

SAN DIEGO HIV PLANNING GROUP (HPG) PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)

MEETING PACKET

THURSDAY, May 9, 2024, 3:00 PM - 5:00 PM

Southeastern Live Well Center (Tubman Chavez Room A), 5101 Market Street, San Diego, CA 92114

The Charge of the Priority Setting and Resource Allocation Committee: To review, analyze and consider available data and make recommendations to the HIV Planning Group based upon that data regarding service priorities, service delivery, and funding allocation by service category, including the commitment to addressing racial/ethnic disparities for Black/African American MSM (retention in care, viral load suppression), Latinx MSM (late and simultaneous diagnoses) and transgender/Non-Binary persons (lack of data and non-representative participation).

TABLE OF CONTENTS

Document	Page Number(s)
Directions and Parking Instructions to the Southeastern Live Well Center	002
Conflict of Interest: Priority Setting & Resource Allocation Committee	003
05/9/2024 PSRAC Agenda	004 - 006
04/11/2024 PSRAC Minutes	007 - 011
HIV/AIDS Epidemiology Data PowerPoint	012 - 030
PSRAC Attendance	031
Service Utilization Report	032
Appendix	
AB 2449: Table, Cause/Emergency Circumstance Information	034 - 036
HIV Needs Assessment Survey Flyer English	037
HIV Needs Assessment Survey Flyer Spanish	038
2024 HIV Planning Group Retreat Flyer	039

Meeting Location & Directions:

Priority Setting & Resource Allocation Committee
Thursday, May 9, 2024

3:00 PM - 5:00 PM

Southeastern Live Well Center 5101 Market St, San Diego, CA 92114 Tubman Chavez Room A



Visitor/Employee parking available in parking structure. Main entrance can be accessed by exiting the parking structure on the 2nd floor and walking down the sidewalk to the left.

FROM I-805 SOUTH:

- 1. Head northwest on I-805 North.
- 2. Take exit 12B for Market St.
- 3. Turn right onto Market St.
- 4. The destination will be on your right.

FROM I-805 NORTH:

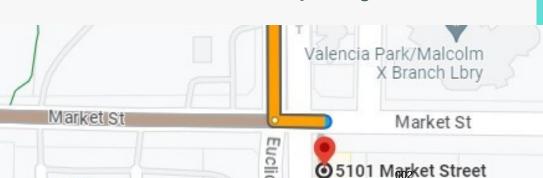
- 1. Head southeast on I-805 South.
- 2. Take exit 13A for CA-94-E/M L King Jr. Fwy.
- 3. Merge onto CA-94 E.

- 4. Take exit 4A for Euclid Ave.
- 5. Turn left onto Euclid Ave.
- 6.Use the left 2 lanes to turn left onto Market St.
- 7. The destination will be on your right.

PUBLIC TRANSPORTATION

MTS Trolley: Orange Line

MTS Bus Routes: 3, 4, 5, 13, 60, 916, 917 and 955



Southeast Live Well Center

Market St



Conflict of Interest Priority Setting and Resource Allocation Committee

Davenport, Beth Non- Man: Med Peer Fleming, Tyra None Garcia-Bigley, EIS:	Minority AIDS Initiative Intervention Services, onal Services
• Non- Man: • Med • Peer Fleming, Tyra • Non- Garcia-Bigley, • EIS:	Medical Case agement Services ical Case Management Navigation Minority AIDS Initiative Intervention Services, onal Services
Man:	Agement Services ical Case Management Navigation Minority AIDS Initiative Intervention Services, onal Services
Fleming, Tyra • None Garcia-Bigley, • EIS:	Minority AIDS Initiative Intervention Services, onal Services
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Fleming, Tyra • None Garcia-Bigley, • EIS:	Minority AIDS Initiative Intervention Services, onal Services
Garcia-Bigley, • EIS:	Minority AIDS Initiative Intervention Services, onal Services
	/ Intervention Services, onal Services
E.P.	onal Services
Felipe • Early	
Regi	
• Hom	e-Based Health Care
Coor	dination
• Med	ical Case Management
• Men	tal Health
Cour	nseling/Therapy
• Men	tal Health: Psychiatric
Med	cation Management
Non-	Medical Case
Man	agement Service
Oral	Health
	atient Ambulatory
Heal	th Services: Medical
Spec	cialty
Outp	atient Ambulatory
Heal	th Services: Primary
Care	•
	Navigation (Referral for
	thcare and Support
	ices)
	sportation: Assisted and Assisted
Highfill, Pam • Subs	stance Use Treatment:
	dential
Jacobs, Dr. • None Delores	Э
Kubricky, • None	Э
Cinnamen	
Mendoza • None	9
Aguirre, Marco Mueller, Chris • Med	ical Casa Managament
I I	ical Case Management, ding Treatment
	erence Services
	patient/Ambulatory
	th Services (Primary
Care	
	ical Transportation
	Medical Case
	agement Service
	ical Specialty
	chiatric Services
• Psyc	SHIALITO SELVICES
Quezada-Torres, • Non Karla	е

Name	Conflict of Interest
Robles, Raul	None
Underwood, Regina	Medical Case Management, including Treatment Adherence Services Mental Health Services Substance Abuse Outpatient Care Medical Transportation Non-Medical Case Management Service Outreach Services Peer Navigation EIS: Regional EIS: Minority AIDS Initiative
Van Brocklin, Rhea	Coordinated HIV Services for Women, Infants, Children, Youth, and Families (CHS: WICYF)
Villafan, Freddy	 Substance Use Disorder Treatment: Residential Transportation: Assisted and Unassisted



Thursday, May 9, 2024, 3:00 PM – 5:00 PM Southeastern Live Well Center 5101 Market Street, San Diego, CA 92114 (Tubman Chavez Room A)

To participate remotely via Zoom:

https://us06web.zoom.us/j/82979385521?pwd=ucUoVVtBupxbdBxothszYHHIP2luoC.1

Join the meeting via phone: 1-669-444-9171 United States Toll Meeting ID: 829 7938 5521 Password: PSRAC

Language translation services are available upon request at least 96 hours prior to the meeting. Please contact HPG Support Staff at 619-403-8809 or via e-mail at <a href="https://meeting.ncbi.nlm.ncbi

A quorum for this meeting is seven (7)

Committee Members: Dr. Beth Davenport | Tyra Fleming (Co-Chair) | Felipe Garcia-Bigley | Pam Highfill | Dr. Delores Jacobs | Cinnamen Kubricky | Marco Aguirre Mendoza | Chris Mueller | Karla Quezada-Torres | Raul Robles | Regina Underwood | Rhea Van Brocklin (Chair) | Freddy Villafan

ORDER OF BUSINESS

- 1. Call to order, roll call, comments from the chair
- 2. Reminders
 - a. Review of Committee Charge
 - b. **Committee members' Conflicts of Interest:** Disclose areas of financial interest (e.g., employment); Refrain from participation in related votes
 - c. **Areas NOT the purview of this committee:** Selection of contractors; contract details; how contractors implement contracted services (staff salaries, etc.) These are the sole purview of the Recipient.
 - d. Focus on service priorities, not on specific service providers.
 - e. **Rules for the meeting** (as necessary): Committee members are limited to two (2) minutes per comment and limited to two (2) comments per item; public comments are welcome at the beginning and prior to each agenda item, limited to two minutes so that all have an opportunity to participate.
- 3. Public comment on non-agenda items (for members of the public)
- 4. Sharing our concerns (for committee members)
- 5. ACTION: Approve the Priority Setting & Resource Allocation Committee agenda for May 9, 2024
- 6. **ACTION:** Approve the Priority Setting & Resource Allocation Committee Minutes from April 11, 2024
- 7. Review follow-up items from the last meeting
- 8. New Business:

- a. **ACTION:** Recommendations for reallocations for FY 24 (the current fiscal year, March 1, 2024 February 28, 2025).
- b. Integrated/Getting to Zero Plan update
- c. Review data on Co-occurring Conditions, Poverty, and Insurance and discuss findings
- d. Review HIV/AIDS Epidemiology Data
- 9. Routine Business:
 - a. Committee Attendance
 - b. 2024 Needs Assessment Survey of HIV Impact Update
 - c. Review Monthly and Year-to-Date expenditures and assess for recommended reallocations
 - d. Partial Assistance Rent Subsidy Program (PARS) and Emergency Housing update
 - e. Review Monthly and Year-to-Date service utilization report
- 10. Suggested items for the future committee agenda
- 11. Announcements

Next meeting date: June 6, 2024, from 1:00 PM – 5:00 PM Location: County Administration Building, 1600 Pacific Hwy, San Diego, CA 92101 (Room 301)

12. Adjournment

Princ	iples for PSRA Decision-Making Process	Criteria for the PSRA Decision-Making Process
Principles Guiding Decision Making (Priorities should reflect the Principles)		Criteria for Priority Setting 1. Documented Need based on:
Fillicipie		
1.	Decisions are made in an open, transparent process	a. Epidemiology of San Diego epidemic (Epi data)
2.	Decisions are based on documented needs (Needs assessment, etc.)	b. Needs and unmet needs expressed in needs assessment, including the needs expressed by
3.	Decisions are based on overall needs within the service area, not narrow single focus concerns	consumers, not in care and/or from historically underserved communities (Needs assessment
4.	Decisions include reports from the Needs Assessment	data)
	committee of the HIV Planning Group.	Minimize disparities in the availability and quality of
5.	Services should be responsive to the epidemiology of HIV in San Diego, including demographics and region	treatment for HIV/AIDS (Demographic service utilization data compared to HIV/AIDS demographic)
6.	Services must be culturally and linguistically appropriate and responsive	Quality, outcome effectiveness, and cost-effectiveness of services (Measured by service category outcomes, CQM,
7.	Services should focus on the needs of low-income,	and client satisfaction data by service category)
	underserved, and disproportionately impacted populations	4. Consumer preferences or priorities for interventions or
8.	Services should minimize disparities in the availability and	services, particularly for populations with severe need,
0.	quality of treatment for HIV/AIDS	historically underserved communities, or those who know
9.	Equitable access to services should be provided across	their status but are not in care
	subpopulations and regions	Consistency with the continuum of care

For more information, visit our website at www.sdplanning.org



Thursday, April 11, 2024, 3:00 PM – 5:00 PM Southeastern Live Well Center 5101 Market Street, San Diego, CA 92114 (Tubman Chavez Room C)

A quorum for this meeting is seven (7)

Committee Members Present: Committee Members Present: | Tyra Fleming (Co-Chair) | Felipe Garcia-Bigley | Pam Highfill | Dr. Delores Jacobs | Cinnamen Kubricky | Marco Aguirre Mendoza | Chris Mueller | Regina Underwood | Rhea Van Brocklin (Chair) | Freddy Villafan Committee Members Joining Virtually: Karla Quezada-Torres (Just Cause) Committee Members Absent: Dr. Beth Davenport | Raul Robles

MEETING MINUTES

Agenda Item	Action	Follow-up
1. Call to order	Rhea Van Brocklin called the meeting to order at 3:00 PM and noted that a quorum was established.	
2. Reminders	Rhea Van Brocklin reviewed conflicts of interest. Pam Highfill read the Committee Charge.	
Public Comment on non-agenda items (for members of the public)	None	
Sharing our concerns (for committee members)	A committee member shared a concern about mental health concerns among the community. They also expressed interest in prioritizing housing for those living with HIV. The last concern shared was regarding costs for utilities and food, requesting access to updated information on food service locations. Another committee member has expressed concern about housing and requested that it be prioritized, as rent increases are forcing residents to move out of the immediate service area.	
5. Action: Review and approve the agenda for April 11, 2024	Motion: Approve the April 11, 2024 meeting agenda as presented with the noted change: Motion/Second/Count (M/S/C): Jacobs / Garcia-Bigley / 7-0 Discussion: none	

Agenda Item	Action	Follow-up
	Abstentions: Van Brocklin Motion carries	
6. Action: Review and approve the meeting minutes for January 11, 2024	Motion: Review and approve the meeting minutes from January 11, 2024 as presented. M/S/C: Villafan / Mueller / 7-0 Discussion: none Abstentions: Van Brocklin Motion carries	
7. Review follow-up items from the last meeting minutes	 HPG Support Staff (HPG SS) will amend the November minutes to reflect no discussion regarding the chair/co-chair – Completed HPG Support Staff will amend the November minutes to reflect a discussion of the public comment regarding PARS – Completed HPG SS will bring the survey to the Steering Committee for discussion and vote – Completed The committee will bring ideas on data requests to the March meeting – Pending The recipients' Office will investigate the fair market rates for PARS – Pending HPG SS will send an email to all regarding the LGBTQIA+ survey. – Completed PSRAC members have requested additional demographic data, including recent HIV migration data, language breakdown among those entering the US, new HIV diagnosis, and San Diego demographics by region. 	HPG SS will follow up with Dr. Tweeten for additional demographic information requested
8. Old Business		
a) Committee Attendance	The Chair reviewed the current attendance policy: To remain in good standing and eligible to vote, the committee member may not miss 3 consecutive meetings or 6 meetings within 12 months. The following discussion was held: - Two consecutive absences are not grounds for removal, but members cannot vote until they attend two consecutive meetings. - A clear policy is essential, as the membership committee has indicated a need to create alignment.	Steering Committee to discuss PSRAC and Strategies during the April meeting

For any inquiries, please send an email to HPG.HHSA@sdcounty.ca.gov
You may also visit our website at sdplanning.org

800

Page **2** of **5**

Agenda Item	Action	Follow-up
b) 2024 Needs Assessment Survey of HIV Impact Update	HPG SS provided an update on the status of the survey. The Chair encouraged the committee to continue distributing the information and collecting the surveys from the sites where they dropped them off. HPG SS is working to enter the surveys online.	
c) Review and update the 2024 PSRAC workplan (budget planning dates/times)	The Chair reviewed the updated PSRAC budget planning meeting dates: • June 6 th 1-4 pm @ CAC Room 301 • June 13 th 1-4 pm @ CAC Room 310 BOS Chambers • July 11 th 1-4 pm @ CAC Room 310 BOS Chambers • July 18 th 1-4 pm @ CAC Room 402A Members agreed with the dates and times but requested hard copies of the expenditure reports for review during the meetings.	
9. New Business		
a. Action: Recommendations for reallocations for FY 24 (the current fiscal year, March 1, 2024 – February 28, 2025)	None: • The Recipients' Office updated that the funding has not yet been received for FY 24.	
b. Integrated/Getting to Zero Plan – update	None	
c. ACTION: Review and approve the draft key findings (KF) for the Ryan White Program (RWP) Regional Service Availability 2024	Motion: Approve the 2024 Key Findings for the Ryan White Program Regional Service Availability M/S/C: Highfill / Garcia-Bigley / 7-0 Discussion: none Abstentions: Van Brocklin Motion carries	
d. ACTION: Review and approve the draft KF Service Eligibility Criteria	Motion: Approve the 2024 Key Findings Service Eligibility Criteria M/S/C: Kubricky / Mueller / 7-0 Discussion: none Abstentions: Van Brocklin Motion carries	

009

Page **3** of **5**

Agenda Item	Action	Follow-up
and Service Guidelines 2024		
10. Routine Business		
a. Review Monthly and Year to Date expenditures and assess for recommended reallocations	The updated report will be provided at the next committee meeting. The Recipients' Office reminded the committee members that all invoices are due July 1, 2024. They also commented that specific services must be cut in the coming months.	
b. Partial Assistance Rent Subsidy Program (PARS) and Emergency Housing update	The Recipients' Office provided an update on the current PARS list: • 69 is currently on the waitlist • 13 previously enrolled • 5 new applicants • Demographics of clients on the waitlist: 69 • Gender: 51 male, 11 female, 7 transgender • Race/ethnicity: 11 Black, 38 Hispanic/Latino, 20 white, 0 Asian • Age: 38 over 45, 29 ages 31-44, 2 ages 18-30 • Region breakdown: Central region 51, East 7, South 4, North 7 • 88 currently enrolled The request for carryover was denied for San Diego County.	
c. Review Monthly and TYD service utilization report	The Recipients' Office reviewed the service utilization and current viral suppression rates.	
11.Suggested items for the PSRAC agenda	The committee members shared the following items: • A program or service that celebrates transitions from temporary housing to permanent and stable housing is needed. • Patience and grace are key for those needing emergency housing to help them get to permanent options.	

Agenda Item	Action	Follow-up
12. Announcements	 HPG Orientation April 18th via Zoom HPG Retreat May 22nd @ COC The Family Health Centers of San Diego is collaborating with the Pride festival; anyone interested in participating or volunteering, please contact Felipe Garcia-Bigley Christie's Place is holding a Lotus training from April 30th – May 3rd to train women living with HIV to become peer navigators/advocates End the Epidemic Event on April 23rd in Sacramento 	HPG SS will email HPG orientation registration information
13. Next Meeting:	Date: Thursday, May 9, 2024, 3:00 PM – 5:00 PM Location: Location: Southeastern Live Well Center, 5101 Market Street, San Diego, CA 92114 (Tubman Chavez Room A)	
14. Adjournment	The meeting adjourned at 4:33 PM.	

Priority Setting and Resource Allocation Committee Meeting 2023 Epi Update

Samantha Tweeten, PhD, MPH

HIV/HCV Surveillance Coordinator

Epidemiology & Immunization Services Branch

Public Health Services





Background

- Data from 2023 eHARS file
- Persons Living with HIV Disease (PLWHD)
 - HIV disease diagnosis and living as of 12/31/2023
 - Current address listed as SD County; could be diagnosed anywhere
 - N=15,035
- SD Incident Cases
 - HIV diagnoses amongst SD County residents only
 - Cumulative cases
 - N=25,458
- SD Recent Cases
 - HIV diagnosis 2019-2023 amongst SD Incident Cases
 - N=2,142



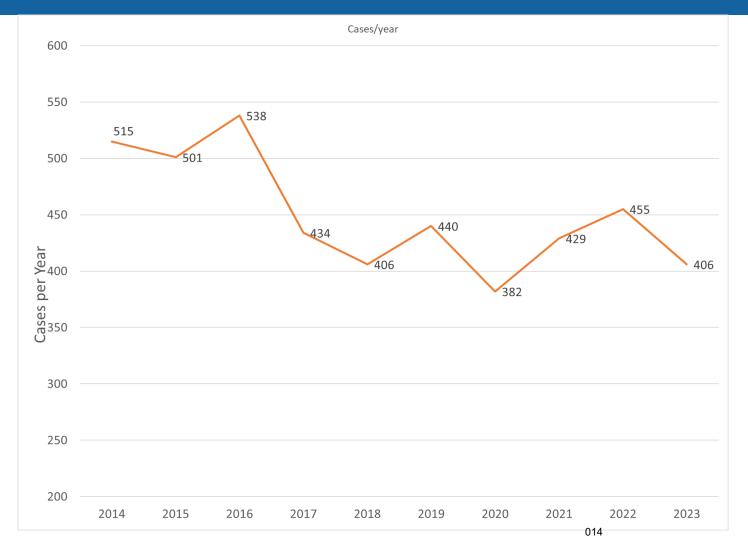


Diagnoses by Year, 2014-2023

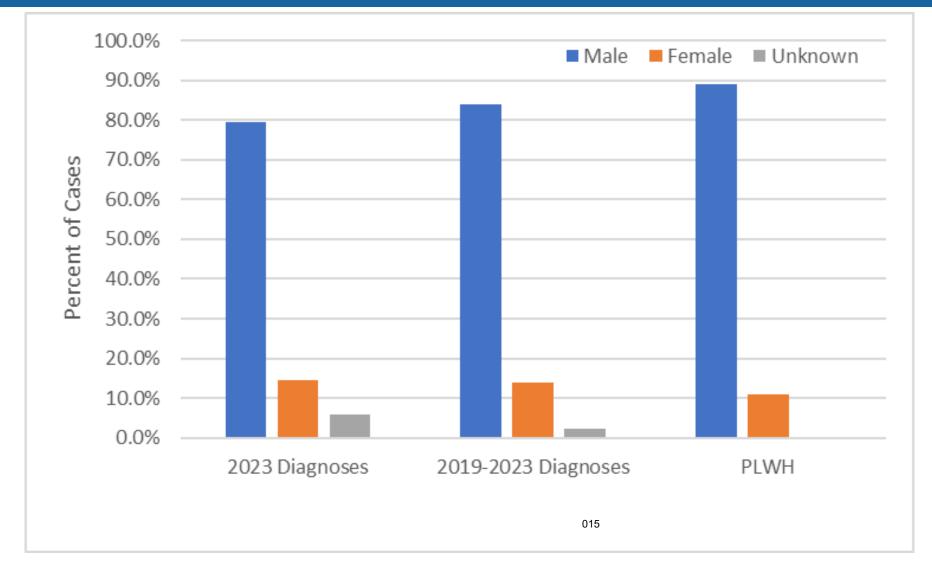
(as of 3/31/2024)







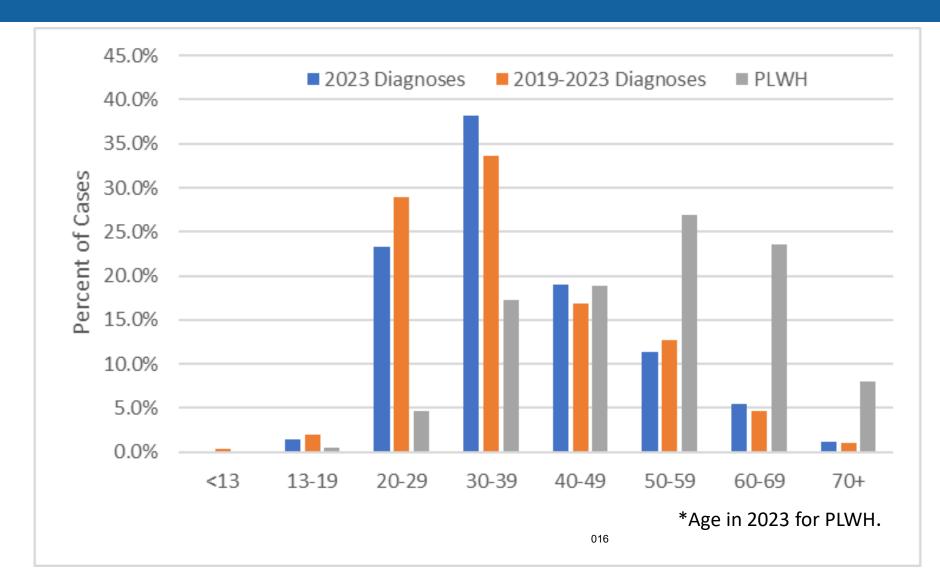
Sex Assigned at Birth – Recent and PLWH







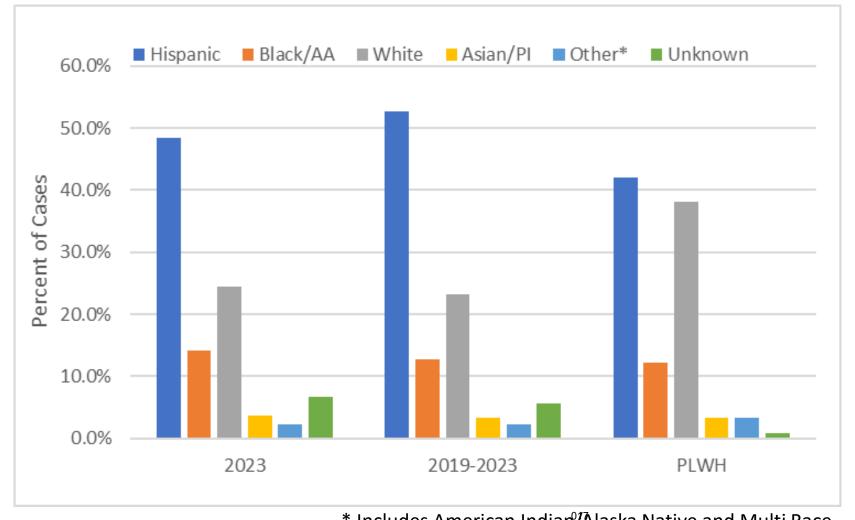
Age – at diagnosis and current (2023)*







Race/Ethnicity – Recent and PLWH







* Includes American Indian/Alaska Native and Multi Race.

Race/Ethnicity Rates

				Rece	ent Diagnose	es	PLWI	Н
	2023 Diagnoses		(2019-2023)			(as of 12/31/2023)		
Race/Ethnicity	N	%	Rate*	N	%	Rate*	N	%
Hispanic	212	48.5%	19.0	1,128	52.7%	20.2	6,326	42.1%
Black/AfricanAmerican	62	14.2%	43.0	275	12.8%	38.2	1,837	12.2%
White	107	24.5%	7.6	497	23.2%	7.1	5,724	38.1%
Asian/PI	16	3.7%	3.8	73	3.4%	3.5	498	3.3%
Other**	10	2.3%		47	2.2%		506	3.4%
Unknown	30	6.8%		122	5.7%		144	0.9%
Total	437	100.0%		2,142	100.0%		15,035	100.0%

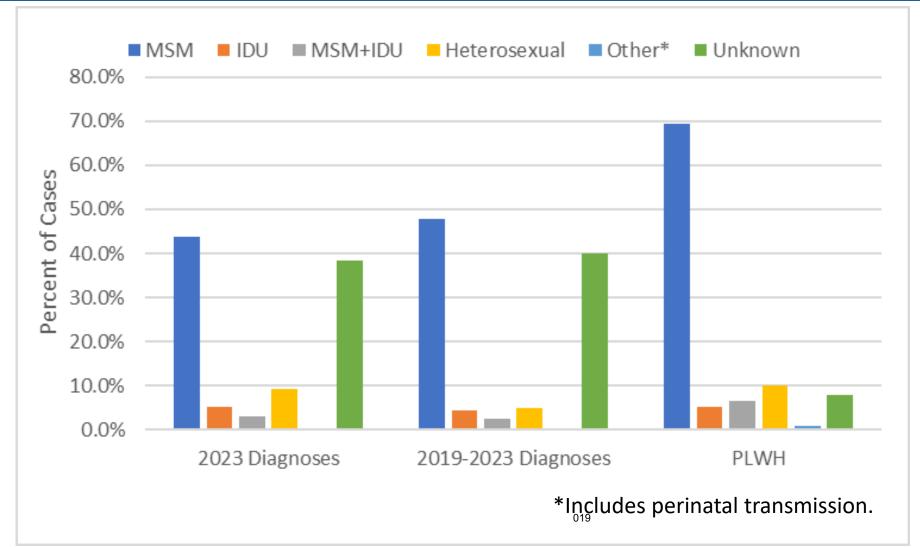
^{*}Per 100,000 population.





^{**}Includes American Indian/Alaska Native and Multiple Race.

Transmission Risk – Recent and PLWH







HHSA Regions – Recent and PLWH

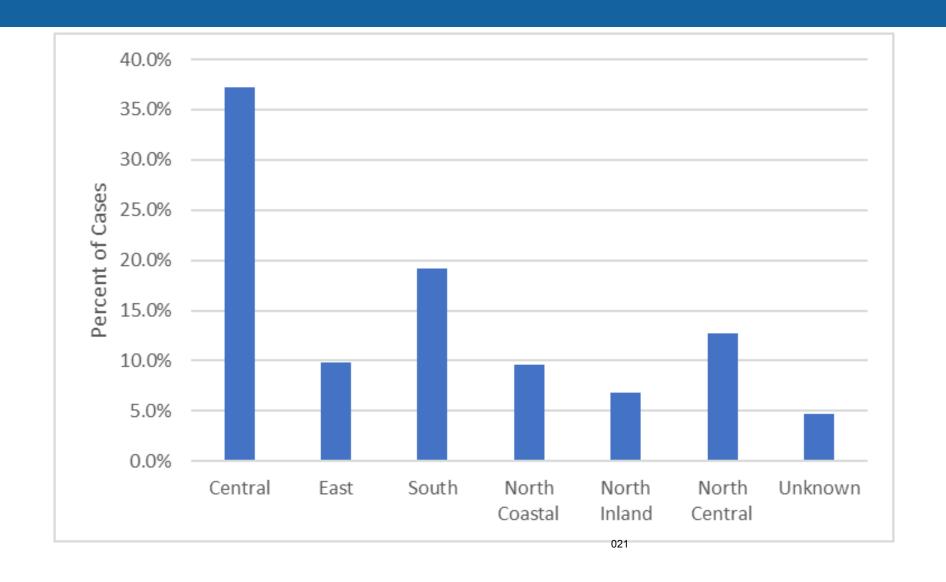




			Recent Diagnoses		PLWH		
	2023 Diagnoses		(2019-20	023)	(as of 12/31/2023)		
Region*	N	%	N	%	N	%	
Central	149	34.1%	797	37.2%	6,760	45.0%	
East	49	11.2%	209	9.5%	1,416	9.4%	
South	77	17.6%	412	19.2%	2,729	18.2%	
North Coastal	49	11.2%	205	9.6%	1,207	8.0%	
North Inland	36	8.2%	146	6.8%	902	6.0%	
North Central	44	10.1%	272	12.7%	1,885	12.5%	
Unknown	33	7.6%	101	4.7%	136	0.9%	
Total	437	100.0%	2142	100.0%	15,035	100.0%	

^{*}Region at diagnosis for Recent and current region for PLWH.

Recent cases (2019-2023) - by HHSA Region







HHSA Regions, 2019-2023 Diagnoses – Age Group

Age at	HHSA Region							
Diagnosis	Central	East	South	N Coastal	N Inland	N Central	Unknown	All Cases
13-19 years	2.1%	1.0%	2.4%	2.0%	0.0%	2.9%	1.0%	2.0%
20-29 years	25.6%	35.9%	26.2%	33.7%	38.4%	28.7%	28.7%	28.9%
30-39 years	36.0%	29.7%	36.9%	26.3%	28.1%	33.1%	32.7%	33.6%
40-49 years	18.7%	15.3%	15.8%	18.0%	13.7%	15.8%	13.9%	16.8%
50-59 years	10.7%	14.4%	12.6%	16.1%	14.4%	13.6%	13.9%	12.7%
60-69 years	5.4%	2.4%	5.6%	52.9%	5.5%	2.9%	7.9%	4.7%
70+ years	1.0%	1.0%	0.5%	0.5%	0.0%	2.6%	2.0%	1.0%
All	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Total	797	209	412	205	146	272	101	2,142





HHSA Regions, 2019-2023 Diagnoses – Race/Ethnicity

Race/			ŀ	HHSA Regio	n			
Ethnicity	Central	East	South	N Coastal	N Inland	N Central	Unknown	All Cases
Hispanic	48.0%	40.7%	78.6%	53.7%	59.6%	40.1%	31.6%	52.8%
Black/AA	16.8%	18.2%	7.8%	5.9%	4.1%	14.3%	14.3%	12.9%
White	24.5%	30.6%	7.3%	31.7%	26.0%	27.9%	29.6%	23.2%
Asian/PI	3.5%	1.9%	2.7%	3.9%	2.7%	6.3%	1.0%	3.4%
Other*	2.5%	2.4%	0.2%	1.5%	2.1%	4.4%	3.1%	2.2%
Uknown	4.6%	6.2%	3.4%	3.4%	5.5%	7.0%	20.4%	5.5%
All	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
Total	797	209	412	205	146	272	101	2,142





HHSA Regions, 2019-2023 Diagnoses - Risk

		HHSA Region						
Risk	Central	East	South	N Coastal	N Inland	N Central	Unknown	All Cases
MSM	51.1%	44.5%	47.8%	43.4%	45.2%	52.2%	30.7%	47.9%
IDU	4.9%	5.7%	3.9%	5.4%	3.4%	4.4%	52.0%	4.5%
MSM+IDU	3.3%	1.4%	1.7%	2.9%	2.1%	2.9%	0.0%	2.5%
Heterosexual	3.9%	8.6%	5.3%	5.9%	4.8%	4.8%	2.0%	4.9%
Other*	0.5%	0.5%	0.0%	0.0%	0.0%	0.4%	0.0%	0.3%
Unknown/NIR	1.0%	39.2%	41.3%	42.4%	44.5%	35.3%	65.3%	40.0%
All	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Total	797	209	412	205	146	272	101	2,142





In-Care 2022-2023

In-Care

- Having a lab within 2022-2023
 - CD4 or Viral Load

In Care 2022-2023		
Yes	No	
76.2%	23.8%	
75.1%	24.9%	
90.5%	9.5%	
76.1%	23.9%	
11,438	3,597	
	Yes 76.2% 75.1% 90.5% 76.1%	





In-Care 2022-2023

Current Age	In Care 202	2-2023
(years)	Yes	No
less than 13	100.0%	0.0%
13-19	88.0%	12.0%
20-29	85.4%	14.6%
30-39	80.3%	19.7%
40-49	75.5%	24.5%
50-59	74.3%	25.7%
60-69	75.7%	24.3%
70+	69.2%	30.8%
All	76.3%	24.0%
N	11,438	3,597

	In Care 2022-2023		
Region	Yes	No	
Central	74.9%	25.1%	
East	81.4%	18.6%	
South	71.7%	28.3%	
North Coastal	80.9%	19.1%	
North Inland	81.0%	19.0%	
North Central	78.0%	22.0%	
Unknown	64.0%	36.0%	
All	76.1%	23.9%	
N	11,438	3,597	





In-Care, 2022-2023

	In Care 2022-2023		
Race/Ethnicity	Yes	No	
Hispanic	74.2%	25.8%	
Black/AA	69.1%	30.9%	
White	79.2%	20.8%	
Asian/PI	80.7%	19.3%	
Other*	86.4%	13.6%	
Unknown	73.4%	26.6%	
All	76.1%	23.9%	
N	11,438	3,597	

	In Care 2022-2023		
Risk	Yes	No	
MSM	77.0%	23.0%	
IDU	66.2%	33.8%	
MSM+IDU	76.2%	23.8%	
Heterosexual	73.9%	26.1%	
Other	75.2%	24.8%	
Unknown	77.5%	22.5%	
All	76.1%	23.9%	
N	11,438	3,597	





Duration of Infection

	All PLW	Н	Current Address	after 2013	Current Address	after 2018
Years	N	%	N	%	N	%
0-4	2,118	14.1%	2,118	16.1%	2,118	17.0%
5-9	2,332	15.5%	2,332	17.7%	2,100	16.9%
10-14	2,303	15.3%	2,079	15.8%	1,909	15.3%
15-19	2,314	15.4%	1,920	14.6%	1,818	14.6%
20-24	2,038	13.6%	1,682	12.8%	1,603	12.9%
25-29	1,727	11.5%	1,387	10.5%	1,317	10.6%
30-24	1,420	9.4%	1,050	8.0%	999	8.0%
35-40	783	5.2%	614	4.7%	579	4.7%
Total	15,035	100.0%	13,182	100.0%	12,443	100.0%





Questions







Samantha Tweeten, PhD, MPH Samantha.Tweeten@sdcounty.ca.gov





THANK YOU

HIV PLANNING GROUP 6-MONTH COMMITTEE TRACKING May 2023 -Apr 2024

PRIORITY SETTING & RES	OURC	E ALLO	CATION	соммі	TTEE										
PSRAC	May	8-Jun	20-Jun	20-Jul	27-Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	#
Total meetings	1	1	1	1	1		1		1		1		0	1	7
Member															
Jacobs, Dr. Delores ^C	*	*	*	*	*		*		*		*		NQ	*	0
Carroll, Reginald	*	*	*	*	*		1		*		1				
Cortes, Alberto	*	*	1	1	1		*		*		*				
Davenport, Beth	*	*	*	*	*		1		1		*		NQ	1	3
Garcia-Bigley, Felipe	1	*	*	*	*		*		1		*		NQ	*	2
Highfill, Pam	*	*	*	*	*		*		*		*		NQ	*	0
Kubricky, Cinnamen [∪]	1	*	*	*	*		*		1		*		NQ	*	2
Mueller, Chris	*	*	*	*	*		1		*		*		NQ	*	1
Robles, Raul	*	*	*	*	*		1		*		*		NQ	1	2
Quezada-Torres, Karla	*	*	1	*	*		*		*		*		NQ	*	1
Underwood, Regina	*	1	*	*	*		*		1		*		NQ	*	2
Van Brocklin, Rhea	1	*	*	*	*		1		1		*		NQ	*	3
Villafan, Freddy	*	*	*	*	*		1		1		*		NQ	*	2

To remain in good standing and eligible to vote, the committee member may not miss 3 consecutive meetings or 6 meetings within 12 months.

1 = Absent for the month

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

JC = Just Cause

EC = Emergency Circumstance

NM = No Meeting

NQ = No Quorum

^{* =} Present

Ryan White Utilization Report

Summary of Services for FY 24

(March 1, 2024 - February 28, 2025)

HIV, STD and Hepatitis Branch





SAN DIEGO HIV PLANNING GROUP (HPG) PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC) MEETING PACKET

APPENDIX

(Page 034-039)

ASSEMBLY BILL (AB) 2449: JUST CAUSE AND EMERGENCY CIRCUMSTANCES (2023)

If the physical attendance quorum requirement is met, AB 2449 permits a member who is not physically present to request virtual attendance at the local legislative body's meeting under two circumstances: (1) for "just cause" and (2) due to "emergency circumstances".

Qualifying Reason	Provisions to attend remotely	Requirements/Limitations
Just Cause	 There is a childcare or caregiving need (for a child, parent, grandparent, grandchild, sibling, spouse, or domestic partner) that requires the member to participate remotely A contagious illness prevents the member from attending the meeting in There is a need related to a defined physical or mental disability that is not otherwise accommodated for Traveling while on official business of the legislative body or another state or local agency 	A member is limited to two (2) virtual attendances based on "just cause" per calendar year
Emergency Circumstances	"A physical or family medical emergency that prevents a member from attending the meeting in person." A member is not required to disclose any medical diagnosis or disability, or any personal medical information that is already exempt from existing law.	A member of the legislative body must make a request to the body to allow the member to meet remotely due to an emergency circumstance, and further must provide a general description of the circumstance justifying such attendance. A request from a member to attend remotely due to an emergency circumstance requires that the legislative body take action and approve the remote attendance at the start of the meeting for the member to be allowed to participate remotely for that meeting*.

^{*}If the request does not allow sufficient time to be placed on the agenda as a proposed action item, then the legislative body may take action at the beginning of the meeting.

ADDITIONAL REQUIREMENTS FOR A MEMBER PARTICIPATING REMOTELY:

In addition to making a request either for "just cause" or due to an "emergency circumstance" for remote appearance, AB 2449 imposes the following three (3) additional requirements on legislative body members seeking to appear remotely at public meetings:

- 1. Before any action is taken during the meeting, the member <u>must</u> publicly disclose whether any other individuals 18 years of age or older are present in the room at the remote location with the member, and the general nature of the member's relationship with any such individuals.
- 2. A member of the legislative body participating from a remote location must participate through both audio **and** visual technology.
- 3. A member's remote participation cannot be for more than three (3) consecutive months or 20 percent of the regular meetings for the local agency within a calendar year. And if the legislative body regularly meets fewer than ten (10) times per calendar year, a member's participation from a remote location cannot be for more than two meetings.

AB 2449 Checklist
(Applicable January 1, 2023 to December 31, 2025)

Procedi	ures for	Public	Partici	pation

	Public must be able to remotely hear, visually observe, and address the legislative body either remotely or in person in real time
	Public must have the opportunity to participate via: 1) two-way audio or 2) a telephonic service with a webcasting service
	Public cannot be required to submit comments prior to the meeting
Proced	dures for Member to Teleconference from a Remote Location
	Member must participate through both audio and visual technology
	Member must disclose adults who are present in the room at the remote location with the member and the general nature of the relationship with those individuals
	Member must submit a general description of the need to teleconference to the legislative body at the earliest opportunity (do not disclose any medical diagnosis or disability)
	Member may teleconference for <u>just cause</u> . Just cause is limited to 2 meetings per calendar year (see "Limits per Member" below). Just cause is defined as:
	 Child care or caregiving need of a child, parent, grandparent, grandchild, sibling, spouse or domestic partner Contagious illness that prevents member from attending in person A need related to a physical or mental disability Travel on official business of the legislative body or another state or local agency
	Member may teleconference due to <u>emergency circumstances</u> , which requires approval of the legislative body and which is defined as a physical or family medical emergency that prevents a member from participating in person
	<u>Limits per Member</u> : Just cause and emergency circumstances cannot be invoked collectively for more than: 1) two meetings if the legislative body has fewer than 10 meetings per calendar year, or 2) three consecutive months or 20 percent of regular meetings per calendar year if the legislative body has 10 or more meetings per year. Just cause cannot be invoked more than twice per calendar year.
Proced	dures for the Board/Commission/Committee/Group
	Include instructions on the agenda how the public can participate remotely
	A quorum of the members of the legislative body must participate in person at the noticed location that is open to the public
	A majority of the membership must approve a request by a member to teleconference due to emergency circumstances ; include the request on the agenda if received in time
	All votes must be taken by roll call
	Meeting must be stopped and no action taken if the broadcast of the meeting or ability of the public to comment is disrupted

TELECONFERENCING RULES UNDER THE BROWN ACT

	Default Rule	Declared Emergency (AB 361)	Just Cause (AB 2449)	Emergency Circumstance (AB 2449)
In person participation	Required	Not Required	Required	Required
Member participation via teleconferencing	Audio or Audio-visual	Audio or Audio-visual	Audio-visual	Audio-visual
Required (minimum) opportunities for public participation	In-Person	Call-In or internet- based	Call-in or internet- based <u>and</u> in person	Call-in or internet- based <u>and</u> in person
Disruption of broadcast or public's ability to comment	Meeting can proceed	No further action taken	No further action taken	No further action taken
Reason must be approved by legislative body	No	Yes (Initial findings and renewed findings every 30 days)	No, but general description to be provided by legislative body	Yes and general description to be provided to legislative body
Votes must be taken by roll call	Yes	Yes	Yes	Yes
Member's remote location included on agenda	Yes	No	No	No
Declared emergency and health official's recommendations for social distancing	No	Yes	No	No
Annual limits	None	None	Twice per calendar year (limits for emergency circumstances also apply for collective number of times AB 2449 can be used per year)	3 consecutive months/ 20% of regular meetings per calendar year; or 2 meetings per calendar year if body meets less than 10 times per year (collectively with just cause)
Effective Dates	Ongoing	Expires 12/31/2023	Expires 12/31/2025	Expires 12/31/2025





YOUR VOICE MATTERS!

ZOZY COUNTY OF SAN DIEGO HIV NEEDS ASSESSMENT SURVEY

TELL US ABOUT:

- Access to HIV prevention and treatment services
- Things that work well
- Challenges and concerns
- Your well-being

TAKE THE SURVEY ONLINE!



Learning about the impact of HIV in San Diego County will help us improve HIV services and access!

CHECK OUT OUR NEW APP FOR COUNTY'S HIV RESOURCES











ZOZY CONDADO DE SAN DIEGO ENCUESTA DE EVALUCIÓN DE LAS NECESIDADES RELACIONADAS CON EL VIH

CUÉNTANOS SOBRE:

- Acceso a la prevención del VIH y
- Servicios de tratamiento
- Coas que funcionan bien
- Desafíos y preocupaciones
- Tu bienestar

¡RESPONDA LA ENCUESTA EN LÍNEA!



Aprendiendo
acerca de el
impacto de la VIH
en Condado de
San Diego nos
ayudará mejorar
los servicios del
VIH y ¡acceso!

CONSULTE NUESTRA NUEVA APLICACIÓN PARA OBTENER RECURSOS SOBRE EL VIH DEL CONDADO



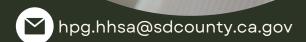


Photo from the 2023 HPG Retreat







Annual HIV Planning Group Retreat 2024



Wednesday, May 22, 2024 at 12:15 PM - 5:00 PM



WHERE

County Operations Center 5570 Overland Ave, San Diego, CA 92123 Medical Examiner Conference Room 1047



LUNCH FIRST

Lunch will be provided at 12:15 PM to kick off the session



For questions, please email the HPG Support Staff at HPG.HHSA@sdcounty.ca.gov.

LET'S TALK ABOUT

RECRUITMENT

How to prioritize getting new members



RETENTION

How can we make HPG meetings more engaging, strengthen the mentorship program, and make sure every voice is heard and matters

MEMBERS OF THE PUBLIC ARE WELCOME TO OBSERVE!

If you can't join in person, join us online by clicking this Zoom link:

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

Join the meeting via phone: (669) 444-9171

Meeting Number: 853 6898 7291

Password: SDHPG