

Continuation of Remote Meetings for Brown Act Boards and Commissions

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

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

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

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

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

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

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

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

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

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

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

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

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

IV. Operation of the Special Teleconferencing Rule

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

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

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

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

VI. Next Steps

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

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

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



County of San Diego

NICK MACCHIONE, FACHE
AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH SERVICES

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


HEALTH OFFICER TELECONFERENCING RECOMMENDATION

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

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

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

September 23, 2021


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

Name	Conflict of Interest	Name	Conflict of Interest
Acevedo, Allan De Jesus, Alfredo, Jacobs, Dr. Delores Kubricky, Cinnamen Lochner, Michael (Mikie) Price, Venice Quezada-Torres, Karla Robles, Raul West, Abigail Wimpie, Michael	<ul style="list-style-type: none"> None 	Grelotti, Dr. David Mar Tang, Moira Ransom, Shannon Reyna, Ivann Spector, Dr. Stephen	<ul style="list-style-type: none"> Medical Case Management Mental Health: Psychiatric Medication Management Non-Medical Case Management Service Outpatient Ambulatory Health Services: Medical Specialty Outpatient Ambulatory Health Services: Primary Care Transportation: Assisted and Unassisted
		Highfill . Pam	<ul style="list-style-type: none"> Substance Use Treatment; Residential
Applebaum, Amy Hernandez, Dr. Elizabeth Tilghman, Dr. Winston Villafan, Freddy	<ul style="list-style-type: none"> Medical Case Management Substance Use Disorder Treatment: Residential Transportation: Assisted and Unassisted 	Underwood, Regina	<ul style="list-style-type: none"> EIS: Minority AIDS Initiative EIS Regional Services Medical Case Management Mental Health Groups/Therapy Non-Medical Case Management Service Outreach Services Peer Navigation (Referral for Healthcare and Support Services) Substance Use Disorder Treatment: Outpatient Transportation: Assisted and Non-Assisted
Lewis, Robert Rucker, James	<ul style="list-style-type: none"> Early Intervention Services, Regional Services EIS: Minority AIDS Initiative Home-Based Health Care Coordination Medical Case Management Mental Health Counseling/Therapy Mental Health: Psychiatric Medication Management Non-Medical Case Management Service Oral Health Outpatient Ambulatory Health Services: Medical Specialty Outpatient Ambulatory Health Services: Primary Care Peer Navigation (Referral for Healthcare and Support Services) Transportation: Assisted and Non-Assisted 		
Cortes, Alberto	<ul style="list-style-type: none"> Emergency Financial Assistance Foodbank/Home Delivered Meals Medical Nutrition Therapy 		
Davenport, Beth	<ul style="list-style-type: none"> Mental Health: Counseling/Therapy Non-Medical Case Management Medical Case Management Peer Navigation 	Van Brocklin, Rhea	<ul style="list-style-type: none"> Coordinated HIV Services for Women, Infants, Children, Youth and Families (CHS: WICYF)



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PUBLIC HEALTH OFFICER

SAN DIEGO HIV PLANNING GROUP (HPG)

Wednesday, September 28, 2022 - 3:00 PM

Meeting via WebEx

Join the meeting via phone: 1-470-238-5742 US Toll / 52-55-6722-5298 Mexico Toll

Participantes que solicitan traducción al español: (Deben notificar al personal de apoyo con 96 horas de anticipación). Recibirán un correo electrónico con el número para llamar.

This meeting is audio and video recorded.

A quorum for this meeting is 13

DRAFT AGENDA

ORDER OF BUSINESS

1. Call to Order/Establish Quorum; (2 min)
2. Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e). (4 min)
 - a) Find HPG has reconsidered the circumstances of the State of Emergency
 - b) Find that State and local officials continue to recommend measures to promote social distancing.
3. Chair Comments; Ground Rules & Abstentions (5 min)
4. Public Comment (See page 2 of agenda for rules) (5 min)
5. Sharing our concerns/Comments on Items not on the agenda (for HPG members) (5 min)
6. **ACTION:** Approval of HPG agenda for September 28, 2022 (5 min)
7. Old Business: None
8. New Business
 - a. **ACTION:** (Membership Committee): Review and approve recommendation(s) for HPG membership. (0 min)
 - b. **ACTION:** (Membership Committee): Approval of Membership Waiver for HPG member (5 min)
 - c. **ACTION:** (Steering Committee): Approval of Membership Waiver and move HPG member to HIV Testing Representative (seat # 42) (5 min)
 - d. Presentation: Membership Committee – Bob Lewis (5 min)
 - e. **ACTION:** (Priority Setting Committee): Review and approve recommendations for reallocation of funds in FY 22 (the current year, March 1, 2022 – February 28, 2023) (10 min)

You may also obtain more information on our web page: www.sdplanning.org

- f. **ACTION:** Approval of HPG Minutes from July 27, 2022; August 3, 2022, August 10, 2022, August 24, 2022. (10 min)
- g. **ACTION:** Approval of HPG consent agenda for September 28, 2022, which includes acceptance of the following committee minutes:
Strategies and Standards Committee: July 5, 2022; Membership Committee; July 13, 2022; Priority Setting and Resource Allocation Committee: June 23, 2022; July 7, 2022; July 14, 2022; July 21, 2022; July 28, 2022, and August 4, 2022; Consumer Group: June 15, 2022 and July 20, 2022; (Included for your information, not for acceptance; CARE Partnership: July 18, 2022; Faith-Based Action Coalition: July 7, 2022) (3 min)
- h. Review follow-up items from meeting minutes (5 min)
- i. Follow-up: Report on the Assessment of the Administrative Mechanism (2 min)
- j. Presentation: Highlights of the Presidential Advisory Council on HIV/AIDS (PACHA) meeting in Los Angeles – Karla Quezada-Torres (10 min)
- 9. HIV, STD, and Hepatitis Branch (HSHB) Reports – Patrick Loose (15 min)
 - a. HSHB Monthly Report: Sept 2022
 - b. HRSA, CDC and CDPH policies and procedures updates
 - c. Expenditure/budget review
 - d. Service Utilization Summary Report – through August 2022
 - e. Monthly Client Service Evaluation (Goldenrod) Summary Report CQM update – August 2022
- 10. Reports
 - a. Committee Reports (Consumer, Membership, Strategies & Standards, PSRAC, Medical Standards) (12 min)
 - b. Planning Group Support Staff (PGSS) Report – Rodney von Jaeger (2 min)
 - i. Administrative budget review
 - ii. Update: In-person meetings
 - c. Report from State Office of AIDS (OA) and AIDS Drug Assistance Program (ADAP) – (included in meeting packet) - Abigail West and Jesse Peck by teleconference, 1616 Capitol Ave, 6th Fl, Ste 616, Sacramento, CA 95814) (2 min)
 - d. GTZ Community Engagement Project Updates (6 min)
 - e. California HIV Planning Group (CHPG) (2 min)
 - f. Faith-Based Action Coalition (2 min)
- 11. Suggestions to Steering Committee for consideration of future items (2 min)
- 12. Announcements (2 min)
- 13. Next Meeting Date: **Wednesday, October 26, 2022** Location: **WebEx**
- 14. Adjournment

Public comment rules:

- Will be heard in the following segments: 1) at the beginning of the meeting, for comments not relating to agenda items, and 2) at the start of each agenda item for comments relating to the item.
- If you would like to make a public comment/say something to the HIV Planning Group please click “raise your hand” in WebEx or Zoom, type something in the chat box, or unmute yourself and ask to be recognized by the Chair.

- Limit of ten minutes per segment and two minutes per speaker except under special circumstances based upon the expected number of speakers, the timeframe for decision-making, and whether additional public meetings have been held prior to the HIV Planning Group, at which extensive public and community comment was heard and included in reports or recommendations before the HIV Planning Group. Under any or all these circumstances, the Chair may modify the time limit for public comment. The time is allotted to provide comment only, not to ask questions or engage in a discussion with HIV Planning Group members. Public comment presented at IVI Planning Group meetings does not require response or discussion by the HIV Planning Group. All comments shall be made in a respectful manner (e.g., no profanity, yelling, bullying, or abusive language).



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HIV PLANNING GROUP MEMBERSHIP COMMITTEE ACTION ITEM INFORMATION SHEET

APPROVAL OF RECOMMENDATION FROM THE MEMBERSHIP COMMITTEE REGARDING WAIVER FOR HPG MEMBER

DATE: September 28, 2022

ITEM: Consider and vote to approve the recommendation from the Membership Committee regarding a waiver for a potential HIV Planning Group (HPG) member.

BACKGROUND: At the Membership Committee meeting on September 14, 2022 the appointment of Ivvan Reyna to fill the Board of Supervisors - District 1 representative (seat #33) was reviewed. Because there are currently four (4) HPG members from UC San Diego, a waiver will be required. Two waivers have been previously granted for HPG members from UCSD.

According to the HIV Planning Group Bylaws, a waiver is required if there are more than two (2) individuals from one agency; however, the Membership Committee can consider the needs of the HIV Planning Group, including subject matter expertise, and recommend a waiver to consider more than two (2) individuals from a single agency/entity. The waiver must provide justification for why having an additional member from a single agency/entity outweighs the membership requirement. The waiver will be reviewed and voted on by the HIV Planning Group.

A review of policy by the Health Resources and Services Administration (HRSA) by consultants indicates that this is allowable.

RATIONALE: The candidate was appointed by the County Supervisor for District 1.

RECOMMENDATION: Approve waiver for the following appointed member of the HPG:

1. Ivvan Reyna – UC San Diego

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



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HIV PLANNING GROUP STEERING COMMITTEE ACTION ITEM INFORMATION SHEET

APPROVAL OF RECOMMENDATION REGARDING SEAT CHANGE AND WAIVER FOR AN HPG MEMBER

DATE: September 28, 2022

ITEM: Consider and vote to approve the recommendation from the Steering Committee regarding a seat change and waiver for an HIV Planning Group (HPG) member.

BACKGROUND: At the Steering Committee meeting on September 20, 2022, the change of HPG member James Rucker from an Unaffiliated Consumer was discussed, as he now works for a Ryan White Part A provider.

Per the rules of the Health Resources and Services Administration (HRSA), an unaffiliated Consumer is defined as a person who uses Ryan White services but is not affiliated with a Ryan White provider (cannot be an employee, paid contractor or be on the Board of Directors).

The committee recommended moving James Rucker to the HIV Testing Representative seat (#42) to maintain his important contributions to the HIV planning process, the HPG and its committee(s).

This change would ultimately result in more than 2 HPG members from the Family Health Centers of San Diego (FHCS) as there is currently one HPG member affiliated with FHCS and a nomination of a candidate affiliated with FHCS has been forwarded to County Board of Supervisors, which if approved would ultimately result in 3 (three) HPG members from a single organization, thus a waiver will be required. There are currently no other waivers granted for HPG members from FHCS.

According to the HIV Planning Group Bylaws, a waiver is required if there are more than two (2) individuals from one agency; however, the Membership Committee can consider the needs of the HIV Planning Group, including subject matter expertise, and recommend a waiver to consider more than two (2) individuals from a single agency/entity. The waiver must provide justification for why having an additional member from a single agency/entity outweighs the membership requirement. The waiver will be reviewed and voted on by the HIV Planning Group.

Action Item Info Sheet
Member seat change and waiver
September 28, 2022

A review of policy by the Health Resources and Services Administration (HRSA) by consultants indicates that this is allowable.

RATIONALE: The HPG member provides valued input in the HIV planning process at the HPG and the Priority Setting and Resource Allocation Committee, where he currently serves as that committee's co-chair.

RECOMMENDATIONS:

1. Move James Rucker from Unaffiliated Consumer seat (#5) to HIV Testing Representative seat (#42)
2. Approve a waiver for James Rucker – FHCS

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



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HIV PLANNING GROUP PRIORITY SETTING AND RESOURCE ALLOCATION COMMITTEE (PSRAC) ACTION ITEM INFORMATION SHEET

Recommendations for Re-Allocation for FY 22-23

DATE: September 28, 2022

ITEM: Approve the PSRAC's recommendations for re-allocating Part A funds in fiscal year 22-23.

BACKGROUND:

The HIV, STD, and Hepatitis Branch (HSHB) is continuing to see high utilization of Emergency Housing Assistance (EHA) and recommended an increase to avoid any future potential interruption of the availability of this key service. Additionally, the HSHB Office recommended an increase for Coordinated HIV Services for Women, Infants, Children, Youth, and Families (CHS: WICYF) (priority #11).

HSHB reviewed expenditure trends and recommended that funding be reduced in Medical Specialty and Primary Care and be re-allocated to EHA to continue addressing critical housing needs of persons living with HIV in San Diego County. They also recommended funding be reduced in Mental Health: Counseling/Therapy and Support Groups (priority #15) and re-allocate to CHS: WICYF to specifically serve Mental Health services within the service category CHS: WICYF (priority #11).

The PSRAC reviewed the information and made the following recommendations at its September 8, 2022 meeting.

RECOMMENDATIONS:

1. **Action Item:** Decrease funding to Outpatient Ambulatory Health Services: Medical Specialty (priority #2) by **\$50,000**, from **\$243,386** to **\$193,386**.
2. **Action Item:** Decrease funding to Outpatient Ambulatory Health Services: Primary Care (priority #1) by **\$100,000**, from **\$932,630** to **\$832,630**.
3. **Action Item:** Decrease funding to Mental Health: Counseling/Therapy (priority #15) by **\$50,000**, from **\$1,061,062** to **\$1,011,062**.

Action Item Info Sheet

Reallocations

September 28, 2022

4. **Action Item:** Increase Emergency Housing Assistance (priority #8) by **\$150,000**, from **\$630,000** to **\$780,000**.
5. **Action Item:** Increase funding to Coordinated Health Services for Women, Infants, Children, Youth, and Families (CHS: WICYF) (priority #11) by **\$50,000**, from **\$943,317** to **\$993,317** with an intent to increase capacity in mental health services within the service category.

These come to the HPG as seconded motions, open for discussion.



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San Diego HIV Planning Group (HPG)

Wednesday July 27, 2022

3:00 PM

Meeting occurred via video teleconference (WebEx)

MINUTES

Quorum is 15

HPG Members Present: Allan Acevedo / Amy Applebaum / Alberto Cortes / Beth Davenport / Dr. David Grelotti / Dr. Delores Jacobs / Cinnamon Kubricky / Robert Lewis / Mikie Lochner / Moira Mar-Tang / Venice Price / Karla Quezada-Torres / Shannon Ransom / Raul Robles / Dr. Stephen Spector / Dr. Winston Tilghman / Regina Underwood / Rhea Van Brocklin / Freddy Villafan / Abigail West / Michael Wimpie / Joe Zilvinskis

HPG Members Absent: Alfredo De Jesus / Dr. Elizabeth Hernandez / Pam Highfill / James Rucker

Agenda Item	Action/Discussion	Follow-up
1. Call to Order/ Establishment of Quorum	Mikie Lochner, HPG Chair, called the meeting to order at 3:03 p.m. and noted the presence of a quorum.	
2. Action: Continuation of Teleconferencing	All votes at the meeting were taken by roll call; HPG members' names were called out verbally, then individual voice votes were noted and recorded. Action: Continuation of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e). a. Find HPG has reconsidered the circumstances of the State of Emergency b. Find that State and local officials continue recommending measures to promote social distancing. Motion/Second/Count (M/S/C): Jacobs/Villafan 18/0 Abstentions: Lochner, West, Zilvinskis Motion carries	
3. Chair Comments; Ground Rules & Abstentions	The Chair thanked participants, led a moment of silence, and announced staff and HPG members' July birthdays.	
4. Public comment	A member of the public thanked the staff for taking the roll call vote.	
5. Sharing our concerns/ Comments on Items not on the agenda	A member of the HPG noted the cost of utilities continues to rise and they noted some consumers might be resorting to activities they have previously stopped doing, possibly including illegal things to make money.	

Agenda Item	Action/Discussion	Follow-up
6. Action: Approval of the HIV Planning Group (HPG) agenda for July 27, 2022	Action: Approve the HPG Meeting agenda for July 27, 2022 as presented. M/S/C: Cortes/Wimpie 16/0 Abstentions: Davenport, Lochner, West, Zilvinskis Motion carries	
7. Review follow-up items from meeting minutes	Reviewed	
8. Old Business		
None		
9. New Business		
a. Action Item: (Membership Committee): Review and approve recommendation(s) for HPG membership.	Bob Lewis presented the action item. The Action Item Information Sheet was included in the meeting materials packet. Action: Approve the recommendation to nominate Felipe Garcia-Bigley for HPG membership as the Prevention Provider representative (Seat #38) M/S/C: Membership Committee 16/0 Abstentions: Lewis, Lochner, West, Zilvinskis Motion carries	
b. ACTION: (Priority Setting and Resource Allocation Committee) (PSRAC): Review and approve recommendations for reallocation of funds in FY 22 (the current year, March 1, 2022 – February 28, 2023)	Dr. Jacobs presented the action item. The Action Item Information Sheet was included in the meeting materials packet. Action: Approve a decrease in funding to Medical Specialty (priority #2) of \$ \$30,000, from \$273,386 to \$243,368. M/S/C: PSRAC 10/0 Abstentions: Grelotti, Jacobs, Lewis, Mar-Tang, Price, Ransom, Spector, Villafan, West, Wimpie, Zilvinskis Motion carries	
	Action: Approve a decrease in funding to Oral Health (priority #4) of \$100,000, from \$300,940 to \$200,940. M/S/C: PSRAC 11/0 Abstentions: Grelotti, Jacobs, Kubricky, Lewis, Lochner, Mar-Tang, Price, Ransom, Spector, West, Zilvinskis Motion carries	
	Action: Approve an increase in funding to Emergency Housing (priority #8) \$100,000, from \$530,000 to \$630,000. M/S/C: PSRAC 16/0 Abstentions: Jacobs, Lochner, Price, West, Zilvinskis Motion carries	

Agenda Item	Action/Discussion	Follow-up
	<p>Action: Approve an increase in funding to Psychosocial Support Services (priority #16) by \$30,000 from \$30,000 to \$60,000.</p> <p>M/S/C: PSRAC 13/0</p> <p>Abstentions: Applebaum, Grelotti, Jacobs, Lochner, Ransom, Van Brocklin, Villafan, West, Zilvinskis</p> <p>Motion carries</p>	
<p>c. ACTION: (Priority Setting and Resource Allocation Committee) (PSRAC): Review and approve recommendations for priority rankings and service directions for FY 23 (next fiscal year, March 1, 2023 – February 28, 2024)</p>	<p>Dr. Jacobs presented the action item. The Action Item Information Sheet was included in the meeting materials packet.</p> <p>Action: Approve ranking Outpatient Ambulatory Health Service: Primary Care as priority #1.</p> <p>M/S/C: PSRAC 13/0</p> <p>Abstentions: Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Ransom, Spector, West, Zilvinskis</p> <p>Motion carries</p>	
	<p>Action: Approve ranking Outpatient Ambulatory Health Service: Medical Specialty as priority #2.</p> <p>M/S/C: PSRAC 13/0</p> <p>Abstentions: Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Ransom, Spector, West, Zilvinskis</p> <p>Motion carries</p>	
	<p>Action: Approve ranking Psychiatric Medication Management as priority #3.</p> <p>M/S/C: PSRAC 13/0</p> <p>Abstentions: Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Ransom, Spector, West, Zilvinskis</p> <p>Motion carries</p>	
	<p>Action: Approve ranking Oral Health as priority #4.</p> <p>M/S/C: PSRAC 17/0</p> <p>Abstentions: Jacobs, Lewis, Lochner, Price, West, Zilvinskis</p> <p>Motion carries</p>	
	<p>Action: Approve ranking Medical Case management as priority #5, Non-medical Case Management as priority #6, and Non-medical Case Management for Housing as priority #7.</p> <p>M/S/C: PSRAC 9/0</p> <p>Abstentions: Applebaum, Davenport, Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Ransom, Spector, Tilghman, Underwood, West, Zilvinskis</p> <p>Motion carries</p>	
	<p>Action: Approve ranking Emergency Housing as priority #8.</p> <p>M/S/C: PSRAC 15/0</p> <p>Abstentions: Jacobs, Lochner, Price, West, Zilvinskis</p> <p>Motion carries</p>	
	<p>Action: Approve ranking Housing Location, Placement, and Advocacy Services as priority #9; and ranking Partial Assistance Rental Subsidy (PARS) as priority #10.</p>	

Agenda Item	Action/Discussion	Follow-up
	M/S/C: PSRAC 14/0 Abstentions: Jacobs, Lewis, Lochner, Price, Underwood, West, Zilvinskis Motion carries	
	Action: Approve ranking Coordinated Health Services for Women, Infants, Children, Youth, and Families (CHS:WICYF) Housing Location, Placement, and Advocacy Services as priority #11, and ranking Childcare services (a subcategory of CHS:WICYF) as priority #11a. M/S/C: PSRAC 14/0 Abstentions: Applebaum, Jacobs, Lochner, Price, Tilghman, Van Brocklin, West, Zilvinskis Motion carries	
	Action: Approve ranking Early Intervention Services: Regional Services (EIS:RS) as priority #12; ranking Health Education and Risk Reduction (a subcategory of EIS:RS) as priority #12a; ranking Outreach Services (a subcategory of EIS:RS) as priority #12b; ranking Referral Services (a subcategory of EIS:RS) as priority #12c; and ranking Health Education and Risk Reduction (a stand-alone service category) as priority #13. M/S/C: PSRAC 14/0 Abstentions: Acevedo, Applebaum, Jacobs, Lochner, Price, Underwood, West, Zilvinskis Motion carries	
	Action: Approve ranking Peer Navigation (Referral for Health Care and Support Services) as priority #14; ranking Mental Health: Counseling/Therapy as priority #15; ranking Psychosocial Support Groups as priority #16; and ranking Substance Use Treatment services: Outpatient as priority #17. M/S/C: PSRAC 8/0 Abstentions: Acevedo, Applebaum, Davenport, Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Price, Ransom, Spector, Underwood, West, Zilvinskis Motion carries	
	Action: Approve ranking Substance Use Treatment services: Residential as priority #18. M/S/C: PSRAC 9/0 Abstentions: Applebaum, Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Price, Ransom, Spector, Tilghman, Underwood, West, Zilvinskis Motion carries	
	Action: Approve ranking Food Services: Home-delivered Meals as priority #21; ranking Medical Nutrition Therapy as priority #22; ranking Legal services as priority #23; and ranking Emergency Financial Assistance as priority #24. M/S/C: PSRAC 15/0 Abstentions: Acevedo, Applebaum, Jacobs, Lochner, Price, West, Zilvinskis Motion carries	

Agenda Item	Action/Discussion	Follow-up
	<p>Action: Approve ranking Home Health as priority #25; ranking Early Intervention Services: HIV Counseling and Testing as priority #26; ranking Cost-sharing Assistance as priority #27; and ranking Hospice as priority #28. M/S/C: PSRAC 15/0 Abstentions: Jacobs, Lewis, Lochner, Price, Underwood, West, Zilvinskis Motion carries</p> <p>The committee requested Steering Committee to look at ways in the future to handle priority rankings more efficiently and still avoid conflicts.</p>	Staff will add the topic to the September Steering Committee agenda.
d. Update: Revision of Bylaws	Mikie Lochner noted the Ad hoc committee met and addressed some issues recommended during the Health Resources and Services Administration (HRSA) site visit. The bylaws are being reviewed by County Counsel.	
e. ACTION: (Steering Committee): Elect HPG representative to Housing Committee	<p>Action: Elect Cinnamen Kubricky as the HPG representative to the Housing Committee. M/S/C: Acevedo/Villafan 17/0 Abstentions: Jacobs, Kubricky, Lochner, West, Zilvinskis Motion carries</p>	
f. ACTION: Approval of HPG Minutes from June 22, 2022	<p>Action: Approve the HPG minutes from June 22, 2022 as presented. M/S/C: Jacobs/Van Brocklin 14/0 Abstentions: Lochner, Mar-Tang, Price, Spector, West, Zilvinskis Motion carries</p>	
g. Action: Approval of HPG consent agenda for July 27, 2022	<p>Action: Approval of HPG consent agenda for July 27, 2022, which includes acceptance of the following committee minutes: Strategies and Standards Committee: June 7, 2022; Membership Committee; June 8, 2022; Priority Setting and Resource Allocation Committee: May 11, 2022, June 2, 2022 and June 9, 2022 June 16, 2022; (Included for your information, not for acceptance; CARE Partnership: June 13, 2022; Faith-Based Action Coalition: June 2, 2022) M/S/C: Acevedo/Ransom 15/0 Abstentions: Applebaum, Lochner, West, Zilvinskis Motion carries</p>	
10. HIV, STD, and Hepatitis Branch (HSHB) Reports – Patrick Loose		
a. HSHB Monthly Report: July 2022	<p>Lauren Brookshire reviewed the report which was included in the meeting materials packet. She highlighted the following:</p> <ul style="list-style-type: none"> • Several Procurements/Requests for Proposals (RFPs) are active/in development. • The HSHB has not yet received the report from the HRSA site visit. 	

Agenda Item	Action/Discussion	Follow-up
	<ul style="list-style-type: none"> The system capacity report reveals most service categories have good capacity; there is a 2 – 3 months wait for a psychiatry appt in the South region and a waiting period in the North region for Mental Health services; for both service categories appointments are available in other regions in-person and telehealth. 	
b. HRSA, CDC, and CDPH policies and procedures updates	No updates	
c. Expenditure/budget review	The expenditure report, through June 2022, which is 33% of the fiscal year expended some services have lower spending including Primary Care (22%), Medical Specialty (16%), Psychiatric Med. Mgmt. (10%), Oral Health (13%), Med. Case Mgmt. (27%), and Peer Navigation (21%).	
d. Service Utilization Summary Report – through June 2022	Service utilization through June 2022 shows an approx. 12% decrease compared to June 2021. Viral suppression among Ryan White clients who have a test on file is 92%.	
e. Monthly Client Service Evaluation (Goldenrod) CQM update – June 2022	One goldenrod was received in June with positive remarks.	
11. Reports		
a. Committee Reports	<ul style="list-style-type: none"> Priority Setting and Resource Allocation Committee: Making FY 23 allocation recommendations; all are welcome. Strategies & Standards Committee: Working to implement the HPG approved Justice, Equity, Diversity, and Inclusion/Identity (JEDI) principles. Consumer Group: No meeting in July; next meeting in September. Medical Standards and Evaluation Committee: Developing a workgroup to review the Getting to Zero Action Plan items pertinent to the committee. Membership Committee: Reviewing vacant seats and attempting to fill them; HPG members are needed on the committee. 	
b. Planning Group Support Staff (PGSS) Report	i. Administrative budget review – Tabled, report included in meeting materials packet. ii. Update: In-person meetings – Tabled	
c. Report from State Office of AIDS (OA) and AIDS Drug Assistance Program (ADAP)	Tabled – report included in meeting materials packet.	
d. Getting to Zero (GTZ) Community Engagement Project Updates	Tabled	
e. California HIV Planning Group	Tabled	

Agenda Item	Action/Discussion	Follow-up
f. Faith-Based Action Coalition	Tabled	
12. Suggestions to Steering Committee for consideration of future items	Tabled	
13. Announcements	Rodney von Jaeger announced: <ul style="list-style-type: none"> Christie's Place is having HIV Advocacy training starting August 30, 2022 at 4:00 p.m. The California Department of Public Health's Medication Assistance Program is inviting feedback from clients; for more information contact Tracy.Lee@cdph.ca.gov July 28th is World Hepatitis Day, for testing information contact the FHCSD website. 	
14. Next meeting date	Next Meeting:(Weekly) Wednesday, August 3, 2022 Location: WebEx	
15. Adjournment	5:05 PM	



County of San Diego

NICK MACCHIONE, FACHE
DIRECTOR

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

San Diego HIV Planning Group (HPG)

Wednesday, August 3, 2022

3:00 PM

Meeting occurred via video teleconference (WebEx)

MINUTES

Quorum is 14

HPG Members Present: Allan Acevedo / Beth Davenport / Dr. David Grelotti / Pam Highfill / Dr. Delores Jacobs / Cinnamen Kubricky / Robert Lewis / Mikie Lochner (Chair) / Venice Price / Karla Quezada-Torres / Shannon Ransom / James Rucker / Dr. Winston Tilghman / Rhea Van Brocklin / Freddy Villafan / Michael Wimpie / Joe Zilvinskis

HPG Members Absent: Amy Applebaum / Alberto Cortes / Alfredo De Jesus / Dr. Elizabeth Hernandez / Moira Mar-Tang / Raul Robles / Dr. Stephen Spector / Regina Underwood / Abigail West

Agenda Item	Action/Discussion	Follow-up
1. Call to Order/ Establishment of Quorum	Mikie Lochner, HPG Chair, called the meeting to order at 3:05 p.m. and noted the presence of a quorum.	
2. Chair Comments; Ground Rules & Abstentions	The chair led a moment of silence, reviewed the rules for teleconference meetings, discussed conflicts of interest rules, shared August staff and HPG member birthdays and thanked participants of the meeting.	
3. Public Comment (See page 2 of agenda for rules)	A member of the public referenced the HPG ground rules against personal attacks and stated that in the past they felt that they were verbally attacked in an HPG meeting by HPG members.	
4. Sharing our concerns/Comments on Items not on the agenda	A member of the HPG stated that California landlords can raise rents by 10% and noted that many people are living check to check. They stated that they were meeting more people who were having difficulty making ends meet and others who are using Fentanyl illegally.	
5. Action: Approval of the HIV Planning Group (HPG) agenda for August 3, 2022	Action: Approve the HPG meeting agenda for August 3, 2022 as presented. M/S/C: Villafan/Acevedo 14/0 Abstentions: Lochner, Zilvinskis Motion carries	
6. Old Business		

Agenda Item	Action/Discussion	Follow-up
None		
7. New Business		
a. ACTION: (Membership Committee): Review and approve recommendation(s) for HPG membership.	There are no Membership Committee recommendations currently.	
b. ACTION: (Priority Setting and Resource Allocation Committee) (PSRAC): Review and approve recommendations for reallocation of funds in FY 22 (the current year, March 1, 2022 – February 28, 2023)	There are no PSRAC reallocation recommendations currently.	
c. ACTION: (Priority Setting and Resource Allocation Committee): Review and approve recommendations for budget allocation in FY 23 in level and reduction funding scenarios (next fiscal year, March 1, 2023 – February 28, 2024)	<p>Public Comment: A member of the public noted the PSRAC made its best effort for the FY 23 budget allocations and some reallocation may be needed during the year.</p> <p>Dr. Jacobs explained there was a misunderstanding at the PRSAC meeting of July 28, 2022 on some aspects of the FY 23 level-funding scenario recommendations. The total additional amount recommended for the service category Partial Assistance Rental Subsidy (PARS) in the FY 23 level funding scenario was \$140,000. It was not clear at the time, that \$100,000 had been already added to PARS in June 2022 as part of the action item to address the increase in the FY 22 Part A grant award. In the FY 23 level-funding scenario recommendations coming from the PSRAC four service categories were affected by the misunderstanding:</p> <ul style="list-style-type: none"> • Outpatient Ambulatory Health Services: Primary Care • Medical Case Management • PARS • Psychosocial Support 	

Agenda Item	Action/Discussion	Follow-up
	<p>HPG members may want to make some changes to the recommendations coming from PSRAC for these service categories based on this revised information. These changes would need to be made as motions from the floor.</p>	
	<p>Action: Decrease funding to Outpatient Ambulatory Health Services: Primary Care (priority #1) by \$100,000 from \$1,032,630 to \$932,630. M/S/C: PSRAC 3/4 Abstentions: Davenport, Jacobs, Lochner, Lewis, Ransom, Villafan, Zilvinskis Motion fails</p>	
	<p>Action: Decrease funding to Outpatient Ambulatory Health Services: Primary Care (priority #1) by \$70,000 from \$1,032,630 to \$962,630. M/S/C: Kubricky/Rucker 6/0 Abstentions: Davenport, Grelotti, Jacobs, Lochner, Lewis, Price, Ransom, Villafan, Zilvinskis Motion carries</p>	
	<p>Action: Level-funding to Outpatient Ambulatory Health Services: Medical Specialty (priority #2) at \$273,386. M/S/C: PSRAC 8/0 Abstentions: Grelotti, Jacobs, Lochner, Lewis, Ransom, Villafan, Zilvinskis Motion carries</p>	
	<p>Action: Level-funding to Mental Health: Psychiatric Medication Management (priority #3) at \$28,036. M/S/C: PSRAC 9/0 Abstentions: Grelotti, Jacobs, Lochner, Lewis, Quezada-Torres, Ransom, Villafan, Zilvinskis Motion carries</p>	
	<p>Action: Level-funding to Oral Health (priority #4) at \$300,940. M/S/C: PSRAC 12/0 Abstentions: Jacobs, Lochner, Lewis, Villafan, Zilvinskis Motion carries</p>	
	<p>Action: Decrease funding to Medical Case Management (priority #5) by \$70,000 from \$1,268,338 to \$1,198,338. M/S/C: PSRAC 0/7 Abstentions: Davenport, Grelotti, Jacobs, Lochner, Lewis, Price, Ransom, Tilghman, Villafan, Zilvinskis Motion fails</p>	
	<p>Action: Level-funding to Medical Case Management (priority #5) at \$1,268,338. M/S/C: Kubricky/Rucker 8/0 Abstentions: Davenport, Grelotti, Jacobs, Lochner, Lewis, Ransom, Tilghman, Villafan, Zilvinskis</p>	

Agenda Item	Action/Discussion	Follow-up
	Motion carries	
	Action: Level-funding to Non-medical Case Management (priority #6) at \$392,021. M/S/C: PSRAC 8/0 Abstentions: Davenport, Grelotti, Jacobs, Lochner, Lewis, Ransom, Tilghman, Villafan, Zilvinskis Motion carries	
	Action: Level-funding to Non-medical Case Management for Housing (priority #7) at \$250,000; Level-funding to Emergency Housing (priority #8) at \$530,000; and Level-funding to Housing Placement, Location, and Advocacy Services (priority #9) at \$100,000. M/S/C: PSRAC 7/0 Abstentions: Grelotti, Highfill, Jacobs, Lochner, Lewis, Ransom, Tilghman, Van Brocklin, Villafan, Zilvinskis Motion carries	
	Action: Increase funding to Partial Assistance Rental Subsidy (PARS) (priority #10) by \$140,000 from \$767,507 to \$907,507. M/S/C: PSRAC 0/11 Abstentions: Jacobs, Lochner, Price, Villafan, Zilvinskis Motion fails	
	Action: Increase funding to Partial Assistance Rental Subsidy (PARS) (priority #10) by \$40,000 from \$767,507 to \$807,507. M/S/C: Grelotti/Rucker 12/0 Abstentions: Jacobs, Lochner, Villafan, Zilvinskis Motion carries	
	Action: Level-funding to Coordinated Health Services for Women, Infants, Children, Youth, and Families (CHS:WICYF) (priority #11) at \$943,317. This service category includes several subcategories, including Childcare services. M/S/C: PSRAC 7/0 Abstentions: Jacobs, Lochner, Lewis, Ransom, Tilghman, Van Brocklin, Villafan, Zilvinskis Motion carries	
	Action: Level-funding to Early Intervention Services: Regional Services (EIS:RS) (priority #12) at \$800,386 (this service category includes 3 subcategories); Zero funding to Health Education and Risk Reduction (HERR) (stand-alone HERR, independent of EIS:RS) (priority #13) at \$0; and Level-funding to Peer Navigation (Referral to Health Care and Support Services) (priority #14) at \$400,000. M/S/C: PSRAC 6/0	

Agenda Item	Action/Discussion	Follow-up
	Abstentions: Davenport, Jacobs, Lochner, Lewis, Price, Ransom, Villafan, Zilvinskis Motion carries	
	Action: Level-funding to Mental Health: Counseling and Therapy/Support Groups (priority #15) at \$1,061,062. M/S/C: PSRAC 7/0 Abstentions: Davenport, Jacobs, Lochner, Lewis, Price, Villafan, Zilvinskis Motion carries	
	Action: Increase funding to Psychosocial Support services (priority #16) by \$30,000 from \$30,000 to \$60,000. M/S/C: PSRAC 9/0 Abstentions: Jacobs, Lochner, Lewis, Ransom, Villafan, Zilvinskis Motion carries	
	Action: Level-funding to Substance Use Treatment services: Outpatient (priority #17) at \$315,217; Zero funding to Substance Use Treatment services: Residential (priority #18) at \$0; and Level-funding for Home-based Health Care Coordination (priority #19) at \$228,500. M/S/C: PSRAC 8/0 Abstentions: Jacobs, Lochner, Lewis, Price, Tilghman, Villafan, Zilvinskis Motion carries	
	Action: Level-funding to Transportation: Assisted and Unassisted (priority #20) at \$142,830; Level-funding to Food: Home-delivered Meals (priority #21) at \$536,073; and Level-funding to Medical Nutrition Therapy (priority #22) at \$35,542. M/S/C: PSRAC 7/0 Abstentions: Jacobs, Lochner, Lewis, Price, Ransom, Tilghman, Villafan, Zilvinskis Motion carries	
	Action: Level-funding to Legal services (priority #23) at \$285,265; and Level-funding to Food: Emergency Financial Assistance (priority #24) at \$28,730 M/S/C: PSRAC 11/0 Abstentions: Jacobs, Lochner, Price, Villafan, Zilvinskis Motion carries	
	Action: Zero funding to Home Health Care (priority #25) at \$0; Zero funding to Early Intervention Services: HIV Counseling and Testing (priority #26) at \$0; Zero funding to Cost Sharing Assistance (priority #27) at \$0; and Zero funding to Hospice (priority #28) at \$0. M/S/C: PSRAC 11/0	

Agenda Item	Action/Discussion	Follow-up
	Abstentions: Jacobs, Lochner, Price, Villafan, Zilvinskis	
	At the next meeting PSRAC will address the FY 23 MAI level funding budget, the FY 23 reduction funding scenario budget and service directives.	
d. ACTION: (Priority Setting Committee): Review and approve recommendations for service directives for FY 23 (next fiscal year, March 1, 2023 – February 28, 2024)	There are no PSRAC service directive recommendations currently.	
8. HIV, STD, and Hepatitis Branch (HSHB) Reports – Patrick Loose		
a. Expenditure/budget review	<p>The expenditure report was included in the meeting materials packet. Patrick Loose highlighted the following:</p> <p>Part A funding: At the end of June 2022, 33% of the fiscal year elapsed, some services had decreased expenditures, including Primary Care (22%), Medical Specialty (16%), Psych. Med. Mgmt (10%), Oral Health (13%), Med. Case Mgmt (27%), Peer Navigation (21%), Home-Based Health Care Coord. (26%), Emergency Financial Assistance (14%)</p> <p>Other funding: The Ending the HIV Epidemic (EHE) grants from HRSA and CDC are both underspending, however there is an anticipation of carrying over all the funds from years 1 – 2 of the grants into years 3, 4, & 5.</p>	
b. Service Utilization Summary Report – through June 2022	<p>The report was included in the meeting materials packet. There was an approx. 10% decrease in the number of clients served compared to the same time the previous year. There is increased utilization in Medical Specialty and Oral Health.</p> <p>There are 54 probable cases of Monkeypox in San Diego County, the majority among men who have sex with men. The virus is spread by skin-to-skin. For more information on Monkeypox visit the website https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/community_epidemiology/dc/human-monkeypox/</p>	
9. Suggestions to Steering Committee for consideration of future items	None	

Agenda Item	Action/Discussion	Follow-up
10. Announcements	<ul style="list-style-type: none"> Christie's Place is hosting "Dancing With Hope" A <i>Strength for the Journey Women's Empowerment Retreat</i> September 23, 24 & 25 2022 in Julian. For more information contact Rhea Van Brocklin at rvbrocklin@christiesplace.org. Christie's Place is hosting a training, The Project PEARL, to train persons living with HIV in advocacy on August 30, 2022 4:00 p.m. For more information, please contact Jessica Sanchez at jsanchez@christiesplace.org. Mikie Lochner noted that Rhea Van Brocklin presented at the International AIDS Conference. 	
10. Next meeting date	Next Meeting: Wednesday, August 10, 2022 Location: WebEx	
11. Adjournment	4:53 p.m.	



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

San Diego HIV Planning Group (HPG)

Wednesday, August 10, 2022

3:00 PM

Meeting occurred via video teleconference (WebEx)

MINUTES

Quorum is 14

HPG Members Present: Allan Acevedo / Amy Applebaum / Alberto Cortes / Dr. David Grelotti / Pam Highfill / Dr. Delores Jacobs / Robert Lewis / Mikie Lochner / Moira Mar-Tang / Venice Price / Shannon Ransom / James Rucker / Dr. Winston Tilghman / Regina Underwood / Freddy Villafan / Michael Wimpie / Joe Zilvinskis

HPG Members Absent: Beth Davenport / Alfredo De Jesus / Dr. Elizabeth Hernandez / Cinnamon Kubricky / Karla Quezada-Torres / Raul Robles / Dr. Stephen Spector / Rhea Van Brocklin / Abigail West

Agenda Item	Action/Discussion	Follow-up
1. Call to Order/ Establishment of Quorum	Mikie Lochner, HPG Chair, called the meeting to order at 3:02 p.m. and noted the presence of a quorum.	
2. Chair Comments; Ground Rules & Abstentions	The chair led a moment of silence, welcomed participants, reviewed the rules for a teleconference meeting and the rules for Conflicts of Interest.	
3. Public Comment (See page 2 of agenda for rules)	A member of the public was not aware that public comment occurred only at the beginning of an agenda item even if there were several parts/actions. They also stated the data in the service utilization reports does not make sense to them, noted that the PARS data is from March 2022, and that at present there is the lowest number of consumers on the HPG they have ever seen.	
4. Sharing our concerns/Comments on Items not on the agenda (for HPG members)	An HPG member stated that they were disappointed that a provider moved to a new location without notice to the community and that their phone number goes directly to voicemail.	
5. Action: Approval of the HIV Planning Group (HPG) agenda for August 10, 2022	Action: Approve the HPG meeting agenda for August 10, 2022 as presented. Public Comment: A member of the public stated there is no Consumer Vice-chair for the HPG and stated that this should have been added to the HPG agenda.	

Agenda Item	Action/Discussion	Follow-up
	M/S/C: Villafan/Rucker 13/0 Abstentions: Applebaum, Lochner, Underwood, Zilvinskis Motion carries	
6. Old Business		
None		
7. New Business		
a. ACTION: (Membership Committee): Review and approve recommendation(s) for HPG membership.	There are no Membership Committee recommendations currently.	
b. ACTION: (Priority Setting and Resource Allocation Committee) (PSRAC): Review and approve recommendations for reallocation of funds in FY 22 (the current year, March 1, 2022 – February 28, 2023)	Dr. Jacobs reviewed the PSRAC recommendations; the action item information sheet was included in the meeting materials packet.	
	Action: Decrease funding to Primary Care (priority #1) by \$100,000, from 1,032,630 to \$932,630. M/S/C: PSRAC 7/0 Abstentions: Applebaum, Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Ransom, Underwood, Villafan, Zilvinskis Motion carries	
	Action: Increase funding to Medical Case Management (priority #5) by \$50,000, from \$1,268,338 to \$1,318,338 M/S/C: PSRAC 6/0 Abstentions: Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Ransom, Underwood, Villafan, Zilvinskis Motion carries	
c. ACTION: (Priority Setting and Resource Allocation Committee): Review and approve recommendations for	Dr. Jacobs reviewed PSRAC recommendations for FY 23 Minority AIDS Initiative (MAI) funding in a level-funding scenario. The action item information sheet was included in the meeting materials packet. Action: Level-funding for Minority AIDS Initiative (MAI): \$574,238 for Multi-Disciplinary Teams and	

Agenda Item	Action/Discussion	Follow-up
budget allocation in FY 23 in level and reduction funding scenarios (next fiscal year, March 1, 2023 – February 28, 2024)	<p>\$100,000 for MAI Emergency Housing for a total of \$674,238.</p> <p>M/S/C: PSRAC 10/0</p> <p>Abstentions: Applebaum, Jacobs, Lewis, Lochner, Underwood, Villafan, Zilvinskis</p> <p>Motion carries</p>	
	<p>Dr. Jacobs reviewed the PSRAC recommendations for the FY 23 reduction-funding scenario. The action item information sheet was included in the meeting materials packet.</p> <p>Action: Use 1% of the combined FY 23 Part A and Minority AIDS Initiative (MAI) level-funding scenario total of \$10,423,948 for the reduced-funding scenario (= \$104,240).</p> <p>M/S/C: PSRAC 6/0</p> <p>Abstentions: Applebaum, Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Price, Ransom, Underwood, Villafan, Zilvinskis</p> <p>Motion carries</p>	
	<p>Action: Decrease funding to Outpatient Ambulatory Health Services: Primary Care (priority #1) by \$50,000 from \$932,630 to \$882,630.</p> <p>M/S/C: PSRAC 7/0</p> <p>Abstentions: Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Price, Ransom, Underwood, Villafan, Zilvinskis</p> <p>Motion carries</p>	
	<p>Action: Decrease funding to Medical Case Management (MCM) Services (Priority #5) by \$54,240 from \$1,198,338 to \$1,144,098.</p> <p>M/S/C: PSRAC 6/0</p> <p>Abstentions: Applebaum, Grelotti, Jacobs, Lewis, Lochner, Mar-Tang, Ransom, Tilghman, Underwood, Villafan, Zilvinskis</p> <p>Motion carries</p>	
d. ACTION: (Priority Setting Committee): Review and approve recommendations for service directives for FY 23 (next fiscal year, March 1, 2023 – February 28, 2024)	<p>Dr. Jacobs reviewed the PSRAC recommendations; the action item information sheet was included in the meeting materials packet.</p>	
	<p>Action: Carve out to Peer Navigation (Referral to Health Care and Support Services) (priority #14), to ensure that youth (those 26 years of age and under) have access to youth peer services while also keeping the Peer Navigation service category available for all in all five HHSA regions. Also request information regarding any additional funds needed to accomplish this service recommendation.</p> <p>M/S/C: PSRAC 7/0</p>	

Agenda Item	Action/Discussion	Follow-up
	<p>Abstentions: Applebaum, Jacobs, Lewis, Lochner, Mar-Tang, Ransom, Underwood, Villafan, Zilvinskis</p> <p>Motion carries</p>	
	<p>Action: Recommend to the Standards and Strategies Committee that the Universal Standards be modified to ensure that all clients are assessed regarding their interest in participating in telehealth and that those who are interested are assessed for capacity (phone, data service, pad, etc.) and provided with options to obtain what is needed.</p> <p>M/S/C: PSRAC 11/0</p> <p>Abstentions: Applebaum, Jacobs, Lochner, Villafan, Zilvinskis</p> <p>Motion carries</p>	
8. HIV, STD, and Hepatitis Branch (HSHB) Reports – Patrick Loose		
a. Expenditure/budget review	The report was included in the meeting materials packet and was reviewed at last week's HPG meeting. There were no questions regarding the report.	
b. Service Utilization Summary Report – through June 2022	The report was included in the meeting materials packet and was reviewed at last week's HPG meeting. There were no questions regarding the report.	
9. Suggestions to Steering Committee for consideration of future items	None	
10. Announcements	<ul style="list-style-type: none"> There will be an HPG meeting on August 24, 2022 to address the core medical services waiver, Assessment of the administrative Mechanism, and discuss an HPG task force for Monkeypox. There will <u>not</u> be an HPG meeting on August 17, 2022. There will be a Townhall Meeting/webinar on Monkeypox on Thursday, August 11, 2022 6:00 – 7:30 p.m. via tinyurl/Monkeypox.com or telephone 1-669-990-6833 Webinar ID: 849 2176 3751 Passcode: 576964 	
10. Next meeting date	<p>Next Meeting:(Weekly) Wednesday, August 24, 2022 3:00 p.m.</p> <p>Location: WebEx</p>	
11. Adjournment	4:02 p.m.	



County of San Diego

NICK MACCHIONE, FACHE
DIRECTOR

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

San Diego HIV Planning Group (HPG)

Wednesday, August 24, 2022

3:00 PM

Meeting occurred via video teleconference (WebEx)

MINUTES

Quorum is 14

HPG Members Present: Alberto Cortes / Beth Davenport / Alfredo De Jesus / Dr. David Grelotti / Dr. Elizabeth Hernandez / Pam Highfill / Dr. Delores Jacobs / Cinnamon Kubricky / Robert Lewis / Mikie Lochner / Moira Mar-Tang / Venice Price / Karla Quezada-Torres / Shannon Ransom / Raul Robles / James Rucker / Dr. Stephen Spector / Dr. Winston Tilghman / Regina Underwood / Rhea Van Brocklin / Freddy Villafan / Michael Wimpie / Joe Zilvinskis

HPG Members Absent: Allan Acevedo / Amy Applebaum / Abigail West

Agenda Item	Action/Discussion	Follow-up
1. Call to Order/ Establishment of Quorum	Mikie Lochner, HPG Chair, called the meeting to order at 3:00 p.m. and noted the presence of a quorum.	
2. Action: Continuation of Teleconferencing	<p>All votes at the meeting were taken by roll call; HPG members' names were called out verbally, then individual voice votes were noted and recorded.</p> <p>Action: Continuation of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e).</p> <ul style="list-style-type: none"> a. Find HPG has reconsidered the circumstances of the State of Emergency b. Find that State and local officials continue recommending measures to promote social distancing. <p>Motion/Second/Count (M/S/C): Van Brocklin/Ransom 17/0</p> <p>Abstentions: De Jesus, Hernandez, Lochner, Zilvinskis</p> <p>Motion carries</p>	
3. Chair Comments; Ground Rules & Abstentions	The chair thanked meeting participants, particularly consumers, reviewed the rules of the meeting, teleconferencing rules, conflict of interest rules, and led a moment of silence.	

Agenda Item	Action/Discussion	Follow-up
4. Public Comment (See page 2 of agenda for rules)	A member of the public stated the racial categories on the HPG membership application do not conform with those of the Health Resources and Services Administration (HRSA); they stated Chicano is not a race.	
5. Sharing our concerns/Comments on Items not on the agenda (for HPG members)	A member of the HPG thanked Mikie Lochner for the Townhall meeting on Monkeypox. A member of the HPG noted consumer rents may increase by 10% and the costs of utilities and food are also increasing; Emergency financial services may become a more important service category.	
6. Action: Approval of the HIV Planning Group (HPG) agenda for August 24, 2022	Action: Approve the HPG Meeting agenda for August 24, 2022 as presented. M/S/C: Rucker/Jacobs 18/0 Abstentions: De Jesus, Hernandez, Lochner, Zilvinskis Motion carries	
7. Old Business		
None		
8. New Business		
a. ACTION: (Membership Committee): Review and approve recommendation(s) for HPG membership.	There are no Membership Committee recommendations currently.	
b. ACTION: (Priority Setting and Resource Allocation Committee) (PSRAC): Review and approve recommendations for reallocation of funds in FY 22 (the current year, March 1, 2022 – February 28, 2023)	There are no PSRAC recommendations for FY 22 reallocations currently.	
c. ACTION: Approve the recommendation to request a Medical Core Services Waiver for FY 23.	Action: Approve the recommendation to request a Medical Core Services Waiver for FY 23. M/S/C: Cortes/Villafan 14/0 Abstentions: De Jesus, Grelotti, Hernandez, Jacobs, Lochner, Mar-Tang, Tilghman, Zilvinskis Motion carries	

Agenda Item	Action/Discussion	Follow-up
<p>d. ACTION: Review the Assessment of the Administrative Mechanism report and move to accept with any questions forwarded to the HSHB.</p>	<p>Rodney von Jaeger reviewed the administrative mechanism report, which was sent to HPG prior to the meeting by email.</p> <p>Action: Move to accept the Assessment of the Administrative Mechanism report with the following recommendation: Recipient's office should provide average time from Notice of Award for Ryan White (RW) Part A/MAI services to start of contract for any new RW services or RW service categories."</p> <p>Public comment: A member of the public stated some providers in the community are not notified in a timely manner regarding changes in funds for services or depletion of funds in a service category. Staff noted that this referenced incident occurred outside of the timeframe being evaluated by this report, which is the past fiscal year, FY 21 (March 1, 2021 – February 28, 2022)</p> <p>M/S/C: Van Brocklin/Kubricky 18/0</p> <p>Abstentions: De Jesus, Hernandez, Lochner, Tilghman, Zilvinskis</p> <p>Motion carries</p>	
<p>e. ACTION: Discuss and approve the recommendation to convene an HPG task force for Monkeypox.</p>	<p>Action: Approve the recommendation to convene an HPG task force for Monkeypox</p> <p>Public comment:</p> <p>A member of the public noted they were glad to see that advising the County on equitable distribution of the vaccine was included in this action.</p> <p>A member of the public stated a task force was not needed at this time.</p> <p>Discussion: An HPG member recommended that data on women and Monkeypox is collected.</p> <p>M/S/C: Cortes/Highfill 18/0</p> <p>Abstentions: De Jesus, Hernandez, Lochner, Zilvinskis</p> <p>Motion carries</p>	
<p>f. ACTION: Approval of the HPG minutes from July 27, 2022, August 3, 2022, and August 10, 2022.</p>	<p>Action: Approval of the HPG minutes from July 27, 2022 as presented.</p> <p>M/S/C: Villafan/Van Brocklin 17/0</p> <p>Abstentions: De Jesus, Hernandez, Highfill, Lochner, Rucker, Zilvinskis</p> <p>Motion carries</p> <hr/> <p>Action: Approval of the HPG minutes from August 3, 2022 as presented.</p> <p>M/S/C: Villafan/Highfill 14/0</p> <p>Abstentions: Cortes, De Jesus, Hernandez, Lochner, Mar-Tang, Robles, Spector, Underwood, Zilvinskis</p>	

Agenda Item	Action/Discussion	Follow-up
	Motion carries	
	Action: Approval of the HPG minutes from August 10, 2022 as presented. M/S/C: Rucker/Villafan 12/0 Abstentions: Davenport, De Jesus, Hernandez, Kubricky, Lochner, Quezada-Torres, Rucker, Spector, Van Brocklin, Zilvinskis Motion carries	
9. HIV, STD, and Hepatitis Branch (HSHB) Reports – Patrick Loose		
a. HSHB Monthly Report: August 2022	The report was included in the meeting materials packet. Patrick Loose highlighted the following: <ul style="list-style-type: none">• The County declared Monkeypox a public health emergency on August 2, 2022.• You can now receive text updates about monkeypox from the County. Text COSD MONKEYPOX to 468-311.• A virtual Monkeypox Townhall was held on Thursday, August 11th. A recording is available on the County website.• Additional information and resources including data now available on the Monkeypox website: www.SanDiegoCounty.gov/monkeypoxSD	
b. HRSA, CDC and CDPH policies and procedures updates	There are no policy and procedure updates. A written response to the HRSA site visit corrective action plan will be submitted soon. A non-competing continuation report for the Part A/MAI grant will be submitted to HRSA on October 3, 2022.	
c. Expenditure/budget review	The report was included in the meeting materials packet. For Ryan White (RW) Part A funds, through June 2022, which is 33% of the FY 22 fiscal year elapsed, there is decreased expenditures in Primary Care (22%), Medical Specialty (16%), Psychiatric Medication Management (10%), Oral Health (13%), Medical Case Management (27%), Referral to Health Care and Support Services (Peer Navigation) (21%), Home-based Healthcare Coordination (24%), and Emergency Financial Assistance (14%). RW Part B expenditures are as expected. Two Ending the HIV Epidemic (EHE) grants are underspending due to delays in release of procurements. Both HRSA and the CDPH will allow carryover of funds from Years 1 and 2 of the projects to Years 3-5.	

Agenda Item	Action/Discussion	Follow-up
d. Service Utilization Summary Report – July 2022	The report was included in the meeting materials packet. Service was provided to 2,396 clients, which is approx. an 11% decline from clients served during the prior grant period (2,698).	
e. Monthly Client Service Evaluation (Goldenrod) Summary Report CQM update – July 2022	There was one goldenrod received in July for a RW service provider, which consisted of positive comments.	
10. Suggestions to Steering Committee for consideration of future items	<ul style="list-style-type: none"> An HPG member recommended more on programs and data for the Transgender community, specifically what programs and data are available? An HPG member recommended information on long-term survivors of HIV and addressing all health issues, in addition to HIV. 	Staff will add the recommendations to the Steering Committee agenda.
11. Announcements	<ul style="list-style-type: none"> The PEARL Leadership training program will start on August 30, 2022. If interested, please contact Jessica Sanchez, Project Coordinator jsanchez@christiesplace.org or (619)702-4186. There are still spots available for the September Retreat for Women in Julian. If interested, please contact Kenyatta Parker at 619-702-4186. August 29th is National Faith HIV/AIDS Awareness Day. There will be a panel discussion on Faith and HIV on Monday, August 29, 2022 5:30 p.m. at the Coyote Café in Old Town. For more information, please contact Karla Quesada-Torres at karla.quezadatorres@gilead.com The Ryan White AIDS Conference is occurring this week. Anyone interested in joining the Monkeypox Task Force please contact HPG Support Staff at HPG.HHSA@sdcounty.ca.gov. 	
12. Next meeting date	Next Meeting:(Weekly) Wednesday, September 28, 2022 3:00 p.m. Location: WebEx	
13. Adjournment	4:33 p.m.	



County of San Diego

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

SAN DIEGO HIV PLANNING GROUP STRATEGIES AND STANDARDS COMMITTEE

Tuesday July 5, 2022
11:30 AM – 1:00 PM
Meeting by ZOOM

DRAFT MINUTES
Quorum = Eight (8)

Present: Allan Acevedo (Co-Chair), Amy Applebaum, Samantha Bowen, Kimberly Brouwer, Beth Davenport, Liz Johnson, Shannon Ransom (Chair), Rhea Van Brocklin,

Absent: Lucia Franco, Moira Mar-Tang, Joseph Mora, Venice Price, Dr. Winston Tilghman, Michael Wimpie

Agenda Item	Action	Follow-up
1. Call to order	Shannon Ransom established that a quorum was present at 11:31 AM and called the meeting to order.	
2. ACTION ITEM: Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)	Motion: Recognize that there is a continued proclaimed state of emergency and State and local officials have imposed or recommended measures to promote social distancing authorizing teleconferenced meetings pursuant to Government Code section 54953(e). Motion/Second/Count (M/S/C): Johnson/Van Brocklin (7/0) Abstention(s) Ransom Motion carries.	
3. Public Comment/Sharing our Concerns	A member of the community commented that they liked that the meeting began with a roll call. They stated that they wished that all committees had the same agenda.	
4. Review and approve the agenda for July 5, 2022	Motion: Approve the agenda for the July 5, 2022 meeting as presented. M/S/C: Acevedo/Johnson (7/0) Abstention(s): Ransom Motion carries.	
5. Review and approve the Minutes for June 7, 2022	Motion: Approve the minutes for the June 7, 2022 meeting as presented. M/S/C: Acevedo/Van Brocklin (5/0) Abstentions: Applebaum, Davenport, Ransom	

Agenda Item	Action	Follow-up
	Motion carries.	
6. Old Business		
a) Discussion: Additional Townhall Meetings to further discuss the Integrated Plan	<p>HSHB is in the process of hiring a consultant. The committee noted that the list of priority populations on the agenda for this item is not final or definitive and should be reviewed. L. Brookshire confirmed that developing a list of priority populations will be part of the scope of work and that actual plan will be developed and submitted for approval.</p> <p>Support staff informed the Committee that Jeffery Weber had been added to the committee on May 26, 2022. Today's meeting agenda did not include his name when posted so he will not vote today but will be added to committee role.</p>	
b) Discussion: Implementation of the JEDI Principles	The Committee discussed and agreed that it will consider recommending a poll of HPG and committee members. This poll could be used to determine training priorities. Poll and training could potentially be facilitated by the GTZ consultant being hired by HSHB. The committee would also like to consider list of potential training resources. Myleen Abuan Paragas will contact Meredith Lee, who may be able to do training regarding JEDI Principles. Other trainers may be needed to supplement this training. Committee Members would also like to review a paired down slide with land acknowledgment to consider a recommendation that it be included for all committee meetings.	<p>Myleen Abuan Paragas to work with support staff to contact Meredith Lee.</p> <p>Support staff to develop a simplified version of the land acknowledgment slide.</p>
7. New Business		
a) Consider Cancellation of August Meeting due to Weekly HPG Meetings	<p>Motion: Cancel the scheduled meeting on August 2, 2022.</p> <p>M/S/C: Johnson/Davenport (7/0)</p> <p>Abstentions: Ransom</p> <p>Motion carries.</p>	
b) Update: Planned Changes to RW Annual Enrollment – Impact on Enrollment Throughout the Part A System	HSHB is developing a memo detailing the change and the Aug 1 st start date to be distributed to Ryan White providers by July 11, 2022. HSHB website will also be updated by July 11 th . This information will be presented to Case Managers during their monthly meeting with HSHB on July 14 th . This information will be reviewed at Steering (July 21), Consumer Group (July 23) and at HPG (July 27). Consumers will only be required to present eligibility paperwork on enrollment but may need to provide information for re-certification annually on their birthday. Consumers will only need to enroll in Ryan White at one location but may need to	Add to committee and HPG agendas

Agenda Item	Action	Follow-up
	complete any provider-specific enrollment for each provider.	
8. Routine Business		
a) Getting to Zero 3-Yr Action Plan: Next Priority	This item to added to the September. At that time, the committee will consider whether this decision will be made in a work group or in the committee. A member expressed their preference to begin with items 4d and 4 g because Housing is an important issue and the training would align with the work that the committee has been doing.	Add this to the September agenda. Coordinate with consultant if available
9. Update Committee Work Plan		
a) Upcoming Trainings	At the next meeting in September, the committee will work on developing a work plan that includes a schedule for the rest of the year. This will include an outline of when the committee plans to complete tasks throughout the year in order to ensure that recommendations can be provided to other committees in a timely manner.	This item to be added to the September agenda
10. Recommendations to HPG, HPG committees and requests of recipient	None	
11. Suggested items for the future committee agenda	None.	
12. Announcements	County Public Health is doing a Meningococcal Vaccination event on Sunday, July 10 at the San Diego LGBT Community Center from 9:00 AM – 2:00 PM	
13. Confirm next meeting date and time	Tuesday, September 6, 2022 at 11:30 AM Location: Zoom	
14. Adjournment	Meeting adjourned at 12:37PM.	



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

SAN DIEGO HIV PLANNING GROUP (HPG) MEMBERSHIP COMMITTEE

Wednesday, July 13, 2022
11:00 AM – 1:00 PM

WebEx

DRAFT MINUTES
Quorum = Three (3)

Present: Bob Lewis (Chair), Mikie Lochner, Regina Underwood, Freddy Villafan, Joe Zilvinskis (Co-Chair)

Agenda Item	Action	Follow-up
1. Call to order	Bob Lewis called the meeting to order at 11:01 a.m. and noted that a quorum was established.	
2. ACTION ITEM: Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)	Motion: Recognize that there is a continued proclaimed state of emergency, and State and local officials have imposed or recommended measures to promote social distancing authorizing teleconferenced meetings pursuant to Government Code section 54953(e). Motion: Continue Teleconference M/S/C: Lochner/Villafan 3/0 Abstentions: Lewis/Zilvinskis Motion carries	
3. Public Comment/Non-committee members' comment	None.	
4. Action: Review and approve the July 13, 2022 agenda	Motion: Approve the July 13, 2022 meeting agenda. M/S/C: Lochner/Villafan 3/0 Abstentions: Lewis, Zilvinskis Motion carries	
5. Action: Review and approve the June 8, 2022 meeting minutes	Action: Approve the June 8, 2022 meeting minutes as presented. M/S/C: Lochner/Villafan 3/0 Abstentions: Lewis, Zilvinskis Motion carries	

Agenda Item	Action	Follow-up
6. Review follow-up items	Reviewed by HPG Staff	
7. Review Applications	None.	
8. Membership Interview	<p>Felipe Garcia-Bigley was interviewed. The average score was 18.3.</p> <p>Action: Recommend HPG approve the nomination of Felipe Garcia-Bingley and send the nomination to the San Diego County Board of Supervisors to fill “Recipient of Other Federal HIV Programs - Prevention Provider” seat 38.</p> <p>M/S/C: Lochner/Villafan 3/0</p> <p>Abstentions: Lewis, Zilvinskis</p> <p>Motion carries</p>	
9. Old Business		
<p>a) Focused Recruitment</p> <p>i. Open Seat</p> <p>ii. Underrepresented groups</p> <p>iii. Review draft HPG trifold brochure</p>	<p>Review vacant HPG membership seats:</p> <ul style="list-style-type: none"> • Persons Living with HIV/AIDS who use Ryan White Part A service (employees or board members of a Ryan White funded service provider not eligible for this category) – 9 open seats (9 seats). • Person who uses HIV Prevention services such as PrEP or PEP • Representative of a Federally funded HIV Prevention Service Provider • Representative of an HIV Testing provider • Prevention Services Consumer/Advocate • Prevention Intervention Representative • Representative appointed by Board of Supervisors District 1 • Representative appointed by Board of Supervisors District 5 • Representative of the Hospital Planning Agency or Health Care Planning Agency • Representative of State Government- State Medicaid (Medi-Cal) program • Representative of Federal HIV Programs/Veterans Administration <p>2 Members resigned</p> <ul style="list-style-type: none"> • Roger Al-Chaikh Prevention Services Consumer Advocate • Karen Connolly Prevention Intervention Represented 	

Agenda Item	Action	Follow-up
	The committee discussed Membership recruitment. Members would like to advertise across the County, especially in the North and South regions. Venues discussed include: <ul style="list-style-type: none"> • Bay Pride - South Bay Pride • Big Gay Picnic at Balboa Park • Navigation Collaboration meetings. 	
	The HPG Brochure/Trifold was reviewed, and changes/suggestions will be emailed to Villafan for the update.	Once HPG Brochure/Trifold is completed, it will be sent off to Steering Committee and then to HPG for approval.
b) Review Termed Seat Positions for 2022 & 2023	The committee reviewed the termed seat table. A committee member suggested that HPG members should be informed about their termed date.	HPG will inform members six months before their mmmm ends, either to be reappointed or for an open seat update to recruit
10. New Business		
i. Discussion: Should HPG and committee members report to the meeting Chair or support staff if they will not be able to attend a meeting?	The committee members agree that HPG members should email HPG staff when they are unable to join the meeting (absent). If possible, they should also inform committee chairs.	
ii. Discussion: Should Membership Committee meet in August or cancel a meeting due to HPG weekly meetings?	Action: Cancel the August 2022 Membership Committee meeting due to HPG weekly meetings M/S/C: Lochner/Villafan 3/0 Abstentions: Lewis, Zilvinskis Motion carries	
11. Review Attendance		
i. HPG Attendance	Reviewed	HPG will follow up with De Jesus and Highfill regarding attendance
ii. Committee Attendance	Reviewed	
12. Routine Business		
i. Getting to Zero (GTZ) 3-Year Action Plan	The HIV, STD, and Hepatitis Branch (HSHB) is still working on hiring staff for additional support.	
ii. Mentor Appointments	Evaluation for Mentors/Prospective Mentors Highfill needs a mentor - possibly Dr. Jacobs.	Lochner will reach out to Dr. Jacobs to be Highfill's mentor.
iii. Committee Appointments	Garcia-Bigley will be attending committee meetings- PSRAC and Membership. Lochner suggested an annual poll of HPG members to ask them about their committee preferences and whether they	HPG staff will add an annual poll of members regarding committee preference to the HPG Work Plan

Agenda Item	Action	Follow-up
	are interested in switching to a new committee.	Add MSEC Committee attendance to the Sept agenda.
13. Agenda items for future meetings	None.	
14. Announcements	Happy Pride Month Encourage consumers to call 211 for Monkeypox vaccine appointments (limited vaccines)	
15. Next Meeting Date	Wednesday, August 10, 2022, 11:00 a.m. via WebEx	
16. Adjournment	Meeting adjourned at 12:40 p.m.	



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

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

Thursday, June 23, 2022

3:00 PM – 5:00 PM

WebEx Meeting

DRAFT MINUTES

Quorum is Seven (7)

Members: Beth Davenport / Reginald Carroll / Alberto Cortes / Dr. Delores Jacobs (Chair) / Chris Mueller / Karla Torres / Regina Underwood / Rhea Van Brocklin

Members Absent: Pam Highfill / Cinnamen Kubricky / Raul Robles / James Rucker

Agenda Item	Action	Follow-up
1. Call to order	Dr. Jacobs called the meeting to order at 3:02 p.m. and noted that a quorum was established.	
2. Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)	Motion: Find that the Committee has reconsidered the State of Emergency and that State and local officials continue to recommend measures to promote social distancing authorizing teleconferenced meetings pursuant to Government Code section 54953(e). Motion/Second/Count (M/S/C): Van Brocklin/Torres 5/0 Abstentions: Jacobs Motion carries	
3. Reminders	Rhea Van Brocklin read the committee charge. Dr. Jacobs reviewed the rules for conflicts of interest (COI) and the committee's role. There was a request for clarification of conflict of interest regarding case management, specifically, do members who have a relationship to a provider that has case managers need to abstain in all categories that include case management services, e.g., transportation, housing, etc.	Request clarification from the Steering Committee regarding COIs for case managers.

Agenda Item	Action	Follow-up
4. Public Comment on non-agenda items (for members of the public)	None	
5. Committee Members: Sharing Our Concerns on non-agenda items	A committee member stated additional training was needed on the difference between public comments and sharing concerns at meetings.	
6. Action: Review and approve agenda for June 23, 2022	Action: Approve the June 23, 2022 meeting agenda as presented. Motion/Second/Count (M/S/C): Carroll/Mueller 6/0 Abstentions: Jacobs Motion carries	
7. Action: Review and approve meeting minutes for May 11, 2022, June 2, 2022 and June 9, 2022 June 16, 2022	Motion: Approve the May 11, 2022, June 2, 2022, June 9, 2022 and June 16, 2022 meeting minutes as a group as presented with the noted change: On the June 2, 2022 minutes, change the quorum to seven (7). (M/S/C): Carroll/Van Brocklin 4/0 Abstentions: Cortes, Davenport, Mueller, Torres Motion carries	Staff will update the June 2, 2022, PSRAC minutes.
8. Routine Business a) COVID-19 update	Transmission in San Diego County continues to be a concern; the number of cases has increased to 1,000. however, hospitalizations and deaths are rare for those who are vaccinated.	
b) Review monthly and YTD expenditure and examine for any recommended reallocations. i. Review of over/under spending	FY 22 expenditure reports are unavailable as invoices are pending; a report will be available for the second meeting in July.	
c) Affordable Care Act (ACA) update	Medi-Cal in California has expanded to include everyone who is 50 or older and whose -income is less than 138% of the federal poverty level (FPL); the Recipient's office will assist clients' transfer; however, no clients will be denied Ryan White (RW) services if they are unwilling or unable to enroll in Medi-Cal.	
d) Review Monthly and YTD service utilization report	There is a decrease in the overall number of individual unique clients by approx. 10 – 14%, approximately one-half of the decline in numbers is in Primary Care, as perhaps clients are enrolling in ACA or Medi-Cal.	

Agenda Item	Action	Follow-up
e) HIV Prevention update	A testing report will be available for the next meeting.	
f) Review/update FY 22 Work Plan as needed	Reviewed; remove the work plan from the June 30, 2022 meeting, which is not scheduled.	Staff will update the work plan.
9. Old Business		
a) Getting to Zero (GTZ) Community Action Plan 1) Review Housing data (if available) 2) Discussion/Potential Action Item: Continue to discuss PARS waiting list, including recommendation regarding the waiting list and service directives.	The committee reviewed the potential service delivery recommendations for Partial Assistance Rental Subsidy (PARS), including 1. Limiting the program to 24 months. 2. Having clients meet with a housing case manager, and 3. Ensure that implementation would be done to minimize the impact on the clients currently using PARS. The committee decided to wait until the Housing Case Management services are in place to make any recommendations.	Table on the PSRAC agenda until the Housing Case Management program(s) are in place.
b) Elect a new committee co-chair	Nominations for a new committee co-chair will remain open.	
10. New Business		
a. Action Item: Approve the recommendation(s) for reallocation of Part A funds in FY 22 (the current fiscal year; March 1, 2022 – February 28, 2023).	None currently	
11. Review any additional data that is available	The committee reviewed the list of data sets reviewed and data that is pending. Dr. Riley discussed the pending key data by service category, which will be available at the next meeting. He will check with Dr. Tweeten to see if any HIV Epidemiology updates or revisions/clarification to the data on Continuum of Care/Viral Suppression will be forthcoming.	
12. Recommendations with justifications to HIV Planning Group for service priority ranking, and how services should be organized and delivered in FY 23	The committee will begin priority rankings for FY 23 at the next meeting.	
13. Next Meeting	Thursday, July 7, 2022 Time: 3:00 p.m. Location: WebEx	
14. Next Meeting:		

Agenda Item	Action	Follow-up
15. Announcements	<ul style="list-style-type: none"> • The Faith-Based Action Coalition is hosting a National HIV Testing Day event on Saturday, June 25, 2022, 10:00 a.m. – 2:00 p.m. at the Malcolm X Library. For more information, please contact Dr. Ken Riley. • Christie's Place is presenting the "Dancing with Hope" Retreat on September 23 – 25, 2022, at Camp Stevens Retreat Center in Julian, CA. For more information, contact Kenyatta Parker at 619-702-4186. 	
16. Adjournment	Adjourned at 4:01 02 p.m.	



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

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

Thursday, July 7, 2022

3:00 PM – 5:00 PM

WebEx Meeting

DRAFT MINUTES

Quorum is Seven (7)

Members present: Reginald Carroll / Alberto Cortes / Beth Davenport / Pam Highfill / Dr. Delores Jacobs (Chair) / Cinnamon Kubricky / Chris Mueller / Raul Robles / James Rucker / Karla Quezada - Torres / Regina Underwood / Rhea Van Brocklin

Agenda Item	Action	Follow-up
1. Call to order	Dr. Delores Jacobs called the meeting to order at 3:00 p.m. and noted that a quorum was established.	
2. Reminders	The committee charge was read by James Rucker. Dr. Jacobs reviewed conflicts of interest, focus on service categories, and the rules of the meeting.	
3. Public Comment on non-agenda items (for members of the public)	<p>A member of the committee noted two years ago, there were high sexually transmitted infection (STI) rates in San Diego County during the month of Pride. This year there is concern regarding Monkeypox. Is there information about vaccines for the community?</p> <p>A member of the committee asked if a consumer gets a job with a Ryan White provider, how does that affect their responsibility with the HPG? That would make that consumer affiliated, and they would have to abstain from votes concerning service categories for which that provider receives Ryan White funding.</p>	HPG Support Staff will send the Vaccination event flyer and link to the Town Hall meeting recording to the PSRAC Committee.

Agenda Item	Action	Follow-up
<p>4. Committee Members: Sharing Our Concerns on non-agenda items</p>	<p>A member of the committee recommended explaining to committee members that Public Comments on non-agenda items are for members of the public and sharing our concerns on non-agenda items is for committee members. They also stated one could not be in an unaffiliated consumer seat if one is a Ryan White provider. This could change with the changes to the HPG by-laws.</p> <p>A member of the committee stated they were told that there is no funding for emergency hotel stays, which severely impacts clients; they recommended looking into this.</p> <p>A member of the committee stated their agency was told Emergency Housing funds were shut off for a couple of days.</p>	<p>The information regarding who Public Committee is for and who Sharing our Concern is for is noted on every agenda.</p> <p>The Recipient's office will investigate the reports of disruption and depleted funding in Emergency Housing services.</p>
<p>5. Action: Review and approve the agenda for July 7, 2022</p>	<p>Action: Approve the July 7, 2022 meeting agenda as presented. Motion/Second/County (M/S/C): Carroll/Van Brocklin 11/0 Abstentions: Jacobs Motion carries</p>	
<p>6. Routine Business</p>		
<p>a) Review monthly and YTD expenditures and examine for any recommended reallocations. i. Review of over/under spending</p>	<p>Lauren Brookshire discussed the updated expenditure report, which was not yet available for review by the committee and will be sent out later. For a couple of years, there was significant amount of funding towards Emergency Housing (EH) during the height of the COVID-19 pandemic and there were expanded authorizations for EH from 2 weeks to up to 6 weeks. As of March 1, 2022, category returned to a 2-week limit in EH, with review for requests beyond that with special authorization. The amount of funding allocated for EH in FY 22 is significantly less, \$550,000 total, and approximately 47% expended in FY 22. The Recipient noticed funds were low in the service category, took recipient action and immediately added \$50,000 so that there will be no</p>	<p>The committee requested the Recipient investigate the concerns of EH service disruption and reports of fund depletion.</p>

Agenda Item	Action	Follow-up
	<p>gaps. The Recipient office has been cautious in approving beyond 2 weeks. The HPG may consider adding more dollars for that service category.</p> <p>Overall, at approximately 33.3% of the FY 22 fiscal year expended, most service categories are on track for spending. However there are a few service categories with low expenditures, including, Primary Care, Medical Specialty, Psychiatric Med. Mgmt., and Oral Health. Medical Case Management is a little low, as are Referral to Health Care and Support Services (Peer Navigation), Home-based Healthcare Coordination, and Emergency Financial Assistance.</p> <p>Committee members inquired regarding reports of EH service disruption, and providers noted they were informed the EH funds were depleted.</p>	
7. Old Business		
a) Elect a new committee co-chair	Cinnamen Kubricky, James Rucker, and Alberto Cortes were nominated. Alberto Cortes will accept the nomination if a consumer member is unable to be elected. Voting will occur at the next meeting, on July 14, 2022.	
b) Review any additional data that is available	Dr. Ken Riley reviewed the draft Key Findings by service category document, which was included in the Combined Data Findings packet sent to the PSRAC members. He also reviewed the overall 2022 Key Data Findings (a summary of the main points from the data sets in the larger Combined Data Findings document) and the draft Cost Data Report. The latter two documents were sent to PSRAC members by email before the meeting and will be added to the Combined Data Findings document.	
8. New Business		
a. Action Item: Approve the recommendation(s) for the reallocation of Part A funds in FY 22 (the current fiscal	No reallocation recommendations currently; anticipate some at the next meeting.	

Agenda Item	Action	Follow-up
year; March 1, 2022 – February 28, 2023).		
b. Action item: Recommendations with justifications to HIV Planning Group for service priority ranking and how services should be organized and delivered in FY 23	Action: Rank Outpatient Ambulatory Health Services: Primary Care as priority # 1. Rationale: A core service, the mechanism to achieve viral suppression and link clients to all services M/S/C: Van Brocklin/Cortes 9/0 Abstentions: Carroll, Jacobs, Mueller Motion carries	
	Action: Rank Outpatient Ambulatory Health Services: Medical Specialty as priority # 2. Rationale: Core service, allows clients access to specialty services/specialists. M/S/C: Cortes/Van Brocklin 9/0 Abstentions: Carroll, Jacobs, Mueller Motion carries	
	Action: Rank Mental Health: Psychiatric Medication Management at priority # 3. Difficult for clients to access medication management, works closely with Primary Care, needed to stay connected to services. M/S/C: Kubricky/Quezada-Torres 9/0 Abstentions: Mueller, Jacobs Motion carries	
	Action: Rank Oral Health a priority # 4. Rationale: Poor oral health linked to overall health, not many alternative payers for this service Discussion: Consider a service recommendation: Service providers must check clients' transportation needs, especially when referring to various locations in the county. M/S/C: Carroll/ Underwood 10/0 Abstentions: Jacobs Motion Carries.	After FY 23 priority ranking recommendations are completed, consider the noted service recommendation.
	Action: Rank Medical Case Management at priority # 5. Rationale: Maximizes the use of RW resources; utilization is a critical component; M/S/C: Cortes/ Carroll 6/0 Abstentions: Davenport, Mueller, Jacobs, Underwood Motion carries	
	Action: Rank Non-Medical Case Management at priority # 6. Rationale:	

Agenda Item	Action	Follow-up
	<p>8th largest service gap (9%), important for clients to access services/stay in care. M/S/C: Carroll/Rucker 7/0 Abstentions: Davenport, Mueller, Jacobs, Underwood Motion carries</p>	
	<p>Action: Rank Non-Medical Case Management for Housing at priority # 7. Rationale: Housing is a high priority; SDC has a large homeless population, a major social determinate of health M/S/C: Carroll/Cortes 9/0 Abstentions: Jacobs, Van Brocklin Motion carries</p>	
	<p>Action: Rank Housing: Emergency Housing at priority # 8. Rationale: Severe need, SD is a very high-priced housing market, #'s of homeless persons increasing; M/S/C: Carroll/Rucker 9/0 Abstentions: Jacobs Motion carries</p>	
	<p>Action: Rank Housing Location, Placement, and Advocacy Services at priority # 9. Rationale: Comprehensive approach to assisting clients with housing needs. Discussion: Consider a service recommendation: Training needed for landlords, especially cultural competency regarding Transgendered persons. M/S/C: Carroll/Cortes 7/0 Abstentions: Jacobs, Van Brocklin Motion carries</p>	<p>After FY 23 priority ranking recommendations are completed, consider the noted service recommendation.</p>
	<p>Action: Rank Partial Assistance Rental Subsidy (PARS) at priority # 10. Rationale: Clients need to be stably housed to access care. M/S/C: Rucker/Carroll 10/0 Abstentions: Jacobs Motion carries</p>	
<p>9. Next Meeting</p>	<p>Thursday, July 14, 2022 Time: 3:00 p.m. Location: WebEx</p>	
<p>10. Announcements</p>	<ul style="list-style-type: none"> • A Meningococcal vaccination event will happen on Sunday, July 10, 2022, from 9:00 a.m. – 2:00 p.m. at the San Diego LGBT Community Center 	<p>Staff will resend the email announcement regarding the vaccination event</p>

Agenda Item	Action	Follow-up
	<p>Parking Lot – 3909 Centre St., San Diego, CA 92103.</p> <ul style="list-style-type: none"> Town Hall: <i>Prepping for Pride – What You Need to Know About Monkeypox, and Meningococcal Disease</i> recording is available on the County’s YouTube channel. https://youtu.be/0Eq_hu1wSh8 	and send a link for the Town Hall webinar.
11. Adjournment	Adjourned at 5:02 p.m.	



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WILMA J. WOOTEN, M.D., M.P.H.
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SAN DIEGO HIV PLANNING GROUP (HPG) PRIORITY SETTING and RESOURCE ALLOCATION COMMITTEE

Thursday, July 14, 2022

3:00 PM – 5:00 PM

WebEx Meeting

DRAFT MINUTES

Quorum is Seven (7)

Members: Reginald Carroll / Alberto Cortes / Beth Davenport / Pam Highfill / Cinnamen Kubricky / Chris Mueller / James Rucker / Karla Quezada-Torres / Regina Underwood / Rhea Van Brocklin /

Members Absent: Dr. Delores Jacobs (Chair) /Raul Robles

Agenda Item	Action	Follow-up
1. Call to order	Rhea Van Brocklin, acting as temporarily appointed committee chair, called the meeting to order at 3:00 p.m. and noted that a quorum was established.	
2. Reminders	Rhea Van Brocklin reviewed conflicts of interest, emphasis on service categories, and the rules of the meeting. Alberto Cortes read the committee's charge.	
3. Public Comment on non-agenda items (for members of the public)	None	
4. Committee Members: Sharing Our Concerns on non-agenda items	<ul style="list-style-type: none">• A member of the committee expressed concern that consumers may not feel encouraged to participate in the committee or the priority setting and budget allocation process. They also stated they had difficulty renewing some Ryan White (RW) services.• A member of the committee stated it is difficult for consumers to make as everything has become very costly. They also expressed concern that RW clients can get	

Agenda Item	Action	Follow-up
	a bus pass, but family members cannot.	
5. Action: Review and approve the agenda for July 14, 2022	Action: Approve the July 14, 2022 agenda as presented with the noted changes: Move New Business, agenda item 8 b. above Old Business and move new business above routine business. Motion/Second/Count (M/S/C): Cortes/Carroll 9/0 Abstentions: Van Brocklin Motion carries	
6. New Business		
a. Action Item: Approve the recommendation(s) for the reallocation of Part A funds in FY 22 (the current fiscal year; March 1, 2022 – February 28, 2023).	No recommendations currently	
b. Action item: Recommendations with justifications o HIV Planning Group for service priority ranking and how services should be organized and delivered in FY 23	Action: Rank Coordinated HIV Services for Women, Infants, Children, Youth, and Families (CHS: WICYF) at priority # 11. Rationale: Needed for women who often prioritize their care last, In Central and South regions larger proportion of recent HIV disease among women; service includes children and males. An HPG Staff reminded the committee members the HRSA requires the committee to make recommendations based on data. M/S/C: Kubricky/Cortes 8/0 Abstentions: Quezada-Torres, Van Brocklin/ Motion carries	
	Action: Rank Childcare services (a subcategory of CHS: WICYF) priority # 11a. Rationale: Childcare was top ranked in the Survey of HIV Impact by 62% of those with children. Discussion: If this is voted priority #11a, it can be funded as a separate service category. M/S/C: Cortes/Mueller 7/0 Abstentions: Carroll, Quezada-Torres, Van Brocklin Motion carries	
	Action: Rank Early Intervention Services: Regional Services priority	

Agenda Item	Action	Follow-up
	<p>#12. Rationale: Assists clients out of care get linked back to primary care and other services (mental health, substance use treatment); linked with peer support; an objective in the GTZ plan.</p> <p>M/S/C: Kubricky/Rucker 7/0</p> <p>Abstentions: Underwood, Van Brocklin</p> <p>Motion carries</p>	
	<p>Action: Rank Health Education & Risk Reduction (subcategory of EIS:RS) priority #12 a; Rationale: Important for working with those newly diagnosed or who were out of care and recently returning to care. rank Outreach Services (subcategory of EIS:RS) priority 12 b; Rationale: Important for people who may be unaware/not know their HIV status; and rank Referral Services (subcategory of EIS:RS) priority #12 c. Rationale: This is important for clients to access additional services as well as primary care.</p> <p>M/S/C: Carroll/Rucker 7/0</p> <p>Abstentions: Underwood, Van Brocklin</p> <p>Motion: carries</p>	
	<p>Action: Rank Health Education and Risk Reduction (a separate service category, independent of Early Intervention Services: Regional Services) at priority # 13. Rationale: 30% of HIV+ respondents in the 2020 - 21 Survey of HIV Impact did not use condoms during sex in the preceding 12 months; 9% of HIV negative/unaware reported that “they have never heard of PrEP”</p> <p>M/S/C: Cinnamen/Cortes 8/0</p> <p>Abstentions: Van Brocklin</p> <p>Motion carries</p>	
	<p>Action: Rank Peer Navigation (Referral to Health and Support Services) at priority #14. Rationale: In the Survey of HIV Impact was the 5th highest service gap (“need, but can’t get) (12%)</p> <p>M/S/C: Carroll/Rucker 6/0</p> <p>Abstentions: Davenport, Underwood, Van Brocklin</p>	

Agenda Item	Action	Follow-up
	<p>Motion carries</p> <p>Action: Rank Mental Health: Counseling/Therapy at priority #15. Rationale: 3rd largest service gap (15%) “need but can’t get”; 37.1% of PLHWA diagnosed or treated for a mental health condition (cf. 19.1% in general population) M/S/C: Kubricky/Highfill 6/0 Abstentions: Davenport, Underwood, Van Brocklin Motion carries</p>	
	<p>Action: Rank Psychosocial Support Services at priority #16. Rationale: Helps prevent social isolation and suicide; 37.1% of PLHW diagnosed or treated for a mental health condition (cf. 19.1% in the general population), noted as a need by consumers in Community Engagement focus groups. M/S/C: Kubricky/Rucker 8/0 Abstentions: Van Brocklin Motion carries</p>	
	<p>Action: Rank Substance Use Treatment Services: Outpatient at priority #17. Rationale: 50% of survey respondents reported a history of substance use; frequent co-occurring conditions among PLWH. Links PLWH to care and helps sustain PLWHA in care. M/S/C: Cortes/Kubricky 5/0 Abstentions: Highfill, Mueller, Underwood, Van Brocklin Motion carries</p>	
	<p>Action: Rank Substance Use Treatment Services: Residential at priority #18. Rationale: Important for clients who do not meet the criteria to receive Medi-Cal. M/S/C: Carroll/Kubricky 6/0 Abstentions: Highfill, Mueller, Underwood, Van Brocklin Motion carries</p>	
	<p>Action: Rank Home-based Health Care Coordination at priority #19. Rationale: Prevents clients from hospitalizations or time in skilled nursing facilities; on Survey of HIV Impact, 5% “need, but can’t get.” M/S/C: Carroll/Cortes 7/0 Abstentions: Van Brocklin</p>	

Agenda Item	Action	Follow-up
	Motion carries	
	Action: Rank Transportation: Assisted and Unassisted at priority #20. Rationale: Ranked #8 on Survey of HIV Impact, 8 th largest service gap, 8% “need, but can’t get.” M/S/C: Carroll/Rucker 5/0 Abstentions: Mueller, Underwood, Van Brocklin Motion carries	
	Action: Rank Food Services: Food Bank/Home-Delivered Meals at priority #21 and rank Medical Nutrition Therapy at priority #22. Rationale: Ranked #7 on Survey of HIV impact, helps clients and family members. M/S/C: Carroll/Kubricky 7/0 Abstentions: Cortes, Van Brocklin Motion carries	
	Action: Rank Legal Services at priority #23. Rationale: #10 ranked in 2020 - 21 Survey of HIV Impact; 3 rd largest service gap, “need, but can’t get” (15%). M/S/C: Kubricky/ Quezada-Torres Abstentions: Van Brocklin Motion carries	
	Action: Rank Emergency Financial Assistance at priority #24. Rationale: Emergency utility payment #15 ranked in the 2021 Survey of HIV Impact; and 5 th largest service gap (12%). M/S/C: Carroll/Rucker 7/0 Abstentions: Cortes, Van Brocklin Motion Carries	
	Action: Rank Home Health Care at priority #25. Rationale: Core service; #18 ranked in 2021 Survey of HIV Impact, 5% need but can’t get; Rank Early Intervention Services: HIV Counseling and Testing at priority #26. Rationale: Core service; is important in getting persons unaware of status aware and linked to and retained in care if needed. Improves availability of HIV testing and links PLWHA to care; Rank Cost-Sharing Assistance at priority #27. Rationale: Core service; Focus group participants stated that “lack of access to healthcare or resources to get the medication refilled” was a primary reason for not taking HIV medication,	

Agenda Item	Action	Follow-up
	and Rank Hospice at priority #28. Rationale: Core service. M/S/C: Quezada-Torres/Kubricky 7/0 Abstentions: Van Brocklin Motion carries	
c. Action Item: Recommendations with justifications to the HIV Planning Group for changes in funding allocations for FY 23 (next fiscal year, March 1, 2023 – February 28, 2024) in level and reduction-funding scenarios	Tabled	
6. Routine Business		
a) Review monthly and YTD expenditures and examine for any recommended reallocations. i. Review of over/under spending	Tabled	
7. Old Business		
b) Elect a new committee co-chair	Tabled	
c) Review any additional data that is available	Tabled	
9. Next Meeting	Thursday, July 21, 2022 Time: 3:00 p.m. Location: WebEx	
10. Announcements	Patrick Loose reminded everyone about the high rate of COVID cases in San Diego and the increase in hospitalizations and recommended when leaving your home, wear a mask and take precautions. Also, if you are eligible to receive COVID booster vaccines, please do so. For more information, go to Coronavirus Disease 2019 (sandiegocounty.gov) Karla Quezada-Torres is hosting a lunch at the café Coyote in Old Town	

Agenda Item	Action	Follow-up
	Friday, July 15, 2022, at 11:30 am, focusing on the importance of testing and treatment and ending the HIV Epidemic. Community members and providers are invited.	
11. Adjournment	Adjourned at 4:59 p.m.	



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

Thursday, July 21, 2022

3:00 PM – 5:00 PM

WebEx Meeting

DRAFT MINUTES

Quorum is Seven (7)

Members: Reginald Carroll / Pam Highfill / Dr. Delores Jacobs (Chair) / Cinnamon Kubricky / James Rucker / Karla Torres / Regina Underwood / Rhea Van Brocklin / Beth Davenport

Members Absent: Alberto Cortes/Chris Mueller/Raul Robles

Agenda Item	Action	Follow-up
1. Call to order	Dr. Jacobs called the meeting to order at 3:00 p.m. and noted that a quorum was established.	
2. Reminders	Read by James Rucker.	
3. Public Comment on non-agenda items (for members of the public)	A member of the public commented about the funding and administration of Housing Opportunities for People with AIDS (HOPWA) short-term rental and utility payment in SD. It is difficult to know who is administering it. Can the committee investigate from whom rental and mortgage assistance from HOPWA is available?	The member will send an e-mail to Patrick Loose, who will connect him to HOPWA.
4. Committee Members: Sharing Our Concerns on non-agenda items	<p>A committee member commented that people still do not know how to access services, such as transportation. They also mentioned not understanding how the Recipient gets the numbers for unduplicated clients.</p> <p>A member of the committee expressed concerns about Emergency Financial Assistance as rates for utilities continue to rise. They are concerned for consumers with and without children who must put everything towards rent and that some</p>	

Agenda Item	Action	Follow-up
	Consumers may be doing illegal things to make ends meet.	
5. Action: Review and approve agenda for July 21, 2022	Action: Approve the July 21, 2022 meeting agenda as presented with the notable change: Move action items up under new business to before routine business. M/S/C: Carroll/Rucker, 6/2 Abstentions: Jacobs Motion carries	
6. Routine Business		
a) Review monthly and YTD expenditure and examine for any recommended reallocations. i. Review of over/under spending	Patrick Loose reviewed the expenditure report that was included in the meeting materials packet. He highlighted that through the end of June 2022, with 33% of the fiscal year elapsed, some services have low expenditures, including Primary Care, Medical Specialty, Oral Health, Psychiatric Medication Management, Peer Navigation, and Home-based Health Care Coordination.	
7. Old Business		
a) Elect a new committee co-chair	James Rucker and Cinnamen Kubrick were nominated for committee co-chair. Both recommended moving this agenda item to next week's meeting to have all nominated persons present at the meeting.	
b) Review any additional data that is available	None.	
8. New Business		
a. Action Item: Approve the recommendation(s) for reallocation of Part A funds in FY 22 (the current fiscal year; March 1, 2022 – February 28, 2023).	Action: Decrease funding to Medical Specialty (priority #2) by \$30,000 from \$273,386 to \$243,388. M/S/C: Kubricky/Highfill, 7/0 Abstentions: Carroll, Jacobs Motion carries	
	Action: Decrease funding to Oral Health (priority #4) by \$100,000 from \$300,940 to \$200,940. M/S/C: Van Brocklin/Quezada-Torres, 7/0 Abstentions: Carroll, Jacobs Motion Carries.	

Agenda Item	Action	Follow-up
	<p>Action: Increase funding to Emergency Housing (priority #8) by \$100,000 from \$530,000 to \$630,000 M/S/C: Van Brocklin/Kubricky, 8/0 Discussion: The committee discussed Emergency Housing for hotel stays is still two weeks, but the recipient can make an exception. A member of the public noted a friend who received emergency housing assistance was in a motel that had horrific conditions. Can the committee address this concern with the providers?</p> <p>A provider for housing services noted the hotel/motel is selected by the case manager; however, clients can request to go to another location. Abstentions: Jacobs Motion carries</p> <p>Action: Increase funding to Psychosocial Support Services (priority #16) by \$30,000 from \$30,000 to \$60,000. M/S/C: Carroll/Highfill, 7/0 Discussion: The committee asked if this would increase the number of support groups and in which regions. The committee may need to go back and provide guidance on how this will be utilized, in what regions, and towards any specific priority populations. The Recipient noted this is not yet deployed, looking at September/October launch. Abstentions: Jacobs, Van Brocklin Motion carries</p>	
<p>b. Action item: Recommendations with justifications to HIV Planning Group for service priority ranking and how services should be organized and delivered in FY 23</p>	<p>Action: Level funding to Outpatient Ambulatory Health Services: Primary Care (priority #1) at 1,032,630 M/S/C: Carroll/Van Brocklin, 8/0 Abstentions: Jacobs Motion Carries</p> <p>Action: Funding to Medical Specialty (priority #2) at \$ 273,386. M/S/C: Carroll/Van Brocklin, 8/0 Abstentions: Jacobs Motion carries</p> <p>Action: Funding to Psychiatric Medication Service Category (priority #3) at \$28,036.</p>	

Agenda Item	Action	Follow-up
	M/S/C: Carroll/Rucker, 8/0 Abstentions: Jacobs Motion carries	
	Action: Funding to Oral Health (priority #4) at \$300,940. M/S/C: Rucker/Highfill, 8/0 Abstentions: Jacobs Motion carries	
	Action: Funding to Medical Case Management (priority #5) at 1,268,338. M/S/C: Kubricky/Quezada-Torres 6/0 Abstentions: Highfill, Jacobs, Underwood Motion carries	
	Action: Funding to Non-medical Case Management (priority #6) at \$392,021. M/S/C: Kubricky/Rucker, 6/0 Abstentions: Davenport, Jacobs, Underwood Motion carries	
	Action: Funding to Non-medical Case Management for Housing (priority #7) at \$250,000. M/S/C: Rucker/Quezada-Torres, 5/0 Abstentions: Highfill, Jacobs, Underwood, Van Brocklin Motion carries.	
	Action: Funding Emergency Housing (priority #8) at \$530,000. M/S/C: Carroll/Rucker, 7/0 Abstentions: Jacobs Motion carries	
	Action: Funding to Housing Location, Placement, and Advocacy Services (priority # 9) at \$100,000. M/S/C: Carroll/Rucker, 6/0 Abstentions: Jacobs, Van Brocklin Motion carries	
	Action: Funding to the Partial Assistance Rental Subsidy (priority #10) at \$767,507. Discussion: The Recipient noted additional funds might be needed in PARS for FY 23. M/S/C: Rucker/Van Brocklin, Abstentions: Jacobs A recommendation was made to continue the action next week.	Staff will review FY 22 PARS allocation amounts.
	Action: Postpone motion on PARS until next week's meeting.	

Agenda Item	Action	Follow-up
	M/S/C: Carroll/Rucker, 7/0 Abstentions: Jacobs Motion carries	
9. Next Meeting	Thursday, July 28, 2022 Time: 3:00 p.m. Location: WebEx	
10. Announcements	Tabled	
11. Adjournment	Adjourned at 4:59 p.m.	



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

Thursday, July 28, 2022
3:00 PM – 5:00 PM

WebEx Meeting

DRAFT MINUTES

Quorum is Seven (7)

Members present: Beth Davenport / Reginald Carroll / Alberto Cortes / Pam Highfill / Dr. Delores Jacobs (Chair) / Cinnamen Kubricky / Chris Mueller / Karla Quezada-Torres / James Rucker / Regina Underwood / Rhea Van Brocklin

Members absent: Raul Robles

Agenda Item	Action	Follow-up
1. Call to order	Dr. Jacobs called the meeting to order at 3:04 p.m. and noted that a quorum was established.	
2. Action: Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)	Motion: Find that the Committee has reconsidered the State of Emergency and that State and local officials continue to recommend measures to promote social distancing authorizing teleconferenced meetings pursuant to Government Code section 54953(e). Motion/Second/Count (M/S/C): Van Brocklin/Cortes 8/1 Abstentions: Jacobs, Mueller Motion carries	
3. Reminders	Read by James Rucker.	
4. Public Comment on non-agenda items (for members of the public)	None	
5. Committee Members: Sharing Our Concerns on non-agenda items	A committee member commented that they do not agree with how the data regarding unduplicated clients are presented in the Service Utilization report. They stated that they have reported this multiple times and that the report is still not formatted in a way that makes sense to them. A member of the committee expressed concern for the rising cost of utilities, food, and fuel. Emergency Financial Assistance services are important.	

Agenda Item	Action	Follow-up
6. Action: Review and approve agenda for July 28, 2022	Action: Approve the July 28, 2022 meeting agenda as presented with the noted change: Move agenda item 7b. FY 23 funding allocations to agenda item 7a. M/S/C: Van Brocklin/Mueller 6/1 Abstentions: Jacobs Motion carries	
7. New Business		
a) Action: Continue recommendations with justifications to the HIV Planning Group for changes in funding allocations for FY 23 (next fiscal year, March 1, 2023 – February 28, 2024) in level and reduction-funding scenarios.	The committee continued with the motion on the table from the PSRAC meeting of July 21, 2022: Action: Level-funding to Partial Assistance Rental Subsidy (PARS) at \$767,507. Discussion: Lauren Brookshire shared that an estimated \$140,000 additional will be needed to cover additional clients in PARS. M/S/C: Rucker/Van Brocklin 3/6 Abstentions: Jacobs Motion fails	
	Action: Increase funding to Partial Assistance Rental Subsidy (PARS) (priority #10) by \$140,000 from \$767,507 to \$907,507. M/S/C: Carroll/Rucker 10/0 Abstentions: Jacobs Motion carries	
	Action: Level-funding to Coordinated Health Services for Women, Infants, Children, Youth, and Families (CHS:WICYF) (priority #11) at \$943,317 (includes several subcategories, including Childcare services) M/S/C: Kubricky/Carroll 9/0 Abstentions: Jacobs, Van Brocklin Motion carries	
	Action: Level-funding to Early Intervention Services: Regional Services (EIS:RS) (priority #12) at \$800,386 (includes three (3) subcategories) M/S/C: Carroll/Cortes 9/0 Abstentions: Jacobs, Underwood Motion carries	
	Action: Level-funding to Peer Navigation (Referral to Health Care and Support Services) (priority #14) at \$400,000 M/S/C: Kubricky/Rucker 8/0 Abstentions: Davenport, Jacobs, Underwood Motion carries	
	Action: Level-funding to Mental Health: Counseling/Therapy (priority #15) at \$1,061,062. M/S/C: Carroll/Kubricky 7/0 Abstentions: Davenport, Jacobs, Underwood Motion carries	

Agenda Item	Action	Follow-up
	Action: Increase funding to Psychosocial Support Services (priority #16) by \$30,000 from \$30,000 to \$60,000. M/S/C: Carroll/Rucker 8/0 Abstentions: Jacobs, Underwood, Van Brocklin Motion carries	
	Action: Level-funding to Substance Use Treatment Services: Outpatient (priority #17) at \$315,127. M/S/C: Carroll/Kubricky 7/0 Abstentions: Highfill, Jacobs, Mueller, Underwood Motion carries	
	Action: Zero funding to Substance Use Treatment Services: Residential (priority #18) at \$0. M/S/C: Cortes/Rucker 7/0 Abstentions: Highfill, Jacobs, Mueller Motion carries	
	Action: Level-funding to Home-based Health Care Coordination (priority #19) at \$228,500 M/S/C: Carroll/Van Brocklin 9/0 Abstentions: Jacobs, Mueller Motion carries	
	Action: Level-funding to Transportation (Assisted and Unassisted) (priority #20) at \$142,830. M/S/C: Van Brocklin/Highfill 7/0 Abstentions: Jacobs, Mueller, Underwood Motion carries	
	Action: Level-funding to Food: Home-delivered Meals (priority #21) at \$536,073. M/S/C: Kubricky/Carroll 8/0 Abstentions: Cortes, Jacobs Motion carries	
	Action: Level-funding to Medical Nutrition Therapy (priority #22) at \$35,542. M/S/C: Van Brocklin/Mueller 8/0 Abstentions: Cortes, Jacobs Motion carries	
	Action: Decrease funding to Legal Services (priority #23) by \$100,000 from \$285,265 to \$185,265. M/S/C: Kubricky/Carroll 8/0 Motion withdrawn by maker and second	
	Action: Level-funding to Legal Services (priority #23) at \$285,265. M/S/C: Kubricky/Carroll 8/0 Abstentions: Cortes, Jacobs Motion carries	

Agenda Item	Action	Follow-up
	Action: Level-funding to Emergency Financial Assistance (priority #24) at \$28,730. M/S/C: Kubricky/Carroll 8/0 Abstentions: Cortes, Jacobs Motion carries	
	Action: Zero funding to Home Health Care (priority #25) at \$0; zero funding to Early Intervention Services: HIV Counseling and Testing (priority #26) at \$0; zero funding to Cost Sharing Assistance (priority #27) at \$0; zero funding to Hospice (priority #28) at \$0; and zero funding to Health Education and Risk Reduction (a stand-alone service category, independent of EIS:RS) (priority # 13) at \$0. M/S/C: Carroll/Mueller 9/0 Abstentions: Jacobs Motion carries	
	Action: Decrease funding to Outpatient Ambulatory Health Services: Primary Care (priority #1) by \$100,000 from \$1,032,630 to 932,630. M/S/C: Carroll/Cortes 8/0 Abstentions: Jacobs, Mueller Motion carries	
	Action: Decrease funding to Medical Case Management (priority #5) by \$70,000 from \$1,268,338 to 1,198,338. M/S/C: Carroll/Rucker 5/0 Abstentions: Davenport, Jacobs, Mueller, Underwood Motion carries	
	Forward the recommendations to the HPG.	
8. Routine Business		
a) Review monthly and YTD expenditure and examine for any recommended reallocations. i. Review of over/under spending	Tabled	
9. Old Business		
a) Elect a new committee co-chair	Tabled; Cinnamon Kubricky withdrew her name from the nominations for committee co-chair.	
b) Review any additional data that is available	None.	
10. New Business		

Agenda Item	Action	Follow-up
a. Action Item: Approve the recommendation(s) for reallocation of Part A funds in FY 22 (the current fiscal year; March 1, 2022 – February 28, 2023).	Tabled; no reallocation recommendations currently	
11. Next Meeting	Thursday, August 4, 2022 Time: 3:00 p.m. Location: WebEx	
12. Announcements	Rodney von Jaeger announced: <ul style="list-style-type: none"> • Christie's Place is having HIV Advocacy training starting August 30, 2022 at 4:00 p.m. • The California Department of Public Health's Medication Assistance Program is inviting feedback from clients; for more information contact Tracy.Lee@cdph.ca.gov • July 28th is World Hepatitis Day, for testing information contact the FHCSD website. 	
13. Adjournment	Adjourned at 4:59 p.m.	



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

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

Thursday, August 4, 2022
3:00 PM – 5:00 PM

WebEx Meeting

DRAFT MINUTES

Quorum is Seven (7)

Members Present: Reginald Carroll /Alberto Cortes/ Beth Davenport / Pam Highfill / Dr. Delores Jacobs (Chair) / Cinnamon Kubricky /Chris Muller / Raul Robles / James Rucker / Karla Quezada-Torres / Regina Underwood / Rhea Van Brocklin

Agenda Item	Action	Follow-up
1. Call to order	Dr. Jacobs called the meeting to order at 3:00 p.m. and noted that a quorum was established.	
2. Reminders	Rhea Von Brocklin read the committee charge.	
3. Public Comment on non-agenda items (for members of the public)	Mikie Lochner thanked the committee and community for the and hard work and dedication for the FY 23 priority setting and resource allocation PSRAC process.	
4. Sharing our concerns (for committee members).	A committee member questioned the purpose of these weekly meetings and noted the agendas during this time should be focused only on the psra process. A committee member shared his frustration with the data in the service utilization reports and stated the Recipients' numbers are misleading. He noted for Partial Assistance Rental Subsidy (PARS) the data is from March 2022. Reginald Carroll stated he is resigning from the PSRAC at the end of this meeting. A member of the committee commented about their concern about drug addiction; The member feels that more people are relapsing, and that the availability of substance use treatment is vital.	
5. Action: Review and approve the agenda for August 4, 2022	All votes at the meeting were taken by roll call; PSRAC members' names were called out verbally, then individual voice votes were noted and recorded.	

Agenda Item	Action	Follow-up
	Action: Approve the August 4, 2022 meeting agenda as presented. Motion/Second/Count (M/S/C): Carroll/Davenport 10/0 Abstentions: Jacobs Motion carries	
6. Old Business		
a) Discussion: Last Week's misunderstanding/error in the service category Partial Assistance Rental Subsidy (PARS).	Dr. Jacobs explained the misunderstanding about the PARS at last week's meeting; \$140,000 total was needed in PARS, however, \$100,000 had previously been allocated in June 2022; this was explained and corrected at the HPG Planning meeting on August 3, 2022	
b) Action Item: Continue recommendations with justifications to the HIV Planning Group for changes in funding allocations for FY 23 (next fiscal year, March 1, 2023 – February 28, 2024) in a level-funding scenarios.	Action: Level-funding for Minority AIDS Initiative (MAI); \$574,238 for Multi-Disciplinary Teams and \$100,000 for MAI Emergency Housing for a total of \$674,238. M/S/C: Carroll/Cortes 9/0 Abstentions: Jacobs, Underwood Motion: carries	
c) Action Item: Continue recommendations with justifications to the HIV Planning Group for changes in funding allocations for FY 23 (next fiscal year, March 1, 2023 – February 28, 2024) in a reduction-funding scenario.	Reduced funding scenario by 1%: Primary Care (priority #1) by \$50,000 from \$932,630 to \$882,630; and Decrease funding to Medical Case Management (MCM) Services (Priority #5) by \$54,240 from \$1,198,338 to \$1,144,098. M/S/C: Kubricky/Carroll 7/0 Abstentions: Davenport. Jacobs, Mueller, Underwood Motion: carries	
d) Action Item: Recommendations for service directives for FY 23 (next fiscal year, March 1, 2023 – February 28, 2024)	Action: Carve out to Peer Navigation (Referral to Health Care and Support Services) (priority #14), to ensure that youth (those 26 years of age and under) have access to youth peer services while also keeping the Peer Navigation service category available for all in all five regions. Also, request information regarding any additional funds needed to accomplish this service recommendation – Ensure youth have access to youth peer navigation and ensure Peer Navigation for all clients is available in all HHSA regions. M/S/C: Kubricky/Cortes 8/0 Abstentions: Davenport, Jacobs, Underwood Motion carries	
	Action: Recommend to Standards and Strategies Committee that Universal Standards be modified	

Agenda Item	Action	Follow-up
	<p>to ensure that all clients are assessed regarding their interest in participating in telehealth and that those who are interested are assessed for capacity (phone, data service, pad, etc.) and provided with options to obtain what is needed. M/S/C: Carroll/Kubricky 9/0 Abstentions: Carroll, Kubricky Motion carries</p>	
	<p>For the service category, Psychosocial services ask the Recipient for clarification on regions, priority population, and the number of clients served for the funds money that is allocated.</p>	
e) Elect a new committee co-chair	<p>Cinnamen Kubricky withdrew her name from the nomination process. Two candidates for committee co-chair:</p> <ul style="list-style-type: none"> James Rucker Alberto Cortes <p>Alberto Cortes withdrew his name to support James Rucker and volunteered to assist in coaching him in this task. Action: Vote to elect James Rucker to be the PSRAC Co-Chair M/S/C: Van Brocklin/Cortes 9/0 Abstentions: Carroll, Jacobs Motion: carries James Rucker is the new PSRAC Co-Chair</p>	
f) Review any additional data that is available	There is no additional data for review.	
7. Routine Business		
a) a) Review Monthly and YTD expenditure and examine for any recommended reallocations i. Review of over/under spending	<p>The expenditure/budget report was included in the meeting materials packet and was reviewed at last week's HPG meeting. There were no questions regarding the information.</p>	
8. New Business		
a. Action Item: Approve the recommendation(s) for reallocation of Part A funds in FY 22 (the current fiscal year; March 1, 2022 – February 28, 2023)	<p>Action: Decrease Primary Care (priority #1) by \$100,000, from 1,032,630 to \$932,630. M/S/C: Cortes/Carroll 6/0 Abstentions: Davenport, Jacobs, Muller, Underwood, Van Brocklin Motion carries</p>	
	<p>Action: Increase Medical Case Management by \$50,000, from \$1,268,338 to \$1,318,338. M/S/C: Carroll/Rucker 6/0 Abstentions: Davenport, Jacobs, Muller, Underwood, Van Brocklin Motion carries</p>	

Agenda Item	Action	Follow-up
	<p>Action: Increase Non-Medical Case Management by \$50,000 from \$392,021 to \$442,021.</p> <p>M/S/C: Kubricky/Highfill 6/0</p> <p>Abstentions: Davenport, Jacobs, Muller, Underwood, Van Brocklin</p> <p>Motion: carries</p>	
<p>9. Next Meeting: Thursday, September 8, 2022. (if needed), otherwise October 13, 2022. Location: WebEx.</p>	<p>The next meeting will be on September 8, 2022, if needed.</p>	
<p>10. Announcements</p>	<ul style="list-style-type: none"> • The AIDS Memorial Taskforce is building a site in San Diego and will break ground at Olive Street Canyon Park by Bankers' Hill. • Cinnamen Kubricky thanked the committee members for their support during the PSRAC process • HPG Truax Award Ceremony will take place December 1, 2022. The nomination form will go out soon. It recognizes people working in HIV/AIDS in the community. • Dr. Jacobs thanked the committee members for showing up for weekly meetings during the psra process. 	
<p>11. Adjournment</p>	<p>Adjourned at 4:45 p.m.</p>	



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

SAN DIEGO HIV PLANNING GROUP (HPG) CONSUMER GROUP

Join Zoom Meeting

<https://zoom.us/j/95469032405?pwd=cnJuUUVrVjRhdlByS21LWkQ1blIzd09>

Wednesday, June 15, 2022

3:00 PM – 5:00 PM

DRAFT MINUTES

Quorum = Three (3)

Members Present: Allan Acevedo (Chair) / Michael Donovan / Mikie Lochner (HPG Chair)

Members Absent: Roger Al-Chaikh/ Alfredo De Jesus

Agenda Item	Action	Follow-up
1. Call to order/ Moment of Silence	Allan Acevedo called the meeting to order at 3:01PM and noted a quorum was established.	
2. Action: Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)	Action: Recognize that there is a continued proclaimed state of emergency and State and local officials have imposed or recommended measures to promote social distancing authorizing teleconferenced meetings pursuant to Government Code section 54953(e). Motion/Second/Count (M/S/C): Lochner/Acevedo 0/1 Abstentions: None Motion: Carries	
3. Zoom Housekeeping	Read by Allan Acevedo.	
4. Review		
a. Background, mission statement, goals, and ground rules	Read by meeting participants.	Update Decorum to make eye contact optional.
5. Introductions, icebreaker	Participants introduced themselves.	
6. Public Comment – For Non-HPG Member Participants	None.	

Agenda Item	Action	Follow-up
7. Sharing our Concerns For all Participants	None.	
8. Routine Business		
a. Review/approval of meeting agenda for June 15, 2022	Motion: Approve the meeting agenda for June 15, 2022 as presented. M/S/C: Lochner/Donovan 1/0 Abstentions: Acevedo Motion: Carries	
b. Review/approval of meeting minutes for May 18, 2022 (Review follow-up items)	Motion: Approve the meeting minutes for May 18, 2022 as presented. M/S/C: Donovan/Acevedo Abstentions: Lochner Motion: Carries	
c. Review/approval of meeting minutes for April 20, 2022 (Review follow-up items)	Motion: Approve the meeting minutes for April 20, 2022 as presented. M/S/C: Lochner/Donovan Abstentions: Acevedo Motion: Carries	
9. Old Business		
a. Review: Consumer Group Working Plan/Training Plan	No presentation set for July, and the Harm Reduction that had originally scheduled for May has been rescheduled for August. Lochner advised that the presentation should be moved to September due to meetings in August usually are cancelled due to the budgeting process happening that month.	
b. Discussion: Consumer Committee Co-Chair Vacancy	Participants were reminded that you do not need to be an HPG member to be a consumer group member and therefore the invitation was extended to join. The Housing Opportunities for People With AIDS (HOPWA) committee has an open seat for a consumer that is part of the consumer group. Mikie Lochner stated that HOPWA is meeting next in September.	
10. New Business		
a. Exercise: Happyville Exercise 2022: A Budget Allocation Exercise	Dr. Ken Riley lead participants in the exercise that provided a simulation of the priority setting and budget allocation process that the HPG goes through annually.	

Agenda Item	Action	Follow-up
	The simulation did not complete due to losing quorum and the meeting ended at 4:34 p.m.	
b. Consumer Feedback: JEDI Principles Infographic	Tabled until next meeting due to loss of quorum.	
11. Updates		
a. CARE Partnership	Tabled	
b. Membership	Tabled	
c. Strategies	Tabled	
d. Medical Standards	Tabled	
e. Priority Settings and Resource Allocation	Tabled	
f. Steering	Tabled	
g. HPG	Tabled	
12. Announcements	None	
13. Confirm next meeting date Wednesday, April 20, 2022 via Zoom	Next Meeting: Wednesday, July 20, 2022 via Zoom	
14. Adjournment	Meeting adjourned at 4:34 p.m. due to loss of quorum.	



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SAN DIEGO HIV PLANNING GROUP (HPG) CONSUMER GROUP

Join Zoom Meeting

<https://zoom.us/j/95469032405?pwd=cnJuUUVrVjRhdlByS21LWkQ1blIzd09>

Wednesday, July 20, 2022

3:00 PM – 5:00 PM

DRAFT MINUTES

Quorum = Three (3)

Members Present: Allan Acevedo (Chair) / Alfredo De Jesus / Michael Donovan / Wayne Durance / Mikie Lochner (HPG Chair)

Members Absent:

Agenda Item	Action	Follow-up
1. Call to order/ Moment of Silence	Meeting was cancelled due to not having quorum to be held.	



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

CARE PARTNERSHIP

Monday, July 18, 2022
11:00 AM – 1:00 PM

Meeting URL: <https://zoom.us/j/95445978475?pwd=bmRSNEI3Z2pnRVY3U3g5ZmRZYVN6dz09>

Meeting ID: 954 4597 8475

DRAFT MINUTES

Attendees: Gloria Alonzo, Rand Basma, Reginald Carroll, Tammelita Colton-Pineda, Pablo Corona, Michelle Darnelle, Klyria Garcia, Loren Goldstein, Aaron Gutierrez, Felice Jimenez, Lori Jones, Mikie Lochner, Patty Lopez, Rosalva Martha-Patten, Nichole Pepper, Shannon Ransom, Concepcion Silva, Andrea Tomana, Rhea Van Brocklin

HPG Support Staff: Delio Ladron de Guevara, Rodney VonJaeger

Spanish Interpretation available, call: 1-888-582-3528 (toll free) /1-847-944-7361 (US toll) – Pass Code 9150 983#

Agenda Item	Action	Follow-up
1. Welcome and introductions	Shannon Ransom started the meeting at 11:01AM and participants introduced themselves only they wanted to and everyone was reminded that you could stay anonymous if you they desired.	
2. Comments from the Chair/	Chair would like to invite a recipient of Ryan White services to take over the Chair position. If anyone is interested, please let Shannon Ransom know. Also, she would like to wish everyone a happy Pride celebration that was celebrated last weekend!	
a. Respectful Engagement	Reviewed.	
3. Moment of silence	Observed.	
4. Review Mission Statement	Reviewed by participants.	
5. Public comment/ Sharing our Concerns	A participant shared that some treatments that clients receive are being interrupted by Medicare due to the changes to its coverage. Another participant shared that the volunteer lawyer program has no offices open in the central area of San Diego County. This fact removes access to most people that may be in need of their services.	
6. Review & approval of the	Approved by consensus.	

Agenda Item	Action	Follow-up
meeting agenda for July 18, 2022		
7. Review & approval of June 13, 2022 meeting minutes	Approved by consensus.	
8. Discuss and update the training plan	The training plan was reviewed by the Co-Chair Patty Lopez. She also asked for input on preference from people on having either one or two presentations per meeting.	
9. Cultural Competency/ Training Opportunities/ Updates	None were shared.	
10. Old Business		
a. None		
11. New Business		
a. Presentation: Medicare – Pablo Corona	Presented by Pablo Corona from Elder Law & Advocacy's Health Insurance and Advocacy Program (HICAP). Pablo reviewed the different parts of Medicare, along with assistance programs for low-income households. Open enrollment for additional coverage (Such as Care Advanced plans) starts October 15 each year. For additional assistance, people can contact HICAP at 858-565-8772 or visit www.seniorlaw-sd.org .	
12. Reports		
a. Women and Youth Out of Care Group Discussion	<p>The county of San Diego issued an opportunity for funding for low-barrier medical for those that can't attend to regular clinics. The county asked applicants how they would use the funding to reach those people that aren't being serviced by regular means (such as mobile clinics). The opportunity closed and updates should be forthcoming in the next couple of months on who got the funding.</p> <p>Christie's Place has hired another peer navigator and will start in the middle of August to help bring in more people in to care.</p> <p>The UCSD's MCAP Seeking Safety program is starting a group for young adults very soon and is currently recruiting. This is for people that have experienced stressful or traumatic situations or substance use. Contact MCAP for more information.</p>	
b. HIV Planning Group (HPG)	HPG's Priority Setting and Resource Allocation Committee (PSRAC) is currently going through the priority setting and budget allocation and continue	

Agenda Item	Action	Follow-up
Planning Group Support Staff	<p>through this month of July. Ranking has completed and allocations should be done by the end of July. The HPG will then take over in August to complete the budget process.</p> <p>Mikie Lochner also extended an invitation to people with lived experience to join the HPG as there are many seats open. Contact hpg.hhsa@sdcounty.ca.gov or go to www.sdplanning.org.</p> <p>Consumer Group did the Happyville Ranking and Budget Allocation simulation at their June meeting.</p>	
c. Housing Needs/Progress Group Discussion	There was a presentation from PATH, a housing program, at the monthly Case Management and Peer Navigation meeting that is hosted by the County of San Diego.	
d. Ryan White Part D Shannon Ransom	No updates were reported.	
e. Women's Conference 2023	It will be in person Saturday March 11, 2022 at the Handlery Hotel. The planning committee will meet in August to start planning. If you would like to participate in the planning meeting contact Rhea Van Brocklin or Christie's Place to sign up.	
f. Research • ACTG/AVRC • HNRP • MCAP	<ul style="list-style-type: none"> • AVRC continues to recruit, contact Aaron Gutierrez at 619-742-0433 or email him at aogutierrez@health.ucsd.edu. • MCAP is recruiting infants for a COVID-19 vaccine trial. Another study is starting for children under 60 months. Contact MCAP for information. • MCAP is also partnering with the Hospital General in Tijuana to find participants for research for the injectable HIV treatment. 	
13. Agency updates/Announcements	<ul style="list-style-type: none"> • The August CARE Partnership meeting will be cancelled. • Dancing for Hope retreat is recruiting. It is in Julian and hosted by Christie's Place. Vaccination is required. They are currently taking applications and you can contact Christie's Place to apply. • Back to School Party August 12, 2022. Will be a drive-through event and will be giving out supplies for children. Call Christie's Place to apply. <p>Next Meeting Date:</p> <p>Monday, September 19, 2022, 11:00 AM, virtually via Zoom</p>	
14. Adjournment	Adjourned at 12:25PM	

Faith-Based Action Coalition (FBAC)

Monthly Meeting

Time: 10am-12pm

Date: Thursday, July 7, 2022

Attendees	Kenyatta Parker (Chair), Myleen Abuan (Secretary), Lori Jones, Felipe Ruiz, Jazmine Arias, Dr. Ken Riley (Vice-Chair), Jean-Aine Pretanvil
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Item	Discussion	Follow-Up
1. Call to order/Opening Prayer/Read the FBAC Mission Statement/Introductions	Dr. Ken Riley called the meeting to order at 10.05 AM. Introductions were made. <ul style="list-style-type: none"> Opening Prayer by: Lori Jones Mission Statement by: Kenyatta Parker 	
2. Review/Approve Agenda	The July 7, 2022, meeting agenda was approved by consensus with the change to move the EHE update to agenda item 5. a.	
3. Review/Approve Last Meeting's Minutes	The June 2, 2022, meeting minutes was approved by consensus with a few minor recommended changes.	
4. Financial Report	Tabled, Dr. Riley will request a written report for the next FBAC meeting.	
5. Old Business		
a. Ending the HIV Epidemic (EHE) Activities Update	<p>Felipe Ruiz, manager of the CDC EHE grant, provided an update of EHE activities; there are two active procurements: HIV Prevention and Care Services for Transgender Persons and Comprehensive HIV Prevention Services For Persons Who Inject Drugs. An additional three procurements will be released in the coming months: Benefits Navigation, Mobile PrEP, and Routine HIV Testing. The Getting to Zero (GTZ) Mobile App is also being developed and is anticipated to be ready by the end of the Summer, it will also have a paper format.</p> <p>A Request for Proposal (RFP) was awarded for Narcan distribution. FBAC requested a presentation on Harm Reduction and resources throughout the County.</p> <p>Jean-Ain Pretanvil introduced himself as the manager for the HRSA EHE grant and will have a report at the next meeting.</p> <p>Jean-Ain Pretanvil introduced himself as the manager for the EHE CDC grant and will have a report at the next meeting.</p>	Felipe Ruiz and Lori Jones to present on Harm Reduction in September.

b. Follow-up re: ELEVATE (Building Leaders of Color) Training	Tabled; Mikie Lochner unable to attend today's meeting.	
6. New Business		
a. Events Calendar	<p>i. National HIV Testing Day 2022 Debrief/Evaluation Dr. Riley reviewed the evaluation report, additional comments included:</p> <ul style="list-style-type: none"> a. Consider partnering with other events (e.g., Juneteenth, other NHTD events) to ensure testing is available at these different community events. This could also be a platform for us to promote a larger event for the National Black HIV/AIDS Awareness Day in February. b. More outreach to the community is needed, weeks and days before the event, early morning of the event, and during the event. c. Consider a different location d. Use radio and other media, especially social media e. Get the community involved directly in the planning process. <p>ii. National Black HIV/AIDS Awareness Day 2023 Planning – It was recommended to start planning as early as possible to ensure that we can have a larger event. NBHAD 2023 falls on Tuesday, February 7, 2023, so the potential date for the event could be Saturday, February 4, 2022. Dr. Riley will develop a task list and discuss at the next meeting.</p> <p>iii. Community Events for our Participation/Partnering with other Organizations - Dr. Riley will develop the FBAC annual calendar to capture community events that the FBAC could consider participating and/or sending a representative. It will be a living document, updated at each meeting.</p> <p>iv. San Diego Youth Partnership (SDYP) Representative needed from FBAC</p>	<p>Dr. Riley will update the evaluation report and re-send to participants for additional input.</p> <p>Dr. Riley will send FBAC members the meeting invitation to the next San Diego Youth Partnership meeting.</p>

	<p>a. It was recommended to have Andrea Chavez who chairs the meeting to talk about this organization. Dr. Riley attended their last meeting and connected them with groups such as CARE Partnership and Christie's Place.</p>	
b.	v.	
<p>7. HIV Planning Group/Ryan White/ HIV Prevention/ HIV, STD, and Hepatitis Branch (HSHB) Updates</p>	<p>The Priority Setting and Resource Allocation Committee (PSRAC) of the HIV Planning Group (HPG) has been meeting every week since June to make recommendations for next fiscal year's priority rankings and budget allocations. There are currently many vacant seats within the HIV Planning Group, particularly for unaffiliated consumer and HIV Prevention representatives. If you know if anyone who would be interested in filling either a community member seat or prevention seat, please reach out to hpg.hhsa@sdcounty.ca.gov.</p> <p>The Strategies and Standards Committee of the HPG has introduced the Justice, Equity, Diversity, and Inclusion Intention (JEDI) Principles that addresses the Getting to Zero 3 yr. Community Action plan. The JEDI Principles were developed to address medical mistrust and the differential treatment of black and brown consumers, also noting that there is still work to address the needs of other marginalized communities. The document also provides a land acknowledgement that recognizes our inhabitation on Native Land. It has been approved by the HIV Planning Group and will be incorporated at future committee and planning group meetings in the future.</p> <p>In addition, the Strategies and Standards committee had the Housing Case Management standards approved and updated the Universal Standards to indicate that re-enrollment to the Ryan White Program is now a yearly requirement, not a bi-yearly requirement.</p>	<p>Myleen Abuan to send the list of vacant seats on the HPG to Dr. Riley for distribution to FBAC members and participants.</p>
<p>8. Open Forum</p>	<p>There was a townhall meeting last week called "Prepping for Pride" by the County of San Diego, touching on the recent increase on Monkeypox and Meningococcal Disease. A free vaccination event was held on Sunday, July 3, and another one will happen on Sunday, July 10, 2022 from 9:00 AM – 2:00 PM</p>	

9. Next Meeting/Future Agenda Items	<ul style="list-style-type: none"> • Meeting Date: Thursday, September 1, 2022 • Time: 10:00 AM – 12:00 PM • Location: Zoom 	
10. Announcements	<p>A free vaccination event for meningococcal disease will take place Sunday, July 10, 2022 from 9:00 – 2:00 PM at the San Diego LGBT Center.</p> <p>Owens Clinic will be holding an art contest to install art pieces at their location. Deadline to submit interest is July 15, and deadline to submit art is August 15, 2022. San Diego Pride will be celebrated on Saturday and Sunday, July 16 & 17, 2022. Christie's Place and the County of San Diego will be tabling at the event.</p>	
11. Closing Prayer/Adjournment	<p>Closing Prayer by: Myleen Abuan. Meeting was adjourned at 11:35 AM by Kenyatta Parker.</p>	

San Diego HIV Planning Group Assessment of the Administrative Mechanism

Data from Fiscal Year 21/22

8/23/2022 with HPG questions and HSHB responses added on 9/14/2022



INTRODUCTION

The Ryan White HIV/AIDS Program (RWHAP) legislation requires each Part A program planning council to:

assess the efficiency of the administrative mechanism in rapidly allocating funds to the areas of greatest need within the eligible area and at the discretion of the planning council, assess the effectiveness, either directly or through contractual arrangements, of the services offered in meeting the identified needs.” [Section 2602(b)(4)(E)].

This responsibility is referred to as the “assessment of the administrative mechanism.” This is the only task that allows for planning groups to look at procurement and contracting.

The purpose of the Fiscal Year 2022 Assessment of the Administrative Mechanism (AAM) is to ensure that the needs of people living with HIV/AIDS (PLWH) are being met by assessing the process used by HIV, STD and Hepatitis Branch (HSHB) of the County of San Diego (Recipient) to identify, contract with, and pay providers for delivering HIV-related services

METHODOLOGY

HPG Support staff conducted a desk audit of the contracting process. The Recipient was asked to provide information on the fiscal and procurement process from March 1, 2021 through February 28, 2022. The following information was requested from the recipient by August 18, 2022 to allow staff to analyze the information:

- Procurement process: a narrative description of the procurement process, and specific data regarding Ryan White Part A procurements that have been conducted during the report period, including how the opportunity was advertised, how many entities downloaded the procurement documents and attended the pre-proposal conference, and the number of proposals received.
- Contracting: a narrative description of the number of contracts that were in place at the beginning of the current Ryan White grant period.
- Reimbursement of subrecipients: a narrative describing how subrecipients bill for services and the timeline for reimbursement, along with some deidentified information from a single contract to illustrate timelines.
- Use of funds: a narrative description of the monthly expenditure reports that are provided to HPG.

FINDINGS

Procurement

- One Request for Proposals (RFP) for Ryan White Part A services was issued during the reporting period:
 1. **RFP 11207:** HIV Clinical Quality Management and HIV Data Support (2 lots)
 - Posted on 10/15/2021
 - Closed on 11/29/2021
 - Advertised on Buynet
 - Number of RFP documents downloaded was 41
 - Number who attended the proposal conference was 0
 - Number of proposals received was 1 for each lot
 - Notice of Intent to Award was posted on 2/18/2022
 - Contract start date was 3/1/2022
- No Request for Quotation (RFQ) for Ryan White Part A services was issued during the period.
- The Recipient provides a Procurement update in the monthly report to Steering Committee and HPG.
- Additional information about RFP and RFQ is in the “Description of Processes and Definitions” section below.

Contracting

- There have been no interruptions to any Ryan White service categories related to procurement processes during the past 10 years.
- Between March 1, 2021 and February 28, 2022, there were twenty-three RW contracts in place: 12 RW Part A; 3 RW Part A & Part A-MAI, and 8 RW Part A & B OAHS
- Contract revisions typically require 30 days to implement. However, in situations where additional funding is added, more time may be needed to assess and plan for any increased capacity that may be necessary.

Reimbursement

- Approved invoices were paid in a timely manner
- Most contracts are net-30 terms. One provider was set up for net-15 payment terms to ensure timely payments for Emergency Housing Assistance, Partial Assistance Rental Subsidy (PARS) and Emergency Financial Assistance services.
- During the ongoing COVID-19 epidemic, the system for processing invoices entirely through electronic means remained in place. This system enabled Ryan White Part A

invoices to be processed within the contract terms while staff worked remotely and established a protocol to follow in the event of future need.

- The following actual data is an illustrative example of the timeline: Invoice Dated 4/30/2021; Invoice Received by HSHB on 5/20/2021; Payment made on 6/8/2021.

Use of Funds

- The Recipient provides Part A/B Ryan White fund expenditure monthly reports to the Steering Committee, the Priority Setting and Resource Allocation Committee (PSRAC) and the HPG. This allows timely reallocation of funds from service categories that are underspending to those that are overspending.
- Monthly Service utilizations report and updates are provided to PSRAC and HPG.
- “Reallocation of Part A funds” is a standing agenda item for Steering Committee, PSRAC, and HPG meetings.
- The Recipient or recipient staff are available at Steering Committee, PSRAC, and HPG meetings to answer questions, respond to request for data, or reallocation of funds.

DESCRIPTION OF PROCESSES AND DEFINITIONS

Procurement Process

Ryan White is funded by the federal government and is subject to federal regulations (45 CFR Part 75). These regulations are 150 pages long and they govern how the County of San Diego must procure contracts for services. Per these guidelines, there are two primary types of procurement activities that apply to Ryan White Part A funds: requests for qualifications and requests for proposals.

Request for Proposals (RFP): RFPs are used for most service contracts that involve federal funding and are the most common procurement method used for Ryan White Part A service categories funded by the HIV Planning Group. An RFP is a time-intensive process that requires the efforts of HSHB,

Public Health Services Administration, Agency Contract Support, and the Department of Purchasing and Contracting. The time between initiation of an RFP and award of a contract is generally 6 to 12 months.



As with all County procurements, RFPs are posted on the County's procurement portal, BuyNet (<https://buynet.sdcounty.ca.gov/>). BuyNet allows entities to register to receive automatic notification of any potential procurement that might be interesting to that entity. BuyNet also allows the County to know how many entities view and download RFP documents, which provides data regarding interest in the procurement. The RFP document specifies the date and time that proposals are due. By County ordinance, a proposal that is submitted even one minute after the deadline cannot be considered for funding unless it was the only proposal received. Procurements associated with Ryan White funding are also advertised through the HIV Planning Group email distribution list.

Eligible proposals are evaluated by a Source Selection Committee (SSC). The SSC is made up of five non-conflicted voting members, up to two alternates, and technical advisors. SSC voting members are selected from other areas in HHSA or the County and are selected for subject matter expertise or experience in evaluating proposals. Alternates are selected in case any voting member of the SSC is unable to complete the RFP process. All voting members are required to complete a conflict of interest. Technical advisors include program and contract analysts from HSHB and a representative from Public Health Services Administration contracting unit. The members of SSCs are kept confidential until after a notice of intent to award (NOI) has been posted in order to avoid the potential for bidders to attempt to influence the outcomes of SSC deliberations.

Depending upon the number and complexity of proposals received, the SSCs might meet once or over several months until all proposals have been reviewed and evaluated. The SSC uses a comprehensive tool to evaluate all proposals received and determine best value to the County. The tool is confidential until after an NOI is posted, but the evaluation criteria are clearly specified in the RFP documents provided on BuyNet. At the conclusion of deliberations, the SSC will determine which entity or entities will be awarded contracts and will generate a

comprehensive report that outlines the strengths and weaknesses of each proposal. After a report is written, it is reviewed by the Chief of HSHB, the Director of Public Health Services (Dr. Elizabeth Hernandez), and the Agency Director (Nick Macchione or Patty Kay Danon, HHSA Chief Operating Officer), and then returned to the Director of the Department of Purchasing and Contracting, Jack Pellegrino, for award.

A NOI is posted on BuyNet, and all successful and unsuccessful bidders receive individual communication from the County regarding the outcome of their proposals. All unsuccessful bidders have the option to schedule a debrief with the SSC Chair. During a debrief, the Chair will review the noted strengths and weaknesses of an unsuccessful proposal and answer questions from the bidder. Debriefs are also available to successful bidders, although these are rarely requested. There is a five-day protest period immediately following the posting of the NOI. After five days have passed, if no protest is received, the County will move to execute contracts.

Request for Quotation (RFQ): RFQ is a faster procurement method, but it has several important limitations. Generally, HHSA/PHS/HSHB will use RFQs to bring on consultants for time-limited activities. Any contract awarded through an RFQ process that contains federal funds cannot last longer



than five years, cannot have expenses more than \$100,000 in a single year, and cannot exceed \$250,000 in total expenditures during the life of the contract. The time between issuance of an RFQ and implementation of a contract is generally 60 to 90 days.

As with an RFP, an RFQ will be posted on BuyNet with a set due date. By ordinance, the County cannot consider any bid submitted after the due date and time unless it is the only bid received.

Once received, bids are sent directly to HSHB for evaluation by staff within HSHB and PHS. The relative strengths and weaknesses of each bid are considered for best value to the County and successful entities will be selected. Once selected, HSHB will send a report to the Department of Purchasing and Contracting, who in turn will issue an NOI. As with an RFP, after five days have passed, if there are no protests the County will move to execute contracts. No protest of an RFQ has been submitted to HSHB.

Contracting Process

Per local ordinance, the County must wait five days after posting a notice of intent to award (NOI) before taking any further action so that any unsuccessful bidder has the opportunity to file a protest. Unsuccessful bidders cannot protest the outcome; they must assert that the County

did not follow its published process in making its determination, and they must specify what process or processes were not followed. If a bidder files a protest, the County is required to investigate the protest and make a determination. A bidder can request successive levels of review, including a final determination, if necessary, by the Chief Administrative Officer. Under County ordinance, no contracts can be awarded until a protest has been resolved. If the time required to resolve any protests might delay the expected beginning of a contract, the County will generally extend an existing contract to ensure that there is no interruption to services. There has only been one protest of a Ryan White Part A procurement during the past five years, and the protest was ultimately determined to be without merit and was dismissed. Although there was a significant delay in the implementation of the new contract, existing contracts were extended to ensure service provision during the protest period and there was no interruption in services.

If an NOI is posted and there is no protest (or once a protest is resolved), the County must then negotiate contracts. All proposals for contracts are considered “Best and Final Offers” (BAFO), which means the County can issue a contract without negotiation as long as the County does not make any changes to what a bidder proposed. Occasionally, however, bidders request deviations from County requirements or Statement of Work requirements, and those instances might require negotiation. Contract negotiations are typically completed within one week but may take longer. If the County cannot successfully negotiate an award, it can issue a new NOI if there are other proposals that were deemed acceptable. If not, the County might need to repeat the procurement process.

Reimbursement Process

Subrecipients are required to use the HSHB invoice template to submit invoices by the 10th calendar day after the end of the reporting month in which services are



provided. Upon receipt by HSHB, invoices are date-stamped, reviewed and, if no issues are identified, reasonable, allocable, and allowable expenditures are given preliminary approval. If issues are identified, the Administrative Analyst will contact the subrecipient for clarification or additional documentation to support an invoice. If the issue cannot be resolved, the Administrative Analyst will forward their concerns to the Fiscal Administrative Analysts and Principal Administrative Analyst. Once a review has been completed, and any requested clarification/documents have been received, the invoice is forwarded to the Contracting Officer’s Representative (COR) for final approval, signature, and payment authorization. Per HSHB policy, any disallowed expenses are reported to the subrecipient. A Fiscal Administrative

Analysts enters COR approved invoices into the internal payment tracking spreadsheet, and they are forwarded to the Financial Support Services Division (FSSD) for payment processing. FSSD personnel date-stamps invoices upon receipt and processes the invoices for payment in the County's accounting system (ORACLE), using contract terms. Invoices are paid via check or Electronic Fund Transfer to the subrecipient. The Fiscal Administrative Analysts forwards invoice payment documentation to an Administrative Analysts who will check ORACLE to confirm the date and amount that the subrecipient has been paid. Once an Administrative Analyst has confirmed that a payment has been made, a copy of the invoice will be maintained in the subrecipient files.

Outpatient Ambulatory Health Services providers claims are managed by a financial intermediary who is set up to make immediate payment to assure timely claim reimbursements. The intermediary pays the providers claims from a bank account funded for claim reimbursements. On a bi-monthly basis, the intermediary draws down the bank account for the total amount of provider claims and sends a funding request to the County with details of the invoice. The invoice request is processed, and payment is made to replenish the bank account.

In the final month of the Ryan White fiscal year, invoices forwarded to FSSD are flagged as "Priority Validation", identifying the invoice as one that should be given priority for processing. By using this method, payments can be issued quickly and reflected in ORACLE. This practice assists with preparing the Ryan White Part A final quarterly cost report and yearend reporting requirements.

To ensure that invoices for the County fiscal year ending June 30 are paid in a timely manner, subrecipients are requested to submit a preliminary invoice with June expenditures. Any variances with June actuals are addressed with final June invoice submission.

Use of Funds

The Recipient provides a monthly expenditure report at PSRAC, Steering Committee and HPG meetings. The presentation enables an assessment on spending by comparing the percent of the year elapsed with the percent of the service category that has been spent. Service Categories that are underspending or overspending are highlighted to ensure members are aware of categories to watch in case reallocation of funds may be needed.

The expenditure report is distributed in the packet of materials provided each month along with a monthly written report from the Recipient that provides a written recap of the budget and lists upcoming Requests for Proposal's (RFPs) that the Recipient is procuring or has procured during the current FY.

QUESTIONS FROM THE HIV PLANNING GROUP

Based on the report findings, the HIV Planning Group and the Recipient continue to work in partnership to ensure that the needs of consumers are met. To strengthen this partnership, the HPG requested some additional information.

Question from the HPG to the HSHB:

- What was the average time from Notice of Award in FY 21 for Ryan White (RW) Part A/MAI services to start of contract for services in new RW service categories?

HSHB's Responses to HPG Question:

No contracts for new services were started in FY 21.

- For Health Education & Risk Reduction (stand-alone, independent of EIS:RS) – To address the FY 21 award reduction, the HPG voted on June 23, 2021, to rescind the previous reduction funding scenario for FY 21 and decrease Health Education and Risk Reduction by \$33,000, from \$33,000 to \$0.
- For Peer Navigation (Referral for Health Care and Support Services) – Ryan White contracts were already in place and HSHB did not start any new contracts. Services are ongoing to current/existing RW providers.
- For Psychosocial Support Services – HPG voted on March 24, 2021, to reduce allocation to the service category Psychosocial Support (priority #25) by \$63,090 from \$67,000 to \$3,910 to fund a short-term, temporary Partial Assistance Rental Subsidy (PARS) extension for 90 days in FY 21 for clients on the Housing: Partial Assistance Rental Subsidy (PARS) waiting list.



County of San Diego

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PUBLIC HEALTH SERVICES DIRECTOR

HIV, STD and Hepatitis Branch of Public Health Services County of San Diego Health and Human Services Agency Monthly Report to the HIV Planning Group September 2022

Updates are in **bold**.

Items for HPG Follow-Up

- None.

HSHB has moved! Effective 9/16/2022 HIV Planning Group support staff, program staff, and administrative staff have office space at the Chula Vista Live Well Center, located at 690 Oxford Street in Chula Vista. Clinic staff continue to work out of the South, Central, and North Central Region Public Health Centers.

Coronavirus (COVID-19) Impacts and Updates

- Meetings of the HIV Planning Group will continue virtually as long as there is a local emergency.
- HRSA publishes routinely updated FAQs related to Ryan White services:
<https://hab.hrsa.gov/coronavirus-frequently-asked-questions>
- The CDC also has a comprehensive COVID-19 guide:
<https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- The California Department of Public Health has also established a web page to provide COVID-19 updates:
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx>
- The County of San Diego has established a webpage dedicated to COVID-19:
www.coronavirus-sd.com. On this page, the public has information regarding the current status of COVID-19 in San Diego County. They can also find additional information about the virus and how to prepare themselves.

- For general questions about COVID-19, the County recommends reaching out to 2-1-1 San Diego (211sandiego.org).

Monkeypox Updates

- The County declared monkeypox a local health emergency on August 2, 2022.
- You can now receive text updates about monkeypox from the County. Text COSD MONKEYPOX to 468-311.
- Additional information and resources including data now available on the Monkeypox website: www.SanDiegoCounty.gov/monkeypoxSD

Procurements

- An RFP for low-barrier models of medical care on Buynet has closed. **Notice of Intent to Award will be posted soon.**
- An RFP for peer-based mobile PrEP education and delivery is in development.
- HSHB is working with the County's technology provider to develop the Getting to Zero mobile phone app and will deploy that with a printed resource guide when complete.
- An RFP for comprehensive HIV prevention services for persons who inject drugs has closed on Buynet. **Notice of Intent to Award will be posted soon.**
- An RFQ for implementation funding for non-profit medical providers to implement routine HIV testing will soon be posted on Buynet.
- An RFP for benefits navigation **is currently on Buynet.**
- An RFP for comprehensive HIV services for transgender individuals has closed on Buynet.
- Later this year, there will be RFP's for Ryan White services. Procurements are currently under development.

Ryan White Parts A/HRSA Updates/Clinical Quality Management

- The Ryan White Part A grant has three parts. The first is "formula." This amount is based upon the number of people living with HIV in San Diego County. The second part is called "supplemental." This amount is based upon the strength of the County's application for funding. The final part of the award is "Minority AIDS Initiative." This amount is based upon the number of people living with HIV who are Black, Hispanic, Asian, Pacific Islander, Native American/Native Alaskan or whose ancestry includes more than one race.
- HSHB has received final notice of award for the current grant period, March 1, 2022 to February 28, 2023.

Year	Formula	Supplemental	MAI	Total
20-21	\$7,201,641	\$3,439,807	\$773,149	\$11,414,597
21-22	\$7,124,107	\$3,469,994	\$742,177	\$11,336,278
22-23	\$7,625,887	\$3,557,289	\$793,221	\$11,976,397

- HSHB has received a core medical services waiver from HRSA for March 2022 to February 2023. Ordinarily, 75% of grant funding would have to be spent on “core medical services.” With the waiver, the HIV Planning Group is exempt from that requirement. San Diego County has received a core medical services waiver for the past 8 years. The core medical services waiver can be granted if there are no waiting lists for Ryan White HIV core medical services and there is no waiting list for California’s AIDS Drug Assistance Program. **HSHB is requesting a new Core Medical Services Waiver for FY 23/24.**
- A programmatic site visit with HRSA occurred the week of May 23-27, 2022. Final report was received. **On 8/26/2022, Recipient’s office submitted a Corrective Action Plan (CAP) addressing proposed resolution of the findings.**
 - HRSA noted the following strengths of the RW program:
 - Culturally responsive program
 - Leveraging of other funding sources
 - Internal tracking systems
 - Policies and procedures
 - Trauma-informed approach to services and contract administration/monitoring
 - The following findings are being addressed:
 - Program: Lack of compliance with reflectiveness and representation on the HIV Planning Group, specifically vacancies in the seats for Hospital Association, State Medicaid, and recipient of Federal Funding.
 - Program: Lack of documentation regarding HIV Planning Group seat for District 1 representative, specifically regarding expiration of seat and participation as a sub-committee co-chair.
 - Fiscal: Lack of substantiating documentation for fiscal monitoring of contracts.

- Fiscal: Lack of compliance testing, policies and procedures do not outline federal cost principles.
- Clinical Quality Management: Lack of compliance with review of performance data evaluation on a quarterly basis.
- Clinical Quality Management: Lack of infrastructure related to evaluating the effectiveness of the clinical quality management program.
- **Recipient's office is currently working on completing the Fiscal Year (FY) 2023 Non-Competing Continuation (NCC) Progress Report for Part A due October 3rd.**

Ryan White Part B

- Notice of Grant Award for FY19-24 was received. Total grant award for Part B and MAI is \$2,291,806 each year.
- Ryan White Part B funds HIV primary care and oral health, medical and non-medical case management, inpatient substance use treatment services, emergency financial assistance, early intervention services, representative payee, and focused HIV testing.

2021 Ryan White Services Report (RSR)

- The RSR is a comprehensive report of key client and program data from everyone funded by Ryan White. The report describes the clients who receive Ryan White services, such as race, gender, age, and where they live. It also looks at health outcomes, like viral suppression.
- Key findings for San Diego County from the 2020 RSR summary report:
 - The Ryan White system in San Diego County (Parts A, B, C, D and F) provided services to 7,153 clients in calendar year 2020. That is the second largest number of patients served by Ryan White in California.
 - 80.2% of San Diego County Ryan White clients live at or below 100% of the federal poverty level. This percentage is by far the highest proportion in California.
 - 91.9% of persons living at or below 100% of FPL are virally suppressed.
 - Almost four-fifths of Ryan White clients in San Diego County are stably housed (78.4%), with 11.2% in temporary housing and 10.4% unstably housed.
 - 92.7% of San Diego County Ryan White clients have achieved viral suppression, which ranks seventh among all funded areas.

Ending the HIV Epidemic Funding (HRSA)

- The federal Ending the HIV Epidemic (EHE) initiative focuses on achieving two ambitious goals: a 75% reduction in new HIV infections by 2025 and a 90% reduction in new HIV infections by 2030.
- For HRSA Ending the HIV Epidemic funding, the County of San Diego has received a partial award for the period of 3/1/22 through 2/28/23. The amount of the award is \$508,583. According to HRSA, this amount should represent 31% of the eventual award. This means that we can expect a total of \$1,640,590, which is level with the previous year's funding. This funding supports community engagement, leadership development, low-barrier medical care, and improving linkage to care for persons living with HIV through the use of community-informed molecular epidemiology.
- HRSA conducted a virtual site visit at the end of February. We are awaiting the final report and will share with HPG once received.
- HRSA has notified all EHE funding recipients that due to the impacts of COVID-19, we will be allowed to carry forward all unspent funding from the first two years of the grant (March 1, 2020, through February 28, 2021) into Years 3-5 of the grant (March 1, 2022, through February 28, 2025). Instructions and timelines were provided by HRSA at the end of May, carryover must be submitted in August.
- **Final notice has been received. Funding for FY 22/23 was increased and is \$2,004,000.**

CDC 18-1802 Funding

- Current CDC funding for HIV prevention (known as "18-1802") has changed its framework, and it is currently focusing on three areas:
 - Strengthening disease intervention infrastructure;
 - Expanding and providing navigation services (medical care, benefits, support services); and
 - Expanding access to syringe services for persons who inject drugs.
- HSHB has notified the California Department of Public Health that we will be moving forward with implementation of syringe services using funding received under the Ending the HIV Epidemic grant focused on HIV prevention.
- 18-1802 funding is deployed for HIV testing, status-neutral linkage to care (linkage to ART or PrEP), social media, condom distribution, and evaluation.

Ending the HIV Epidemic funding (CDC)

- The California Department of Public Health was successful in its application to the CDC for funding under the Ending the HIV Epidemic initiative. As a result, HSHB has been awarded \$1.9 million per year for five years. This new funding will support the following activities:
 - *Wrap-Around Services for Persons Who Inject Drugs:* Provide comprehensive testing—HIV, HCV, STDs— status-neutral health care navigation (for PrEP or ART), and linkage to substance use disorder treatment and mental health resources.
 - *Mobile PrEP + PrEP Champions:* Recruit Black and Latinx MSM and Transgender persons who are currently utilizing PrEP to become PrEP champions to support outreach and education efforts connected with mobile PrEP clinics. The mobile clinics will provide PrEP-related medical evaluation, including comprehensive testing (HIV, HCV, STDs and safety labs), ongoing PrEP medical care, linkage to Benefits Navigation, and prescriptions for PrEP.
 - *Routine HIV Testing Implementation Grants:* Provide competitive start-up grants for local community health centers and other non-profit health care providers to implement routine HIV testing in primary care, urgent care and emergency departments. The funding would pay for any needed revisions to electronic health record systems, training for all staff, educational materials for clients, funding for unfunded (uninsured) tests, and funding for linkage to care for clients who are diagnosed with HIV. The funding would last for a period of 12 months.
 - *Benefits Navigation:* Provide trained benefits counselors who can help clients enroll in necessary benefits programs, including Medi-Cal, Covered California, ADAP, PrEP-AP, CalFresh, pharmaceutical patient assistance programs, etc.
 - *Getting to Zero App and Resource Guide:* Develop a mobile application that provides information and resources regarding medical and support services for persons living with or vulnerable to HIV. Once developed, conduct ongoing maintenance of all resources and information to ensure that it remains up-to-date, comprehensive and accurate. Create printed versions of the resource guide, as well, to ensure accessibility by a large proportion of the residents of San Diego County.

- *HIV Care and Prevention Services for Transgender Persons:* Provide trauma informed, linguistically and culturally appropriate support services for transgender persons including co-located HIV prevention and care services, gender-affirming care services, STD and HCV testing, behavioral and substance use treatment services, and social support services (e.g., housing, job training, and food supports).
- *Surveillance Program Improvements:* Increase the ability of the County of San Diego's HIV Epidemiology Surveillance Program (HESP) to detect potential clusters so that the HIV, STD and Hepatitis Branch and its contracted providers can respond timely, ensure linkage to ART and other resources for persons newly diagnosed or newly re-engaged, ensure linkage to PrEP for those who are HIV-negative but have ongoing vulnerability to HIV, and reduce onward transmission of HIV. Specifically, this funding will ensure timely entry and assignment of all new HIV case reports as well as entry of lab reports not received via electronic lab reporting.
- *Enhanced Support for HIV Planning Group/Ending the HIV Epidemic Advisory Committee:* Provide additional staff support to the HIV Planning Group to augment the group's ability to effectively plan for and evaluate HIV prevention efforts in alignment with the County of San Diego's Getting to Zero initiative and the federal Ending the HIV Epidemic initiative

Service Utilization

- **Ryan White Parts A and B**
 - **Ryan White Part A Service Utilization Report provides data regarding clients and service utilization through August 31, 2022.**
 - **In the first half of this fiscal year, the Ryan White Part A system of care provided services to 2,588 clients. This number represents about a 11% decline from clients served during the prior grant period, which was 2,907.**
 - **Viral suppression of clients receiving services in the month August 2022 was 91% for clients who have viral load tests documented in ARIES.**
 - **HSHB continues to assess the capacity of the Ryan White system on a monthly basis in critical core medical services. We also include non-medical case management due its important role in linking clients to needed services. The system capacity assessment looks at the availability of services by measuring the time until the third available appointment.**

Because of our Core Medical Services Waiver, we must ensure that there are no waiting lists for any core medical service that are longer than 30 days.

- **Outpatient/Ambulatory Health Services: No concerns.**
- **Oral Health: No concerns.**
- **Psychiatry: The wait for all psychiatric appointments (in-person and telehealth, day and evening) in South region is currently 2-3 months, but in-person and virtual day and evening appointments are available in other regions.**
- **Mental Health: There is currently a wait list in North Region, but in-person and virtual day and evening appointments are available in other regions.**
- **Medical Case Management: No concerns.**
- **Non-Medical Case Management: No concerns.**

Budget

- In general, one of the primary measures we use to assess spending is to compare the percent of the year elapsed with the percent of the service category that has been spent. For a 12-month period, around 8% of funding should be spent each month to ensure funding is fully spent by the end of the grant period. When the percent of funds spent is higher than the percent of year elapsed, it means that funding might run out before the end of the grant period. When the percent of funds spent is less than the percent of the year elapsed, there is the possibility of savings and unspent grant dollars at the end of the period. For purposes of this analysis, a variance that is less than 4% (approximately two weeks) is used to determine whether service categories are displaying accelerated or slower-than-expected expenditure.
- **No Updates. July budget data will be available at the September HPG Meeting.**
- **Ryan White Part A**
 - For the period (3/1/22 – 2/28/23), the report reflects expenditures through June, representing 33% of the grant period.
 - The following service categories are under target for the fiscal year:
 - Primary Care (22%)
 - Medical Specialty (16%)
 - Psychiatric Medication Management (10%)
 - Oral Health (13%)

- Medical Case Management (27%)
 - Referral to Health Care and Support Services (Peer Navigation) 21%
 - Home-based Healthcare Coordination (24%)
 - Emergency Financial Assistance (14%)
- Ryan White Part B
 - For the period (4/1/22 – 3/31/23), the report reflects expenditures through June, representing 25% of the grant period.
 - No concerns.
 - HIV Prevention (1802 Funding)
 - The report reflects expenditures through June 2022, representing 50% of the grant period.
 - No concerns.
 - HRSA EHE (20-078 Funding)
 - The report reflects 33% of the grant year elapsed (March 1, 2022-February 28, 2023). HRSA will allow carryover of funds from Years 1 and 2 of the project to Years 3-5. Instructions for carryover submission was received late May 2022.
 - HSHB expects to fully spend out its grant funding in Year 3 (current year).
 - CDC/CDPH (20-2010 Funding)
 - This report reflects 58% of the grant year elapsed (August 1, 2021-July 31, 2022) with 5% of the grant spent due to delays in release of procurements. CDPH will allow carryover of funds from Years 1 and 2 of the project to Years 3-5.

Policy Updates

- HRSA and CDPH continue to provide clarifications regarding uses of funding during the pandemic. Links to this revised guidance is provided above. New guidance will be provided as it is received.

SUMMARY OF SERVICES FOR FY22
August 2022, Total to Date, and Prior Year Total

RYAN WHITE SERVICES		Aug	Total to Date	Prior Year Total
FY 2022-2023				
Unduplicated clients served	Clients	1376	2,588	2,907
New	Clients	165		
Returning	Clients	1211		
VIRAL LOAD SUPPRESSION				
Virally suppressed	Clients	1039		
% Virally suppressed		91%		
With Test	Tests	1145		
Without Test	Tests	231		
PART-A SERVICES				
Outpatient Ambulatory Health Services: HIV Primary Care*	Visits	135	833	902
	Clients	122	505	548
Outpatient Ambulatory Health Services: Medical Specialty Care	Visits	0	133	91
	Clients	0	69	61
Psychiatric Medication Management	Visits	0	9	23
	Clients	0	7	15
Oral Health Care: Dental Care	Visits	76	546	445
	Clients	60	265	221
Early Intervention/Integrated Services for Women, Children & Families: Coordinated Care	Visits	84	1,113	871
	Clients	28	128	85
Early Intervention/Integrated Services for Women, Children & Families: Childcare	Visits	35	48	62
	Clients	35	36	50
Early Intervention Services: Regional Services	Visits	794	4,048	4,296
	Clients	369	885	1,030
Early Intervention Services: Peer Navigation Services	Visits	79	461	527
	Clients	23	116	125
Early Intervention Services: Outreach Services	Visits	0	0	0
	Clients	0	0	0
Medical Case Management Services	Visits	884	5,246	6,015
	Clients	410	680	744
Home-based Health Care Coordination	Visits	61	406	483
	Clients	17	39	47
Case Management -Non-Medical	Visits	479	2,635	3,500
	Clients	205	303	424
Mental Health Services: Counseling/Therapy	Visits	257	1,592	1,793
	Clients	109	189	225
Substance Abuse Treatment Services – Residential*	Visits	0	62	0
	Clients	0	21	0
Substance Abuse Treatment Services - Outpatient	Visits	312	1,933	1,417
	Clients	49	76	52

*Includes Part B funded services

SUMMARY OF SERVICES FOR FY22
August 2022, Total to Date, and Prior Year Total

RYAN WHITE SERVICES		Aug	Total to Date	Prior Year Total
Housing Services: Partial Assistance Rental Subsidy	Visits	111	656	765
	Clients	111	123	148
Medical Transportation Services - Assisted	Visits	1	4	6
	Clients	1	2	4
Medical Transportation Services - Unassisted	Visits	208	1,786	1,797
	Clients	148	374	413
Housing Services: Emergency Housing Assistance	Visits	91	476	619
	Clients	71	294	290
Food Services: Food Bank/ Home Delivered Meals	Meals	2874	17,220	23,567
	Clients	107	160	302
Medical Nutrition Therapy	Visits	0	68	88
	Clients	0	48	68

*Includes Part B funded services

SUMMARY OF SERVICES FOR FY22
August 2022, Total to Date, and Prior Year Total

RYAN WHITE SERVICES			Aug	Total to Date	Prior Year Total
PART-A SERVICES continued					
Legal Services	Visits		10	91	119
	Clients		9	67	69
Emergency Financial Assistance	Visits		38	146	377
	Clients		21	51	68
Internet Access	Visits		0	1	2
	Clients		0	1	2
Internet Equipment	Visits		0	4	18
	Clients		0	2	10
Collateral Contacts	Visits		284	1,457	2,069
	Clients		168	450	463
MAI SERVICES					
Medical Case Management Services	Visits		117	581	1,103
	Clients		58	110	144
Mental Health Services: Therapy/Counseling	Visits		72	456	249
	Clients		35	68	48
Substance Abuse Treatment Services - Outpatient	Visits		17	107	64
	Clients		7	22	13
Faciliated Referrals	Visits		0	0	0
	Clients		0	0	0
Outreach Encounters	Visits		0	0	0
	Clients		0	0	0
Medical Transportation Services - Assisted	Visits		0	0	0
	Clients		0	0	0
Medical Transportation Services - Unassisted	Visits		0	0	0
	Clients		0	0	0
Case Management -Non-Medical	Visits		107	539	490
	Clients		47	80	53

*Includes Part B funded services

August 2022 Goldenrods	Total #
# Goldenrods Received	1
# of Providers	1
# of RW-funded services provided	1
# of Clients Contacted	0
# Given permission to use information	1
# Positive Remarks	1
# Remarks Requiring Follow-Up	0

This newsletter is organized to align the updates with Strategies from the ***Laying a Foundation for Getting to Zero: California's Integrated HIV Surveillance, Prevention, and Care Plan*** (Integrated Plan). The [Integrated Plan](http://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final_ADA.pdf) is available on the Office of AIDS' (OA) website at www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final_ADA.pdf.

In This Issue:

- Strategy A
- Strategy B
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- Strategy K
- Strategy M
- Strategy N

HIV Awareness:

September 18th is National HIV/AIDS and Aging Awareness Day (NHAAD). NHAAD is celebrated to bring awareness to the growing number of people living long and full lives with HIV. It also brings attention to issues related to aging with HIV such as other health conditions that can complicate HIV treatment, social needs, and address new infections among older adults. As people age, they are less aware of their HIV risk factors and are less likely to get tested. To find a list of resources for additional information about NHAAD, testing options and awareness day events visit [National HIV/AIDS and Aging Awareness Day](#) #HIVandAging.

National Gay Men's HIV/AIDS Awareness Day (NGMHAAD) is recognized on September 27th. NGMHAAD is observed to raise awareness of HIV among gay and bisexual men. Testing and learning of varied prevention options is highly encouraged and promoted on NGMHAAD. CDC's *Let's Stop HIV Together* campaign has [many resources](#) for gay and bisexual men.

General Office Updates:

COVID-19

OA is committed to providing updated information related to COVID-19. We have disseminated a number of documents in an effort to keep our clients and stakeholders informed.

Please refer to our [OA website](http://www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx) at www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx, to stay informed.

Monkeypox (MPX)

OA is committed to providing updated information related to MPX. We have partnered with the Division of Communicable Disease Control (DCDC), a program within the Center of Infectious Diseases, and have disseminated a number of documents in an effort to keep our clients and stakeholders informed. Please refer to the [DCDC website](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/monkeypox.aspx) at <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/monkeypox.aspx>, to stay informed.

Please Note Effective Immediately: Due to concerns about stigma with the name **monkeypox**, **California Department of Public Health (CDPH) is using the acronym MPX (or Mpox when spoken) to refer to the virus until a new name is established by the World Health Organization.**

On August 16, (Northern CA), 17, (Southern CA), and 18, (Central CA), CDPH held regional stakeholder listening sessions about Monkeypox (MPX) in California. Community Based Organizations, Local Health Departments, and Community Advocates were invited to participate. The purpose of these listening sessions was to provide updates about the current status of MPX and what CDPH is doing,

what the regions need to know, and provide a Q & A/listening session for the regions. The listening sessions were held in English and Spanish.

CDPH would like to thank everyone who registered and those who attended.

The meeting recordings for all three listening sessions can be accessed at the following links:

8/16/22

[Spanish](https://vimeo.com/740580683) - <https://vimeo.com/740580683>

[English](https://vimeo.com/740606019) - <https://vimeo.com/740606019>

8/17/22

[Spanish](https://vimeo.com/741014075) - <https://vimeo.com/741014075>

[English](https://vimeo.com/741012697) - <https://vimeo.com/741012697>

8/18/22

[Spanish](https://vimeo.com/741018492) - <https://vimeo.com/741018492>

[English](https://vimeo.com/741017193) - <https://vimeo.com/741017193>

The password for all sessions is: **CDPH**
Please see links below for additional resources and updates.

- [Monkeypox Communications Toolkit](#) (CDPH)
- [Monkeypox Information and Resources](#) (CDC)
- [Frequently Asked Questions](#) (CDC)

Racial Justice and Health Equity

The Racial & Health Equity (RHE) workgroup aims to gain insight and understanding of racial and health equity efforts throughout CDPH and take next steps towards advancing RHE in our work. The workgroup has formed subcommittees to address community stakeholder engagement challenges, improve OA policy and practices to support RHE and increasing OA knowledge and attitude on RHE among leadership and staff.

The workgroup convened in August to hold discussion on our understanding and experiences of white privilege, how it is used to cause harm and enforce and maintain racial inequities.

HIV/STD/HCV Integration

As the lead state department in the COVID-19 response, CDPH has re-directed hundreds of staff to this effort. Because of this, the integration efforts of the OA, STD Control Branch, and Office of Viral Hepatitis Prevention are postponed indefinitely. Please refer to our [OA website](#) at www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx, to stay informed.

Ending the Epidemics Strategic Plan



CDPH-OA/STD Control Branch are pleased to report that the roll-out of the **California Strategic Plan** to address the syndemic of HIV, HCV and STIs continues August through September as we review all of the community stakeholder input from our provider needs assessment, community survey and regional listening sessions. We have reached a diversity of stakeholders including consumers, advocates, public health, and CBO staff. Thank you for your ideas about how to drill down into our **30 strategies** organized across **six social determinants of health**. Also, thanks to Facente Consulting for leading this community engagement effort.

As soon as it is complete, we will be releasing a blueprint draft for community input based on what we learned. There will be a comment period and a road show to present this document to our partners.

Below is the [website that documents our work](#) including the draft roadmap, the recording our Statewide Town Hall, and the list of completed regional listening sessions:

- <https://tinyurl.com/CDPHStratPlan>

Ending the HIV Epidemic (EHE)

In August, EHE counties attended a special training offered by the Keck School of Medicine about the Street Medicine Model to help strengthen their mobile services especially aimed at people experiencing homelessness. Thanks to all the EHE counties that continue to implement their EHE plans to help accelerate the end of HIV in California.

Strategy A: Improve Pre-Exposure Prophylaxis (PrEP) Utilization

PrEP-Assistance Program (AP)

As of August 31, 2022, there are 184 PrEP-AP enrollment sites covering 178 clinics that currently make up the PrEP-AP Provider Network.

A [comprehensive list of the PrEP-AP Provider Network](https://cdphdata.maps.arcgis.com/apps/webappviewer/index.html?id=6878d3a1c9724418aebfea96878cd5b2) can be found at <https://cdphdata.maps.arcgis.com/apps/webappviewer/index.html?id=6878d3a1c9724418aebfea96878cd5b2>.

[Data on active PrEP-AP clients](#) can be found in the three tables displayed on page 4 of this newsletter.

Strategy B: Increase and Improve HIV Testing

OA's HIV home-testing distribution demonstration project continues through Building Healthy Online Communities (BHOC) in the six California Consortium Phase I Ending the HIV Epidemic in America counties. The program, [TakeMeHome®](https://takemehome.org/), (<https://takemehome.org/>) is advertised on gay dating apps, where users see an ad for home testing and are offered a free HIV-home test kit.

In the first 23 months, between September 1, 2020, and July 31, 2022, 3566 tests were distributed. This month, mail-in lab tests (including dried blood spot tests for HIV, syphilis, and Hepatitis C, as well as 3-site tests for

gonorrhea and chlamydia) accounted for 130 (66.0%) of the 197 total tests distributed.

Of individuals ordering a test in July, 31.5% reported never before receiving an HIV test, and 53.8% were 18 to 29 years of age. Among individuals reporting race or ethnicity, 38.2% were Hispanic/Latinx, and of those reporting sexual history, 58.9% indicated 3 or more partners in the past 12 months. To date, 404 recipients have completed an anonymous follow up survey, with 94.1% indicating they would recommend TakeMeHome HIV test kits to a friend. The most common behavioral risks of HIV exposure reported in the follow up survey were being a man who has sex with men (73.5%) or having had more than one sex partner in the past 12 months (62.1%).

Strategy D: Improve Linkage to Care

Since 2007, the Center for Quality Improvement and Innovation recognizes organizations and individuals who make exemplary progress in improving their Ryan White-funded services. One of 2022 award winners is Team VIDA at Santa Rosa Community Health Center (SRCHC) in Sonoma County. Team VIDA includes programmatic staff, case managers, clinicians, pharmacy staff, and a quality coordinator who provides back-up to providers or RNs for any positive result notifications, as well as provides linkage to care for positive patients.

In the fall of 2020, OA began a quality improvement (QI) initiative to increase the number of Ryan White HIV/AIDS Program clients receiving comprehensive healthcare coverage (CHC). Team VIDA increased the number of clients receiving non-medical case management who are enrolled in CHC from 58% to 93%, well surpassing the statewide goal of 85%, in just six months. They accomplished this by reviewing and restructuring their data collection efforts to ensure that underserved clients (uninsured and those that may need a follow up) were being identified. They also established an Access

Active PrEP-AP Clients by Age and Insurance Coverage:

Current Age	PrEP-AP Only		PrEP-AP With Medi-Cal		PrEP-AP With Medicare		PrEP-AP With Private Insurance		TOTAL	
	N	%	N	%	N	%	N	%	N	%
18 - 24	346	9%	---	---	---	---	41	1%	387	10%
25 - 34	1,091	29%	1	0%	---	---	280	7%	1,372	37%
35 - 44	875	23%	---	---	3	0%	191	5%	1,069	29%
45 - 64	561	15%	1	0%	20	1%	127	3%	709	19%
65+	28	1%	---	---	165	4%	7	0%	200	5%
TOTAL	2,901	78%	2	0%	188	5%	646	17%	3,737	100%

Active PrEP-AP Clients by Age and Race/Ethnicity:

Current Age	Latinx		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian/ Pacific Islander		White		More Than One Race Reported		Decline to Provide		TOTAL	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
18 - 24	189	5%	---	---	44	1%	23	1%	---	---	94	3%	9	0%	28	1%	387	10%
25 - 34	787	21%	---	---	130	3%	75	2%	2	0%	300	8%	7	0%	71	2%	1,372	37%
35 - 44	684	18%	3	0%	89	2%	46	1%	1	0%	202	5%	10	0%	34	1%	1,069	29%
45 - 64	472	13%	3	0%	42	1%	20	1%	---	---	155	4%	---	---	17	0%	709	19%
65+	26	1%	1	0%	5	0%	3	0%	---	---	159	4%	---	---	6	0%	200	5%
TOTAL	2,158	58%	7	0%	310	8%	167	4%	3	0%	910	24%	26	1%	156	4%	3,737	100%

Active PrEP-AP Clients by Gender and Race/Ethnicity:

Gender	Latinx		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian/ Pacific Islander		White		More Than One Race Reported		Decline to Provide		TOTAL	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Female	326	9%	1	0%	7	0%	8	0%	---	---	10	0%	1	0%	10	0%	363	10%
Male	1,695	45%	6	0%	284	8%	157	4%	3	0%	881	24%	22	1%	136	4%	3,184	85%
Trans	127	3%	---	---	16	0%	1	0%	---	---	13	0%	1	0%	4	0%	162	4%
Unknown	10	0%	---	---	3	0%	1	0%	---	---	6	0%	2	0%	6	0%	28	1%
TOTAL	2,158	58%	7	0%	310	8%	167	4%	3	0%	910	24%	26	1%	156	4%	3,737	100%

All PrEP-AP charts prepared by: ADAP Fiscal Forecasting Evaluation and Monitoring (AFFEM) Section, ADAP and Care Evaluation and Informatics Branch, Office of AIDS. Client was eligible for PrEP-AP as of run date: 08/31/2022 at 12:01:11 AM
Data source: ADAP Enrollment System. Site assignments are based on the site that submitted the most recent application.

Coordinator role – someone that specializes in AIDS Drug Assistance Program and health insurance for individuals with HIV. This role streamlined the process of linking patients to care in less than one hour (other providers can take days, if not weeks). To continue their efforts, Team VIDA has incorporated QI into their onboarding process for new staff. They even implemented cross-training to fortify their office’s workflow, which proved crucial to staffing during the early days of the COVID-19 pandemic.

When asked if they had any words of wisdom to share for people just starting out on their own QI journeys, HIV Program Manager Paola Diaz said, “We don’t own the project, the team owns the project. We are all responsible to make sure the work gets done the best it can. When everybody felt that they were part of a project, it became easier. If we keep everyone focused on the goal, we get better patient care, we get better results.”

To [learn more about SRCHC’s Team Vida](https://targethiv.org/cqii/cqii-quality-award-program#santarosa), please visit <https://targethiv.org/cqii/cqii-quality-award-program#santarosa>.

Strategy G: Improve Availability of HIV Care

The California Department of Housing and Community Development (HCD) will release its draft of the 2021-22 Consolidated Annual Performance and Evaluation Report (CAPER)

for public comment prior to submittal to HCD. The CAPER reports on specified federal housing and economic assistance allocated by the state, which includes the Housing Opportunities for Persons with AIDS (HOPWA) program, for the period July 1, 2021, through June 30, 2022. The draft will be available on [HCD’s website](https://www.hcd.ca.gov/plans-and-reports) at <https://www.hcd.ca.gov/plans-and-reports>, for a 15-day public comment period starting on August 30 and ending on September 15, 2022 at 5PM. [Questions and public comments](mailto:CAPER@hcd.ca.gov) can be submitted to CAPER@hcd.ca.gov. More information is available on their website.

Strategy J: Increase Rates of Insurance/Benefits Coverage for PLWH or on PrEP

As of August 16, 2022, the number of ADAP clients enrolled in each respective ADAP Insurance Program are shown in the ADAP Enrollment System chart below.

Strategy K: Increase and Improve HIV Prevention and Support Services for People Who Use Drugs

Updated National HIV/AIDS Strategy Released

The *National HIV/AIDS Strategy Federal Implementation Plan for 2022—2025* was released in August. Updates include an emphasis on the important roles of harm reduction and syringe services programs in the

ADAP Insurance Assistance Program	Number of Clients Enrolled	Percentage Change from June
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	548	-1.08%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	5,914	-0.95%
Medicare Part D Premium Payment (MDPP) Program	2,041	-0.73%
Total	8,503	-0.91%

national response to HIV, as well as to hepatitis C virus infection and substance use disorder.

The strategy also calls on jurisdictions to “enhance the ability of the HIV workforce to provide naloxone and educate people on the existence of fentanyl in the drug supply to prevent overdose and deaths and facilitate linkage to substance use disorder treatment and harm reduction programs”.

The [full plan](https://hivgov-prod-v3.s3.amazonaws.com/s3fs-public/NHAS_Federal_Implementation_Plan.pdf) can be found at https://hivgov-prod-v3.s3.amazonaws.com/s3fs-public/NHAS_Federal_Implementation_Plan.pdf

[Learn how to start naloxone distribution services](https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/Fatal_Overdose_Prevention_for_Social_Service_Providers_FINAL.pdf) at https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/Fatal_Overdose_Prevention_for_Social_Service_Providers_FINAL.pdf

International Overdose Awareness Day 2022

On August 31, International Overdose Awareness Day (IOAD), harm reduction programs across the state honored people who died by overdose and recognized people who use drugs, their families and friends who use naloxone to reverse opioid overdoses and save lives. A collective banner drop and other community events brought awareness to the national public health crisis and called for more funding to reduce overdose deaths.

[Learn more about IOAD](https://www.overdoseday.com/) at <https://www.overdoseday.com/>

[Find your local harm reduction provider](https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_prev_sepdirectory.aspx) at https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_prev_sepdirectory.aspx

Governor Newsom Vetoed Bill to Pilot Overdose Prevention Programs

In August, Governor Newsom vetoed a bill to pilot overdose prevention programs in California. SB 57 would have allowed Los Angeles, San Francisco, and Oakland to pilot safer drug

consumption spaces to prevent overdose death, reduce public drug use and offer linkage to prevention and treatment services. This harm reduction strategy has been offered in cities around the world since the mid-1980s and is proven effective at preventing overdose death.

Strategy M: Improve Usability of Collected Data

The [HIV and Black/African Americans Fact Sheet](#), [HIV and Latinx Fact Sheet](#), and [HIV and Transgender People Fact Sheet](#) are now available on the [OA Case Surveillance Reports webpage](#). These fact sheets include 2010 to 2020 trend data on new HIV diagnoses among Black/African Americans, Latinx, and transgender people. The fact sheets also include demographic characteristics of new HIV diagnoses and health outcomes among Black/African Americans, Latinx, and transgender people compared to the statewide average.

Strategy N: Enhance Collaborations and Community Involvement

California Planning Group (CPG):

The CPG Community and State Co-Chairs will be hosting a four-part virtual fall meeting for all CPG Membership in October/November of 2022. This meeting will be open to the public. To avoid holding these meetings up against a weekend and to ensure there is no overlap with other important conferences and meetings scheduled for October, we have chosen to hold this year's meeting on October 25 & 27 and November 1 & 3. This meeting will be comprised of four separate Zoom meetings:

- **Day 1:**
Tuesday, October 25, 2022
1:00 PM – 4:00 PM Leadership Academy
(*CPG members only*)
- **Day 2:**
Thursday, October 27, 2022
12:45 PM – 4:00 PM

- **Day 3:**
Tuesday, November 1, 2022
12:45 PM – 4:00 PM

- **Day 4:**
Thursday, November 3, 2022
12:45 PM – 4:00 PM

Note: October 25 will be a skills-building meeting and will not open to the public; however, there will be a 10-minute public comment period on October 27, November 1, and November 3.

For [questions regarding this issue of *The OA Voice*](#), please send an e-mail to angelique.skinner@cdph.ca.gov.



JOIN US!

SAN DIEGO HIV PLANNING GROUP ORIENTATION

**THURSDAY, OCTOBER 20, 2022
2:00PM - 4:00 PM**

All HPG Members and anyone interested in learning more about the HIV Planning Group are welcome!

Si puede atender la orientación y le gustaría la disponibilidad de un traductor a español o alguna otra acomodación necesaria para su participación, por favor contacte al Equipo de Apoyo de HPG por lo menos 3 días antes de la junta al (619) 944-7341.

Register in advance for this webinar:

https://us06web.zoom.us/webinar/register/WN_488iv0cTSCCTUdjqWJqMDA

After registering, you will receive a confirmation email containing information about joining the webinar.



**For information, accessibility accommodations, or to RSVP, please reach us at:
E-mail: HPG.HHSA@sdcounty.ca.gov | Telephone: (619) 403-8809**



**Se les
invita!**

ORIENTACIÓN PARA EL GRUPO DE PLANIFICACIÓN PARA VIH DE SAN DIEGO

**JUEVES 20 DE OCTUBRE, 2022
2:00PM - 4:00 PM**

***Todos los miembros del HPG y cualquier persona interesada en aprender
mas sobre el Grupo de Planificación de VIH están bienvenidos.***

Si puede atender la orientación y le gustaría la disponibilidad de un traductor a español o alguna otra acomodación necesaria para su participación, por favor contacte al Equipo de Apoyo de HPG por lo menos 3 días antes de la junta al (619) 944-7341.

Regístrese por Avanzado para el seminario:

https://us06web.zoom.us/webinar/register/WN_488iv0cTSCCTUdjqWJqMDA

Después de registrarse, recibirá un correo electrónico de confirmación que contendrá la información necesaria para atender.



**Para más información, asistencia en accesibilidad, o para confirmar que atenderá, favor de contactarnos:
Correo electrónico: HPG.HHSA@sdcounty.ca.gov | Teléfono: (619) 944-7341**

DR. A. BRAD TRUAX AWARDS



Call for Nominations for the 2022 Dr. A. Brad Truax Awards

Each year, the San Diego HIV Planning Group recognizes individuals who have served the community and made outstanding contributions in the struggle against the HIV/AIDS epidemic. Nominations are made by people living with HIV/AIDS and affected community members.

The Selection Committee is composed of former Dr. A. Brad Truax Award winners. Awards will be presented at a reception honoring all nominees on World AIDS Day, Thursday, December 1, 2022.

From all nominations, awards are given in three service categories:

- HIV Education, Prevention and/or Counseling and Testing
- HIV Care, Treatment and/or Support Services for persons living with HIV/AIDS
- HIV Planning, Advocacy or Policy Development related to HIV education, prevention, counseling and testing, care, treatment and/or support services

The selection committee also selects one individual to receive the Dr. A. Brad Truax award. This award was named in honor of Dr. A. Brad Truax and in memory of his tireless dedication to the prevention and treatment of HIV/AIDS. Dr. Truax chaired the first advisory board on HIV/AIDS in San Diego County. He was a persistent and diplomatic person who encouraged people with different interests and agendas to work together to achieve goals that benefit the community.

Learn more at
<http://tiny.cc/truax>



Nominations

Who is Eligible:

- A volunteer, board member, or staff person who provides service that improves the quality of life of people living with HIV/AIDS in San Diego.
- Service provided during the last year.
- If the nominee is employed by an HIV service provider, the nomination must be for service above and beyond what is expected for their paid position.

Who Can Nominate:

- Anyone may submit a nomination.
- Self-nominations must include a letter of recommendation from a third party.

Nomination Procedure:

- Submit the Nomination Form (printed or typed).
- Attach relevant supporting information (please limit to 3 pages).
- Include a high-resolution picture of the nominee.

**Nominations are due by
3:30 pm on October 15, 2022**

Please submit by email to:
HPG.HHSA@sdcounty.ca.gov
Subject: Truax Nomination

DR. A. BRAD TRUAX AWARDS



INVITACIÓN A PROPONER NOMINACIONES PARA PREMIO A. BRAD TRUAX 2022

Todos los años, el Grupo de Planificación para el VIH de San Diego reconoce a las personas que ayudaron a la comunidad e hicieron contribuciones excepcionales en la lucha contra la epidemia de VIH/SIDA. Las nominaciones las realizan las personas con VIH/SIDA y los miembros de la comunidad afectados.

El Comité de Selección está compuesto por personas que previamente han ganado el premio Dr. A. Brad Truax. Los premios se presentarán en una recepción en honor a todas las personas nominadas en el Día Mundial del SIDA, que es el jueves 1º de diciembre de 2022.

De todas las nominaciones, se entregan premios en tres categorías de servicios:

- Educación, prevención y/o asesoría y pruebas de VIH
- Servicios de cuidado, tratamiento y/o apoyo del VIH para personas con VIH/SIDA
- Planificación, defensa o desarrollo de políticas sobre VIH relacionadas con la educación, prevención, asesoría y pruebas, cuidado, tratamiento y/o servicios de apoyo del VIH

Además, el comité de selección también elige a una persona para recibir el premio Dr. A. Brad Truax. Este premio recibe su nombre en honor al Dr. A. Brad Truax en memoria de su incansable dedicación a la prevención y el tratamiento del VIH/SIDA. El Dr. Truax presidió la primera junta de asesoría sobre VIH/SIDA en el Condado de San Diego. Fue una persona persistente y diplomática que alentó a personas con diferentes intereses y motivaciones a trabajar juntas para lograr objetivos que beneficiaran a la comunidad.

Para obtener más información,
visite la página web:
<http://tiny.cc/truax>



Nominaciones

A quién se puede nominar:

- Un voluntario, miembro de la junta o miembro del personal que brinde servicios que mejoren la calidad de vida de las personas con VIH/SIDA en San Diego.
- El servicio debe haberse brindado durante el último año.
- Si la persona nominada es empleada de un proveedor de servicios de VIH, la nominación debe ser por el servicio más allá de lo que se espera por su posición remunerada.

Quién puede nominar:

- Cualquier persona puede presentar una nominación.
- Las autonominaciones deben incluir una carta de recomendación de un tercero.

Procedimiento de nominación:

- Presente el Formulario de nominación (impreso o a mano).
- Adjunte información de respaldo relevante (límitese a 3 páginas)..
- Incluya una fotografía de alta resolución de la persona nominada.

Todas las nominaciones deben
presentarse antes del
15 de octubre de 2022
a las **3:30 pm**

Envíelas por correo electrónico a:
HPG.HHSA@sdcounty.ca.gov
Asunto: Nominación Truax