

Wednesday, November 19, 2025, 3:00 PM – 5:00 PM Southeastern Live Well Center 5101 Market Street, San Diego, CA 92114 Tubman Chavez Room C

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

TABLE OF CONTENTS

Document	Page Number(s)
Directions and Parking Instructions	001
Procedure for Public Requests During HPG Meetings	002
HPG Member Conflict of Interest (COI) Sheet	003
HPG Agenda 11/19/2025	004 – 005
FY25 Expenditure Report (through September 2025)	006 – 008
FY25 Utilization Report (QR code)	009
Meeting Minutes (HPG and Committees)	010 – 074
Action Item Information Sheets: Recommendations for Membership Appointments	075 – 078
Action Item Information Sheet: Request to Approve Board Letter	079
Board Letter	080 – 084
Action Item Information Sheet: Recommendation for FY25 Reallocations	085
Presentation: The Pacific AIDS Education and Training Center	086 – 094
Flyer: 2025 Dr. A. Brad Truax Award Ceremony and Reception	095 – 096
AB 2302 Reminders	097

Meeting Location & Directions:

HIV Planning Group (HPG)

November 19, 2025 3:00 PM – 5:00 PM

Southeastern Live Well Center 5101 Market Street San Diego, CA 92114 Tubman Chavez Room C



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

FROM I-805 SOUTH:

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

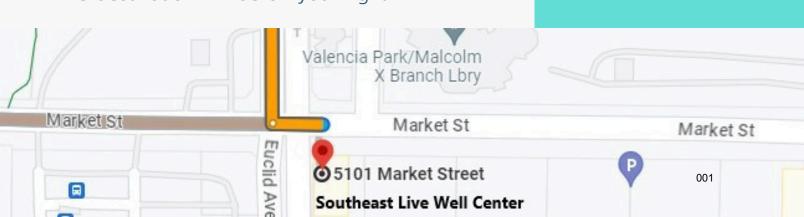
FROM I-805 NORTH:

- 1. Head southeast on I-805 South.
- 2. Take exit 13A for CA-94-E/M L King Jr. Fwy.
- 3. Merge onto CA-94 E.
- 4. Take exit 4A for Euclid Ave.
- 5. Turn left onto Euclid Ave.
- 6.Use the left 2 lanes to turn left onto Market St.
- 7.The destination will be on your right.

PUBLIC TRANSPORTATION

MTS Trolley: Orange Line

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



Procedure of HPG Public Requests During HPG Meetings

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

The process/procedure for responding is as follows.

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

Explain the process for a response and indicate that:

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

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

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

No Conflicts

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

Fleming, Tyra Jones, Lori Kubricky, Cinnamen Lochner, Michael Lothridge, Jen Miles, Skyler Rooney, Ivy

Weber, Jeffery Wimpie, Michael Yancey, Adrienne

Revised 9/18/25

^{**}Referral for Healthcare and Support Services



Wednesday, November 19, 2025, 3:00 PM – 5:00 PM Southeastern Live Well Center 5101 Market Street, San Diego, CA 92114 Tubman Chavez Room C

To participate remotely via Zoom:

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

Call in: +1 (669) 444-9171

Meeting ID (access code): 853 6898 7291

Password: SDHPG

Language translation services are available upon request at least 96 hours prior to the meeting. Please contact HPG Support Staff via e-mail at https://memory.ca.gov.

A quorum for this meeting is thirteen (13)

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

ORDER OF BUSINESS

- 1. Call to order and roll call (3-3:05)
- 2. Welcome, moment of silence, matters from the Chair (3:05-3:10)
- 3. A moment to remember and honor Kenneth Riley, MD, MPH (3:10-3:20)
- 4. <u>Public comment</u> (for members of the public) concerns/questions/suggestions for future training topics/agenda items (3:20-3:25)
- 5. <u>HPG Member Open Forum</u> concerns/questions/suggestions for future training topics/agenda items (3:25-3:30)
- 6. **ACTION:** Approve the HPG agenda for November 19, 2025 (3:30-3:35)
- 7. HIV, STD, and Hepatitis Branch (HSHB) Report (3:35-3:45)
- 8. Routine Business: (3:45-3:50)
 - a. **ACTION:** Approval of consent agenda for November 19, 2025 which includes:
 - i. Approval of HPG minutes from October 22, 2025
 - ii. Acceptance of the following committee minutes:

Steering Committee	September 12, 2025
Membership Committee	September 10, 2025
Priority Setting and Resource Allocation Committee	June 12, 2025; July 17, 2025; July 24, 2025; July 31, 2025; August 7, 2025
Medical Standards and Evaluation Committee	September 9, 2025
Community Engagement Group	October 15, 2025
Strategies and Standards Committee	August 5, 2025

Page **1** of **2**

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

CARE Partnership September 15, 2025

- iii. (Membership Committee): HPG appointments/reappointments Pamuela Halliwell, Sergio Luna, Joseph Westcott
- iv. (Community Engagement Group): Joint City/County HIV Housing Committee designated CEG seat appointment – Jen Lothridge
- b. Report Outs deferred
- 9. Old Business: (N/A)
 - a. None
- 10. New Business: (3:50-4:50)
 - a. ACTION: Approve the Board Letter to Authorize Acceptance of Funding to Address Sexually Transmitted Infections, Support Harm Reduction Services, and Apply for Future Funding Opportunities
 - b. **ACTION** (*Priority Setting and Resource Allocation Committee*): Approve the FY25 (fiscal year March 1, 2025 February 28, 2026) Reallocations
 - c. **Presentation**: The Pacific AIDS Education and Training Center (AETC) (4:20-4:50)
- 11. HPG Support Staff Updates (4:50-4:55)
- 12. Announcements (4:55-5:00)
- 13. Adjournment (5:00)

Next Meeting Date: *one week early* **Wednesday**, **December 17**, **2025**, at **3:00 PM – 5:00 PM**Location: Southeastern Live Well Center, 5101 Market Street, San Diego, CA 92114
(Tubman Chavez Room C) and via Zoom

RW 2025-26 PART A AWARD INFORMATION	
Funding Source	Total RW 2025-26 Award
Part A	11,941,254.00
Part A MAI	812,482.00
TOTAL AWARD AMOUNT	12,753,736.00

RW 2025-26

YEAR TO DATE EXPENDITURE AND SAVINGS BREAK-DOWN Through September 2025

FY25-26 ALLOCATION BREAK DOWN											
					RW 2025-26		CORE Medical				
Funding Source	Admin. \$	Admin. %	CQM \$	CQM %	Service dollars	Total	Services	Support Services			
Part A	1,149,330	10%	335,660	3%	10,456,264	11,941,254	46.05%	53.95%			
Part A MAI	81,248	10%	34,092	4%	697,142	812,482	40.0370	33.9370			
TOTAL	1,230,577.80		369,752.07		11,153,406.13	12,753,736.00	49%	51%			

Ryan White Part A Allocations								% Elapsed	58%		
Service Categories	HRSA Ranking	Priority Ranking	RW 2025-26 HPG Initial Allocation	%	HPG & Recipient Approved Actions +/-	RW 2025-26 HPG Adjusted Allocation	%	RW 2025-26 Year to Date Expenditure	RW 2025-26 Year-to-Date - % Expenditure/Budget)	RW 2025-26 Balance	Comments
Outpatient Ambulatory Health Services: Primary Care	11	1	1,102,630.00	11%	718,407.00	1,821,037.00	17%	706,238.47	39%	1,114,798.53	
Outpatient Ambulatory Health Services: Medical Specialty	11	2	195,000.00	2%	•	195,000.00	2%	97,327.03	50%	97,672.97	
Psychiatric Medication Management	1j	12	6,000.00	0%	7,500.00	13,500.00	0%	3,805.93	28%	9,694.07	
Oral Health	1k	3	160,940.00	2%	97,847.00	258,787.00	2%	116,971.46	45%	141,815.54	
Medical Case Management	1h	4	1,151,853.00	12%	(122,000.00)	1,029,853.00	10%	492,609.92	48%	537,243.08	
Non-Medical Case Management for Housing		6	200,000.00	2%		200,000.00		16,332.42	8%		
Housing: Emergency Housing	2e	9	1,183,515.00	12%	203,717.00	1,387,232.00	13%	643,703.31	46%	743,528.69	
Housing: Location, Placement and Advocacy Services		8	100,000.00	1%	(100,000.00)	-		-	0%	-	
Housing: Partial Assistance Rental Subsidy (PARS)	2e	7	850,507.00	9%	104,000.00	954,507.00	9%	467,940.49	49%	486,566.51	
Non-Medical Case Management	2h	5	392,021.00	4%	(85,000.00)	307,021.00	3%	164,104.90	53%	142,916.10	
Coordinated HIV Services for Women, Infants, Children, Youth, and Families (WICYF)	1c	13	993,157.00	10%	70,000.00	1,063,157.00	10%	568,650.45	53%	494,506.55	
Childcare Services	2a		-	0%	-	-	0%	-	0%	-	
Early Intervention Services: Regional Services	1c	14	790,000.00	8%	(42,000.00)	748,000.00	7%	356,781.42	48%	391,218.58	
Health Education & Risk Reduction	2d	14a	-	0%	-	-	0%	-	0%	-	
Outreach Services	2j	14b	-	0%	-	-	0%	-	0%	-	
Referral Services	21	14c	-	0%	-	-	0%	-	0%	-	
Referral to Health and Supportive Services (Peer Navigation)		16	260,000.00	3%	(61,148.00)	198,852.00	2%	83,558.10	42%	115,293.90	006

Ryan White Part A Allocations								% Elapsed	58%		
Service Categories	HRSA Ranking	Priority Ranking	RW 2025-26 HPG Initial Allocation	%	HPG & Recipient Approved Actions +/-	RW 2025-26 HPG Adjusted Allocation	%	RW 2025-26 Year to Date Expenditure	RW 2025-26 Year-to-Date - % Expenditure/Budget)	RW 2025-26 Balance	Comments
Mental Health: Counseling/Therapy	1j	10	810,000.00	8%	(230,000.00)	580,000.00	6%	280,513.50	48%	299,486.50	
Psychosocial Support Services		17	46,744.00	0%	-	46,744.00	0%	2,309.00	5%	-	
Substance Use Services: Outpatient	1m	11	313,127.00	3%	41,010.00	354,137.00	3%	180,026.20	51%	174,110.80	
Substance Abuse Services: Residential	20	18	-	0%	-		0%	-	0%	-	
Home-based Health Care Coordination	1e	19	228,500.00	2%	(15,000.00)	213,500.00	2%	112,328.05	53%	101,171.95	
Transportation: Assisted and Unassisted	2g	20	151,830.00	2%	(60,000.00)	91,830.00	1%	44,165.96	48%	47,664.04	
Food Services: Food Bank/Home-Delivered Meals	2c	21	536,073.00	5%	97,090.00	633,163.00	6%	247,270.47	39%	385,892.53	
Medical Nutrition Therapy	1i	22	35,542.00	0%		35,542.00	0%	20,940.19	59%	14,601.81	
Legal Services	2i	23	285,265.00	3%	-	285,265.00	3%	169,227.39	59%	116,037.61	
Emergency Financial Assistance	2b	24	61,856.00	1%		61,856.00	1%	25,476.97	41%	36,379.03	
Home Health Care	1f	25	-	0%			0%	-	0%	-	
Early Intervention Services: HIV Counseling and Testing	1c	26	-	0%		-	0%	-	0%	-	
Cost-Sharing Assistance	1d	27	-	0%		-	0%	-	0%	-	
Hospice	1g	28	-	0%		-	0%	-	0%	-	
Subtotal			9,854,560.00	100%	624,423.00	10,478,983.00	98%	4,800,281.63	46%	5,678,701.37	
Ryan White Part A Minority AIDS In	itiative (MA	d)	RW 2025-26 HPG Initial Allocation		HPG & Recipient Approved Actions +/-	RW 2025-26 HPG Adjusted Allocation	%	RW 2025-26 Year to Date Expenditure	RW 2025-26 Year-to-Date - % Expenditure/Budget)	RW 2025-26 Balance	Comments
Multi-Disciplinary Team			593,182.00		-	593,182.00	86%	231,031.30	39%	362,150.70	
Housing: Emergency Housing			100,000.00		-	100,000.00	14%	22,308.59	22%	77,691.41	
		Subtotal	693,182.00		-	693,182.00	100%	253,339.89	37%	439,842.11	
		TOTAL	10,547,742.00		624,423.00	11,172,165.00		5,053,621.52	45%	6,118,543.48	

	% Balance					
CORE Medical Services	4,825,976.50	46.1%	2,936,192.62	60.8%	1,889,783.88	39.2%
Support Services	5,653,005.00	53.9%	1,864,089.01	33.0%	3,788,915.99	67.0%
TOTAL	10,478,981.50		4,800,281.63		5,678,699.87	

Month: Sep-25

Part A & Part B Prevention Comp A/C

HRSA 20-078

YEAR TO DATE EXPENDITURE AND SAVINGS BREAK-DOWN THROUGH SEPTEMBER 2025											
F	RW 2025-26 SERVICE DOLLAR ALLOCATIONS AND EXPENDITURES										
Funding Source	RW 2025/2026 Service Dollars	Contract YTD Expenditure	% of Year Invoiced	% Spent	Balance	Comments					
Ryan White Part B											
Outpatient Ambulatory Health Services (Medical)	5 -	\$ -	42%	0.00%	\$ -	Part A Payment Summary (Part B funding)					
Early Intervention Services (Expanded HIV Testing)	\$ -	\$ -	42%	0.00%	\$ -	Part A Payment Summary (Part B funding)					
Early Intervention Services (Focused Testing)	\$187 ann	\$78,999.91	42%	42.04%	\$ 108,900	Part B Payment Summary					
Medical Case Management (Emergency Financial Assistance)	\$403,510	\$71,928.75	42%	17.83%	\$ 331,581	Part B Payment Summary					
Housing (Substance Abuse Services-Residential)	\$421,512	\$377,903.98	42%	89.65%	\$ 43,608	Part B Payment Summary					
Non-medical Case Management (Rep Payee)	\$38,098	\$19,218.67	42%	50.45%	\$ 18,879	Part B Payment Summary					
CoSD Medical Case Management	\$416,150	\$127,293.71	42%	30.59%	\$ 288,856	Part B Cost Report					
CoSD Early Intervention Services	\$285,044	\$89,141.83	42%	31.27%	\$ 195,902	Part B Cost Report					
Ryan White Part B Total	\$ 1,752,214	\$ 764,487			\$ 987,727						
Prevention (27-0047) - HIP											
Counseling and Testing	\$ 105,482.46	\$ 56,223.25	33%	53.30%	\$ 49,259	Payment Summary					
Evaluation/ Linkage Activities/ Needs Assessment	\$ 907,907.24	\$ 258,148.40	33%	28.43%	\$ 649,759	Payment Summary					
Prevention Total	\$ 1,013,390	\$ 314,372			\$ 699,018						
HRSA Ending the HIV Epidemic (EHE) - 25-063 FY25-26											
HRSA EHE	\$ 4,789,446.50	\$ 905,229.00	58%	18.90%	\$ 3,884,218	Payment Summary					
EHE Total	\$ 4,789,447	\$ 905,229			\$ 3,884,218						
TOTAL	\$ 7,555,050	\$ 1,984,088			\$ 5,570,963						

Ryan White Utilization Report

Summary of Services for FY 25

(March 1, 2025 - February 28, 2026)



HIV, STD and Hepatitis Branch



Wednesday, October 22, 2025, 3:00 PM – 5:00 PM Southeastern Live Well Center 5101 Market Street, San Diego, CA 92114 Tubman Chavez Room A

A quorum for this meeting is thirteen (13)

HPG Members Joining in Person (19): Nicole Aguilar | Beth Davenport | Tyra Fleming | Rosemary Garcia | Felipe Garcia-Bigley | David Grelotti | Ben Ignalino | Lori Jones | Cinnamen Kubricky (*Vice-Chair*) | Michael Lochner (*Chair*) | Jen Lothridge | Eva Matthews | Skyler Miles | Veronica Nava | Shannon Paugh | Ivy Rooney | Stephen Spector | Rhea Van Brocklin | Michael Wimpie

HPG Members Joining Virtually: Michael King (Just Cause)

HPG Members Absent (5): Marco Aguirre Mendoza | Juan Conant | Michael Donovan | Jeffery Weber | Adrienne Yancey

ORDER OF BUSINESS

Agenda Item	Discussion/Action	Follow-Up
Call to order and roll call	Mikie Lochner called the meeting to order at 3:02 PM and noted the presence of an in-person quorum.	
Welcome, moment of silence, matters from the Chair	A moment of silence was observed. The Chair made the following announcements: - Reminder to speak into the microphone. - A reminder to be aware of conflicts of interest and to opt out of discussion when conflicted. - An acknowledgment of October birthdays.	
3. Public comment	The following comments were shared: - A concern about access to emergency housing and a long waitlist.	
4. HPG Member Open Forum	The following comments were made: A concern about rising prices, loss of food benefits. A comment about additional resources for food access from SD Live Well Advance that took place today.	
5. ACTION : Approve the HPG agenda for October 22, 2025	Motion: Approve the HPG agenda for October 22, 2025.	

Agenda Item	Discussion/Action	Follow-Up
6. HIV, STD, and Hepatitis Branch (HSHB) Report	Motion/Second/Count (M/S/C): Van Brocklin/Nava/16-0 Discussion: none Abstentions: Lochner Motion carries Patrick Loose provided an update on the service category expenditures through the month of August and summarized utilization data. The following discussion was held: - A concern that the aging population may be having a harder time accessing information online. - In follow-up to a request to have data comparable to last year's spending, a QR code that's available in the packets was noted. - Regional data may be available for the areas where clients are not	
7. Routine Business	being served.	
a. ACTION: Approve the consent agenda for October 22, 2025 which includes: i. HPG minutes (9/24/25) ii. Community Engagement Group minutes (9/10/25); Strategies and Standards Committee minutes (8/5/25)	Motion: Approve the consent agenda for October 22, 2025 M/S/C: Fleming/Garcia-Bigley/17-0 Discussion: none Abstentions: Lochner Motion carries	
b. Report Outs i. State Office of AIDS (OA) and AIDS Drug Assistance Program (ADAP) – Leroy Blea ii. Housing Committee – Nicole Aguilar or committee representative iii. California HIV Planning Group (CHPG) – Mikie Lochner	Leroy Blea provided the following updates from ADAP: - The detailed report was included in the packet. - All HPG members are invited to join the listserv to get updates from the State Office of AIDS directly: officeofaids@cdph.ca.gov. - Office of AIDS is also working on a contractual relationship with Department of Health Care Services (DHCS) to provide a representative on Medi-Cal for all	

Agenda Item	Discussion/Action	Follow-Up
Agenda Item	Planning Councils that are trying to fill that vacancy. Nicole Aguilar provided the following updates: - The Housing Committee meets on the third Wednesday every other month. The next meeting is on November 19. There are vacancies. Mikie Lochner provided the following updates: - Rhea Van Brocklin is a newly	Follow-Up
	appointed CPG member.Representatives met with Dr.	
8. Old Business	Ramos at the latest CPG meeting.	
a. ACTION (Strategies and Standards Committee): Approve changing the PARS enrollment period from 48 months to 24 months, with extension periods allowed in 6-month increments for up to 48 months while clients are actively working on a housing plan	 Motion: Approve changing the PARS enrollment period from 48 months to 24 months, with extension periods allowed in 6-month increments for up to 48 months while clients are actively working on a housing plan. M/S/C: Strategies and Standards Committee/18-0 Discussion: The following discussion: A concern that clients without a housing case manager may potentially fall through the cracks. PARS is intended to be a short-term program to address an emergency. The Recipient's Office will be bringing back recommendation to the Strategies and Standards Committee to clarify the requirements for an extension. Abstentions: Kubricky, Lochner Motion carries 	
b. ACTION (Strategies and Standards Committee): Approve Universal Standards	Motion: Approve the revised Universal Standards M/S/C: Strategies and Standards Committee/19-0 Discussion: none	

	SAN DIEGO HIV PLANNING GROUP (HPG)			
	Agenda Item	Discussion/Action	Follow-Up	
		Abstentions: Lochner Motion carries		
	c. ACTION (Medical Standards and Evaluation Committee): Approve Dental Practice Guidelines	Motion: Approve Dental Practice Guidelines M/S/C: MSEC/15-0 Discussion: Abstentions: Garcia-Bigley, Grelotti, King, Lochner, Paugh Motion carries		
9.	New Business			
	a. ACTION (Strategies and Standards Committee): Approve Service Standards Introduction	Motion: Approve Service Standards Introduction. M/S/C: Strategies and Standards Committee/16-0 Discussion: the following discussion took place: - A request to evaluate whether the Standards are overall inclusive of those at risk for HIV A recommendation to vote on this introduction as is and bring back to the committee for additional discussion. Abstentions: Jones, Lochner Motion carries	The Recipient's Office will develop a paragraph and bring to next Strategies and Standards Committee meeting in December.	
	b. ACTION (Strategies and Standards Committee): Approve Case Management Standards	Motion: Approve the revised Case Management Standards. M/S/C: Strategies and Standards Committee/12-0 Discussion: The following discussion took place: - The committee was commended for integrating non-clinical and clinical case management A request to clarify how clients can get in touch with providers as there may be a general confusion. Abstentions: Davenport, Garcia-Bigley, Grelotti, King, Kubricky, Lochner, Paugh, Spector Motion carries	The committee will review the document for additional changes	
	c. ACTION (Strategies and Standards Committee): Approve Emergency Financial Assistance and	Motion: Approve the revised Emergency Financial Assistance and Housing Standards.		

Agenda Item	Discussion/Action	Follow-Up
Housing Standards	M/S/C: Strategies and Standards Committee/18-0 Discussion: none Abstentions: Lochner, Matthews Motion carries	
10. HPG Support Staff Updates	 All are invited to attend the 36th annual Dr. A. Brad Truax Award Ceremony and Reception on December 1; please to RSVP on the website at sdplanning.org 	
11. Announcements	 Tree of Life Ceremony will be held at 6pm at Village Hillcrest following the Truax Award Ceremony and Reception on December 1. The last Project Pearl had 15 participants, and five of them are planning to apply for the HPG membership. Another cohort, for the youth, will be starting in November. 	
12. Adjournment	The meeting was adjourned at 4:52 PM.	
Next meeting date	Date: Wednesday, November 19, 2025 (one week early) Time: 3:00 PM – 5:00 PM Location: Southeastern Live Well Center, 5101 Market Street, San Diego, CA 92114 (Tubman Chavez Rooms B and C) and via Zoom	



Friday, September 12, 2025, 10:00 AM – 12:00 PM County Operations Center 5530 Overland Ave, San Diego, CA 92123 (Meeting Room 124)

A quorum for this meeting is four (4)

Members Present: Michael Donovan | Dr. David Grelotti | Mikie Lochner (Chair) | Rhea Van Brocklin |

Michael Wimpie

Members Absent: Felipe Garcia-Bigley | Cinnamen Kubricky (Vice-Chair)

ORDER OF BUSINESS

Agenda Item		Discussion/Action	Follow-Up
1.	Call to order, introductions, comments from the chair, and a moment of silence	Mikie Lochner called the meeting to order at 10:02 AM. Introductions were made. A moment of silence was observed. The following comments were made: - The budget process has been completed. - A request to be patient with staff. - A reminder that the committee chairs are there for consumers, not providers.	
2.	the public)	None	
	Sharing our concerns (for committee members)	The following comments were made: - A request to get a better sense of the budgeting process, especially related to the public comment at the recent Medical Standards and Evaluation Committee (MSEC) meeting. Patrick Loose clarified that the law prohibits HPG members from becoming involved in contracting, especially current procurements. Any programs that have issues with an active procurement may reach out to the Purchasing and Contracting department.	
4.	ACTION: Approve the Steering Committee agenda for September 12, 2025	Motion: Approve the Steering Committee agenda for September 12, 2025	_

Agenda Item Discussion/Action Follow-Up			
Agenua item	Discussion/Action	i ollow-op	
5. ACTION : Approve meeting minutes from July 11, 2025	Motion/Second/Count (M/S/C): Van Brocklin/Donovan/4-0 Discussion: none Abstentions: Lochner Motion carries Motion: Approve meeting minutes for July 11, 2025 with a requested change M/S/C: Donovan/Van Brocklin/4-0 Discussion: remove "in a timely manner" from item #3		
	Abstentions: Lochner		
6. ACTION : Approve the HIV Planning Group agenda for September 24, 2025	Motion carries Motion: Approve the HIV Planning Group agenda for September 24, 2025 with elimination of item #10g M/S/C: Grelotti/Wimpie/4-0 Discussion: A request to see the reallocations before they are presented at the September HPG meeting. Abstentions: Lochner Motion carries	HPG Support Staff (SS) to work with the Recipient's office to share the reallocations with Rhea ahead of the HPG meeting since the Priority Setting and Resource Allocation Committee (PSRAC) got cancelled.	
7. Committee reports and recommendations	Community Engagement Group (CEG): none MSEC: Mental Health and Psychiatric Service Standards will be reviewed at the November meeting. A new attendance policy was also approved. Membership Committee: Kalee Garland's application was approved for appointment and will be brought to the September HPG. Cinnamen Kubricky's and Nicole Aguilar's applications for reappointment were also approved. A discussion about the right to appeal/dissent was held. Another discussion was on having work plans for all committees. The membership committee is considering providing several attendance policy options to the committees to review. This only applies		

Agenda Item	Discussion/Action	Follow-Up
HPG Support Staff Report	to the committees that meet less frequently than once a month. PSRAC: the September meeting was cancelled due to lack of quorum. Strategies and Standards Committee: none Dasha Dahdouh provided the following updates:	
	 Gratitude for everyone's patience as the support staff team works to make the meetings a success. 	
9. HIV, STD, and Hepatitis Branch (HSHB) Report	Patrick Loose provided the following updates: The Senate passed a budget that restored all original proposed cuts. However, the HIV prevention funding has been eliminated. No funding for testing and surveillance. Parts C, D and F are also under consideration for elimination. As these are proposed changes, there is no change to the HPG seats that represent Parts C and D. There is a general concern with the impact on outcomes. The housing funding (HOPWA) is also being considered for elimination. Some of the national sources of information are AIDS United, the National Minority AIDS Council, and NACCHO. Working on a set of recommendations for reallocations. There has been a drop in overall utilization. The updated expenditure report will be available within the next week.	
10. Old Business		
a. Update : Regional Town Halls	The following updates were provided: - South and East Regional Planning meetings took place in	

Agenda Item	Discussion/Action	Follow-Up
	August and September, respectively. The next meeting will take place on Friday, October 10 in the North Inland area at the North Inland Live Well Center. These regional planning meetings are part of a larger plan, related to the triennial needs assessment and the comprehensive plan. A consultant will be brought in to help with the assessment of the service capacity.	
11. New Business	Motion: Approve the Desirient's	
a. ACTION : Approve the Recipient's Authority to transfer up to \$100,000 between service categories (an increase from \$50,000) without prior approval from the HPG	Motion: Approve the Recipient's Authority to transfer up to \$100,000 between service categories (an increase from \$50,000) without prior approval from the HPG. M/S/C: Van Brocklin/Wimpie/4-0 Discussion: The following discussion took place: - The hope is that it will help remove some barriers in the underspending To clarify, the authority would apply for \$100,000 per category per grant period. Abstentions: Lochner Motion carries	
b. ACTION : Approve Ryan White Part A carryover funds from FY24-25 to Fy25-26 in the amount of \$427,958	Motion: Approve Ryan White Part A carryover funds from FY24-25 to Fy25-26 in the amount of \$427,958. M/S/C: Van Brocklin/Wimpie/4-0 Discussion: The following discussion took place: - General support for this, but a concern that HPG voted to decrease the service category during the budgeting process. The committee was reminded that HPG voted to decrease funding with the carryover in mind.	

Agenda Item	Discussion/Action	Follow-Up
A OTION. Assume a salinus	- Emergency housing funds up to two weeks of hotel stay in an instance of unstable housing. The other part of this is rent subsidy in an instance when housing is at risk of being lost Eviction assistance seems to be the most helpful component of this service category. Abstentions: Lochner Motion carries The following in the large seems to be the most helpful component of this service category.	
c. ACTION : Approve a policy on appointment of community members to committees	 The following discussion took place: A concern that the decisions are currently unilateral. Unless there is a real concern from any of the three chairs, the community member should be able to join. When it comes to HPG members, the guidelines are part of the bylaws. This policy is being considered for community members who express interest in joining a committee that doesn't require HPG membership. The goal is to decrease barriers and make it easy to join. The motion was tabled to allow for more discussion. 	Membership Committee to review and add the language to the policy.
d. Report : Assessment of the Administrative Mechanism – Dasha Dahdouh	Dasha Dahdouh presented on the 2025 Assessment of the Administrative Mechanism. - What would happen if someone is denied a service in a service category? If there is a third-party payor for a service, the client is referred to the payor. Ryan White is a payor of last resort. - How soon after a service delivery is there a requirement to invoice? The invoices are due on the 10 th of the month for the previous month. Some contracts have negotiated for it to be the 15 th of the month.	

Agenda Item	Discussion/Action	Follow-Up
e. Presentation : Integrated HIV Prevention and Care	Francisco Puentes presented on the Integrated HIV Prevention and Care	•
Plan	Plan. The consultant who has been hired to support this is a Project	
	Manager and is receiving direction from HSHB.	
f. Discussion : Committee Chair Retreat (November 2025)	The following ideas were presented:	HPG SS to work on a March-May 2026 HPG retreat
g. Discussion : Working with support staff on agenda items	Mikie Lochner reminded the chairs that the support staff can assist in preparing the agenda for each meeting, including HPG.	
h. Update : Cybersecurity at HPG and committee meetings	Dasha Dahdouh provided the following updates: - Over the last several months, HPG SS has implemented a number of features on the back end of Zoom to ensure safety and security of virtual and inperson attendees.	
12. Routine Business	•	
a. Review : Committee attendance	The committee attendance summary was reviewed.	
b. Public comments/HPG member comments/Suggestions to the Steering Committee from previous HPG meeting(s)	 The following comments were reviewed: A reminder that the Planning Body is here to allocate funds for viral services (public comment, July 23) A concern that expenses and the cost of living are going up (member concerns, July 23) A reminder that some consumers may be struggling with recovery (member concerns, July 23) Appreciation for the opportunity to volunteer during the Pride weekend (member concerns, July 23) 	

Agenda Item	Discussion/Action	Follow-Up
13. Future agenda items for	A request to remove this item as it's	HPG SS to
consideration	redundant with another item on the	remove moving
	agenda.	forward.
14. Announcements	 2025 Truax nominations are 	
	open; deadline is October 5,	
	2025	
	 September and October 	
	upcoming outreach events and	
	opportunities to volunteer	
15. Next meeting date	Date: Friday, November 12, 2025	
	Time: 10:00 AM – 12:00 PM	
	Location: County Operations Center,	
	5530 Overland Ave, San Diego, CA	
	92123 (Meeting Room 124) and via	
	Zoom	
16. Adjournment	Meeting adjourned at 11:59 AM.	



Wednesday, September 10, 11:00 AM – 1:00 PM Southeastern Live Well Center 5101 Market Street, San Diego, CA 92114 (Tubman Chavez Room A)

A quorum for this meeting is three (3)

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

Absent: Ben Ignalino

ORDER OF BUSINESS

	Agenda Item	Discussion/Action	Follow-Up
1.	Call to order	Rhea Van Brocklin called the meeting to order at 11:05 AM and noted the presence of an in-person quorum.	
2.	Public Comment on non-agenda items (for Members of the public)	A member of the public inquired about None	
3.	Sharing our concerns (for committee members)	A committee member inquired about • None	
4.	ACTION: Review and approve the September 10, 2025 meeting agenda	Motion: Approve the Membership agenda for September 10, 2025 Motion/Second/Count (M/S/C): Wimpie/ Jones/2-0 Abstentions: Van Brocklin Motion carries	
5.	ACTION: Review and approve the May 14, 2025, and July 9, 2025 Membership minutes	Motion: Approve the Membership minutes for May 14, 2025, and July 9, 2025 M/S/C: Wimpie/Jones/2-0 Abstentions: Van Brocklin Motion carries	
6.	New Business		
	a. ACTION: Approve Kalee Garland for Seat #14	Motion: Approve HPG Appointment, Kalee Garland, for Seat #14 General Member M/S/C: Wimpie/Jones/2-0 Abstentions: Garcia-Bigley Motion carries	
	b. ACTION: Approve Reappointment, Cinnamen Kubricky for Seat #4	Motion: Approve HPG Reappointment, Cinnamen Kubricky for Seat #4 General Member M/S/C: Jones/Wimpie/2-0 Abstentions: Garcia-Bigley Motion carries	

MEMBERSHIP COMMITTEE			
Agenda Item	Discussion/Action	Follow-Up	
c. ACTION: Approve HPG Reappointment, Nicole Aguilar for Seat #40	Motion: Approve HPG Reappointment, Nicole Aguilar for Seat #40, Recipient of other federal HIV programs – Housing Opportunities for Persons with AIDS (HOPWA)/Housing and Urban Development (HUD) M/S/C: Wimpie/Jones/2-0 Abstentions: Garcia-Bigley Motion carries	HPG Support Staff will confirm with the board clerk whether Nicole's term date is correct or if a reappointment/vote is required due to a potential clerical error.	
7. Old Business			
a. HPG Member recruitment update	As of September 10, 2025, we have 22 members. Updates: • Michael King and Jen Lothridge approved 8/26/2025 Expired Terms: Cinnamen Kubricky: Seat 4 - General Member 11/02/25 • Cinnamen completed her application and is currently an active member. • Serves as co-chair for HPG and represents the group at the Housing Committee, attending monthly meetings. • Frequently participates in events (e.g., Women's Conference, Pride event) and supports outreach activities such as surveys. • Well-known for supporting and informing newer members. • Reappointment interviews are not required; her current contributions were reviewed for the record.	HPG Support Staff will reach out to potential candidates for remaining vacant seats, including attempts to contact Sergio Luna for seat 42.	
	 Several consumers recently applied, showing increased engagement from individuals seeking both housing and community advocacy. Two additional prospective applicants (new attendees, active in meetings and public comments). 		

Agenda Item	Discussion/Action	Follow-Up
		•
	 If current efforts are successful, five General members may join by year- end. 	
i. Vacant Seats	As of September 10, 2025, there are 17 vacant seats • 9 General Member seats • 20- Mental Health Provider • 21- Substance Abuse Treatment Provider • 24- Hospital Planning Agency or Health Care Planning Agency • 27- Prevention Services Consumer • 28- State Government-State Medicaid • 34- Board of Supervisors Designee:	
ii. New Committee Members	District 2 Haley Garland is interested in PSRAC and CEG Joseph Westcott is interested in PSRAC PSRAC	
b. HPG Membership Demographics	Current HPG Demographics: reviewed and discussed the recruitment efforts: Outreach Events: The recent town hall in San Ysidro (21 attendees, mostly Spanish speakers) was part of targeted outreach for Hispanic/Latino community involvement. Ongoing efforts in colleges and schools to reach and recruit youth.	
c. Review and Discussion: Chair Member's Guide to Robert's Rules of Order & Responsibilities	The committee members discussed the following in the Chair Member guide and responsibilities. Bylaws Review: Suggestions on chair responsibilities discussed and incorporated based on previous meetings. Focus placed on clarifying Robert's Rules of Order for meetings and documenting processes for public comment. Proposed that the steering committee discuss chair guidance documents at an upcoming retreat. Meeting Structures:	HPG Support Staff will prepare the guidance draft for chairs, highlighting meeting procedure, handling public comments, and following through on member suggestions. Send draft to steering committee/retreat for further input.

WIEWIDERSHIP COMMITTIES			
Agenda Item	Discussion/Action	Follow-Up	
	 Emphasis on noting and executing suggestions from previous meetings, especially those raised during "future agenda items for consideration." Aim to ensure robust follow-through on member suggestions. 		
d. Discussion: Develop HPG Member Seat Descriptions	 The members discussed the following steps for developing the HPG seat descriptions. Recognized need for concise job descriptions for each seat, beyond just eligibility requirements. Existing documents describe who can apply but not the specific responsibilities once seated. 2–3 sentence summaries outlining member duties and expectations for each seat. This task will be ongoing and require group input and discussion; initial drafts will be circulated by email for collective review. 	HPG Support Staff will begin drafting concise job descriptions for each seat; circulate draft for group feedback.	
Routine Business			
a. HIV Planning Group Attendance	Reviewed - HPG Support Staff sends reminders to members who have missed three (3) consecutive or six (6) meetings within 12 months. Discussion: Just Cause Policy: • A query was raised about whether "just cause" absences apply per committee or to the planning group as a whole. • An official response from the clerk of the board/council is still pending. HPG Support Staff continues to track all JC/EC Committee-Specific Attendance Policies: • Noted that committees' meetings less frequently (e.g., six times/year) need to tailor attendance policies. • PSRAC committee is needed to create a attendance policy	PSRAC and other committees that don't meet monthly will need to create an attendance policy	
b. Committee Attendance	Reviewed - HPG Support Staff sends reminders to members who have missed		

Agenda Item	Discussion/Action	Follow-Up
Agenda item	Discussion/Action	I ollow-op
	three (3) consecutive or six (6) meetings	
	within 12 months.	
c. Getting to Zero	Review 2025 HPG Outreach Calendar	
(GTZ) Community		
Engagement		
Project		
i. Review Outreach		
and Event		
Engagement		
Efforts		
8. Future agenda items		
for consideration		
9. Announcements	2025 Truax Nominations	
	 Due Sunday, October 5, 2025 	
	36 th Dr. A. Brad Truax Awards	
	Monday, December 1, 2025	
10. Next Meeting Date	Date: Wednesday, October 8, 2025	
	Time: 11:00 AM –1:00 PM	
	Location: County Operations Center,	
	5530 Overland Ave, San Diego, CA 92123	
10 Adia	Conference Room 124	
12. Adjourn	The meeting adjourned at 12:41 pm.	



Thursday, June 12, 2025, 3:00 PM – 5:00 PM Southeastern Live Well Center. 5101 Market St, San Diego, CA 92114. Tubman Chavez Room A

A quorum for this meeting is five (5)

Committee Members Present: Tyra Fleming (Co-Chair) | Felipe Garcia-Bigley | Sergio Luna | Chris

Mueller | Cinnamen Kubricky | Dr. Beth Davenport

Committee Members Joining Virtually: Eva Matthews | Rhea Van Brocklin (Chair)

Committee Members Absent: Marco Aguirre Mendoza | Dr. Delores Jacobs

MEETING MINUTES

	Agenda Item	Action	Follow-up
1.	Call to order	Rhea Van Brocklin called the meeting to order at 1:17 PM and noted an in-person quorum was established.	
		Motion: Approve emergency circumstance for Rhea Van Brocklin Motion/Second/Count (M/S/C): Garcia-Bigley/Davenport/7-0 Abstentions: Van Brocklin Motion carries	
		Comments from the Chair: The chair began by acknowledging the pain and fear in the community. They encouraged everyone to use their voices and platforms to show care for those being targeted and welcome people with open arms.	
2.	Reminders		
3.	Public Comment on non- agenda items (for members of the public)	None.	
4.	Sharing our concerns (for committee members)	Expression of appreciation to both providers and consumers, especially amidst difficult times. Concerns: Children are living in fear due to community and home struggles. Consumer relapses are increasing; encouragement to maintain hope and support. Economic hardship: rises in utilities/trash, rent increases (notably for Section 8 recipients, a minimum \$200 increase).	

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

Agenda Item	Action	Follow-up
	 Importance of disseminating current, accurate information to allay panic. Thanks to supporting HPG members during personal hardships, especially following a family death and personal struggles. 	
5. Action: Review and approve the agenda for June 12, 2025	Motion: Approve the June 12, 2025 Meeting agenda as presented. M/S/C: Mueller/Fleming/7-0 Abstentions: Van Brocklin Motion carries	
6. Action: Review and approve the meeting minutes for March 13, 2025	Action: Review and approve the meeting minutes for March 13, 2025 M/S/C: Fleming/Kubricky/7-0 Abstentions: Van Brocklin Motion carries	
7. Old Business		
a. None		
8. New Business	T	I
a. ACTION: Recommendations for reallocations for FY 25 (the current fiscal year, March 1, 2025 – February 28, 2026) (if needed)	No recommended reallocations.	
b. Review of the Statewide Integrated Plan goals related to PSRAC	Virginia Suarez presented on Statewide Integrated Plan goals related to PSRAC and discussed the following: Results-Based Accountability (RBA) HSHB Profile of Funding Sources 2022 California Integrated Strategic Plan RBA Planning Process Leverage existing capacity Introduction to Program Staff Implementation Planning Implementation	
c. Review the status of the goals in the Getting to Zero (GTZ) Community Engagement Plan related to PSRAC.	Presentation by Felipe Ruiz & Virginia Suarez (HIVSV & Hepatitis Team, County of San Diego) Scope: • Updates on integrated statewide HIV plan and results-based accountability (RBA) framework,	

status-neutral approace community engagement Purpose & Process: RBA is used to evaluate effectiveness and important important in the effectiveness and impo	ate program provement key lients are by "Trying pugh" (Mark In via Clear punicate data. Tse funding A, CDC,
tell the story embedde Integrates across 30 s to health determinants Hepatitis C) with a whilens. Implementation phases: Staff introduced/traine Apr 2024); planning at alignment ongoing; co partnerships for metric and actions; seeking t select key metrics pub Intended Outcomes: Greater data transpare particularly for the pub stakeholders. Smoother integration of for syndemic (multi-dis response. System will better sup setting and future care Status Neutral, Whole Approach Project Overview: HRSA grant enabled r services for at-risk HIV individuals first Ryan V to target this population	prioritize, and and and in the data. Instrategies tied as, (HIV, STIs, mole-person) and (since Februard internal possultant and acceptance of programs as ease) apport priority be planning. Be-Person analogation v-negative white funding
Target group: • Monolingual Spanish-s gay, bisexual, and MS transgender individual Diego's southern region	-speaking SM, as well as Ils in San

Agenda Item	Action	Follow-up
Agenda item	Family Health Centers, San Ysidro Health). Year 2 Implementation: Expanded non-medical case management to PrEP support and HIV prevention within the Ryan White framework. Adopted social networking strategies for outreach/testing, reaching hard-hit communities. Revising HIV service standards with HRSA and HPG to ensure alignment with statusneutral/whole-person priorities. Community Engagement & Leadership Development The recent 6-month period saw the awarding of new community engagement contracts focused on AAPI communities and others. There is a new leadership development initiative for HIV-positive people (notably at Chris's Place). Early steps toward the next 5-year (2027) Integrated HIV Prevention & Care Plan: Stakeholder conversations, town halls, lessons learned from previous cycles.	1 Ollow-up
d. Review updated HIV/AIDS Epidemiology Data and discuss findings	Presenter: Cesar Arevalo (on behalf of Dr. Tweeten, Epidemiology and Immunization Services Branch) Key Data: • For the past decade (2017-2024), annual new cases have remained below 500, with a notable dip in 2020 attributed to the COVID-19 pandemic. • 2024 reported 400 new cases Viral Suppression Definition: Less than 200 viral copies/mL. Calculation Methods: • Data presented as total cases vs. only those with recent labs and addresses. The latter shows higher suppression rates. Sex Assigned at Birth: • Males have higher viral suppression rates.	

Age	enda Item	Action	Follow-up
		Race/Ethnicity: Black/African Americans have the lowest suppression rates (as low as 88.5% when only including those with updated labs). Age: Viral suppression is highest among those aged 0–12 (100%) and increases with age. Risk Category: Lowest among people who inject drugs (PWID: 85.3%), followed by MSM. Trends Over Five Years: Suppression rates show similar patterns over time—white individuals have higher rates, Black/African Americans lower, using both measurement methods.	
approve on Co- Condit	N: Review and e key data findings occurring ions, Poverty, and nce, and discuss	Tabled.	
regiona RWTEA and dis	data on the al distribution of A Part A/B services cuss findings – Herrera	Tabled	
approve on Rya eligibil	N: Review and e key data findings n White's service ity criteria & other e guidelines and a finding	Tabled	
9. Routine E	Business	,	
to-Date	Monthly and Year- expenditures and for recommended ations	Reviewed	
Year-to	the Monthly and -Date service on report	Reviewed	
Subsidy	Assistance Rent / Program (PARS) nergency Housing	As of June 5, 2025: • 48 currently on the waitlist • 21 previously enrolled • 27 new applicants this past month	HPS SS to forward recommendation from PSRAC for

Agenda Item	Action	Follow-up
	Demographics of clients on the waitlist: (48) Gender:	Strategies and Standards to add an agenda item regarding reviewing the PSRAC waitlist priority.
d. Committee Attendance	None	
10. Suggested items for the PSRAC agenda	None	
11. Announcements	None	
12. Next Meeting:	Date: Thursday, June 26, 2025, 1:00 PM - 4:00 PM Location: Southeastern Live Well Center, 5101 Market St, San Diego, CA 92114 (Tubman Chavez Room A) and via Zoom	
13. Adjournment	The meeting adjourned at 3:55 PM.	



Thursday, July 17, 2025, 1:00 PM – 4:00 PM Southeastern Live Well Center. 5101 Market St, San Diego, CA 92114. Tubman Chavez Room A

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A quorum for this meeting is six (6)

Committee Members Present: Tyra Fleming (Co-Chair) | Felipe Garcia-Bigley | Dr. Delores Jacobs | Sergio Luna | Chris Mueller | Cinnamen Kubricky | Dr. Beth Davenport | Rhea Van Brocklin (Chair) Committee Members Joining Virtually:

Committee Members Absent: Marco Aguirre Mendoza | Eva Matthews

MEETING MINUTES

MEETING MINUTES		
Agenda Item	Action	Follow-up
1. Call to order	Rhea Van Brocklin called the meeting to order at 1:00 p.m. and noted that an in-person quorum had been established.	
2. Reminders	Reviewed	
Public Comment on non-agenda items (for members of the public)	A member of the public expressed ongoing concern about a \$1.4 million budget shortfall, highlighting the need to understand the root cause and prevent recurrence.	
Sharing our concerns (for committee members)	Committee members stated the following challenges and access to services: • Stressed that system navigation is unnecessarily complex for consumers; repeated stories of being sent from provider to provider and unexpected hospital charges. • Calling for more investment in peer services, case management, and social support is essential for connecting consumers to existing services. • Concerns about consumers feel "left in the dark" and lack hope. Shared that desperate questions about returning to risky behaviors arise when support feels absent. • Strong advocacy for increased transparency and consumer involvement suggested town	

Agenda Item	Action	Follow-up
V	halls or open forums for sharing information and gathering input. The Steering Committee is actively considering monthly open forums/town halls before official HPG meetings to improve consumer information flow and engagement with subject matter experts.	
5. Action: Review and approve the agenda for July 17, 2025	Motion: Approve the June 17, 2025 Meeting agenda as presented. Motion/Second/Count (M/S/C): Abstentions: Van Brocklin Motion carries	
6. Routine Business		
a. Review Monthly and Year-to- Date expenditures and assess for recommended reallocations	Financial & Expenditure Reports (Current Year through June 30, 2025) Primary Care Report delivered through June 30, 2025 (covering 67% of the calendar/fiscal year). 32% of the annual primary care allocation is spent on track with time elapsed, especially since this year's allocation is \$100,000 less than last year's. Potential Trend: More clients could enter Ryan White because of shifting eligibility for Medi-Cal (e.g., the exclusion of undocumented clients after October 1, 2025, due to a federal order).	
	 Oral Health Already 54% spent vs. 33% of the year elapsed. Noted significant increase in demand/utilization for dental care; flagged as a key area to watch and potentially require additional allocations. Psychiatric Medication Management 58% of the budget spent; higher than projected. 	
	 Recommendation to increase funding to ensure service continuity through year-end. 	

Medical and Non-Medical Case Management • Both categories are underspent currently; reasons unclear. • The team is analyzing providers to determine underlying causes, primarily since consumer stories reflect ongoing high demand for system navigation support. Peer Navigation • Spending is well ahead of projections. • Suggestion to increase allocation immediately, with possible further increases if additional savings are confirmed post-meeting. Emergency Housing: • No funds spent yet, but anticipated full usage by the end of the year. Other Funding Sources (Part B, Prevention) • Fund balances are mainly positive. • Award notices for high-impact prevention and CDC "Ending the HIV Epidemic" funds received (delays noted but amounts consistent with prior years). • These prevention funds secure programming through at least May 2026, but budget threats to prevention and surveillance for future years are noted. b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update As of July 9, 2025: 50 are currently on the waitlist 21 previously enrolled 29 new applicants Demographics of clients on the waitlist: 50 Gender: 31 male, 13 female, 6 transgender Race/ethnicity: 13 Black, 25 Hispanic/Lattino, 10 White, 1 Asian, 1	Agenda Item	Action	Follow-up
projections. Suggestion to increase allocation immediately, with possible further increases if additional savings are confirmed post-meeting. Emergency Housing: No funds spent yet, but anticipated full usage by the end of the year. Other Funding Sources (Part B, Prevention) Fund balances are mainly positive. Award notices for high-impact prevention and CDC "Ending the HIV Epidemic" funds received (delays noted but amounts consistent with prior years). These prevention funds secure programming through at least May 2026, but budget threats to prevention and surveillance for future years are noted. b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update As of July 9, 2025: 50 are currently on the waitlist 21 previously enrolled 29 new applicants Demographics of clients on the waitlist: 50 Gender: 31 male, 13 female, 6 transgender Race/ethnicity: 13 Black, 25 Hispanic/Latino, 10 White, 1 Asian, 1		Medical and Non-Medical Case Management Both categories are underspent currently; reasons unclear. The team is analyzing providers to determine underlying causes, primarily since consumer stories reflect ongoing high demand for system navigation support. Peer Navigation	
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American Indian Age: 37 over 45, 11 ages 31-44, 2	(PARS) and Emergency	50 are currently on the waitlist 21 previously enrolled 29 new applicants Demographics of clients on the waitlist: 50 Gender: 31 male, 13 female, 6 transgender Race/ethnicity: 13 Black, 25 Hispanic/Latino, 10 White, 1 Asian, 1 American Indian	

Agenda Item	Action	Follow-up
	Regions: Central Region 35, East 12, South 1, North 2 90 currently enrolled	
c. Review of the Monthly and Year-to-Date service utilization report	Reviewed	
7. Old Business		
a. Review Additional Data Requested	Dustin Walker reviewed additional data requested and the following topics: • FY24 Female Federal Poverty Level (FLP) and Viral Load Suppression by SD region • FY24 Unit of Service (UOS) Analysis by primary service category • "In Care" and "Retained in Care" Comparison • FY24 RW Receipt and Retained in Care Rates • By gender, race, age, FLP Discussion: A member from the public requested data regarding not only women but dependents. A member asked for clarification regarding gender reporting and the inclusion of non-binary people.	
8. New Business		
a. ACTION: Recommendations for reallocations for FY 25 (the current fiscal year, March 1, 2025 – February 28, 2026) (if needed)	Motion: Decrease Non-Medical Case Management by \$40,000 from \$392,021 to \$352,021. This is a one- time decrease. M/S/C: Fleming/Luna/4-0 Abstentions: Van Brocklin, Garcia- Bigley, Davenport, Mueller Motion carries	
	Motion: Decrease Medical Case Management by \$72,000 from \$1,151,853 to \$1,079,853. This is a one-time decrease. M/S/C: Luna/Kubricky/4-0 Abstentions: Van Brocklin, Davenport, Mueller Motion carries Motion: Increase Psychiatric	
	Motion: Increase Psychiatric Medication Management by \$7,500 from \$6,000 to \$13,500	

Agenda Item	Action	Follow-up
	M/S/C: Jacobs/Davenport/4-0 Abstentions: Garcia-Bigley, Van Brocklin, Mueller Motion carries	
	Motion: Increase Oral Health by \$100,000 from \$160,940 to \$268,940 M/S/C: Mueller/Fleming/6-0 Abstentions: Garcia-Bigley, Van Brocklin Motion carries	
	Motion: Increase Peer Navigation by \$4,500 from \$188,593 to \$193,093. M/S/C: Fleming/Luna/5-0 Abstentions: Garcia-Bigley, Davenport, Van Brocklin Motion carries	
b. Presentation on Minority AIDS Initiative (MAI) funding and its uses for services in all regions	Maritza Herrera presented it on the MAI and discussed the following:	
c. ACTION: Review and approve key data findings on Co-occurring Conditions, Poverty, and Insurance, and discuss findings	Motion: Approve key data findings on Co-occurring Conditions, Poverty, and Insurance, and discuss findings M/S/C: Garcia-Bigley/Mueller/6-0 Abstentions: Van Brocklin Motion carries	
d. ACTION: Review key findings on non-Ryan White Mental Health and Substance Use Treatment resources in the community with a focus on HIV/LGBT competencies	Motion: Approve Key findings on non-Ryan White Mental Health and Substance Use Treatment resources in the community, with a focus on HIV/LGBT competencies M/S/C: Fleming/Kubricky/6-0 Abstentions: Jacobs, Van Brocklin Motion carries	HPG Support Staff will revise the address for Family Health Centers of San Diego and incorporate the changes from BHS.

Agenda Item	Action	Follow-up
e. ACTION: Review of the 2024 Survey of HIV Impact of the Needs Assessment	Tabled	
f. ACTION: Summarize/Finalize Key Findings data on HIV Epidemiology	Motion: To approve the Summarize/Finalize Key Findings data on HIV Epidemiology M/S/C: Garcia-Bigley/Jacobs/7-0 Abstentions: Van Brocklin Motion carries	
g. ACTION: Summarize/Finalize Key Findings data on HIV Care Continuum	Tabled	
h. ACTION: Complete recommendations with justifications for changes in funding allocations in level and reduction-funding scenarios for FY 26 (March 1, 2026 – February 28, 2027).	Tabled	
Suggested items for the PSRAC agenda	Reviewed	
10. Announcements	None	
11. Next Meeting:	Date: Thursday, July 24, 2025, 1:00 PM - 4:00 PM Location: Southeastern Live Well Center, 5101 Market St, San Diego, CA 92114, Tubman Chavez Room A	
12. Adjournment	The meeting adjourned at 3:58 PM.	



Thursday, July 24, 2025, 1:00 PM – 4:00 PM Southeastern Live Well Center. 5101 Market St, San Diego, CA 92114. Tubman Chavez Room A

A quorum for this meeting is six (6)

Committee Members Present: Marco Aguirre Mendoza | Tyra Fleming (Co-Chair) | Felipe Garcia-Bigley | Dr. Delores Jacobs | Sergio Luna | Eva Matthews | Chris Mueller | Cinnamen Kubricky | Dr. Beth Davenport | Rhea Van Brocklin (Chair)

MEETING MINUTES

Agenda Item	Action	Follow-up
1. Call to order	Rhea Van Brocklin called the meeting to order at 1:10 PM and noted an in-person quorum was established.	
2. Reminders	None	
Public Comment on non-agenda items (for members of the public)	 A member of the public stated Request for the county to distribute service eligibility criteria updates (suggested biannually) to all agencies due to staff turnover. Medical Case Management Shortage: Long-term clients shared an inability to access case management at Christie's Place despite significant health needs. Transportation and Childcare Barriers: Emphasis on the need for transportation and childcare to facilitate participation, especially for women with children. 	
Sharing our concerns (for committee members)	 Reminder that current times are unique; data may not fully reflect situational realities. Calls for reflective, mindful decision-making considering 	

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Agenda Item	Action	Follow-up
	broader present-day challenges	
4. Action: Review and approve the agenda for July 24, 2025	Motion: Approve the July 24, 2025 Meeting agenda as presented. Motion/Second/Count (M/S/C): Kubricky/ Fleming 8/0 Abstentions: Van Brocklin Motion carries	
5. Routine Business		
a. Review Monthly and Year-to-Date expenditures and assess for recommended reallocations	No New Reallocations since prior meeting. Recent funding increases: Oral health (most significant increase, specific dollar amounts not given). Psychiatric medication management. Recent funding decreases: Medical and non-medical case management (only unspent funds from March—June; does not affect future services). Watch List (Potential Underspending) Medical Specialty: \$190,000 budgeted, only \$20,000 spent; medium risk of underspending. podiatry, gynecology, and oncology. May result in substantial savings. EIS Regional: Medium underspending risk; sources under investigation for causes. Substance Use Treatment (Outpatient): Small risk of underspending; no changes recommended at this time. Home-Based Care Coordination: Medium risk: service is	
	episodic (post-	

Agenda Item	Action	Follow-up
	hospitalization, to prevent readmission). Peer Navigation: Small risk of insufficient funding. Oral Health: An additional \$100,000 allocated; being monitored. Psychiatric Medication Management: Slight risk of shortfall (\$5,000–\$10,000); manageable via routine adjustments	
b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update	No update	
c. Review the Monthly and Year-to-Date service utilization report	 Approximately 10% decrease in clients served compared to last year. Notable increases in: Women, children, family: +20% clients. Medical nutrition therapy: +39% clients. Other categories have decreased uptake, indicating clients are accessing fewer services. Possible Causes of Decline: Reported increased client fear of accessing in-person services (cited by providers and community). A need to explore data on fear and potential solutions to increase client sense of safety. Data System Transition: Statewide change from ARIES to HIV Care Connect as data system. Possible incomplete data transfer during transition 	

Agenda Item	Action	Follow-up
	noted as partial explanation for observed declines.	
6. Old Business		
a. Review Additional Data Requested	None	
7. New Business		
a. ACTION: Recommendations for reallocations for FY 25 (the current fiscal year, March 1, 2025 – February 28, 2026) (if needed)	None	
b. ACTION: Summarize/Finalize Key Findings data on HIV Epidemiology	Motion: Approve Key Findings data on HIV Epidemiology. Motion/Second/Count (M/S/C): Garcia-Bigley/ Jacobs 8/0 Abstentions: Van Brocklin Motion carries Discussion: Key Findings: HIV Care Continuum Data Importance: Guides program funding/resource distribution. Identifies gaps by age, race, gender, and risk. Tracks progress toward ending the HIV epidemic. Care Continuum Steps Reviewed: • Diagnosed, linked to care, retained in care, viral suppression. Retention in Care: • 70% of people living with HIV accessed care. • 47% remained in care (as defined by 2 visits/12 months, 3+ months apart). • Concerns raised about this metric's validity; it reflects older standards and may not account for stable clients only needing 1 annual visit. • Suggestion to adjust or clarify the metric for future reporting. Viral Suppression:	

Agenda Item	Action	Follow-up
	County-wide: ~58% (limitations acknowledged in comparison data). Ryan White clients: 93–95% (significantly higher). Noted the need for increased outreach/education on U=U ("Undetectable equals Untransmittable"). Extended Discussion: Retained in care measure is problematic, may not truly indicate engagement in care. The distinction between Ryan White and county-wide data was discussed, with an emphasis on benchmarking but not conflating for service allocation.	
c. ACTION: Summarize/Finalize Key Findings data on HIV Care Continuum	Motion: Approve Key Findings data on HIV Care Continuum. Motion/Second/Count (M/S/C): Luna/Mueller 8/0 Abstentions: Van Brocklin Motion carries Discussion: Data sources clarified: Epidemiological data lags due to reporting; Ryan White uses ARIES/Care Connect; epidemiology uses eHARS (state report). There is a recognized need for more recent and comparable data across reporting systems. Importance of focusing on the out- of-care population; targeted strategies needed.	
d. ACTION: Recommendations with justifications to the HIV Planning Group for service priority ranking and how services should be organized and delivered in FY 26 (March 1, 2026 – February 28, 2027)	Motion: Approve FY26 priority rankings as Outpatient Ambulatory Health Services: Primary Care Ranking #1/ Outpatient Ambulatory Health Services: Medical Specialty Ranking #2/ Oral Health Ranking #3	

Agenda Item	Action	Follow-up
	Motion/Second/Count (M/S/C): Abstentions: Van Brocklin/ Garcia/Bigley/ Mueller 6/0 Motion carries	
	Motion: Housing: Partial Assistance Rental Subsidy (PARS) Ranking #4/ Housing Location, Placement and Advocacy Services Ranking #5/ Mental Health: Counseling/Therapy / Substance Use Treatment Services: Outpatient Ranking #7 Motion/Second/Count (M/S/C): Jacobs/Kubricky 4/0 Abstentions: Van Brocklin/ Davenport/ Garcia-Bigley/ Mueller Motion caries	
	Motion: Approve FY26 priority rankings: Mental Health: Psychiatric Medication Management Ranking #8/ Mental Case Management Ranking #9 / Non-Medical Case Management Ranking #10 / Non-Medical Case Management for Housing Ranking #11/ Housing Location, Placement and Advocacy Services Ranking #12 Motion/Second/Count (M/S/C): Jacobs/ Luna Abstentions: Kubricky/ Davenport/ Mueller Van Brocklin Motion carries	
	Motion: Approve FY26 priority rankings: Coordinated HIV Services for Women, Infants, Children, Youth, and Families (CHS: WICYF) Ranking 13/ Childcare services (subcategory of CHS: WICYF) Ranking #13a/ Peer Navigation (Referral for Health Care and Support Services) Ranking #14/ Outreach Services (subcategory of EIS:RS) Ranking #15b/ Early Intervention Services: Regional Services (subcategory of Referral Services (subcategory of	

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Agenda Item	Action	Follow-up
	EIS) Ranking #15c/ Health Education & Risk Reduction (stand-alone) Ranking #16 Motion/Second/Count (M/S/C): Fleming/ Jacobs 4/0 Abstentions: Matthews/ Garcia-Bigley/ Mueller / Davenport /Van Brocklin Motion carries	
	Motion: Approve FY26 priority rankings: Psychosocial Support Services #17/Substance Use Treatment Services: Residential Ranking #18 / Home-based Health Care Coordination ranking # 19 Motion/Second/Count (M/S/C): Jacobs/ Mueller 7/0 Abstentions: Garcia-Bigley / Van Brocklin/ Mueller/ Davenport Motion: Failed Motion: Approve FY26 priority rankings: Psychosocial Support Services #17/Substance Use Treatment Services: Residential Ranking #18 /Home-based Health Care Coordination ranking #19 Motion/Second/Count (M/S/C): Jacobs/ Matthews 5/0 Abstentions: Garcia-Bigley / Mueller/ Van Brocklin Motion: carries	
	Motion: Approve FY26 priority rankings: Transportation Assisted and Unassisted Ranking #20 (M/S/C): Jacobs/ Luna 6/0 Abstentions: Garcia-Bigley/ Mueller / Van Brocklin Motion: carries	
	Motion: Approve FY26 priority rankings: Food Services: Food Bank/Home-Delivered Meals at	

Agenda Item	Action	Follow-up
Agenda nom	priority #21; Medical Nutrition Therapy at priority #22; Legal Services at priority #23; Emergency Financial Assistance at priority #24; Home Health at priority #25; Early Intervention Services: HIV Counseling and Testing at priority #26; Cost-Sharing Assistance at priority #27; and Hospice at priority #28 (M/S/C): Jacobs/ Davenport 5/0 Abstentions: Matthews, Kubricky, Mueller, Van Brocklin Motion: carries	T Onlow up
e. ACTION: Complete recommendations with justifications for changes in funding allocations in level and reduction-funding scenarios for FY 26 (March 1, 2026 – February 28, 2027).	None	
Suggested items for the PSRAC agenda		
9. Announcements		
10. Next Meeting:	Date: Thursday, July 31, 2025, 1:00 PM - 4:00 PM Location: Southeastern Live Well Center 5101 Market St, San Diego, CA 92114. Tubman Chavez Room A	
11. Adjournment	The meeting adjourned at 4:02 PM.	



Thursday, July 31, 2025, 1:00 PM – 4:00 PM Southeastern Live Well Center. 5101 Market St, San Diego, CA 92114. Tubman Chavez Room A

A quorum for this meeting is six (6)

Committee Members Present: Dr. Beth Davenport | Felipe Garcia-Bigley | Cinnamen Kubricky | Eva Matthews | Marco Aguirre Mendoza | Chris Mueller | Rhea Van Brocklin (Chair)

Committee Members Absent: Tyra Fleming (Co-Chair) | Dr. Delores Jacobs | Sergio Luna

MEETING MINUTES

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Agenda Item	Action	Follow-up		
1. Call to order	Rhea Van Brocklin called the meeting to order at 1:01 PM and noted an in-person quorum was established.			
2. Reminders	None			
Public Comment on non- agenda items (for members of the public)	None			
Sharing our concerns (for committee members)	None			
5. Action: Review and approve the agenda for July 31, 2025	Motion: Approve the July 31, 2025 Meeting agenda: move new business 8a. With 6 a. Routine Business. Motion/Second/Count (M/S/C): Mueller/Matthews/6-0 Abstentions: Van Brocklin Motion carries			
6. Routine Business				
Review Monthly and Year- to-Date expenditures and assess for recommended reallocations	None			
b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update	None			
c. Review of the Monthly and Year-to-Date service utilization report	None			
7. Old Business				
a. None				
8. New Business				
a. ACTION: Recommendations for FY 25 reallocations	None			

Agenda Item	Action	Follow-up
(current fiscal year, March 1, 2025 – February 28, 2026)		
b. ACTION: Recommendations for budget allocations in level-funding and reduction-funding scenarios for (next fiscal year, FY 26, March 1, 2026 – February 28, 2027)	Motion: Level funding to Outpatient Ambulatory Health Services: Primary Care (priority #1) \$1,821,037 M/S/C: Kubricky/Aguirre-Mendoza/4-0 Abstentions: Garcia-Bigley, Mueller, Van Brocklin Motion carries	Level funding
	Motion: Level funding to Outpatient Ambulatory Health Services: Medical Specialty (priority #2) \$195,000 M/S/C: Aguirre-Mendoza / Matthews/2-3 Abstentions: Garcia-Bigley, Mueller Motion failed	
	Motion: Decrease \$20,000 funding to Outpatient Ambulatory Health Services: Medical Specialty (priority #2) to \$175,000 M/S/C: Kubricky/Davenport/4-0 Abstentions: Garcia-Bigley, Mueller, Van Brocklin Motion failed	
	Motion: Level funding to Oral Health (priority #3) at \$260,940 M/S/C: Mueller/Aguirre-Mendoza/5-0 Abstentions: Garcia- Bigley, Van Brocklin Motion carries	34% utilization- corrections 54%
	Motion: Level funding to Housing: Partial Assistance Rental Subsidy (PARS) (priority #4) at \$850,507 M/S/C: Aguirre-Mendoza/Mueller/6-0 Abstentions: Van Brocklin Motion carries	
	Motion: Decrease 20,000 to Housing: Emergency Housing (priority #5) \$953,515 M/S/C: Aguirre-Mendoza/none Abstentions: Van Brocklin The motion did not carry since there was no second motion.	
	Motion: Level funding to Housing: Emergency Housing (priority #5) \$933,515 M/S/C: Mueller/Kubricky/5-1 Abstentions: Van Brocklin Motion carries	

Agenda Item	Action	Follow-up
	Motion: for Level funding to Housing: Emergency Housing (priority #5) \$933,515 M/S/C: Garcia-Bigley/Aguirre- Mendoza/6-0 Abstentions: Van Brocklin Motion Rescinded	
	Motion: Level funding Mental Health: Counseling/Therapy (priority # 6) at \$ 580,000 M/S/C: Aguirre-Mendoza /none Abstentions: Van Brocklin, Davenport, Garcia-Bigley, Muller Motion did not carry since there was no second motion.	
	Motion: Decrease \$20,000 Mental Health: Counseling/Therapy (priority # 6) at \$ 560,000 M/S/C: Kubricky/Aguirre-Mendoza/2-3 Abstentions: Garcia-Bigley Motion failed	
	Motion: Increased \$10,000 Mental Health: Counseling/Therapy (priority # 6) at \$ 600,000 M/S/C: Matthews/Mueller/3-0 Abstentions: Davenport, Garcia-Bigley, Van Brocklin, Kubricky Motion carries	
	Motion: Increase \$10,000 for Substance Use Treatment Services: Outpatient (priority #7) at \$323,127 M/S/C: Aguirre-Mendoza/Mueller/2-3 Abstentions: Van Brocklin, Garcia-Bigley Motion failed	
	Motion: Level funding to Substance Use Treatment Services: Outpatient (priority #7) at \$313,127 M/S/C: Matthews/Mueller/5-0 Abstentions: Van Brocklin, Garcia-Bigley Motion carries	
	Motion: Level funding to Mental Health: Psychiatric Medication Management (priority #8) at \$13,500 M/S/C: Kubricky/Matthews/4-0 Abstentions: Van Brocklin, Garcia-Bigley, Mueller Motion carries	

Agenda Item	Action	Follow-up
	Motion: increase of \$72,000 Medical Case Management (priority #9) at \$ 1,151,853 M/S/C: Matthews/Aguirre-Mendoza/2-0 Abstentions: Davenport, Mueller, Van Brocklin, Kubricky Motion carries	
	Motion: Increase 40,000 Level funding to: Non-Medical Case Management (priority #10) at \$392,021 M/S/C: Kubricky/Matthews/2-1 Abstentions: Davenport, Muller, Van Brocklin Motion carries	
	Motion: Level funding to Non-Medical Case Management for Housing (priority #11) at \$200,000 M/S/C: Davenport/Garcia-Bigley/6-0 Abstentions: Van Brocklin Motion carries	Service providers will work with clients in PARS to find permanent housing.
	Motion Level funding to Coordinated HIV Services for Women, Infants, Children, Youth, and Families (CHS: WICYF) (priority #13) at \$993,157 M/S/C: Garcia-Bigley/Davenport/5-0 Abstentions: Van Brocklin, Kubricky Motion carries	
c. ACTION: Recommendations for how services should be organized and delivered in FY 26 (March 1, 2026 – February 28, 2027)	Tabled	
d. Review service categories that underspend (monthly)	Tabled	
9. Routine Business		
10. Suggested items for the PSRAC agenda	Reviewed	
11. Announcements	None	
12. Next Meeting	Date: Thursday, August 7, 2025, 1:00 PM - 4:00 PM Location: County Operations Center, 5560 Overland Ave, San Diego, CA 92123, Conference Room 171 and Via Zoom	
13. Adjournment	The meeting adjourned at 4:02 PM.	



Thursday, August 7, 2025, 1:00 PM –4:00 PM County Operations Center, 5560 Overland Ave, San Diego, CA 92123.

Conference Room 171

A quorum for this meeting is six (6)

Committee Members: Tyra Fleming (Co-Chair) | Felipe Garcia-Bigley | Dr. Delores Jacobs | Sergio Luna | Eva Matthews | Marco Aguirre Mendoza | Chris Mueller | Rhea Van Brocklin (Chair)

Committee Members Absent: Dr. Beth Davenport | Cinnamen Kubricky

MEETING MINUTES

Agenda Item	Action	Follow-up
1. Call to order	Rhea Van Brocklin called the meeting to order at 1:05 PM and noted an in-person quorum was established.	
2. Reminders	None	
Public Comment on non- agenda items (for members of the public)	A new member of the public stated clarification regarding whether previously set meeting priorities/rankings could be changed; confirmed as final for the coming fiscal year after the HIV Planning Group vote.	
Sharing our concerns (for committee members)	 A committee member asked about resources or protocols for handling potential ICE raids while remaining compliant with the law and protecting consumers. Resources will be shared after the meeting. Emphasis by committee members on recognizing diverse perspectives and lived experiences in HIV/AIDS care, urging empathy and respect for different viewpoints 	

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Agenda Item	Action	Follow-up
5. Action: Review and approve the agenda for August 7, 2025	Motion: Approve the August 7, 2025 Meeting agenda with the addition of new business 7a. Allocated the additional \$227,277 RW for the current fiscal year Motion/Second/Count (M/S/C): Fleming/ Mueller 5/0 Abstentions: Van Brocklin Motion Discussion: The committee was informed of unexpected additional funding from HRSA through the Ryan White Part A award, totaling \$12,325,227. Increase of \$227,277	
	over the amount reflected on the current allocation sheet	
6. Old Business		
a. None	None	
7. New Business		
a. ACTION: Allocation of the additional HRSA Ryan White Part A award: \$227,277.	Motion: allocation of the additional HRSA Ryan White Part A award: \$227,277. Initial motion: to allocate the \$227,277 equally across four categories: oral health, peer navigation, emergency housing, and counseling & testing	Members agreed to amend the motion 5/0
	Amended motion: The motion was amended (with a two-thirds committee approval) to allocate funds evenly across three categories: Oral Health, Peer Navigation, and Emergency Housing. Each received \$75,759 (rounded from \$75,751, see transcript for possible figure variation).	
	Motion/Second/Count (M/S/C): Luna/Fleming 12/0	

Agenda Item	Action	Follow-up
	Abstentions: Garcia-Bigley/Van Brocklin Motion carries	
b. ACTION: Recommendations for FY 25 reallocations (current fiscal year, March 1, 2025 – February 28, 2026)	None	
c. ACTION: Recommendations for budget allocations in level-funding and reduction-funding scenarios for (next fiscal year, FY 26, March 1, 2026 – February 28, 2027)	Motion: Level funding to level fund Coordinated HIV Services for Women, Infants, Children, Youth, and Families (WICYF) (priority #13) at \$993,157 Motion/Second/Count (M/S/C): Fleming/Luna 4/1 Abstentions: Garcia-Bigley/ Van Brocklin Motion Carries Motion: Level funding to Peer Navigation (priority #14) \$268,852 Motion/Second/Count (M/S/C): Fleming/Luna 4/1 Abstentions: Garcia-Bigley/ Van Brocklin	
	Motion Carries Motion: Decrease Early Intervention Services (EIS): Regional Services (priority #15) by \$20,000 from \$773,000 to \$753,000 Motion/Second/Count (M/S/C): Fleming/ Luna 4/1 Abstentions: Garcia-Bigley / Van Brocklin Motion carries	
	No Motion: Health Education and Risk Reduction (priority #16)	
	Motion: Level funding Psychosocial Support Services (priority #17) at \$46,744 Motion/Second/Count (M/S/C): Garcia-Bigley/ Aguirre-Mendoza 5/0 Abstentions: Muller/ Van Brocklin	

Agenda Item	Action	Follow-up
	Motion Carries	
	No Motion: Substance Use Tx Services: Residential (priority #18)	
	Motion: Decrease \$20,000 funding to Home-based Health Care Coordination (priority #19) at \$228,500 Motion/Second/Count (M/S/C): Fleming/ 4/0 Abstentions: Garcia-Bigley/ Van Brocklin Motion carries	
	Motion: Level funding to Transportation - Assisted & Unasst. (priority # 20) at \$ 101,830 Motion/Second/Count (M/S/C): Aguirre-Mendoza/ Luna 4/0 Abstentions: Garcia-Bigley/ Mueller/ Van Brocklin Motion carries	
	Motion: Decrease to 54,000 Housing: Emergency Housing (priority #5) at 1,009,274 Motion/Second/Count (M/S/C): Garcia-Bigley/ Mueller 6/0 Abstentions: Van Brocklin/ Motion carries	
	Motion: Level funding to Food Services: Food Bank/Home Delivered Meals (priority # 21) at \$ 536, 073 Motion/Second/Count (M/S/C): Garcia-Bigley/ Mueller 5/0 Abstentions: Matthews/ Van Brocklin Motion Carries	
	Motion: Level funding to Medical Nutrition Therapy (priority #22) at \$ 35,542 Motion/Second/Count (M/S/C): Fleming/Luna 5/0	

Agenda Item	Action	Follow-up
	Abstentions: Matthews/ Van Brocklin / Garcia-Bigley Motion Carries	
	Motion: Level funding to Legal Services (priority #23) at \$285,265 Motion/Second/Count (M/S/C): Matthews/ Luna 5/0 Abstentions: Van Brocklin/ Garcia- Bigley/ Mueller Motion carries	
	Motion: Level funding Emergency Financial Assistance (priority #24) at \$ 61,856 Motion/Second/Count (M/S/C): Luna/ Mueller 5/0 Abstentions: Matthews Van Brocklin Motion carries	
	No Motion: Home Health Care (priority #25)	
	Motion: Increase/Decrease Level funding to Early Intervention Services: HIV Counseling and Testing (priority #26) Motion/Second/Count (M/S/C): Abstentions: Van Brocklin/ Motion carries	
	No Motion: Cost-Sharing Assistance (priority #27)	
	No Motion: Hospice (priority #28)	
	Motion: Level funding for the Minority AIDS Initiative (MAI) at \$576,971 Motion/Second/Count (M/S/C): Mueller/ Aguirre-Mendoza 5/0 Abstentions: Garcia-Bigley / Van Brocklin/ Motion carries	
Reduction in Scenario Amount	Motion: Approve a decrease in Housing: Emergency Housing (priority #5) by \$300,000 from \$1,009,274 to \$709,274.	

Agenda Item	Action	Follow-up
	Motion/Second/Count: Fleming/ Muller 6/0 Abstentions: Van Brocklin Motion carries	
	Motion: Approve a decrease in Medical Case Management (priority #9) by \$70,000 from \$1,079,853 to \$1,009,853. Motion/Second/Count: Fleming/Luna 4/1 Abstentions: Garcia-Bigley/Matthews/ Van Brocklin Motion carries	
	Motion: Decrease Primary Care by \$100,000 at \$1,721.037 Motion/Second/Count: Fleming/ Luna 3/1 Abstentions: Garcia-Bigley/ Mueller/Van Brocklin	
d. ACTION: Recommendations for how services should be organized and delivered in FY 26 (March 1, 2026 – February 28, 2027)	Motion: Approve a decrease in Oral Health (priority #3) by \$34,092 from \$336,699 to \$302,607. Motion/Second/Count (M/S/C): Aguirre-Mendoza/ Mueller 4/1 Abstentions: Garcia-Bigley /Van Brocklin Motion carries	
8. Routine Business		
a. Review Monthly and Year-to- Date expenditures and assess for recommended reallocations	None	
b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update	None	
c. Suggested items for the PSRAC agenda	Schedule additional meetings as needed to complete budget adoption and respond to any new developments in grant awards or policy.	
9. Announcements		

Agenda Item	Action	Follow-up
10. Next Meeting:	September 11, 2025 3:00 PM – 5:00 PM County Operations Center, 5560 Overland Ave, San Diego, CA 92123. Conference Room 171 and Via Zoom	
11.Adjournment	The meeting adjourned at 3:50 PM.	



Tuesday, September 09, 2025, 4:00 PM – 5:30 PM County Operations Center 5530 Overland Ave, San Diego, CA 92123 (Room 124)

A quorum for this meeting is seven (7)

Committee Members Present: Dr. Jeannette Aldous (Co-Chair) | Dr. Laura Bamford | Dr. Fadra Whyte | Dr. Rosemary Garcia | Dr. David Grelotti (Chair) | Yessica Hernández | Mikie Lochner | Shannon Paugh | Karla Quezada-Torres | Dr. Martha Rodriguez | Edith Saville | Dr. Stephen Spector | Dr. Winston Tilghman

Meeting Minutes

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	Agenda Item	Action	Follow-up
1.	Welcome and moment of silence, comments from the Chair	Dr. Grelotti called the meeting to order at 4:06 PM and introductions were done. A moment of silence was observed.	
		The chair expressed concern about upcoming changes to the funding and medical landscape that are likely to impact both patients and health systems. They emphasized the importance of staying united as a team.	
2.	Public Comment	The following public comments were made: - A concern about the County's Request for Proposals process and impact on continued access to patient-centered services.	
3.	Sharing our Concerns	The following committee comments were made: - A reminder that Medicare open enrollment runs from October 15 to December 7, and clients should refer to their pharmacy for help with plan changes. - A clarification that MSEC helps set medical service standards but is not involved in contracting decisions, and that concerns may be better addressed through a County forum. - A County staff member shared that there is an online forum available to submit comments. - A concern about a disconnect between what is approved by this Committee and HPG and what is implemented through contracting,	HPG SS will follow up regarding bringing staff from the contracting team to an HPG meeting.

Agenda Item	Action	Follow-up
	with a request to invite someone from contracting to the next HPG meeting. - A concern about a gap between field realities and survey expectations, with a call for more open dialogue across committees to address service and funding challenges.	
4. Action: Approve the consent MSEC agenda (which includes the September 09, 2025 agenda and the May 13, 2025 minutes)	Motion: Approve the consent MSEC agenda with the amendment of moving 6a. above 5a. Motion/Second/Count (M/S/C): Lochner/Aldous/12-0 Discussion: Abstentions: Dr. Grelotti Motion Carries	
5. Old Business:		
a. Action: Update and approve Dental Practice Guidelines	Motion: Approve the Dental Practice Guidelines with the recommended changes. M/S/C: Aldous/Lochner/12-0 Discussion: Recommended changes in packet: Page 24 – 25 - Update the Table of Contents Page 27 - Under oral mucosal lesions section change to human herpes virus (HHV-8) - Under lab values 2 nd dot point add the sentence "CD4 monitoring may be done less often for stable patients". - When discussing normal ranges, clarify if it is an adult living with or without HIV. Page 28 - Second dot point change "no problem" to "no contraindication". Page 30 - Change CD4 of < 200/mm3. Page 31 - Do not edit treatment plan as it is not purview of the committee. Page 35 – 36	

Agenda Item	Action	Follow-up
	 Add "Last accessed [date]" or direct to American Dental Association search if links are inactive. Abstentions: Dr. Grelotti Motion Carries 	
6. New Business:		
a. Discussion: Review 2024 Needs Assessment findings and identify priorities b. Action: Review and approval of the committee	Dasha presented on the Needs Assessment and the following topics: - Total Questions & Responses - HIV & Ryan White Status - Demographics - Gender orientation - Sexual orientation - Age - Race/Ethnicity - Zip code - Common Themes - Housing - English/Spanish differences - Social support - Substance use - Trouble accessing services - Top Unmet Needs - Rent - Transportation - Dental - Legal services - Referrals - Peer Navigation - Food - Case Management - What Matters Most for 50+ Motion: Approve the MSEC attendance policy "Committee members are expected	HPG SS will update the
meeting attendance policy	to attend all meetings. To remain in good standing and eligible to vote, the committee member may not miss more than 2 meetings within the 12 months." M/S/C: Hernandez/Aldous/10/1 Discussion: Possibly change to a percentage. Abstentions: Dr. Grelotti & Spector Motion Carries	attendance policy. And forward to the Membership Committee.
7. Other Updates:		
a. STD and Mpox Update (Dr. Tilghman)	Tabled.	

Agenda Item	Action	Follow-up
b. Committee member updates	Tabled	
Future agenda items for consideration	Tabled	
9. Announcements	 November 4th is election day; therefore, individuals might be late for the meeting. 	
10. Next meeting date	Date: November 4, 2025 Time: 4:00 PM – 5:30 PM Location: County Operations Center 5530 Overland Ave, San Diego, CA 92123 (Room 124)	
11. Adjournment	The meeting was adjourned at 5:42 PM.	



Wednesday, October 15, 2025, from 3:00 PM – 5:00 PM County Operations Center 5530 Overland Ave, San Diego, CA 92123 Room 124

A quorum for this meeting is two (2).

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

Committee Members Absent: Veronica Nava

MEETING MINUTES

Agenda Item	Discussion/Action	Follow-Up
Call to order, roll call, comments from the chair, and a moment of silence	The chair called the meeting to order at 3:06PM and noted the presence of an in-person quorum.	
Review Background, Mission Statement, Goals, and Agreement of Meeting Decorum	Committee members read the Mission Statement and the Community Engagement Group (CEG) Charge. Donovan and Lothridge reviewed the meeting decorum.	
3. Introductions (Name, Role with HPG/Consumer, Pronouns), Icebreaker	Members and participants introduced themselves.	
Public comment (for members of the public)	A member of the public urged HIV service providers to partner with San Diego County's HOPWA program and apply for funding to reduce or the PARS waitlist.	
5. Sharing our concerns (for committee members)	A committee member suggested that disaster preparedness could be a potential presentation topic.	HPG SS will add a presentation idea for Disaster Preparedness month in September 2026.
6. ACTION: Approve the consent CEG agenda (which includes the October 15, 2025 agenda and the	Motion: Approve the consent CEG agenda (which includes the October 15, 2025 agenda and the September 10, 2025, minutes)	
September 10, 2025, minutes)	Motion/Second/Count (M/S/C): Lothridge/Donovan/2-0 Abstention(s): None	

Agenda Item Discussion/Action Follow-Up			
Agenda Item	Discussion/Action	rollow-op	
	Motion carries		
Follow-Up Items from	None.		
minutes:			
7a. Committee Updates			
I. HIV Planning	The HPG meets next week with a very		
Group (HPG)	packed agenda. They are voting on 5		
	service standards categories, along with PARS, that have been edited and		
	approved by Strategies and Standards		
	or MSEC.		
II. Strategies and	The committee recently met and		
Standards	approved the combined Medical/Non-		
Committee	Medical Case Management Standards,		
	Introduction, and Emergency Financial		
	Assistance and Housing Standards.		
III. Steering Committee	The committee will not meet until		
IV. Membership	November. The committee is reviewing the		
Committee	description of seats and what each		
Committee	seat is responsible for. They will be		
	reviewing 3 - 4 seats for each meeting.		
V. Priority Settings	The committee did not meet due to a		
and Resource	lack of quorum but will be meeting in		
Allocation	November.		
Committee			
(PSRAC)	The constitution will be an incident		
VI. Medical Standards and Evaluation	The committee will now be reviewing		
Committee (MSEC)	the Mental Health and Psychiatric Medication Management Service		
Committee (MCLC)	Standards.		
7b. Community Updates			
CARE Partnership	CARE Partnership will meet again next		
	month.		
II. HIV Housing	CEG does not currently have a		
Committee/Housing	member that is sitting on the Housing		
Opportunities for Persons with AIDS	Committee but is in the process of approving and appointing one.		
(HOPWA)	approving and appointing one.		
8. New Business			
a. Presentation:	Maritza Herrera presented on PARS		
Partial	and the following was discussed:		
Assistance rental	Ryan White Overview		
Subsidy	○ Ryan White HIV/AIDS		
Program (PARS)	Treatment Extension Act		

Auenua nem	Agenda Item Discussion/Action Follow-Up			
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	 PARS Overview Program information Funding Enrollment process Purpose Housing case management PARS Eligibility Eligibility and requirement criteria 			
	Discussion:			
	 The housing transition plan supports clients early by connecting them to alternative housing options and focusing case management solely on housing needs. Clarification that individuals who are currently enrolled on PARS will not be automatically removed after 24 months but need to prove that they are actively working on a housing plan. The goal is to ensure Ryan White clients have temporary support as a bridge to stable housing. The chair reminded everyone that the HPG itself is not allowed to get involved with providers or the contracting part. They are responsible for prioritizing the services and allocating funds to them. 			
b. ACTION:	Motion: Approve HOPWA	HPG SS will follow		
Approve HOPWA Appointment, Jen Lothridge for HPG Community Engagement Group Seat	Appointment, Jen Lothridge for HPG Community Engagement Group Seat Motion/Second/Count (M/S/C): Donovan/Lothridge/2-0 Abstention(s): None Motion carries	up with next step for appointment.		

COMMUNITY ENGAGEMENT GROUP			
Agenda Item	Discussion/Action	Follow-Up	
c. Discussion: Ways to engage the community for 2026	The committee discussed ways to engage the committee for 2026 and the following ideas were discussed: - Appointing HPG consumers to provide updates at the CEG meeting rather than staff. - Promoting the CEG flyer at provider offices to increase participation. - Opportunities to host CEG meetings at facilities outside of County buildings. - Suggestion to have a meeting at the homeless court. - Doing outreach at food bank locations. - Event with Friends of MalcomX Library. - Resource tabling event with 8 to 10 community partners. - MTS presentation.	HPG SS will bring up appointing HPG consumers to provide CEG updates to Membership Committee. HPG SS will create 2026 workplan with in depth review of the 4-5 service categories (mandatory services) for January.	
9. Old Business			
a. Committee Attendance	None.		
b. Discussion: Review 2025 CEG workplan	 Limit the amount of discussion on the 2026 work plan for December meeting. Brainstorm Holiday Party activities/ideas for December. 		
10. Announcements	 November 30th Impulse will sponsor The Red Ribbon Gala to benefit POZabilities. December 1st Truax followed by the tree lighting. October 21st the chair of the HPG will be getting married. All are welcome to attend. 		
11.Next meeting date	Next Meeting: Wednesday, November 12, 2025, from 3:00 PM – 5:00 PM Location: Southeastern Live Well Center; 5101 Market St, San Diego, CA 92114; Tubman Chavez Room C		
12. Adjournment	Meeting was adjourned at 4:33PM.		



Tuesday, August 5, 2025, 3:00 PM – 4:30 PM County Operations Center 5530 Overland Ave, San Diego, CA 92123 Training Room 124

A quorum for this meeting is seven (7)

Committee Members: Amy Applebaum | Michael King | Skyler Miles | Joseph Mora | Ivy Rooney | Dr.

Winston Tilghman | Jeffery Weber | Michael Wimpie (Chair)

Members Absent: Nicole Aguilar | Juan Conant | Beth Davenport | Veronica Nava

ORDER OF BUSINESS

	Agenda Item	Discussion/Action	Follow-Up
1.	Call to order, introductions, comments from the chair, and a moment of silence	Michael Wimpie called the meeting to order at 3:03 PM. Introductions were had. A moment of silence was observed. The chair had no comments/updates.	
2.	Public comment (for members of the public)	None	
3.	Sharing our concerns (for committee members)	None	
4.	ACTION: Approve the Strategies and Standards Committee agenda for August 5, 2025	Motion: Approve the Strategies and Standards Committee agenda for August 5, 2025 Motion/Second/Count (M/S/C): Rooney/Weber/7-0 Abstentions: none Motion carries	
5.	ACTION: Approve the Strategies and Standards Committee meeting minutes from June 3, 2025	Motion: Approve meeting minutes for June 3, 2025 M/S/C: King/Tilghman/7-0 Abstentions: none Motion carries	
6.	Review follow-up items from last meeting	 HPG Support Staff (HPG SS) to clarify the Service Standards Introduction language and bring the document back for discussion. In Progress HPG SS to work on the Case Management Standards with the Recipients' Office to revise 	

Agenda Item Discussion/Action Follow-Up		
Agenda Item	Discussion/Action	Follow-op
	 and bring back for review. In Progress HPG SS to work with the HPG Chair to approve an ad hoc working group with Joseph Mora, Michael King, Veronica Nava, Amy Applebaum, and Michael Wimpie. In Progress HPG SS will incorporate discussion suggestions in the Universal Standards and bring back to the committee for approval. Completed 	
7. New Business		
a. ACTION: Review and approve Clarification Regarding the Partial Assistance Rental Subsidy (PARS) Waiting List Priorities and Enrollment	Motion: Approve changing the PARS enrollment period from 48 months to 24 months, with extension periods allowed in 6-month increments for up to 48 months while clients are actively working on a housing plan. M/S/C: Miles/Weber/8-0 Discussion: The following discussion took place: - The goal of PARS is to provide stable housing while people look for affordable, permanent housing. - Having two lists might create more barriers to reapplying, thus increasing homelessness. - This service is specifically for temporary housing assistance. - Consider decreasing the time on PARS to 24 months (from 48) with a 6-month extension at a time for up to 48 hours. Abstentions: none Motion carries	HPG SS will bring the revised Action Item to the September HPG meeting
b. ACTION : Review and approve combined Medical/Non-Medical Case Management Standards	Motion tabled. The document is still being reviewed and finalized by the HSHB staff.	HPG SS will follow up with the final revisions for the October meeting

A rough Item			
Agenda Item	Discussion/Action	Follow-Up	
c. ACTION : Review and approve the committee meeting attendance policy	The committee has been tasked with developing an attendance policy because they meet every other month. The motion has been tabled until October.		
8. Old Business			
a. ACTION : Review and approve Service Standards Introduction	Tabled		
b. ACTION : Review and approve Emergency Financial Assistance and Housing Standards	Tabled		
c. ACTION : Review and approve Universal Standards	Motion: Approve Universal Standards M/S/C: Wimpie/Rooney/7-0 Discussion: The following discussion took place: - Trauma-Informed Care Guidelines have been incorporated into the Universal Standards All suggestions from the previous meeting were addressed in the tracked changes for the committee's reference. Abstentions: none Motion carries		
d. ACTION : Review and approve Trauma-Informed Care guidelines 9. Routine Business	The document has been incorporated into the Universal Standards.		
	Name		
a. Discussion : Recommendations from Priority Setting & Resource Allocation Committee (PSRAC)	None		
 b. Recommendations to the HIV Planning Group (HPG), HPG committees, and requests of recipient 	None		

Agenda Item	Discussion/Action	Follow-Up
c. Review : Committee Attendance	The attendance summary was reviewed as part of agenda items 7c.	
d. Suggested items for future committee agenda	None	
10. Announcements	None	
11. Next meeting date	Date: Tuesday, October 7, 2025 Time: 3:00 PM – 4:30 PM Location: to be determined and via Zoom.	
12. Adjournment	Meeting adjourned at 4:30 PM.	

MEETING MINUTES

CARE PARTNERSHIP FOR WOMEN, CHILDREN, AND FAMILIES Monday, September 15, 2025 11:00 AM – 1:00 PM

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

Agenda Item	Action	Follow-up
Welcome and introductions	Johneisha Jones started the meeting at 11:06AM, and the participants introduced themselves online.	
Comments from the Chair/	The chair mentioned that we will be disabling introductions, chat, and muting for security purposes.	
Respectful Engagement	Respectful engagement guidelines read by Johneisha Jones.	
Moment of silence	A moment of silence was observed, remembering those who have passed and those living with or affected by HIV/AIDS and/or COVID-19.	
Review Mission Statement	Mission Statement read by Johneisha Jones	
Public comment/ Sharing our Concerns	 The Chair of the San Diego County HIV Planning Group (HPG) introduced himself and encouraged attendees to engage with the group. He emphasized the importance of public comments and consumer involvement, noting that community members are the best experts on the services provided. Johneisha thanked the chair for attending and emphasized the importance of attending HPG meetings. She encouraged community members to participate, share feedback, and make their voices heard to ensure funding and services reflect the real needs of those affected. A community member expressed concern about possible funding cuts to the MCAP program at UCSD, noting that the program has provided essential support to many women. They shared worries about new waitlists for therapy services. The MCAP representative acknowledged existing funding gaps, confirming that there is currently a waitlist for therapy. They emphasized the need to address these gaps, noting that efforts to find alternative referrals for clients have so far been unsuccessful. The chair acknowledged that most agencies, including Christie's Place, are facing waitlists for mental health services and shared that a part-time therapist was recently hired to help reduce the backlog. They asked the community to be patient 	

Agenda Item	Action	Follow-up
	 as funding limitations are addressed, reminding individuals that mental health services may also be accessible through their medical coverage outside of HIV-specific programs. A community member described MCAP as a vital source of support for themselves and many families, women, and children. A community member emphasized that MCAP provides a unique sense of belonging and care that other programs cannot replace. The chair praised MCAP's staff for creating a family-like environment. She encouraged community members to speak at city and County levels, attend HPG meetings. She emphasized that raising public awareness is essential to protecting these vital services. She offered her support in this process. The HPG chair clarified that HIV funding is managed at the County level, not the city, and emphasized that any concerns about services should be formally documented through agency grievance policies or Golden Rod forms. He encouraged members to submit these forms as this allows the County and the HPG to track and address complaints. He assured members that no one could face retaliation for raising issues and offered his and Johneisha's support in the process. A member shared that they have been part of MCAP since 1998 and have consistently received strong support. They emphasized that MCAP has been especially valuable for mothers with children. 	
Review & approval of the meeting agenda	The agenda for September 15, 2025, was approved by consensus as presented.	
 Review & approval of the meeting minutes 	The minutes for July 17, 2025, was approved by consensus as presented.	
 Discuss 2025 Training Opportunities/ Updates 	November: Updates on MediCal December: Self-care presentation and holiday party	
Old Business		
a. None		
New Business	,	
a. Presentation: Shamine Linton Founder/CEO, Sharia's Closet	Shamine Linton presented on Sharia's Closet and discussed the following: • Who we are, what we do, and our why • The faces of Sharia's Closet	
	Sharia's Closet locations	

Agenda Item	Action	Follow-up
	 Referring organizations Ways to support Ongoing needs Community needs Call to action Donation Drop Off: 6244 El Cajon Blvd Ste #5 San Diego, CA 92115. Mon-Sat, 9AM- 4PM. Clothes must be washed and separate by gender/type of clothing. Contact Us: info@shariascloset.org or 619-808-4979 	
b. Presentation: Erin Moore Project Analyst, Division of Prevention Science, University of California, San Francisco	Erin Moore presented on Ivy Study: Intervention for Virological Suppression in Youth • Test a technology-based intervention ○ Video counseling ○ mHealth app "WYZ" • Inclusion Criteria: ○ Age 18-29 years old ○ 3mo since HIV diagnosis ○ Viral load >20 copies/mL within the last year excluding 3mo after initial diagnosis ○ English speaking ○ Live and receive care in California • Activities: \$470-530 max over 12mo How to Sign Up Call/text 415-735-1507 (M-F, 9a-5p) Email ivy@ucsf.edu https://ivy.ucsf.edu/how-sign	
Reports		
a. Women and Youth Out of Care Group Discussion	 Support youth in the community impacted by or living with HIV. Providing guidance and care to those who feel confused or unsure. Many newly diagnosed youth are unaware of available services, so early engagement, face-to-face support, and trust-building are crucial to keep them connected to care. A parent mentioned their 27-year-old son with HIV and cerebral palsy struggling with hopelessness and resistance to care, highlighting concerns about the emotional well-being of youth. 	
a. HIV Planning Group (HPG)	North Regional Planning Meeting: October 10 th from 11am-1pm at 649 W Mission Rd, Escondido, 92025.	

	Agenda Item Action		Follow-up
	Planning Group Support Staff	 Truax Awards: Call for nominations are open until October 5th. The ceremony will be held on December 1st from 3-5pm. HPG Newsletter: Subscribe to receive updates on community events, research studies, and HPG meeting announcements. Email HPG.HHSA@sdcounty.ca.gov . 	
k	o. Ryan White Part D	 Individual experiences and community voices often don't reach decision-makers, creating gaps between needs and available services despite funding. There is a need for collaboration to maintain and improve the overall care system. Shannon thanked everyone for being here today to share their stories and express their concerns. 	
C	c. Research		
i.	AIDS Clinical Trials Group (ACTG)/ Antiviral Research Center (AVRC)	 HIV prevention study: (16 years+, all genders) once yearly lenacapavir injection. The waitlist open and if you are interested reach out to Marvin Hanashiro. 	
ii.	HIV Neurobehavioral Research Program (HNRP)	None.	
iii.	Mother, Child & Adolescent Program (MCAP)	 UPLIFT Study: Focus on attitudes toward breastfeeding while living with HIV. For pregnant individuals, regardless of whether they plan to breastfeed. HIV Research Learning Opportunity: Online via YouTube at Saveaidsresearch.org 9/16 from 8AM – 8PM 	
iv.	UC San Diego Moores Cancer Center		
13. A	nnouncements	 The chair wanted to wish safe travels for the yearly annual retreat, where the ladies from Christie's Place are going up to Camp Julian. A women's Voice Conference Saturday, March 7th, 2026. Crown Plaza Center in Mission Valley. Registration will begin at the beginning of 2026. 	

Agenda Item	Action	Follow-up
	 MCAP Youth Program Seeking Safety for individuals who have experienced substance use or trauma. jmora@health.ucsd.edu October 19th from 11am-3pm drag show at the rail as a fundraiser for MCAP. Red Dress Party October 4th. Annual HIV Fundraiser. Raised over 400k in the last 10 years. UCSD PAP rally for individuals to get free pap smears and will be providing childcare on October 14th you need to make an appointment through UCSD. 	
14. Next Meeting Date	Next CARE Partnership Meeting- Monday, November 17, 2025 In-Person Location: Southeastern Live Well Center 5101 Market St, San Diego, CA 92114; (Tubman Chavez Room A)	
15. Adjournment	Meeting adjourned at 12:51pm.	



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SAN DIEGO HIV PLANNING GROUP (HPG) MEMBERSHIP COMMITTEE ACTION ITEM INFORMATION SHEET

RECOMMENDATION FOR APPOINTMENT TO THE HPG

DATE: November 19, 2025

ITEM: Consider and vote to recommend an appointment to the HPG.

BACKGROUND: On November 5, 2025, the Membership Committee reviewed Pamuela Halliwell's application and recommended her for appointment to the HPG.

RECOMMENDATION:

Action Item (*Membership Committee*): Approve the recommendation to appoint Pamuela Halliwell to the HPG for the first term (Seat #20): Mental Health Provider.

BIOGRAPHIC INFORMATION: Pamuela Halliwell

Pamuela Halliwell is a community leader, author, Licensed Marriage and Family Therapist, a researcher, and Director of Behavioral Health Services at The San Diego LGBT Community Center, committed to advancing health equity for transgender, non-binary, and Black, Indigenous, and People of Color (BIPOC) communities. With a strong behavioral health and community advocacy background, Pamuela combines her lived experience with professional expertise in HIV prevention, care, and policy.

Her motivation for joining the HPG comes from witnessing the ongoing impact of stigma, inequity, and political challenges faced by people living with HIV with emphasis on folks living with intersectional identities. She underscores the need for and importance of diverse representation in decision making. Pamuela's approach to community engagement focuses on collaboration. She promotes thorough needs assessments, partnerships with trusted community organizations, and practical support such as transportation, meals, and incentives to enhance engagement. She highlights the need for transparency, flexibility in meeting accessibility requirements, and culturally relevant outreach through various media and social platforms. Pamuela distinguishes between "engagement" and "outreach," emphasizing reciprocal knowledge sharing rather than one-way information delivery.

In her role at The Center and as former President of the San Diego Black LGBT Coalition, Pamuela has established strong partnerships with organizations such as Family Health Centers of San Diego, Christie's Place, Stepping Stone of San Diego, UC San Diego's Owen Clinic, AIDS Healthcare Foundation (AHF), and others. Her programs provide mental health counseling, harm reduction services, PrEP access, crisis support, and links to care. She serves as a Co-Principal Investigator on UC San Diego's studies addressing intimate partner violence and HIV among transgender and non-binary populations as well as their cisgender heterosexual partners.

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



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SAN DIEGO HIV PLANNING GROUP (HPG) MEMBERSHIP COMMITTEE ACTION ITEM INFORMATION SHEET

RECOMMENDATION FOR APPOINTMENT TO THE HPG

DATE: November 19, 2025

ITEM: Consider and vote to recommend an appointment to the HPG.

BACKGROUND: On November 5, 2025, the Membership Committee reviewed Sergio Paul Luna's application and recommended them for appointment to the HPG.

RECOMMENDATION:

Action Item (*Membership Committee*): Approve the recommendation to appoint Sergio Paul Luna to the HPG for the first term (Seat #27): Prevention Services Consumer.

BIOGRAPHIC INFORMATION: Sergio Paul Luna

Sergio is a new hire at Gilead Sciences and, as a person living with HIV, they are dedicated to improving the lives of people living with HIV. With over 12 years of service at Vista Community Clinic (VCC), they bring extensive experience in peer navigation, case management, and community engagement.

Sergio's introduction to the HPG came through their work at VCC and participation in Project Pearl, which deepened their understanding of HPG's policies, procedures, and committee processes. Sergio has collaborated with multiple Ryan White-funded agencies, including San Ysidro Health, UC San Diego, and Christie's Place, and is well-versed in the local network of HIV services.

Sergio has led support and youth groups in North County for LGBTQI+ individuals and people living with HIV. They have also actively contributed to initiatives through the North County LGBTQ Resource Center, including Faith and HIV/AIDS Awareness Day and World AIDS Day events.

At Gilead Sciences, Sergio continues to leverage their expertise to connect consumers with vital resources and guide professionals in understanding HIV policy and the Ryan White CARE Act. While their role precludes participation in funding or prioritization committees, they remain committed to serving on community-focused HPG committees and advancing inclusive, informed community planning in San Diego County.

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



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SAN DIEGO HIV PLANNING GROUP (HPG) MEMBERSHIP COMMITTEE ACTION ITEM INFORMATION SHEET

RECOMMENDATION FOR APPOINTMENT TO THE HPG

DATE: November 19, 2025

ITEM: Consider and vote to recommend an appointment to the HPG.

BACKGROUND: On November 5, 2025, the Membership Committee reviewed Joseph Westcott's application and recommended him for appointment to the HPG.

RECOMMENDATION:

Action Item (*Membership Committee*): Approve the recommendation to appoint Joseph Westcott to the HPG for the first term (Seat #21): Substance Abuse Treatment Provider.

BIOGRAPHIC INFORMATION: <u>Joseph (Joe) Westcott</u>

Joe has been with Stepping Stone of San Diego for over six years and currently serves as a Program Manager. In this role, he oversees outpatient programs and staff development. He holds a master's degree in social work and has experience as a drug and alcohol counselor and therapist, providing direct care and leadership in behavioral health and recovery services.

In his work, Joe combines personal insight with professional experience. He is deeply connected to the HIV community, collaborating with Ryan White recipients and local service providers to enhance access to care and support. Comfortable sharing his HIV status, Joe believes in using his story to help reduce stigma and empower others.

Joe is actively engaged in community outreach and frequently participates in events. He collaborates with partners such as The LGBT Center, UC San Diego's Owen Clinic, and the Family Health Centers of San Diego. Additionally, he previously served as Treasurer for the Graduate Social Work Association and has been involved in research initiatives with UC San Diego to integrate HIV and substance use treatment.

Dedicated to advancing HIV prevention and awareness, particularly among LGBTQ+ and marginalized populations, Joe remains a visible advocate through Stepping Stone's programs and community initiatives. As a recently appointed member of the HPG's Priority Setting and Resource Allocation Committee (PSRAC), he looks forward to contributing his expertise, reliability, and passion to strengthen HIV services across San Diego County.

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



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SAN DIEGO HIV PLANNING GROUP (HPG) COMMUNITY ENGAGEMENT GROUP (CEG) ACTION ITEM INFORMATION SHEET

RECOMMENDATION FOR APPOINTMENT TO THE JOINT CITY/COUNTY HIV HOUSING COMMITTEE

DATE: November 19, 2025

ITEM: Consider and vote to recommend an appointment to the Joint City/County HIV Housing Committee.

BACKGROUND: On October 15, 2025, the CEG reviewed and recommended Jennifer Lothridge for appointment to the Joint City/County HIV Housing Committee.

RECOMMENDATION:

Action Item (CEG): Approve the recommendation to appoint Jennifer Lothridge for the HPG CEG Seat.

BIOGRAPHIC INFORMATION: Jennifer (Jen) Lothridge

Jennifer is a San Diego native who has been thriving with an HIV/AIDS diagnosis for nearly seven years. She is a proud graduate of the Housing Opportunity for Persons with AIDS (HOPWA) program and brings both lived experience and professional expertise to her advocacy for housing stability and community health. Drawing from her background as a Case Manager for the unhoused at Dreams for Change and as a former HOPWA Case Manager with 211 San Diego, she has gained a deep understanding of the systemic barriers that contribute to homelessness, landlord challenges, and social isolation. Additionally, her work with women aging with HIV/AIDS has helped her find her voice to advocate for these specific, often marginalized sub-populations within the HIV community.

Jennifer is the Co-Chair of the CEG and a Board Member of both POZabilities and Friends of the Malcolm X Library. Jennifer uses her leadership positions to advocate for solutions to consumer unmet needs and housing barriers. Her commitment lies in the goal of transforming community feedback into actionable recommendations that strengthen service delivery, improve housing stability, and influence policy within the County of San Diego. Through her lived experience and professional insight, she continues to champion equitable, person-centered approaches to housing and health.

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



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SAN DIEGO HIV PLANNING GROUP (HPG) ACTION ITEM INFORMATION SHEET

APPROVE BOARD LETTER TO AUTHORIZE ACCEPTANCE OF FUNDING TO ADDRESS SEXUALLY TRANSMITTED INFECTIONS, SUPPORT HARM REDUCTION SERVICES, AND APPLY FOR FUTURE FUNDING OPPORTUNITIES

DATE: November 19, 2025

ITEM: Approve the board letter to accept funding to address sexually transmitted infections, support harm reduction services, and apply for future funding opportunities.

BACKGROUND: For almost three decades, the San Diego County Board of Supervisors (Board) has authorized grants and agreements with the California Department of Public Health Office of AIDS (CDPH-OA) to reduce transmission of HIV in San Diego County. Today's action requests the Board to authorize the acceptance of CDPH ADAP Rebate funds of \$2,355,534 to support disease intervention workforce development activities in San Diego County; the acceptance of \$300,000 from The Center at Sierra Health Foundation for expansion of hard reduction services; and authorize the DCAO of HHSA to execute all required grant documents; and authorize applications for additional funding opportunity announcements to support STI services.

RECOMMENDATIONS:

- 1. Waive Board Policy B-29, Fees, Grant, Revenue Contracts Department Responsibility for Cost Recovery, which requires prior approval of grant applications and full-cost recovery of grants.
- 2. Authorize the acceptance of \$2,355,534 in Disease Intervention Specialist Workforce Development Grant funding from the California Department of Public Health, AIDS Drug Assistance Rebate Fund, for the period July 1, 2025 through June 30, 2030, and authorize the Chief Administrative Officer, or designee, to execute all required documents, upon receipt, including any annual extensions, amendments, and/or revisions thereto that do not materially impact or alter the services or funding level.
- 3. Authorize the acceptance of \$300,000 in California Overdose Prevention and Harm Reduction Initiative funding from the Center at Sierra Health Foundation, for the period of October 1, 2025 through June 30, 2027, and authorize the Chief Administrative Officer, or designee, to execute all required documents, upon receipt, including any annual extensions, amendments, and/or revisions thereto that do not materially impact or alter the services or funding level.
- 4. Authorize the Chief Administrative Officer or designee to apply for additional funding opportunity announcements, if available, for STI testing and prevention resources.

These recommendations come to the HPG requiring a motion and second to proceed.

Attachment: Board Letter



COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

PALOMA AGUIRRE

JOEL ANDERSON Second District

TERRA LAWSON-REMER Third District

MONICA MONTGOMERY STEPPE Fourth District

> JIM DESMOND Fifth District

DATE: **December 9, 2025**

TO: **Board of Supervisors**

SUBJECT

ACCEPTANCE AUTHORIZE OF FUNDING TO **ADDRESS** SEXUALLY TRANSMITTED INFECTIONS, SUPPORT HARM REDUCTION SERVICES, AND APPLY FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

OVERVIEW

Sexually transmitted infections (STIs) remain a significant public health concern locally and across California and the United States. STIs can increase the risk of HIV acquisition and transmission and can cause multiple health complications, including infertility, blindness, hearing loss, and death. Surveillance data demonstrate that the incidence of reportable bacterial STIs has been increasing in San Diego County since 2003, with a slight decrease seen in 2023.

The County of San Diego (County) receives funding from the California Department of Public Health (CDPH) to develop, expand, train, and sustain the disease intervention specialist (DIS) workforce (locally known as communicable disease investigators or CDIs), who respond to new cases of syphilis, HIV, and Mpox. Prior authorization for this funding was received from the San Diego County Board of Supervisors (Board) on November 2, 2021 (11) to accept a four-year grant agreement from July 1, 2021, through June 30, 2025, totaling \$2,093,808.

Substance use disorder is one of the drivers of increases in syphilis, HIV, and Mpox. The combination of substance use and housing instability are some of the root causes we see during case investigations. The County was notified on September 24, 2025 of a new grant award from The Center at Sierra Health Foundation of an award for the California Overdose Prevention and Harm Reduction Initiative. This funding is an opportunity to address STI concerns within communities impacted by substance use.

Today's action requests the Board approve and authorize acceptance of approximately \$2,355,534 in funding for the period of July 1, 2025 through June 30, 2030, to support core STI disease intervention workforce development activities in San Diego County; \$300,000 for the period of October 1, 2025 through May 31, 2027, to support harm reduction services; and to authorize the Chief Administrative Officer (CAO) or designee to execute all required grant documents, upon receipt, including any annual extension, amendments or revisions that do not materially impact or alter the services or funding level; and to authorize the CAO or designee to apply for additional funds for STI testing and prevention resources and to submit reports to the program funder.

Legistar v1.0 1 SUBJECT: AUTHORIZE ACCEPTANCE OF FUNDING TO ADDRESS SEXUALLY TRANSMITTED INFECTIONS AND APPLY FOR FUTURE FUNDING

OPPORTUNITIES

Because there is a significant overlap between HIV and STIs, this item supports the County's Getting to Zero initiative by training and supporting staff to link residents who are vulnerable to HIV and STIs to testing and prevention resources, as well as ensuring that residents living with diagnosed HIV and STIs are linked to care and treatment services. This item also supports the *Live Well San Diego* vision by improving our residents' health through education, prevention, and intervention to interrupt disease transmission.

RECOMMENDATION(S) CHIEF ADMINISTRATIVE OFFICER

- 1. Waive Board Policy B-29, Fees, Grant, Revenue Contracts Department Responsibility for Cost Recovery, which requires prior approval of grant applications and full-cost recovery of grants.
- 2. Authorize the acceptance of \$2,355,534 in Disease Intervention Specialist Workforce Development Grant funding from the California Department of Public Health, AIDS Drug Assistance Rebate Fund, for the period July 1, 2025 through June 30, 2030, and authorize the Chief Administrative Officer, or designee, to execute all required documents, upon receipt, including any annual extensions, amendments, and/or revisions thereto that do not materially impact or alter the services or funding level.
- 3. Authorize the acceptance of \$300,000 in California Overdose Prevention and Harm Reduction Initiative funding from the Center at Sierra Health Foundation, for the period of October 1, 2025 through June 30, 2027, and authorize the Chief Administrative Officer, or designee, to execute all required documents, upon receipt, including any annual extensions, amendments, and/or revisions thereto that do not materially impact or alter the services or funding level.
- 4. Authorize the Chief Administrative Officer or designee to apply for additional funding opportunity announcements, if available, for STI testing and prevention resources.

EQUITY IMPACT STATEMENT

In San Diego County, gay, bisexual, and other men who have sex with men comprise 62% of recent HIV diagnoses and 70% of persons living with HIV. Moreover, like much of the United States, HIV has disproportionately impacted some of San Diego County's most vulnerable residents, which include Black and Hispanic communities, gay, bisexual, and other men who have sex with men. According to the 2024 local surveillance data, Black residents comprise 4.4% of the San Diego County population, but proportionately they represent 20% of recent HIV diagnoses. Likewise, Hispanic residents comprise 35% of the San Diego County population, yet proportionally they represent 53% of recent HIV diagnoses. It is important to link the HIV data to STIs because STIs can increase the risk of HIV transmission to or from other people, often due to sores or small tears in the skin that can cause exposure to the virus.

SUSTAINABILITY IMPACT STATEMENT

The proposed action aligns with the County of San Diego (County) Sustainability Goals to strive for programs, operations, and contracts that reflect the County values and priorities. Specifically, today's action contributes to providing just and equitable access to services and protecting health

Legistar v1.0 2

SUBJECT: AUTHORIZE ACCEPTANCE OF FUNDING TO ADDRESS SEXUALLY TRANSMITTED INFECTIONS AND APPLY FOR FUTURE FUNDING OPPORTUNITIES

and wellbeing. The Disease Intervention Specialist Workforce Development Grant will provide funding to support the HIV, STD, and Hepatitis Branch within Public Health Services, with the goal of increasing the workforce capacity and services aimed to prevent, detect, and treat STIs. Testing and identification will improve the overall health of communities and reduce the demand for associated care services while increasing the effectiveness of care providers.

The proposed actions align with the County of San Diego (County) Sustainability Goal #2 to provide just and equitable access to County services and resources, and Sustainability Goal #4 to protect the health and well-being of San Diegans. This will be accomplished by increasing the capacity and skill of our disease intervention staff with an aim to prevent, identify, and treat STIs. Testing, identification, and treatment of STIs will improve the overall health of communities, reduce the demand of associated care services, while increasing effectiveness of care providers and lowering operating costs.

FISCAL IMPACT

Recommendation #2: Authorize the acceptance of Disease Intervention Specialist Workforce Development funds

Funds for this request are included in the Fiscal Year (FY) 2025-27 Operational Plan in the Health and Human Services Agency. If approved, this request will result in estimated costs of \$261,726 and revenue of \$261,726 in FY 2025-26, and estimated costs of \$523,452 and revenue of \$523,452 in FY 2026-27, for an estimated total of \$2,355,534 in costs and \$2,355,534 in, revenue through FY 2029-30. The funding source for this grant is the California Department of Public Health (CDPH). There will be no change in net General Fund cost and no additional staff years.

Recommendation #3: Authorize the acceptance California Overdose Prevention and Harm Reduction Initiative funding

Funds for this request are not included in the Fiscal Year (FY) 2025-27 Operational Plan in the Health and Human Services Agency. If approved, this request will result in estimated costs of \$151,059 and revenue of \$147,450 in FY 2025-26, and estimated costs of \$156,283 and revenue of \$152,550 in FY 2026-27, for an estimated total of \$307,342 in costs and \$300,000 in revenue through FY 2026-27. The funding source for this grant is the Center at Sierra Health Foundation.

A waiver of Board Policy B-29 is requested because the funding does not offset all costs. These unrecovered costs are estimated to be \$3,609 for FY 2025-26, and \$3,733 for FY 2026-27, for a total of \$7,342 through FY 2026-27. The funding source for these costs will be existing Realignment. The public benefit for providing these services far outweighs the costs.

There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

Legistar v1.0 3

SUBJECT: AUTHORIZE ACCEPTANCE OF FUNDING TO ADDRESS SEXUALLY TRANSMITTED INFECTIONS AND APPLY FOR FUTURE FUNDING

OPPORTUNITIES

The HIV Planning Group recommended approval/disapproval at its November 19, 2025 meeting.

BACKGROUND

Like much of the rest of the United States and other California counties with large populations, surveillance data demonstrate the incidence of sexually transmitted infections (STIs) has increased significantly in San Diego County since 2003, with slight decreases in chlamydia, gonorrhea, and infectious syphilis between 2022 and 2023 (the last year for which we have complete data). In 2023, there were 1,089 reported cases of infectious syphilis, with a rate of 33.1 cases per 100,000 population. A total of 6,651 cases of gonorrhea were reported, with a rate of 202.1 cases per 100,000 population. There were 17,720 cases of chlamydia reported, with a rate of 538.5 cases per 100,000 population.

The purpose of the Disease Intervention Specialist (DIS) Workforce Development Grant is to develop, expand, train, and sustain the DIS workforce. This is the second time the California Department of Public Health has distributed these DIS Workforce Development Grant funds across 61 Local Health Jurisdictions in California. The focus and goals of the grant are:

- Expand and enhance frontline public health staff.
- Conduct DIS workforce training and skills building.
- Build organizational capacity for outbreak response; and
- Evaluate and improve recruitment, training, and outbreak response efforts.

Given the ongoing increases in STI incidence seen throughout California and San Diego County, this funding will support the County of San Diego in continuing to intervene in transmission of STIs by providing timely investigation, linkage to care, and partner notification. It will also provide ongoing training and development for CDIs who are assigned to STI, HIV and mpox cases Moreover, it will support the ability of HHSA to respond to outbreaks of known and currently unknown STIs, such as the emergence of Mpox in 2022-2023.

The County will receive \$261,726 for the period of July 1, 2025, through June 30, 2026, and then \$523,452 annually for the period of July 1, 2026, through June 30, 2030. Year 1 is half the funding for a full 12-months of service due to an overlap between the first and second funding agreements.

People who inject drugs (PWID) are at high risk not only for medical and mental health issues, but also transmissible diseases such as syphilis, HIV and hepatitis C, and are more likely to die prematurely than people who do not inject drugs. Injection behaviors, such as sharing or re-using injection equipment heighten these risks. A 2007 estimate suggests that approximately 35,000 people in San Diego inject drugs, and it is likely that this rate has increased substantially since them.

The County's Harm Reduction Services Program officially launched on April 29, 2024. It provides integrated disease screening activities including HIV and hepatitis C testing, wound care, provision of harm reduction supplies, referrals to wrap-around services, and health education. Rapid syphilis testing will be added in 2026. The purpose of this funding is to support

Legistar v1.0 4

SUBJECT: AUTHORIZE ACCEPTANCE OF FUNDING TO ADDRESS SEXUALLY TRANSMITTED INFECTIONS AND APPLY FOR FUTURE FUNDING

OPPORTUNITIES

the introduction of a contracted Peer Support Specialist to provide overdose and disease prevention education, outreach and engagement, and linkage to care, such as substance use treatment and other healthcare and supportive services; bolster administrative support to carry out plan to expand harm reduction services in the county; improve syringe disposal availability through the purchase of a safe syringe disposal kiosk, and enhance supportive services focusing on transportation and nutrition.

The County will receive \$300,000 for the period of October 1, 2025 through May 31, 2027.

Today's action requests the Board authorize the acceptance of CDPH ADAP Rebate funds in the amount of \$2,355,534 to support disease intervention workforce development activities in San Diego County; the acceptance of \$300,000 from The Center at Sierra Health Foundation for expansion of hard reduction services; and authorize the DCAO of HHSA to execute all required grant documents; and authorize applications for additional funding opportunity announcements to support STI services.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed action supports the Equity (Health) and Community (Quality of Life) initiatives in the County of San Diego's 2025-30 Strategic Plan, as well as our commitment to the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. This is accomplished through education about Sexually Transmitted Infections, interruption of the spread of STIs, and reduction in the impact of STIs on San Diego County residents, leading to improved physical health and a healthy, safe, and thriving region

.

Respectfully submitted,

USE "INSERT PICTURE" FUNCTION TO INSERT SIGNATURE

EBONY N. SHELTON
Chief Administrative Officer

ATTACHMENT(S) N/A

Legistar v1.0 5



HEALTH AND HUMAN SERVICES AGENCY

ELIZABETH A. HERNANDEZ, Ph.D.
INTERIM DEPUTY CHIEF
ADMINISTRATIVE OFFICER

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ADRIENNE COLLINS YANCEY, MPH INTERIM DIRECTOR

SAYONE THIHALOLIPAVAN, MD, MPH PUBLIC HEALTH OFFICER

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

ACTION ITEM INFORMATION SHEET

Recommendations for Reallocation for FY 25-26 (03-01-2025 to 02-28-2026)

DATE: November 13, 2025

ITEM: Approve recipient recommendations for reallocating Part A funds to provide short-term food assistance to eligible Ryan White clients

BACKGROUND: Emergency Financial Assistance (EFA) is one of the allowable service categories that can be funded using Ryan White. It can be used to provide limited one-time or short-term assistance to support clients with an urgent need for essential items or services necessary to improve health outcomes, including food vouchers.

To meet the needs of clients who are experiencing food insecurity due to the volatility of Supplemental Nutrition Assistance Program (SNAP) benefits and escalating costs of living in San Diego County, the HIV, STD and Hepatitis Branch (HSHB) has researched the monthly allowance under SNAP as well as the average cost of groceries for adults living in San Diego County. Based upon that research, HSHB recommends deploying food vouchers at a value of \$100 per week per eligible adult or dependent minor. These grocery vouchers will be distributed to eligible clients through Case Management programs as well as a few other services. The food vouchers and client agreements will prohibit clients from using the vouchers to purchase alcohol, tobacco, or any item other than food or hygiene supplies.

To be eligible for EFA, clients must be a current Ryan White participant or enroll in the program before receiving a voucher, and they must attest to a need for short-term support for food purchases. Use of food vouchers will be tracked through HIV Care Connect and will prohibit clients from accessing food vouchers from more than one provider.

HSHB has identified \$445,250 in savings in Part A and an additional \$260,000 in Ryan White Part B and HRSA Ending the HIV Epidemic, bringing the total to \$705,250. This funding will provide 7,234 food vouchers to eligible clients during November and December 2025.

To support this request, HSHB is recommending a reduction in Outpatient Ambulatory Health Services (OAHS) by \$445,250. This reduction is possible due to under expenditure in this category and will not impact the availability of Outpatient Ambulatory Services for the remainder of the grant period.

RECOMMENDATIONS:

- 1. **Action Item**: Decrease Outpatient Ambulatory Health Services by \$445,250 from \$1,821,037 to \$1,375,787.
- 2. Action Item: Increase Emergency Financial Assistance by \$445,250 from \$61,856 to \$507,106.



Advancing HIV Workforce Capacity Through Regional Collaboration and Partnership

Pacific AETC - Southern California

Wednesday, November 19, 2025

1



Disclaimer

The views and opinions expressed in this presentation are not necessarily those of the Pacific AIDS Education & Training Center (Pacific AETC) or its eight local partner sites in HRSA Region 9, the Regents of the University of California or its San Francisco campus (UCSF or collectively, University), nor of our funder, the Health Resources and Services Administration (HRSA). Neither Pacific AETC, University, HRSA nor any of their officers, board members, agents, employees, students, or volunteers make any warranty, express or implied, including the warranties of merchantability and fitness for a particular purpose; nor assume any legal liability or responsibility for the accuracy, completeness or usefulness of information, product or process assessed or described; nor represent that its use would not infringe privately owned rights.

HRSA Acknowledgement Statement

The Pacific AETC is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) through a partial award of \$2,071,973 for FY25/26. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.

Trade Name Disclosure Statement

Funding for this presentation was made possible by 6 TR7HA53196-01-01 from the Human Resources and Services Administration HIV/AIDS Bureau. The views expressed do not necessarily reflect the official policies of the Department of Health and Human Services nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government. Any trade/brand names for products mentioned during this presentation are for training and identification purposes only.



Disclosures

Speakers: please select the appropriate disclosure statement and delete the other statement and this text

There are no disclosures

All presenters of this continuing medical education activity have indicated that neither they nor their spouse/legally recognized domestic partner has any financial relationships with commercial interests related to the content of this activity.



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Learning Objectives

At the completion of this presentation, participants will be able to:

- Describe the transition of the Pacific AIDS Education and Training Center (PAETC) – Southern California region under UCLA leadership.
- Review key work plan priorities and strategies driving HIV workforce development and training across Southern California.
- Identify opportunities for regional collaboration and partnership, particularly with San Diego County agencies, community clinics, and academic partners, to advance equitable HIV care and prevention.



Overview of the Transition



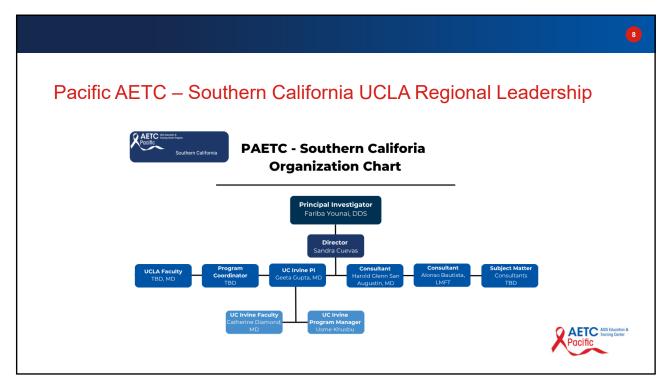
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Background and Transition Overview

- The Pacific AETC network transitioned from a local partner site model to a regional hub model.
- UCLA was selected to lead the Southern California region, consolidating Los Angeles, Orange, San Diego, Imperial, and Riverside counties.
- The new model ensures that training, technical assistance, and faculty engagement are coordinated on a regional level.







Our Vision and Goals

Vision:

To build a unified, equitable, and sustainable HIV workforce across Southern California through training, education, and collaboration.

Goals:

- Strengthen regional training infrastructure under UCLA leadership, ensuring consistent, highquality education for providers across Los Angeles, Orange, San Diego, Riverside, and Imperial Counties.
- Expand continuing education opportunities for physicians, nurses, pharmacists, behavioral health providers, and other allied health providers.
- Enhance clinical training and mentoring through faculty-led practice transformation and technical assistance initiatives.
- Build sustainable partnerships among academic institutions, public health departments, and FQHCs to support long-term workforce development.

9

5-Year Workplan



BASE: Foundational HIV Training and Education

Foundations of Health (FH):

- Trains healthcare team members not currently involved in HIV care (e.g., primary care, OB/GYN, Urgent Care, STI, SUD).
- Focus on minority-serving and rural facilities.
- Promotes awareness of HIV prevention, screening, and linkage to care.
- Combines didactic and interactive modalities emphasizing cultural competency and HIV awareness.

Practice Transformation (PT):

- Builds organizational capacity for system-level improvements in HIV care and prevention.
- Provides process improvement, technical assistance, and faculty coaching for FQHCs and safety-net clinics.
- Focused on enhancing clinical workflows, linkageto-care, and quality of HIV services.

Interprofessional Education (IPE) at UC Irvine:

- Supports faculty and trainees in health professions programs to deliver team-based HIV care
- Promotes collaboration among medical, nursing, pharmacy, and behavioral health disciplines.
- Encourages case-based and simulation learning that prepares future HIV providers.

Capability and Expertise Expansion (CEE):

- Reinforces and expands the knowledge and skills of current HIV care providers.
- Prioritizes interactive modalities (case discussions, simulations, peer exchanges).
- Focus on advanced HIV management, comorbidities, and stigma reduction.
- Offer interactive training modalities.



11

12

Minority AIDS Initiative and Ending the HIV Epidemic

Minority AIDS Initiative (MAI)

- Deliver didactic and clinical trainings tailored to minority-serving providers to help them integrate HIV prevention and treatment into daily practice.
- Integrate HIV-focused curricula into clinical and didactic training at Minority-Serving Institutions (MSIs) (e.g., community colleges, state universities...).
- Partner with health professional organizations representing underrepresented groups to integrate HIV topics into their educational and workforce development programs.

Ending the HIV Epidemic (EHE)

- Deliver team-based training to strengthen capacity for treatment adherence, retention, and viral suppression—upcoming trauma-informed training on December 2, 2025, at the LGBT Center.
- Provide rapid technical assistance in response to outbreaks or identified HIV clusters - upcoming early 2026 webinar series.



Needs Assessment Discussion Questions

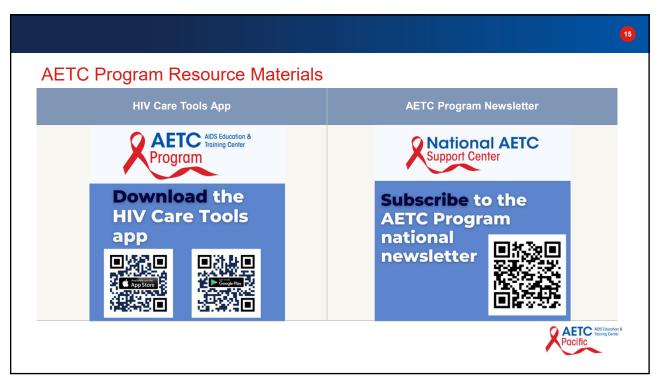


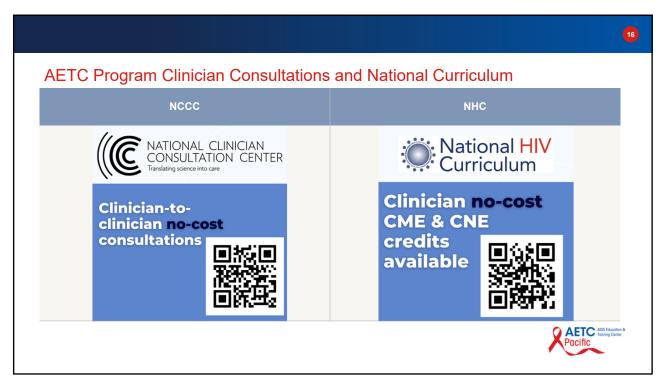
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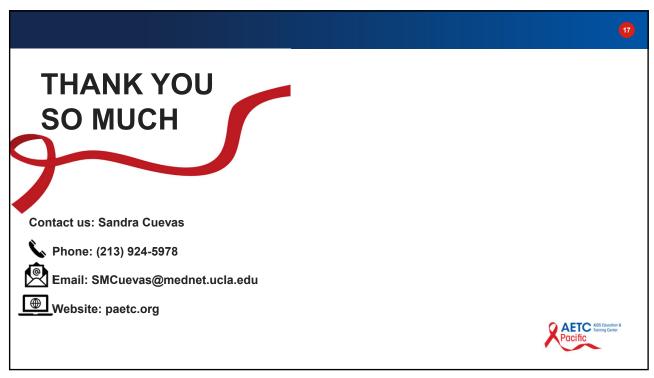
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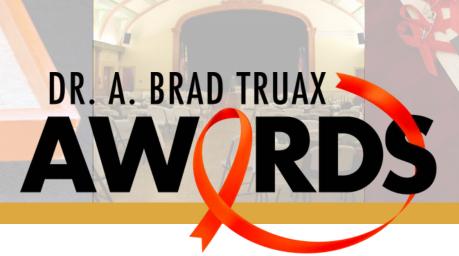
- 1. How can Pacific AETC best support San Diego providers and clinics?
- 2. What HIV-related training topics do you feel are most needed right now in your organization or community?
- 3. Are there specific formats or modalities that work best for your staff (e.g., live webinars, in-person workshops, self-paced online learning)?
- 4. How can we improve coordination and communication between regional partners, including local health departments, academic institutions, and FQHCs?
- 5. Are there local innovations or best practices from your organization that could be shared regionally?











THE 36TH ANNUAL DR. A. BRAD TRUAX AWARDS

DECEMBER

MONDAY

01

3:00-5:00 PM

3909 Centre St., San Diego, CA 92103

The Dr. A. Brad Truax Award was created to honor the memory of Dr. Truax and his tireless dedication to the prevention and treatment of HIV/AIDS in San Diego.

Come recognize and celebrate the incredible contributions made by those who go above and beyond in the field of HIV work and the fight against the HIV/AIDS epidemic.

TO REGISTER PLEASE VISIT

https://tinyurl.com/Truax2025







LA 36TH ENTREGA ANUAL DE LOS PREMIOS DR. A. BRAD TRUAX

DICIEMBRE

LUNES

01

3:00-5:00 PM

3909 Centre St., San Diego, CA 92103

El premio Dr. A. Brad Truax fue creado para honrar la memoria del Dr. Truax y su incansable dedicación a la prevención y el tratamiento del VIH/SIDA en San Diego.

Acompáñanos al evento para reconocer y celebrar las increíbles contribuciones realizadas por aquellos que van más allá en el campo del trabajo sobre el VIH y la lucha contra la epidemia del VIH/SIDA

PARA REGISTRARSE, VISITE

https://tinyurl.com/Truax2025





ASSEMBLY BILL (AB) 2302: THE USE OF JUST CAUSE AND EMERGENCY CIRCUMSTANCES (2025)

(An Amendment to AB 2449)

If the physical attendance quorum requirement is met, AB 2302 permits a member who is not physically present to request virtual attendance at the local legislative body's meeting under two circumstances: (1) for "just cause" and (2) due to "emergency circumstances".

Qualifying Reason	Provisions to Attend Remotely	Requirements/Limitations
"Just Cause"	 There is a childcare or caregiving need (for a child, parent, grandparent, grandchild, sibling, spouse, or domestic partner) that requires the member to participate remotely. A contagious illness prevents the member from attending the meeting in person. There is a need related to a defined physical or mental disability that is not otherwise accommodated for. Traveling while on official business of the legislative body or another state or local agency. 	A member is limited to two (2) virtual attendances due to "just cause" per calendar year.
"Emergency Circumstances"	"A physical or family medical emergency that prevents a member from attending the meeting in person." A member is <u>not</u> required to disclose any medical diagnosis or disability, or any personal medical information that is already exempt from existing law.	A member of the legislative body must: 1. Make a request to the body to allow the member to meet remotely due to an emergency circumstance; and 2. Provide a general description of no more than 20 words of the circumstance justifying such attendance. A request from a member to attend remotely requires that the legislative body take action and approve the remote attendance at the start of the meeting for the member to be allowed to participate remotely for that meeting¹.

¹If the request does not allow sufficient time to be placed on the agenda as a proposed action item, then the legislative body may take action at the beginning of the meeting.

Additional Requirements for a Member Participating Remotely

In addition to making a request either for "just cause" or due to an "emergency circumstance" for remote appearance, AB 2302 imposes the following three (3) additional requirements on legislative body members seeking to appear remotely at public meetings:

- 1. The member:
 - Notifies the legislative body at the earliest opportunity possible, including at the start of a regular meeting, of their need to participate remotely for just cause, including a general description of the circumstances relating to their need to appear remotely at the given meeting. OR
 - Requests the legislative body to allow them to participate in the meeting remotely due to emergency circumstances and the legislative body takes action to approve the request. (See "requirements/limitations" for the use of emergency circumstances.)
- 2. The member shall publicly disclose at the meeting before any action is taken, whether any other individuals 18 years of age or older are present in the room at the remote location with the member, and the general nature of the member's relationship with any such individuals.
- 3. The member shall participate through both audio and visual technology.