 2026 CEG workplan	<p>Workplan:</p> <ul style="list-style-type: none"> • April – Prep for Happyville • May – Diversionary • June – Happyville Exercise and reach out to CARE Partnership for collaboration • Event focused on aging with HIV (55+) <p>Potential Outreach Events:</p> <ul style="list-style-type: none"> • National Faith HIV/AIDS Awareness Day • 10/16 – Binational HIV Conference Event • National Transgender HIV Testing Day with VIDA • National HIV Testing Day with VIDA • Outreach at The Center’s HIV support groups 	
9. Old Business		
a. Committee Attendance	None.	
10. Announcements	Holiday Party.	
11. Next meeting date	<p>Next Meeting: Wednesday, Wednesday, January 21, 2026, from 3:00 PM – 5:00 PM Location: Southeastern Live Well Center; 5101 Market St, San Diego, CA 92114; Tubman Chavez Room C</p>	
12. Adjournment	Meeting was adjourned at 3:54PM.	

COMMUNITY ENGAGEMENT GROUP



*Wednesday, January 21, 2026, from 3:00 PM – 5:00 PM
County Operations Center (COC); 5530 Overland Ave, San
Diego, CA 92123 (Training Room 124)*

A quorum for this meeting is three (3).

Committee Members Present: Michael Donovan (Chair) | Jen Lothridge (Co-Chair) | Sergio Luna | Veronica Nava

MEETING MINUTES

Agenda Item	Discussion/Action	Follow-Up
1. Call to order, comments from the chair, and a moment of silence	<p>The chair called the meeting to order at 3:05PM and noted the presence of an in-person quorum.</p> <p>A moment of silence was observed. The Chair made the following announcements:</p> <ul style="list-style-type: none"> - Happy new year to the committee and members of the public. - The committee will be restructuring this year to have four meetings that will be replaced by special events organized by a community-based organization in San Diego. - March will be hosted by Christie's Place and May will be hosted by Diversionary Theater. 	
2. Review Background, Mission Statement, Goals, and Agreement of Meeting Decorum	Committee members read the Mission Statement, the Community Engagement Group (CEG) Charge, and Meeting Decorum.	
3. Introductions (Name, Role with HPG/Consumer, Pronouns), Icebreaker	Members and participants introduced themselves.	
4. Public comment (for members of the public)	None.	
5. Sharing our concerns (for committee members)	None.	
6. ACTION: Approve the	Motion: Approve the consent CEG	

COMMUNITY ENGAGEMENT GROUP

Agenda Item	Discussion/Action	Follow-Up
consent CEG agenda (which includes the January 21, 2026 agenda and the December 10, 2025 minutes)	agenda (which includes the January 21, 2026 agenda and the December 10, 2025 minutes) Motion/Second/Count (M/S/C): Lothridge/Nava/2-0 Abstention(s): Donovan Motion carries	
Follow-Up Items from minutes:	None.	
7a. Committee Updates		
I. HIV Planning Group (HPG)	The committee will be meeting next week and voting to accept the recommended reallocations that were approved at this month's Priority Setting and Resource Allocation Committee meeting. They will also have a presentation on prevention from the HIV, STD, and Hepatitis Branch.	
II. Strategies and Standards Committee	The committee will be meeting in February to discuss food vouchers and continue the discussion on PARS.	
III. Steering Committee	The committee met earlier this month to discuss an HPG retreat for the chairs, and a separate retreat for the planning body. Their next meeting will be held in March.	
IV. Membership Committee	The committee could not meet this month. They will be meeting in February to discuss seat descriptions and create an accessible document for outreach and recruitment.	
V. Priority Settings and Resource Allocation Committee (PSRAC)	The committee reviewed the data and expenditure reports and accepted the final reallocations for this fiscal year. More funds were allocated towards Emergency Financial Assistance.	
VI. Medical Standards and Evaluation Committee (MSEC)	The committee's next meeting is in February. They will be reviewing and updating the Mental Health and Psychiatric Medication Management Service Standards. They are requesting stakeholders, providers, and consumers be part of the	

COMMUNITY ENGAGEMENT GROUP

Agenda Item	Discussion/Action	Follow-Up
	discussion.	
7b. Community Updates		
I. CARE Partnership	CARE Partnership met in January and had a presentation on the Getting to Zero (GTZ) app. The group has requested presentation suggestions for the 2026 calendar year.	
II. HIV Housing Committee/Housing Opportunities for Persons with AIDS (HOPWA)	Lothridge provided the following updates: <ul style="list-style-type: none"> - Fraternity House signed a lease for 2 new units (4 beds). - Townspeople has 6 spaces available for their emergency housing and will begin their Enhanced Care Management (ECM) soon. - Father Joes has 15 openings. - Stepping Stone has 1 opening. - Being Alive is still providing utility and moving support. - HOPWA waitlist will close on 2/20. 	
8. Old Business		
a. Committee Attendance	None.	
9. New Business		
a. Discussion: Review 2026 CEG workplan	February – Collaborate with Malcom X Library and/or The Center Black Services July – Service Standards Exercise August – No Meeting October – No Meeting Prevention Collaboration November – Medical/Medicaid	
b. ACTION: Review and approve the HIV Planning Group presentation	The committee reviewed the current HIV Planning Group presentation and provided the following feedback: <ul style="list-style-type: none"> - Incorporate data at the beginning of the presentation as a call to action. - Add an overview of the Ryan White Program and funding parts. - Add a slide on the Strategies & 	

COMMUNITY ENGAGEMENT GROUP

Agenda Item	Discussion/Action	Follow-Up
	Standards Committee. - Make CEG slide after PSRAC. - Incorporate more status neutral language. - Add a fun meme at the end to encourage involvement.	
10. Announcements	- Diversionary Theater will be collaborating with POZabilities for 5-6 HIV awareness benefits in May. - A Sweete Affair a POZabilities fundraiser will be held on February 21 st . - Big Gay Picnic will return to Balboa Park on February 8 th .	
11. Next meeting date	Next Meeting: Wednesday, February 18, 2026, from 3:00 PM – 5:00 PM Location: North Clairemont Library; 4616 Clairemont Drive, San Diego, CA 92117	
12. Adjournment	Meeting was adjourned at 4:26PM.	

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 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. M/S/C: Davenport/Aguilar/7-0 Discussion: The policy aligns with the Medical Standards and Evaluation Committee (MSEC). 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 Discussion: Abstentions: 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 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.	

MEETING MINUTES

CARE PARTNERSHIP FOR WOMEN, CHILDREN, AND FAMILIES

Monday, December 08, 2025 11:00 AM – 1:00 PM

Southeastern Live Well Center

5101 Market St, San Diego, CA 92114; (Tubman Chavez Room A)

Agenda Item	Action	Follow-up
<ul style="list-style-type: none"> • Welcome and introductions 	Johneisha Jones started the meeting at 11:03AM, and the participants introduced themselves online.	
<ul style="list-style-type: none"> • Comments from the Chair/ <ul style="list-style-type: none"> ▪ Respectful Engagement 	<ul style="list-style-type: none"> • The Chair reminded attendees to check in on individuals who may not have family to spend the holidays with, noting that this time of year can be especially difficult and that outreach is important. <p>Respectful engagement guidelines read by Johneisha Jones.</p>	
<ul style="list-style-type: none"> • Moment of silence 	A moment of silence was observed, remembering those who have passed and those living with or affected by HIV/AIDS and/or COVID-19.	
<ul style="list-style-type: none"> • Review Mission Statement 	Mission Statement read by Patty Lopez.	
<ul style="list-style-type: none"> • Public comment/ Sharing our Concerns 	<ul style="list-style-type: none"> • The Chair of the HIV Planning Group congratulated Maria Vergara for winning the Truax Service Award for HIV Education, Prevention, and/or Counseling and Testing. Maria was acknowledged and recognized for her community leadership. 	
<ul style="list-style-type: none"> • Review & approval of the meeting agenda 	The agenda for December 8, 2025, was approved by consensus as presented.	
<ul style="list-style-type: none"> • Review & approval of the meeting minutes 	The minutes for November 17, 2025, was approved by consensus as presented.	
<ul style="list-style-type: none"> • Discuss 2026 Training Opportunities/ Updates 	<ul style="list-style-type: none"> • January – Christie’s Place • March – Mother, Child & Adolescent Program (MCAP) 	
<ul style="list-style-type: none"> • Old Business 		
<ul style="list-style-type: none"> a. Discussion: 2026 A Women’s Voice Conference 	None.	
<ul style="list-style-type: none"> • New Business 		
<ul style="list-style-type: none"> a. Presentation: Cassandra Vieten, PhD, clinical Professor at UCSD, Self-Care 	<p>Cassandra Vieten introduced herself and led a brief mindfulness exercise after discussing the following:</p> <ul style="list-style-type: none"> • What is Mindfulness • Benefits of mindfulness practice • Default vs. desired state • What is a mindful individual 	

Agenda Item	Action	Follow-up
<ul style="list-style-type: none"> • Reports 		
<ul style="list-style-type: none"> a. Women and Youth Out of Care Group Discussion 	<ul style="list-style-type: none"> • The Chair also encouraged everyone to remember children during the holiday season and highlighted the availability of several toy drives. 	
<ul style="list-style-type: none"> a. HIV Planning Group (HPG) Planning Group Support Staff 	<p>HPG Support staff and members provided the following updates:</p> <ul style="list-style-type: none"> • CARE Partnership 2026 flyer schedule is updated and posted on the website. • The Chair noted that there are eight (8) open seats for individuals with lived experience and encouraged consumers to get involved. The Chair emphasized that the HPG’s work is centered on addressing the needs and priorities of the HIV community in San Diego County. • CEG Holiday Party: December 10 from 3-5PM at the Mission Valley Library. • HPG Newsletter: Subscribe to receive updates on community events, research studies, and HPG meeting announcements. Email: HPG.HHSA@sdcounty.ca.gov 	
<ul style="list-style-type: none"> b. Ryan White Part D 	<ul style="list-style-type: none"> • Primero Yo: Support group on Fridays with Zoom and In-Person option. • Seeking Safety: Support group available in both English and Spanish. • A request was made to hear from individuals in the community about the gaps and support needed. 	
<ul style="list-style-type: none"> c. Research 		
<ul style="list-style-type: none"> i. AIDS Clinical Trials Group (ACTG)/ Antiviral Research Center (AVRC) 	<ul style="list-style-type: none"> • HIV prevention study: (16 years+, all genders) once yearly lenacapavir injection. • Monday, December 8th at 5:30PM Community Advisory Board (CAB) meeting at the AVRC with a virtual attendance option. 	
<ul style="list-style-type: none"> ii. HIV Neurobehavioral Research Program (HNRP) 	<ul style="list-style-type: none"> • Intersection Margins: A Study Exploring Multiple Discrimination, Methamphetamine Use, and Resilience Among People with HIV. (18+ living in Southern California). 	
<ul style="list-style-type: none"> iii. Mother, Child & Adolescent Program (MCAP) 	<ul style="list-style-type: none"> • Upcoming study focused on developing AI-based tools to support people living with HIV and is seeking both providers and people living with HIV, particularly individuals ages 18–30. • UPLIFT Study: Focus on attitudes toward chestfeeding while living with HIV. For 	

Agenda Item	Action	Follow-up
	pregnant individuals, regardless of whether they plan to chestfeed.	
iv. UC San Diego Moores Cancer Center	None.	
13. Announcements	<ul style="list-style-type: none"> • Christie’s Place will be closed from December 19, 2025, until January 4, 2026. 	
14. Next Meeting Date	Next CARE Partnership Meeting- Monday, January 12, 2026 In-Person Location: Southeastern Live Well Center; 5101 Market St, San Diego, CA 92114; (Tubman Chavez Room A)	
15. Adjournment	Meeting adjourned at 12:21pm.	

Office of AIDS and AIDS Drug Assistance Program
February 2026 Updates

AIDS Drug Assistance Program

- ADAP Enrollment Worker Advisory Committee (AEWAC): The AEWAC meeting scheduled for this month was cancelled due to there being no agenda items from committee members. The next bi-monthly meeting is scheduled for April 9th.

Other Updates

- Ending the Syndemic Symposium 2026 Please save the date for the 5th Annual Ending the Syndemic Symposium 2026! This year's free virtual symposium will be held September 29-October 1st from 12-4 PM each day. Speakers will be addressing three of the social determinants on which our [Strategic Plan](#) and [Implementation-Blueprint](#) are organized: Racial Equity, Housing First and Health Access for All.

- Ending the Syndemic Workshop Series. Ending the Syndemic partners are invited to a workshop on the California HIV/HCV/STI Strategic Plan's Implementation Blueprint on February 27th, 2026, at 11:30 AM. If you attended our first workshop series, this second series will provide specific examples of existing programs that support the work toward implementing the strategies in the plan by social determinant of health. The kickoff workshop features presentations from counties that have adapted the blueprint about how they succeeded, plus reviewing the technical assistance resource portal and a refresher on how to seek TA. The California Department of Public Health, Office of AIDS (CDPH-OA) and the Sexually Transmitted Disease Control Branch (STDCB) are pleased to continue this critical work in 2026.

Workshop Registration:

https://us06web.zoom.us/meeting/register/_DlxmCekQ2mA_uW0L7T7ag

Save the Dates for future workshops:

March 27th 11:30-12:30 Racial Equity and Economic Justice

April 10th 11:30-12:30 Health Access for All and Mental Health and Substance Use

April 24th 11:30-12:30 Housing First and Stigma Free

- Live Virtual HIV PrEP Navigation Certification (HIVPNC). California providers, we would like to share a special opportunity to enhance your knowledge and skills to deliver inclusive, affirming PrEP navigation services! Join HealthHIV online for a two-part training on Tuesday, April 21, 2026 (Part 1) and Thursday, April 23, 2026 (Part 2) from 9:30 to 1:00 PM Pacific Standard Time (PST), respectively, to earn the free HIV PrEP Navigation Certification (HIVPNC). The HIVPNC is the only national certification program that prepares providers and allied health professionals to guide community members in initiating, using, and staying engaged in PrEP care. Complete the live virtual training and gain new skills, CE credits, an "HIVPNC" designation recognizing your certification in PrEP navigation, and a listing alongside hundreds of others in the Certified HIV PrEP Navigator national online directory.

For more information and to register visit: <https://tinyurl.com/eakapbxr>.

- HIV Test Counselor Training Update. Core HIV modules of Successful Approaches to Counseling and Testing – Online and Proficiency (SACT-OP) are now live and available for registration. Participants can register for both the online and in-person trainings at www.sact-op.org. The core HIV training includes training on administering OraQuick HIV/HCV and INSTI rapid tests. As a reminder, any site planning to implement new test technologies must update their quality assurance plan and CLIA waiver (at time of renewal) to include new tests.

Supplemental courses for HCV and syphilis are in final stages of development and should be available in the coming months. Once all courses are launched, they will be available in both English and Spanish. For questions regarding registration, please contact UCLA at

Elizabethwu@sonnet.ucla.edu. LHJs wishing to host an in-person proficiency can contact UCSF Alliance Health Project at stephen.scott@ucsf.edu. All other questions can be sent to Karin Hill at karin.hill@cdph.ca.gov.

- **Harm Reduction.** OA sent out a Dear Colleague letter to update stakeholders about two new laws, effective January 1, 2026. The first makes permanent laws that allow pharmacists and physicians to provide or sell syringes a prescription and protects the people who receive them from prosecution under CA's paraphernalia laws. The second prohibits cities and counties from passing ordinances that bar service providers from providing supplies and services to unhoused people. This new law may be especially relevant to any organization that offers street outreach.
- **HIV Care Connect.** The 2025 Ryan White Services Report (RSR) is available in HIV Care Connect (HCC). Please review your data to prepare for submission but hold off on uploading to HRSA's RSR Web System. HCC's development team is addressing a few items in the RSR. We will update the banner at the top of the screen once everything is ready for submission. For questions or concerns, please contact CEMS@cdph.ca.gov.

OA Voice January Edition. [The Office of AIDS \(OA\) Voice Newsletter: January 2026 Issue](#)