together.

WE CAN END HIV IN OUR COMMUNITIES ONCE & FOR ALL



MEMBERSHIP & COMMUNITY ENGAGEMENT COMMITTEE MEETING

Thursday, October 22, 2026 | 10:00AM – 12:00PM (PST)

510 S. Vermont Ave. Terrace Level Conference Rooms (9th Floor), Los Angeles, CA 90020
Validated Parking: 523 Shatto Place, Los Angeles, CA 90020

Agenda and meeting materials will be posted on our website at https://hiv.lacounty.gov/membership-community-engagement-committee

TO JOIN THE MEETING VIRTUALLY, PLEASE USE THE LINK BELOW

https://bos-lacounty-gov.zoom.us/webinar/register/WN_1K0FfWFWTomp_u_tfboBow

PUBLIC COMMENTS

Public Comment is an opportunity for members of the public to address the Commission on an agenda item or other matter within the Commission's subject matter jurisdiction. Comments may be provided in person or submitted electronically to https://forms.cloud.microsoft/g/sTQqRq5dH7.

ACCOMMODATIONS

Requests for a translator, reasonable modification, or accommodation from individuals with disabilities, consistent with the Americans with Disabilities Act, are available free of charge with at least 72 hours' notice before the meeting date by contacting the Commission office at hivcomm@lachiv.org.

Visit us online: **http://hiv.lacounty.gov**

Get in touch: **hivcomm@lachiv.org**

Subscribe to the Commission's Email List: **https://tinyurl.com/y83ynuzt**

LOS ANGELES COUNTY COMMISSION ON HIV

510 S. Vermont Avenue, 14th Floor, Los Angeles, CA 90020
MAIN: 213.738.2816 | EMAIL: hivcomm@lachiv.org | WEB: https://hiv.lacounty.gov

(REVISED) AGENDA FOR THE MEETING OF THE MEMBERSHIP & COMMUNITY ENGAGEMENT COMMITTEE

THURSDAY, OCTOBER 22, 2026 | 10:00 AM—12:00 PM

510 S. Vermont Ave
Terrace Level Conference Room, Los Angeles, CA 90020
Validated Parking: 523 Shatto Place, Los Angeles, CA 90020

As a building security protocol, attendees entering the first-floor lobby must notify security personnel that they are attending a Commission on HIV meeting.

MEMBERS OF THE PUBLIC MAY JOIN VIRTUALLY BY REGISTERING HERE:
https://bos-lacounty-gov.zoom.us/webinar/register/WN_1K0FfWFWTomp_u_tfboBow

COMMITTEE CO-CHAIRS: Ish Herrera and Vilma Mendoza

AGENDA POSTED: October 15, 2026

PUBLIC COMMENT: Public Comment is an opportunity for members of the public to comment on an agenda item, or any item of interest to the public, before or during the Commission's consideration of the item, that is within the subject matter jurisdiction of the Commission. Public Comment is limited to two minutes each and will be made part of the official record. Public Comment may be provided in person or submitted electronically to https://forms.cloud.microsoft/g/sTQqRq5dH7 .

ACCOMMODATIONS: Interpretation services for the hearing impaired and translation services for languages other than English are available free of charge with at least 72 hours' notice before the meeting date. To arrange for these services, please contact the Commission office at hivcomm@lachiv.org or leave a voicemail at 213.738.2816.

Los servicios de interpretación para personas con impedimento auditivo y traducción para personas que no hablan inglés están disponibles sin costo. Para pedir estos servicios, póngase en contacto con Oficina de la Comisión al (213) 738-2816 (teléfono), o por correo electrónico a HIVComm@lachiv.org, por lo menos setenta y dos horas antes de la junta.

SUPPORTING DOCUMENTATION: Supporting documents are available on the Commission's website https://hiv.lacounty.gov/meetings.

1. **ADMINISTRATIVE MATTERS**

A. Call to Order and Roll Call 10:00 AM—10:05 AM

B. Code of Conduct and Meetings Guidelines/Reminders 10:05 AM—10:10 AM

C. Approval of the Agenda **MOTION #1** 10:10 AM—10:12 AM

D. Approval of Prior Meeting Minutes **MOTION #2** 10:12 AM—10:15 AM

2. **PUBLIC COMMENT** 10:15 AM—10:20 AM

Opportunity for members of the public to address the Commission on agenda items or other matters within the subject matter jurisdiction of the Commission. Public Comment may be provided in person or submitted electronically to https://forms.cloud.microsoft/g/sTQqRq5dH7.

3. **COMMITTEE NEW BUSINESS ITEMS** 10:20 AM—10: 25 AM

Opportunity for Committee members to recommend new business items for the full body or a committee level discussion on non-agendized matters not posted on the agenda, to be discussed and (if requested) placed on the agenda for action at a future meeting, or matters requiring immediate action because of an emergency situation, or where the need to take action arose subsequent to the posting of the agenda.

4. **REPORTS**

A. Commission on HIV (COH) Staff Report 10:25 AM—10:30 AM

(1) Operational and Commission Updates

B. Co-Chairs Report 10:30 AM – 10:35 AM

1) Welcome New Members
   - Dr. Anthony Mills
   - Paola Buenrostro
   - Malik Henry
2) 2026 Work Plan Review
3) 2026 Training Schedule Updates

5. **MEMBERSHIP MANAGEMENT** 10: 35 AM – 10:50 AM

A. Attendance | Mini-Training

B. Membership Applications | Update

(1) New Member Applicant | James Kelly **MOTION #3**

(2) Standards & Best Practices Committee-Only Member | Dejon Smith **MOTION #4**

6. **DISCUSSION** 10:50 AM—11:10 AM

Review Membership Size and Limits

7. **POLICY AND PROCEDURES** 11:10 AM—11:45 AM

A. Priority Setting and Resource Allocations (PSRA) Framework

MOTION #5

B. COH Policy and Procedures

(1) 08.3204 – Commission and Committee Meeting Absences

MOTION #6

(2) 09.1007 – Non-Commission Committee Appointments

MOTION #7

(3) 09.4205 – Commission Membership Evaluation, Nomination and Approval Process

MOTION #8

C. Policies Review| Next Steps

8. **RECRUITMENT, RETENTION, and ENGAGEMENT** 11:45 AM – 11:55 AM

A. Recruitment Strategies for Vacant Seats

B. Outreach & Engagement Updates

9. **NEXT STEPS** 11:55 AM—11:57 AM

A. Task/Assignment Recap

B. Agenda Development for the Next Meeting

10. **ANNOUNCEMENTS** 11:57 AM—12:00 PM

Opportunity for members of the public and Commission members to announce community events, workshops, trainings, and other related activities. Announcements will follow the same protocols as Public Comment.

11. **ADJOURNMENT** **12:00PM**

PROPOSED MOTION(S)/ACTION(S)	
MOTION #1:	Approve the agenda order, as presented or revised.
MOTION #2:	Approve the prior Committee meeting minutes, as presented or revised.
MOTION #3:	Recommend applicant, James Kelly, for full Commission membership and forward the application to the Executive Committee for approval.
MOTION #4:	Approve Standards & Best Practices Committee-Only Member, DeJohn Smith, and forward to the Executive Committee for approval.
MOTION #5:	Approve the Priority Setting and Resource Allocations (PSRA) Framework, as presented or revised, and forward to the Executive Committee meeting for recommendation to the full Commission.
MOTION #6:	Approve proposed revisions to policy 08.3204 – Commission and Committee Meeting Absences, as presented or revised, and forward to the Executive Committee meeting for recommendation to the full Commission.
MOTION #7:	Approve proposed revisions to policy 09.1007 – Non-Commission Committee Appointments, as presented or revised, and forward to the Executive Committee meeting for recommendation to the full Commission.

MOTION #8:	Approve proposed revisions to policy 09.4205 – Commission Membership Evaluation, Nomination and Approval Process, as presented or revised, and forward to the Executive Committee meeting for recommendation to the full Commission.

MEMBERSHIP & COMMUNITY ENGAGEMENT COMMITTEE MEMBERSHIP		
Jayda	Arrington	Committee Member
Stevie	Bieneman	Alternate
Ceasar	Corona	Social & Housing Service Providers
Erika	Davies	City of Pasadena Representative – Committee Member
Dahlia	Alé-Ferlito	City of Los Angeles Representative – Committee Member
Joaquin	Gutierrez	Committee Member
Ish	Herrera	Unaffiliated Representative - At Large #1
Angela	Hunt	Unaffiliated Representative - SPA 6
TJ	Griffin, LMSW	Mental Health Providers
Preston	Locklear	Committee Member
Kiante	McKinley, DSW, LCSW	Committee Member
Vilma	Mendoza	Unaffiliated Representative - SPA 7
Anthony	Mills, MD	Health & Hospital Planning Agencies
Dontá	Morrison, PhD	Alternate
Sadie	Mullen	Committee Member
Kevin	Nguyen	Committee Member
Ujuonu	Nwizu	Committee Member
David	Cerda Orozco	Committee Member
Elizabeth	Pacheco	Committee Member
David	Rojas	Committee Member
Ishmael	Salamanca	City Of Long Beach Representative – Committee Member
Christopher	Webb	Alternate
Jonathan	Weedman	Board of Supervisors Office #5 Representative
David	Valenzuela	Committee Member - ***LOA***
Quorum = 12		

LOS ANGELES COUNTY
COMMISSION ON HIV

Hybrid Meeting Guidelines

(Updated 4.27.26)

- ☐ This meeting is a **Brown-Act meeting** and is being recorded.
  - Turn off your ringers/notifications on your smart devices so as not to disrupt the meeting.
  - Your voice is important and we want to ensure that it is captured accurately on the record. Please be respectful of one another and minimize crosstalk.

- ☐ The **meeting packet** can be found on the Commission's website at https://hiv.lacounty.gov/meetings/. Hard copies of materials will not be provided in compliance with the County's green initiative to recycle and reduce waste.

- ☐ Please comply with the **Commission's Code of Conduct** located in the meeting packet.

- ☐ **Public Comment** can be submitted in person or via email at hivcomm@lachiv.org. *Please indicate your name, the corresponding agenda item, and whether you would like to state your public comment during the meeting; if so, staff will call upon you appropriately. Public comments are limited to two minutes per agenda item. All public comments will be made part of the official record.*

- ☐ For individuals joining in person, we respectfully ask that you **not simultaneously log into the virtual option of this meeting** to mitigate any potential streaming interference for those joining virtually.

- ☐ Attendees joining online should **remain muted** unless called upon.

- ☐ Commissioners and Committee-only members invoking **SB 707 for "Just Cause"** must communicate their intentions to staff no later than one hour before the meeting. Members requesting to join pursuant to SB 707 must have their audio and video on for the entire duration of the meeting and disclose whether there is a person over the age of 18 in the room in order to be counted toward quorum and have voting privileges.

- ☐ Members will be required to explicitly state their agency's **Ryan White Program Part A and CDC HIV Prevention conflicts of interest** on the record. A list of conflicts can be found in the meeting packet, courtesy of staff.

If you experience challenges in logging into the virtual meeting, please contact Commission staff at hivcomm@lachiv.org for assistance. Please note that staff may have limited availability during meetings and responses may be delayed. We appreciate your patience and will follow up as soon as we're able.

LOS ANGELES COUNTY
COMMISSION ON HIV

Meeting FAQ

Quick guide for joining Commission hybrid meetings

We are moving from WebEx to Zoom.
Same meeting, same community space ... just a new virtual room.

LINK

1. Join with the link

Click the Zoom link in the agenda or meeting notice. No registration is needed unless the notice says otherwise.

MUTE

2. Start on mute

Please keep your mic muted until it is your turn to speak. This keeps the audio clear for everyone.

HAND

3. Public comment

When public comment opens, use Raise Hand. Staff will call on speakers and help with unmuting.

CHAT

4. Chat + helpful links

Chat may be used for meeting links, reminders, or support. Please keep comments respectful and meeting-related.

CC

5. Captions + access

Look for CC or Show Captions. For interpretation or other access needs, contact staff as early as possible.

HELP

6. Quick fixes

No sound? Click Join Audio. Video issue? Click Start Video. Connection trouble? Leave and rejoin, or call in by phone if listed.

Mute/Unmute	Start Video	Raise Hand	Chat	Captions
Bottom left	Bottom left	Reactions or More	Toolbar	CC / Show Captions

Quick reminder: Zoom is just the room. Your voice and participation are still the most important part.

Questions? Email hivcomm@lachiv.org or check the meeting notice for call-in details.

LOS ANGELES COUNTY
COMMISSION ON HIV

510 S. Vermont Ave 14th Floor • Los Angeles, CA 90020 • TEL (213) 738-2816 • FAX (213) 637-6748
HIVCOMM@LACHIV.ORG • http://hiv.lacounty.gov

Approved by COH 6/8/23

CODE OF CONDUCT

APPROVED BY OPERATIONS COMMITTEE ON 05/25/23; COH 06/08/23
Approved (11/12/1998); Revised (2/10/2005; 9/6/2005); **Revised (4/11/19; 3/3/22, 3/23/23; 5/30/23)**

The Commission on HIV welcomes commissioners, guests, and the public into a space where people of all opinions and backgrounds are able to contribute. In this space, we challenge ourselves to be self-reflective and committed to an ongoing understanding of each other and the complex intersectionality of the lives we live. We create a safe environment where we celebrate differences while striving for consensus in the fights against our common enemies: HIV and STDs. We build trust in each other by having honest, respectful, and productive conversations. As a result, the Commission has adopted and is consistently committed to implementing the following guidelines for Commission, committee, and associated meetings.

All participants and stakeholders should adhere to the following:

1) **We approach all our interactions with compassion, respect, and transparency.**
2) **We respect others' time by starting and ending meetings on time, being punctual, and staying present.**
3) **We listen with intent, avoid interrupting others, and elevate each other's voices.**
4) **We encourage all to bring forth ideas for discussion, community planning, and consensus.**
5) **We focus on the issue, not the person raising the issue.**
6) **Be flexible, open-minded, and solution-focused.**
7) **We give and accept respectful and constructive feedback.**
8) **We keep all issues on the table (no "hidden agendas"), avoid monopolizing discussions and minimize side conversations.**
9) **We have no place in our deliberations for racist, sexist, homophobic, transphobic, and other discriminatory statements, and "-isms" including misogyny, ableism, and ageism.**
10) **We give ourselves permission to learn from our mistakes.**

In response to violation of the Code of Conduct which results in meeting disruption, Include provisions of SB 1100 which states in part, ". . . authorize the presiding member of the legislative body conducting a meeting or their designee to remove, or cause the removal of, an individual for disrupting the meeting . . . . Removal to be preceded by a warning to the individual by the presiding member of the legislative body or their designee that the individual's behavior is disrupting the meeting and that the individual's failure to cease their behavior may result in their removal." Complaints related to internal Commission matters such as alleged violation of the Code of Conduct or other disputes among members are addressed and resolved in adherence to Policy/Procedure #08.3302." (Commission Bylaws, Article VII, Section 4.)



We're Listening

share your concerns with us.

HIV + STD Services Customer Support Line

(800) 260-8787

Why should I call?

The Customer Support Line can assist you with accessing HIV or STD services and addressing concerns about the quality of services you have received.

Will I be denied services for reporting a problem?

No. You will not be denied services. Your name and personal information can be kept confidential.

Can I call anonymously?

Yes.

Can I contact you through other ways?

Yes.

By Email:
dhspsupport@ph.lacounty.gov

On the web:
http://publichealth.lacounty.gov/dhsp/QuestionServices.htm

County of Los Angeles Public Health
Division of HIV and STD Programs





Estamos Escuchando

Comparta sus inquietudes con nosotros.

Servicios de VIH + ETS
Línea de Atención al Cliente

(800) 260-8787

¿Por qué debería llamar?

La Línea de Atención al Cliente puede ayudarlo a acceder a los servicios de VIH o ETS y abordar las inquietudes sobre la calidad de los servicios que ha recibido.

¿Se me negarán los servicios por informar de un problema?

No. No se le negarán los servicios. Su nombre e información personal pueden mantenerse confidenciales.

¿Puedo llamar de forma anónima?

Si.

¿Puedo ponerme en contacto con usted a través de otras formas?

Si.

Por correo electronico:
dhspsupport@ph.lacounty.gov

En el sitio web:
http://publichealth.lacounty.gov/dhsp/QuestionServices.htm

County of Los Angeles
Public Health
Division of HIV and STD Programs



LOS ANGELES COUNTY
COMMISSION ON HIV

COMMISSION MEMBER "CONFLICTS-OF-INTEREST"

Updated 10/20/26

In accordance with the Ryan White Program (RWP), conflict of interest is defined as any financial interest in, board membership, current or past employment, or contractual agreement with an organization, partnership, or any other entity, whether public or private, that receives funds from the Ryan White Part A program. These provisions also extend to direct ascendants and descendants, siblings, spouses, and domestic partners of Commission members and non-Commission Committee-only members. Based on the RWP legislation, HRSA guidance, and Commission policy, it is mandatory for Commission members to state all conflicts of interest regarding their RWP Part A/B and/or CDC HIV prevention-funded service contracts prior to discussions involving priority-setting, allocation, and other fiscal matters related to the local HIV continuum. Furthermore, Commission members must recuse themselves from voting on any specific RWP Part A service category(ies) for which their organization hold contracts.***An asterisk next to member's name denotes affiliation with a County subcontracted agency listed on the addendum.***

COMMISSION & COMMITTEE-ONLY MEMBERS		ORGANIZATION	SERVICE CATEGORIES
ALMANZAN	**Gerardo**	No affiliation	No Ryan White or prevention contracts
VAZQUEZ ALVAREZ	**Leo**	LACADA	No Ryan White or prevention contracts
ARRELANO	**Oscar**	Homeless Outreach Program Integrated Care System (HOPICS)	No Ryan White or prevention contracts
ARRINGTON	**Jayda**	Unaffiliated representative	No Ryan White or prevention contracts
BALLESTEROS	**Al**	JWCH, INC.	Benefits Specialty
			Core HIV Medical Services - AOM; MCC & PSS
			Mental Health
			Oral Health
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			HTS - Storefront
			HTS - Syphilis, DX Link TX - CSV
			Biomedical HIV Prevention
			Data to Care Services
			Medical Transportation Services
BARAJAS	**Jeronimo**	Unaffiliated Member	No Ryan White or prevention contracts
BIENEMAN	**Stevie**	AIDS Healthcare Foundation	Core HIV Medical Services - AOM; MCC & PSS
			Benefits Specialty
			Mental Health
			Oral Healthcare Services
			STD-Screening, Diagnosis, & Treatment
			HIV Testing Storefront
			Sexual Health Express Clinics (SHEx-C)
			Transportation Services
			HIV and STD Prevention in Long Beach
BLEA	**Leroy**	California Department of Public Health, Office of AIDS	Part B Grantee

COMMISSION & COMMITTEE-ONLY MEMBERS		ORGANIZATION	SERVICE CATEGORIES
BOLAN	**Robert**	LA LGBT Center	Core HIV Medical Services - AOM; MCC & PSS
			Vulnerable Populations (YMSM)
			Vulnerable Populations (Trans)
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			HTS - Storefront
			HTS - Social and Sexual Networks
			Biomedical HIV Prevention Services
			Medical Transportation Services
BROWN	**Jasmine**	Oasis Clinic (Charles R. Drew University/Drew CARES)	Core HIV Medical Services - PSS
			HTS - Storefront
			HTS - Social and Sexual Networks
BUENROSTRO	**Paola**	East Los Angeles Women's Center	High Impact HIV Prevention
CIELO	**Mikhaela**	Los Angeles General Hospital	No Ryan White or prevention contracts
COPELAND	**Raniyah**	Equity Impact Solutions	No Ryan White or prevention contracts
CORONA	**Anthony**	Watt's Healthcare	Core HIV Medical Services - MCC & PSS
			Biomedical HIV Prevention Services
			Oral Health
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			Medical Transportation Services
CORONA	**Ceasar**	Tarzana Treatment Center	Benefit Specialty
			Core HIV Medical Services - AOM; MCC & PSS
			Intensive Care Management
			Substance Use Transitional Hsg
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			HTS - Storefront
			HERR
			Biomedical HIV Prevention Services
			Medical Transportation Services
			HIV Testing and Viral Hepatitis Services
CROSS	**Johnny**	Men's Health Foundation	Biomedical HIV Prevention Services
			Core HIV Services (AOM, MCC, & PSS)
			Promoting Healthcare Engagement Among Vulnerable Populations
			Sexual Health Express Clinics (SHEx-C)
			Transportation Services
			Data to Care Services

COMMISSION & COMMITTEE-ONLY MEMBERS		ORGANIZATION	SERVICE CATEGORIES
DAVIES	**Erika**	City of Pasadena	No Ryan White or prevention contracts
DOLAN	**Caitlyn**	Men's Health Foundation	Biomedical HIV Prevention Services
			Core HIV Services (AOM, MCC, & PSS)
			Promoting Healthcare Engagement Among Vulnerable Populations
			Sexual Health Express Clinics (SHEx-C)
			Transportation Services
			Data to Care Services
ALE-FERLITO	**Dahlia**	City of Los Angeles AIDS Coordinator	No Ryan White or prevention contracts
FRAMES	**Arlene**	Unaffiliated representative	No Ryan White or prevention contracts
GAMBOA	**Robert**	LA LGBT Center	Core HIV Medical Services - AOM; MCC & PSS
			Vulnerable Populations (YMSM)
			Vulnerable Populations (Trans)
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			HTS - Storefront
			HTS - Social and Sexual Networks
			Biomedical HIV Prevention Services
			Medical Transportation Services
GERSH	**Lauren**	APLA Health & Wellness	Benefit Specialty
			Core HIV Medical Services - AOM; MCC & PSS
			Intensive Case Managemenet Services
			Nutrition Support (Food Bank/Pantry Service)
			Oral Health
			STD-Ex.C
			High Impact Prevention
			Biomedical HIV Prevention Services
			Medical Transportation Services
			Data to Care Services
			Residential Facility For the Chronically Ill (RCFCI)
GONZALEZ	**Felipe**	Unaffiliated representative	No Ryan White or Prevention Contracts
GREEN	**Joseph**	Unaffiliated representative	No Ryan White or prevention contracts
GRIFFEN	**TJ**	Men's Health Foundation	Biomedical HIV Prevention Services
			Core HIV Services (AOM, MCC, & PSS)
			Promoting Healthcare Engagement Among Vulnerable Populations
			Sexual Health Express Clinics (SHEx-C)
			Transportation Services

COMMISSION & COMMITTEE-ONLY MEMBERS		ORGANIZATION	SERVICE CATEGORIES
			Data to Care Services
GUTIERREZ	**Joaquin**	REACH LA	HTS - Social and Sexual Networks
HARRIS	**Darryn**	St. John's Well Child and Family Center (SJW)	Core HIV Medical Services - AOM; MCC & PSS
			Oral Health
			HTS - Social and Sexual Networks
			Mental Health
			Biomedical HIV Prevention Services
			Medical Transportation Services
HENRY	**Malik**	AMAAD Institute	No Ryan White or prevention contracts
HUNT	**Angela**	Unaffilated Member	No Ryan White or prevention contracts
HERRERA	**Ismael "Ish"**	Unaffiliated representative	No Ryan White or prevention contracts
JOHNSON	**LeiLani**	Unaffilited Member	No Ryan White or prevention contracts
JOHNSON	**Stephanie**	Men's Health Foundation	Biomedical HIV Prevention Services
			Core HIV Services (AOM, MCC, & PSS)
			Promoting Healthcare Engagement Among Vulnerable Populations
			Sexual Health Express Clinics (SHEx-C)
			Transportation Services
			Data to Care Services
LARA	**Roberto**	AMAAD	No Ryan White or prevention contracts
LESTER	**Rob**	Men's Health Foundation	Biomedical HIV Prevention Services
			Core HIV Services (AOM, MCC, & PSS)
			Promoting Healthcare Engagement Among Vulnerable Populations
			Sexual Health Express Clinics (SHEx-C)
			Transportation Services
			Data to Care Services
LOCKLEAR	**Preston**	LA LGBT Center	Core HIV Medical Services - AOM; MCC & PSS
			Vulnerable Populations (YMSM)
			Vulnerable Populations (Trans)
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			HTS - Storefront
			HTS - Social and Sexual Networks
			Biomedical HIV Prevention Services
			Medical Transportation Services
MARTINEZ	**Miguel**	No affiliation	No Ryan White or prevention contracts

COMMISSION & COMMITTEE-ONLY MEMBERS		ORGANIZATION	SERVICE CATEGORIES
MATTERN	**Eric**	Tarzana Treatment Center	Benefit Specialty
			Core HIV Medical Services - AOM; MCC & PSS
			Intensive Care Management
			Substance Use Transitional Hsg
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			HTS - Storefront
			HERR
			Biomedical HIV Prevention Services
			Medical Transportation Services
			HIV Testing and Viral Hepatitis Services
MCKINLEY	**Kiante**	AIDS Healthcare Foundation (AHF)	Core HIV Services (Ambulatory Outpatient Medical (AOM), Medical Care Coordination (MCC) and & Provider Support Services (PSS))
			Benefits Specialty
			Mental Health
			Oral Healthcare Services
			STD-Screening, Diagnosis, and Treatment
			HIV Testing Storefront
			Sexual Health Express Clinics (SHEx-C)
			Transportation Services
			HIV and STD Prevention in Long Beach
MENDOZA	**Vilma**	Unaffiliated representative	No Ryan White or prevention contracts
MILLER	**Jack**	Unaffiliated Member	No Ryan White or prevention contracts
MILLS	**Tony**	Men's Health Foundation	Biomedical HIV Prevention
			Core HIV Services (AOM, MCC, & PSS)
			Promoting Healthcare Engagement Among Vulnerable Populations
			Sexual Health Express Clinics (SHEx-C)
			Transportation Services
			Data to Care Services
MORRISON	**Donta**	UCLA CARE	No Ryan White or prevention contracts
MULLEN	**Sadie**	No affiliation	No Ryan White or prevention contracts
NASH	**Paul**	University of Southern California	No Ryan White or prevention contracts
NGUYEN	**Kevin**	Saban Community Clinic	No Ryan White or prevention contracts

COMMISSION & COMMITTEE-ONLY MEMBERS		ORGANIZATION	SERVICE CATEGORIES
NELSON	**Katja**	APLA Health & Wellness	Benefits Specialty
			Core HIV Medical Services - AOM; MCC & PSS
			Intensive Case Managemenet Services
			Nutrition Support (Food Bank/Pantry Service)
			Oral Health
			STD-Ex.C
			HERR
			Biomedical HIV Prevention Services
			Medical Transportation Services
			Data to Care Services
			Residential Facility For the Chronically Ill (RCFCI)
NWIZU	**Ujuonu**	Public Health Alliance	No Ryan White or prevention contracts
CERDA OROZCO	**David**	No affiliation	No Ryan White or prevention contracts
PACHECO	**Elizabeth**	Tarzana Treatment Center	Benefit Specialty
			Core HIV Medical Services - AOM; MCC & PSS
			Intensive Case Managemenet Services
			Substance Use Transitional Hsg
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			HTS - Storefront
			HERR
			Biomedical HIV Prevention Services
			Medical Transportation Services
			HIV Testing and Viral Hepatitis Services
PATEL	**Byron**	Los Angeles LGBT Center	Core HIV Medical Services - AOM; MCC & PSS
			Vulnerable Populations (YMSM)
			Vulnerable Populations (Trans)
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			HTS - Storefront
			HTS - Social and Sexual Networks
			Biomedical HIV Prevention Services
			Medical Transportation Services
PERÉZ	**Mario**	Los Angeles County, Department of Public Health, Division of HIV and STD Programs	Ryan White/CDC Grantee
PLEASANTS	**Shawn**	Unaffiliated Member	No Ryan White or prevention contracts
ROJAS	**David**	LAC Consumer & Business Affairs	No Ryan White or prevention contracts

COMMISSION & COMMITTEE-ONLY MEMBERS		ORGANIZATION	SERVICE CATEGORIES
SALAMANCA	**Ismael**	City of Long Beach	Benefits Specialty
			Biomedical HIV Prevention Services
			Transportation Services
SANCHEZ-RAMOS	**Emmanuel**	APLA Health	Benefit Specialty
			Core HIV Medical Services - AOM; MCC & PSS
			Intensive Case Managemenet Services
			Nutrition Support (Food Bank/Pantry Service)
			Oral Health
			STD - ExC
			High Impact Prevention
			Biomedical HIV Prevention Services
			Medical Transportation Services
			Data to Care Services
			Residential Facility For the Chronically Ill (RCFCI)
SAN AGUSTIN	**Glen**	JWCH, INC.	Benefits Specialty
			Core HIV Medical Services - AOM; MCC & PSS
			Mental Health
			Oral Health
			STD Testing and STD Screening, Diagnosis & Treatment Services (STD-SDTS)
			HTS - Storefront
			HTS - Syphilis, DX Link TX - CSV
			Biomedical HIV Prevention Services
			Data to Care Services
			Medical Transportation Services
SAME-WEIL	**Nolan Ross**	Los Angeles Centers for Alcohol & Drug Abuse (L.A. CADA)	No Ryan White or prevention contracts
SANTIAGO	**Draya**	Unaffilited Member	No Ryan White or prevention contracts
SKELTON	**Maria**	No affiliation	No Ryan White or prevention contracts
SPENCER	**LaShonda**	Oasis Clinic (Charles R. Drew University/Drew CARES)	Core HIV Medical Services - PSS
			HTS - Storefront
			HTS - Social and Sexual Networks
WEBB	**Christopher**	REACH LA	HTS - Social and Sexual Networks

COMMISSION & COMMITTEE-ONLY MEMBERS		ORGANIZATION	SERVICE CATEGORIES
WEEDMAN	**Jonathan**	ViaCare Community Health	Biomedical HIV Prevention
			Core HIV Medical Services - AOM & MCC
VALENZUELA	**David**	LAC Department of Public Health	No Ryan White or prevention contracts
VOLBY	**Montana**	Unaffilited Member	No Ryan White or prevention contracts

LOS ANGELES COUNTY COMMISSION ON HIV

510 S. Vermont Avenue, 14th Floor, Los Angeles, CA 90020
MAIN: 213.738.2816 | EMAIL: hivcomm@lachiv.org | WEB: https://hiv.lacounty.gov

MINUTES FOR THE REGULAR MEETING OF THE MEMBERSHIP AND COMMUNITY ENGAGEMENT COMMITTEE

DATE: Thursday, August 27, 2026 from 10:00 AM—12:00 PM.

LOCATION: 510 S. Vermont Ave. Terrace Level Conference Room (9th Floor), Los Angeles, CA 90020

CALL TO ORDER: COH staff called the meeting to order at 10:02 AM.

CO-CHAIRS: Ismael Herrera and Vilma Mendoza.

SUPPORTING DOCUMENTATION: Supporting documents are available on the Commission's website https://hiv.lacounty.gov/membership-community-engagement-committee/.

MEMBERSHIP AND COMMUNITY ENGAGEMENT COMMITTEE MEMBERSHIP P = Present | A = Absent | EA = Excused Absence | SB707 = Remote Participation | PU = Public			
Jayda Arrington	P	Dontá Morrison	P
Stevie Bieneman	P	Sadie Mullen	A
Cesar Corona	P	Kevin Nguyen	P
Erika Davies	P	Ujuonu Nwizu	EA
Dahlia Ale-Ferlito	SB707	David Cerda Orozco	P
Joaquin Gutierrez	P	Elizabeth Pacheco	P
Ish Herrera	P	David Rojas	A
Angela Hunt	P	Ishmael Salamanca	P
TJ Griffin	P	Christopher Webb	P
Preston Locklear	P	Jonathan Weedman	EA
Kiante McKinley	P	David Valenzuela	EA
Vilma Mendoza	P		

ADMINISTRATIVE MATTERS	**MOTION #1**: Approval of the Agenda. *Approved by consensus.* **MOTION #2**: Approval of Prior Meeting Minutes. *Approved by consensus.*
PUBLIC COMMENT	There were no public comments.
COMMITTEE NEW BUSINESS ITEMS	Agendize future discussion regarding establishing membership caps/limits for committees.

REPORTS	**COMMISSION ON HIV (COH) STAFF REPORT** Interim Executive Director, Dawn McClendon, provided the following key updates: • The next Commission meeting is scheduled for September 10 at the California Endowment and is expected to be the final Commission meeting of the year, unless the Executive Committee determines that an additional meeting is necessary. • A planning work group will be formed to begin planning for the Annual Conference scheduled for February 11. Members will be invited to participate via an upcoming email. • The core training series has been completed. Commissioners were reminded to notify staff after reviewing the Priority Setting and Resource Allocations (PSRA) training to be eligible to vote at the September 10 Commission meeting on Program Years 36 and 37 priorities and reallocations. There will be additional capacity-building activities: (1) a knowledge assessment survey will be distributed in October to gather member feedback regarding engagement, training needs, and opportunities for improvement, (2) a virtual mini-training/refresher is planned for December, and (3) a Ryan White Community and Provider Knowledge Exchange is tentatively planned for December. The event would bring together clients, providers, and community members to increase awareness of the Ryan White program, available services, and how to access and navigate those services. • An all-day in-person Data Summit for which attendance is required for all full Commissioners and all Planning, Priorities & Allocations (PP&A) committee members. The summit will provide foundational information on data to support planning and decision-making. An upcoming all-day, in-person Data Summit is required for all full Commissioners and Planning, Priorities & Allocations (PP&A) Committee members. The summit will provide foundational data knowledge to support planning and decision-making. • There is an opportunity to assist with the Commission's social media accounts, including Facebook and Instagram. The goal is to strengthen the organization's social media presence and visibility. A small stipend and training would be provided. **CO-CHAIRS REPORT** The Committee is on track with its work plan and will continue working on policies and procedures. Staff reminded members that feedback was requested and encouraged members to respond.
MEMBERSHIP MANAGEMENT	**SEAT VACATES**

	The Committee approved motions to vacate the seats of two Standards and Best Practices (SBP) committee-only members, Leilani Johnson and Julia Santiago, after staff reported that there has been no communication or participation from either individual despite outreach by email and telephone, and no responses were received from either member after the formal attendance letters were issued. The seat vacate recommendations will be forwarded to the Executive Committee for review and approval and subsequently presented at the September 10 Commission meeting. **MOTION #3**: **Approve seat vacate for LeiLani Santiago, as presented or revised, and forward to the Executive Committee meeting for recommendation to the full Commission.** *Passed by consensus.* **MOTION #4**: **Approve seat vacate for Draya Santiago, as presented or revised, and forward to the Executive Committee meeting for recommendation to the full Commission.** *Passed by consensus.* **MEMBERSHIP APPLICATIONS** The Committee deliberated and discussed six (6) new membership applications, and made the following recommendations: **MOTION #5 – Dr. Anthony Mills**: **Recommend the applicant for full Commission membership and forward the application to the Executive Committee for approval; refer the application for committee-only membership consideration; or determine that the application will not move forward.** **ROLL CALL VOTE: J. Arrington (Abstain), S. Bieneman (Yes), C. Corona (Yes), E. Davies (Yes), D. Ale-Ferlito (Yes), J. Gutierrez (Yes), A. Hunt (Yes), TJ Griffin (Abstain), P. Locklear (Yes), K. McKinley (Yes), D. Morrison (Yes), K. Nguyen (Yes), D. Cerda Orozco (No), E. Pacheco (Yes), I. Salamanca (Yes), C. Webb (Yes).** ***Yes = 13, No= 1, Abstain = 2.*** *Application approved for seat #7, Health & Hospital Planning Agencies, and moves forward to the Executive Committee.* **MOTION #6 – Salvador Silva Velasco**: **Recommend the applicant for full Commission membership and forward the application to the Executive Committee for approval; refer the application for committee-only membership consideration; or determine that the application will not move forward.** **ROLL CALL VOTE: J. Arrington (No), S. Bieneman (Abstain), C. Corona (Yes), E. Davies (No), D. Ale-Ferlito (No), J. Gutierrez (No), A. Hunt (No), TJ Griffin (Abstain), P. Locklear (No), K. McKinley (Abstain), D. Morrison (Yes), K. Nguyen (Abstain), D. Cerda Orozco (No), E.**

	Pacheco (Yes), I. Salamanca (Yes), C. Webb (Yes). ***Yes = 5, No= 7, Abstain = 4.*** *Application considered for MCE committee-only. Application does not move forward.* **MOTION #7 – Jeffrey Young: Recommend the applicant for full Commission membership and forward the application to the Executive Committee for approval; refer the application for committee-only membership consideration; or determine that the application will not move forward.** **ROLL CALL VOTE: J. Arrington (No), S. Bieneman (Yes), C. Corona (Yes), E. Davies (Yes), D. Ale-Ferlito (Abstain), J. Gutierrez (Abstain), A. Hunt (Yes), TJ Griffin (No), P. Locklear (Yes), K. McKinley (Abstain), D. Morrison (Yes), K. Nguyen (Yes), D. Cerda Orozco (No), E. Pacheco (Yes), I. Salamanca (Yes), C. Webb (No).** ***Yes = 9, No= 4, Abstain = 3.*** *Application approved and moves forward to the Executive Committee. Seat to be determined.* **MOTION #8 – Demetrius Baxter: Recommend the applicant for full Commission membership and forward the application to the Executive Committee for approval; refer the application for committee-only membership consideration; or determine that the application will not move forward.** **ROLL CALL VOTE: J. Arrington (No), S. Bieneman (No), C. Corona (No), E. Davies (Yes), D. Ale-Ferlito (No), J. Gutierrez (No), A. Hunt (No), TJ Griffin (No), P. Locklear (No), K. McKinley (No), D. Morrison (No), K. Nguyen (No), D. Cerda Orozco (No), E. Pacheco (No), I. Salamanca (No), C. Webb (No).** ***Yes = 0, No= 16, Abstain = 0.*** *Application considered for an Unaffiliated Consumer seat. Application does not move forward.* **MOTION #9 – Paola Buenrostro: Recommend the applicant for full Commission membership and forward the application to the Executive Committee for approval; refer the application for committee-only membership consideration; or determine that the application will not move forward.** **ROLL CALL VOTE: J. Arrington (Yes), S. Bieneman (Yes), C. Corona (Yes), E. Davies (Yes), D. Ale-Ferlito (Yes), J. Gutierrez (Yes), A. Hunt (Yes), TJ Griffin (Yes), P. Locklear (Yes), K. McKinley (Yes), D. Morrison (Yes), K. Nguyen (Yes), D. Cerda Orozco (Yes), E. Pacheco (Yes), I. Salamanca (Yes), C. Webb (Yes).** ***Yes = 16, No= 0, Abstain = 0.*** *Application approved for seat #14, Other Federally Funded HIV Programs, and moves forward to the Executive Committee.*

	MOTION #10 – Malik Henry: Recommend the applicant for full Commission membership and forward the application to the Executive Committee for approval; refer the application for committee-only membership consideration; or determine that the application will not move forward. **ROLL CALL VOTE: J. Arrington (Yes), S. Bieneman (Yes), C. Corona (Yes), E. Davies (Yes), D. Ale-Ferlito (Yes), J. Gutierrez (Yes), A. Hunt (Yes), TJ Griffin (Yes), P. Locklear (Yes), K. McKinley (Yes), D. Morrison (Yes), K. Nguyen (Yes), D. Cerda Orozco (Yes), E. Pacheco (Yes), I. Salamanca (Yes), C. Webb (Yes). *Yes = 16, No= 0, Abstain = 0.*** *Application approved for an alternate seat and moves forward to the Executive Committee.*
DISCUSSION ITEMS	**CAUCUS STRUCTURE REVIEW AND NEXT STEPS** Staff clarified that the current structure includes the Consumer, Aging, Black, Transgender, and Women's Caucuses, with consideration also being given to establishing a Latinx/Latine Caucus. Staff noted that discussions about restructuring have occurred for several years, with concerns including limited participation, staff capacity, siloed discussions, and overlap among caucus activities. Staff emphasized that restructuring the caucuses would not eliminate or limit community voices and representation. One option would retain the Consumer Caucus while consolidating the population-specific caucuses into a broader Community Caucus. Under this model, workgroups could address specific community priorities and initiatives, with their work connected to the Commission and brought forward through the appropriate committees. Staff also clarified that caucuses are not statutorily required. Rather, the Commission must maintain mechanisms to ensure consumer voices and community perspectives are represented in its planning and decision-making. Caucuses are intended to extend the Commission's community reach and elevate population-specific concerns. Members discussed several options: • Maintain separate population-specific caucuses with improved communication and coordination. • Retain the Consumer Caucus and establish a broader Community Caucus, supported by workgroups or population-specific listening sessions.

	• Consolidate the caucuses and use listening sessions or ad hoc workgroups to address population-specific priorities as needed. Members noted that any new structure could be piloted and evaluated rather than treated as permanent. A six-month review period was suggested to assess participation and effectiveness and determine whether modifications were needed. A motion was introduced to establish a Community Caucus while maintaining a separate Consumer Caucus, with workgroups available to address specific areas of work. The motion was clarified as a modification of Option 1. **MOTION #11, OPTION 1: Approve Establishing a Community Caucus While Maintaining a Separate Consumer Caucus or Option 2: Maintain Separate Population-Specific Caucuses with Improved Communication and Coordination.** **ROLL CALL VOTE: J. Arrington (2), S. Bieneman (1), C. Corona (Abstain), E. Davies (1), D. Ale-Ferlito (Abstain), J. Gutierrez (1), A. Hunt (1), TJ Griffin (2), P. Locklear (1), K. McKinley (2), D. Morrison (2), K. Nguyen (1), D. Cerda Orozco (2), E. Pacheco (1), I. Salamanca (1), C. Webb (1). *Option 1 = 9, Option 2= 5, Abstain = 2.* *Option 1 to approve establishing a Community Caucus while maintaining a separate Consumer Caucus passes.***
POLICY AND PROCEDURES	Staff reminded members that the following policies had been distributed for review: • 08.3204-Commission and Committee Meeting Absences • 09.1007-Non-Commission Committee Appointments • 09.4205- Commission Membership Evaluation, Nomination and Approval Process. Members who had not yet submitted revisions were asked to do so. Staff indicated that additional policy updates would follow after the current review process is completed.
RECRUITMENT, RETENTION, AND ENGAGEMENT	Staff provided updates on recruitment, retention, and engagement activities, including the All of Us Research Program, a long-term initiative collecting health and lifestyle data from a diverse participant population to advance research on health and disease; registration is open for Models of Pride, noting an opportunity to strengthen the Commission's engagement with youth and young adults; USCHA activities, the Taste of Soul event, with additional information to be provided as available. Staff discussed the upcoming Ryan White Community and Provider Knowledge Exchange and encouraged Community Caucus members to participate in the planning of this event. Staff emphasized that broader community

	involvement would strengthen the planning process and advised members to watch for an email with additional information.
ANNOUNCEMENTS	Staff shared information about a confidential support group organized by the Los Angeles LGBT Center for Spanish-speaking individuals living with HIV. The group provides a space for participants to connect, share experiences, receive support, and learn from one another. Reservations are required, and additional information was distributed to members. Committee members also shared the following upcoming community events and opportunities: • Latinx Annual Conference: Registration is open, with priority given to community members. Agency participation should be limited to approximately one or two representatives per agency. • Conference Resource Fair: Organizations may participate through tabling. Participating organizations are asked to provide a $50 gift card, which will be raffled to community participants. • Latino Mixer: A mixer associated with USCHA is scheduled for September 18. • International Overdose Awareness Day: Long Beach will host activities, including a resource fair at MacArthur Park on Saturday from 10:00 a.m. to 2:00 p.m. Services and resources will include HIV and substance-use-related testing, food, treatment and recovery resources, and support for substance use disorders.
ACTION ITEMS	
RESPONSIBLE PARTY	**ITEM**
COH STAFF	• Staff will solicit volunteers for the Annual Conference planning workgroup.
MCE COMMITTEE	• Commissioners who have not completed the required training must do so before the September 10 meeting. • Register for and attend the Data Summit. • Individuals interested in the Commission's social media opportunity should contact staff. • Review and submit comments on the policies and procedures. • Monitor emails for upcoming opportunities and assignments. • Bring potential new members into the Commission and share information about opportunities to participate. • Consider recruitment strategies and identify individuals who may be interested in joining.

	• Prepare for discussion at the next meeting regarding whether committees should be capped.
NEXT MEETING	The next Membership and Community Engagement Committee meeting is Thursday, October 22, 2026, from 10:00 AM—12:00 PM at the Vermont Corridor.
ADJOURNMENT	The meeting adjourned at 12:41 PM.

PREPARED BY: Dr. Sonja Wright	**APPROVAL DATE:**

LOS ANGELES COUNTY
COMMISSION ON HIV

CONFLICT OF INTEREST FORM

SCAN ME

Membership & Community Engagement (MCE) Committee
2026 Workplan

PURPOSE

To identify and organize the activities and priorities the Membership & Community Engagement (MCE) Committee (fka Operations Committee) will lead and advance during the Ryan White Program Year March 1, 2026 – February 28, 2027, in alignment with the Commission's restructured governance model, adopted Bylaws, and integrated HIV planning responsibilities. *The 2026 Workplan and Meeting Calendar are subject to change.*

CRITERIA

Activities included in this workplan are selected based on their ability to:

1. Reflect the core governance, membership, and community engagement functions of the Commission and the MCE Committee;
2. Support and inform the jurisdiction's Integrated HIV Prevention and Care Plan and related needs assessment activities; and
3. Align with COH staff and member capacity, recognizing realistic commitments and a bi-monthly meeting schedule.

CORE COMMITTEE RESPONSIBILITIES

The Membership & Community Engagement (MCE) Committee is responsible for:

1. Developing, conducting, and overseeing ongoing orientation, training, leadership development, and mentorship activities for Commissioners, Committee-only members, and the public related to the Commission, integrated HIV planning, and HIV service systems;
2. Reviewing, recommending, and supporting the implementation of Commission membership-related policies and procedures, including those required by the restructured Bylaws;
3. Coordinating ongoing community outreach, public awareness, and engagement activities to support transparency, participation, and meaningful community involvement in Commission work;

SUBJECT TO CHANGE

4. Leading recruitment, screening, scoring, and evaluation of applications for Commission membership and recommending nominations in accordance with the Open Nominations Process; and
5. Supporting and guiding community-informed needs assessment and engagement activities in coordination with the Planning, Priorities & Allocations (PP&A) Committee as part of the Integrated HIV Prevention and Care Plan.

ACRONYMS	
• **COH:** Commission on HIV • **DHSP:** Division on HIV and STD Programs • **BOS:** Board of Supervisors • **HRSA:** Health Resources and Services Administration • **MCE:** Membership and Community Engagement Committee • **PP&A:** Planning, Priorities, and Allocations Committee • **SBP:** Standards and Best Practices Committee	• **EO:** Executive Office • **CDPH OA:** California Department of Public Health, Office of AIDS • **PSRA:** Priority Setting and Resource Allocation • **RWHAP:** Ryan White HIV/AIDS Program • **MAI:** Minority AIDS Initiative • **PY:** Program Year (e.g. PY37)

#	Objective	Lead Committee	Partners Needed	Timeline	Notes/Comments
1	Develop and conduct Commissioner Orientation & Mandatory Training	MCE	All Committees and Caucuses	Ongoing	
2	Develop, review, and implement COH Policies and Procedures, revise as needed.	MCE	Executive	Ongoing	Approval process from MCE to EC to COH
3	Develop and implement Mentorship Program	MCE	All committees and caucuses	Ongoing	
4	Review membership participation and attendance	MCE	Executive	Quarterly	
5	Coordinate outreach/public awareness efforts to educate and engage the community about the Commission and promote access to HIV prevention, care, and support services.	MCE	All committees and caucuses	Ongoing	
6	Ensure COH membership and recruitment align with all federal requirements	MCE	All committees and caucuses	Ongoing	

SUBJECT TO CHANGE

7	Identify and pursue additional funding to support the Commission's special initiatives and operational needs.	MCE	Executive	Ongoing	

SUBJECT TO CHANGE

2026 MEMBERSHIP & COMMUNITY ENGAGEMENT (MCE) COMMITTEE MEETING CALENDAR

MONTH	KEY ACTIVITIES
~~April 23, 2026 10am-12pm~~	• Open nominations for co-chairs • Elect co-chairs • Conduct committee orientation training • Review 2026 committee workplan • Adopt 2026 committee meeting calendar • Discuss/develop/implement recruitment strategy to fill vacant seats • Review Caucuses roles and responsibilities and provide oversight and guidance to ensure alignment with Commission priorities, community engagement goals, and integrated planning activities
~~June 25, 2026 10am-12pm~~	• Identify priority COH policy and procedures for review and revision • Review/Finalize training and/or mentorship framework & curriculum • Discuss/develop/implement recruitment strategy to fill vacant seats • Coordinate outreach/public awareness efforts to educate and engage the community about the Commission and promote access to HIV prevention, care, and support services, e.g., leverage USCHA Conference held in Anaheim • Coordinate with the PP&A Committee to support community engagement activities related to the Integrated Plan needs assessment • Receive updates from Caucuses and provide oversight and guidance to ensure alignment with Commission priorities, community engagement goals, and integrated planning activities.
~~August 27, 2026 10am-12pm~~	• Review and approve priority COH policy and procedure updates • Review member attendance report and member PIR composition • Support needs assessment engagement; coordinate with PP&A • Begin outlining mentorship program goals, structure, and scope • Discuss/develop/implement recruitment strategy to fill vacant seats • Coordinate outreach/public awareness efforts to educate and engage the community about the Commission and promote access to HIV prevention, care, and support services, e.g., leverage USCHA Conference held in Anaheim

SUBJECT TO CHANGE

	• Receive updates from Caucuses and provide oversight and guidance to ensure alignment with Commission priorities, community engagement goals, and integrated planning activities.
October 22, 2026 **10am-12pm**	• Review and approve priority COH policy and procedure updates • Coordinate with other Committees to support planning and preparation for the Annual Meeting to be held in February 2027 • Discuss/develop/implement recruitment strategy to fill vacant seats • Coordinate outreach/public awareness efforts to educate and engage the community about the Commission and promote access to HIV prevention, care, and support services • Receive updates from Caucuses and provide oversight and guidance to ensure alignment with Commission priorities, community engagement goals, and integrated planning activities.
November 2026 ****CANCELED****	Limited committee activity in recognition of the holiday period to support internal planning, policy development, and preparation for year-end review activities.
December 2026 ****CANCELED****	No committee meeting scheduled to support year-end administrative close-out, planning, and preparation activities led by staff and Commission leadership.

SUBJECT TO CHANGE

January 28, 2027 **10am-12pm**	• Review member attendance report and member PIR composition • Review the COH Bylaws and associated policies to identify any recommended updates or clarifications • Review and assess the committee's yearlong activities and deliverables to identify key lessons learned and draft initial observations and highlights for the next year's workplan and the COH's Annual Report • Coordinate with other Committees to support planning and preparation for the Annual Meeting to be held in February • Discuss/develop/implement recruitment strategy to fill vacant seats • Coordinate outreach/public awareness efforts to educate and engage the community about the Commission and promote access to HIV prevention, care, and support services • Receive updates from Caucuses and provide oversight and guidance to ensure alignment with Commission priorities, community engagement goals, and integrated planning activities
February 25, 2027 **10am-12pm**	• Draft 2027-28 committee workplan and meeting calendar • Translate lessons learned into priorities and recommendations for the upcoming Program Year workplan • Confirm recommended Bylaws or policy updates to advance for Commission consideration, as appropriate • Align membership, training, mentorship, and community engagement activities with upcoming Program Year priorities • Finalize and submit committee contributions, recommendations, and highlights for inclusion in the COH's Executive Office (EO) BOS Annual Report

SUBJECT TO CHANGE

LOS ANGELES COUNTY
COMMISSION ON HIV

2026 - 2027 Training Schedule

(Subject to change)

To meet the Ryan White HIV/AIDS Program (RWHAP) Part A requirements, the Commission on HIV must provide appropriate orientation and annual training that enables members to be fully active participants and to fulfill their legislative responsibilities. Training sessions will educate members to understand their roles, responsibilities, and expectations for participation, how work is undertaken, and how formal decisions are made.

- Training sessions listed below are **mandatory** for all Commissioners, Alternates, and Committee-only members. Additional sessions on topics not listed may be included as appropriate.
- Training sessions are open to the public.
- Training sessions will be held virtually, unless otherwise noted.
- Training session recordings will be made available on our website.
- Certificates of Completion will be provided and attendance will be recorded.
- For questions or assistance, contact Commission staff at hivcomm@lachiv.org.

CLICK ON THE TRAINING TOPIC TO REGISTER

TRAINING TITLE	DATE AND TIME
~~Commission on HIV Orientation~~	~~April 9, 2026~~ ~~9am – 3pm (in person)~~
~~**Co-Chair Orientation & Leadership Development**~~	~~May 20, 2026~~ ~~12pm - 1pm~~
~~**Needs Assessment Overview and Priority Setting and Resource Allocation (PSRA)**~~	~~June 3, 2026~~ ~~12pm – 1pm~~
~~**Service Standards Overview and Development**~~	~~July 22, 2026~~ ~~12pm – 1pm~~
Data Summit ***In Person**	October 30, 2026 9am – 3pm
Member Knowledge & Self-Assessment Survey	Released late October/November 2026
Refresher Training	January 2027 TBD

Revised 9/9/26



LOS ANGELES COUNTY
COMMISSION ON HIV

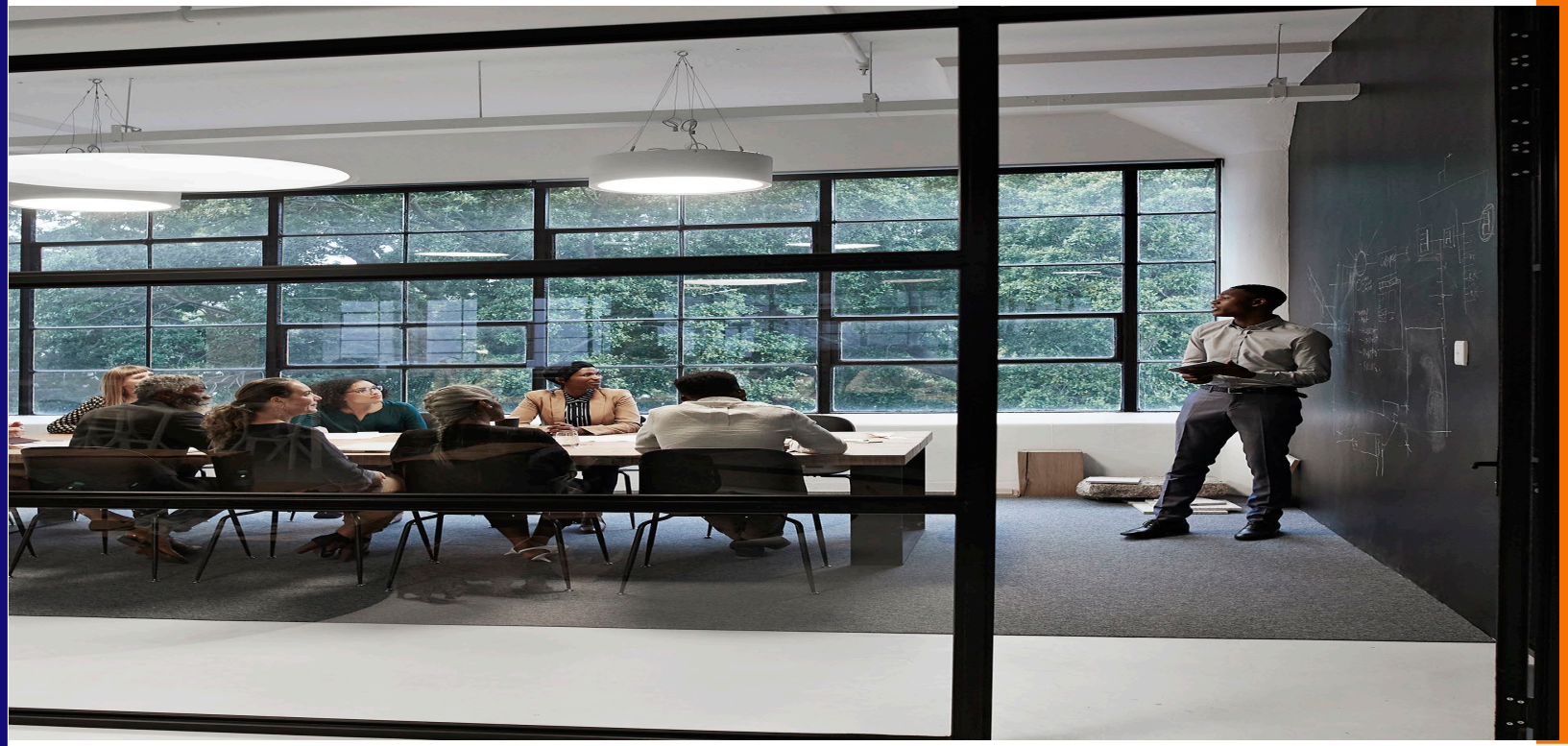
Commission on HIV– MCE Committee

Attendance

October 22, 2026

Commission & Committee Meeting Absences

The purpose of this training is to serve as a brief overview of the Commission on HIV's attendance policy.



Policy #08.3204

LOS ANGELES COUNTY
COMMISSION ON HIV



Key Points

- Why attendance and advance notice matter
- What qualifies as an excused absence
- How and when to report an absence
- Attendance limits and potential consequences
- Leave of absence procedures

LOS ANGELES COUNTY
COMMISSION ON HIV

Why Attendance Matters

Regular attendance is expected

- Members should regularly attend and actively participate in meetings.
- Notify staff as soon as you know you will be absent.
- Advance notice helps staff and Co-Chairs determine whether a quorum will be met.
- Proper documentation ensures absences are accurately recorded.



Attendance Limits

Members may not miss:

- 3 consecutive (2 consecutive – proposed update) Commission or Committee meetings, or
- 6 meetings of either type (4 - proposed update) within one calendar year

Potential consequences:

- Suspension of voting privileges
- Removal from the Commission



LOS ANGELES COUNTY
COMMISSION ON HIV

What Qualifies as an Excused Absence?

Excused absences may include:

- Personal sickness
- Personal or family emergency
- Vacation
- Out-of-town travel
- Unforeseen work schedule conflict



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Extended Leave of Absence

For extended sickness or personal/family emergencies:

- Members may request a leave of absence for up to 3 months.
- Notify Commission staff immediately once the extended absence is known.
- Keep staff updated on status and expected return.
- If the absence extends beyond 3 months, Commission leadership will determine next steps.



LOS ANGELES COUNTY
COMMISSION ON HIV

Special Consideration for Unaffiliated Consumer Members

Unaffiliated Consumer Members experiencing hardship:

- Attendance concerns are reviewed case by case.
- The review considers:
  - Overall participation
  - Attendance record
  - Individual circumstances



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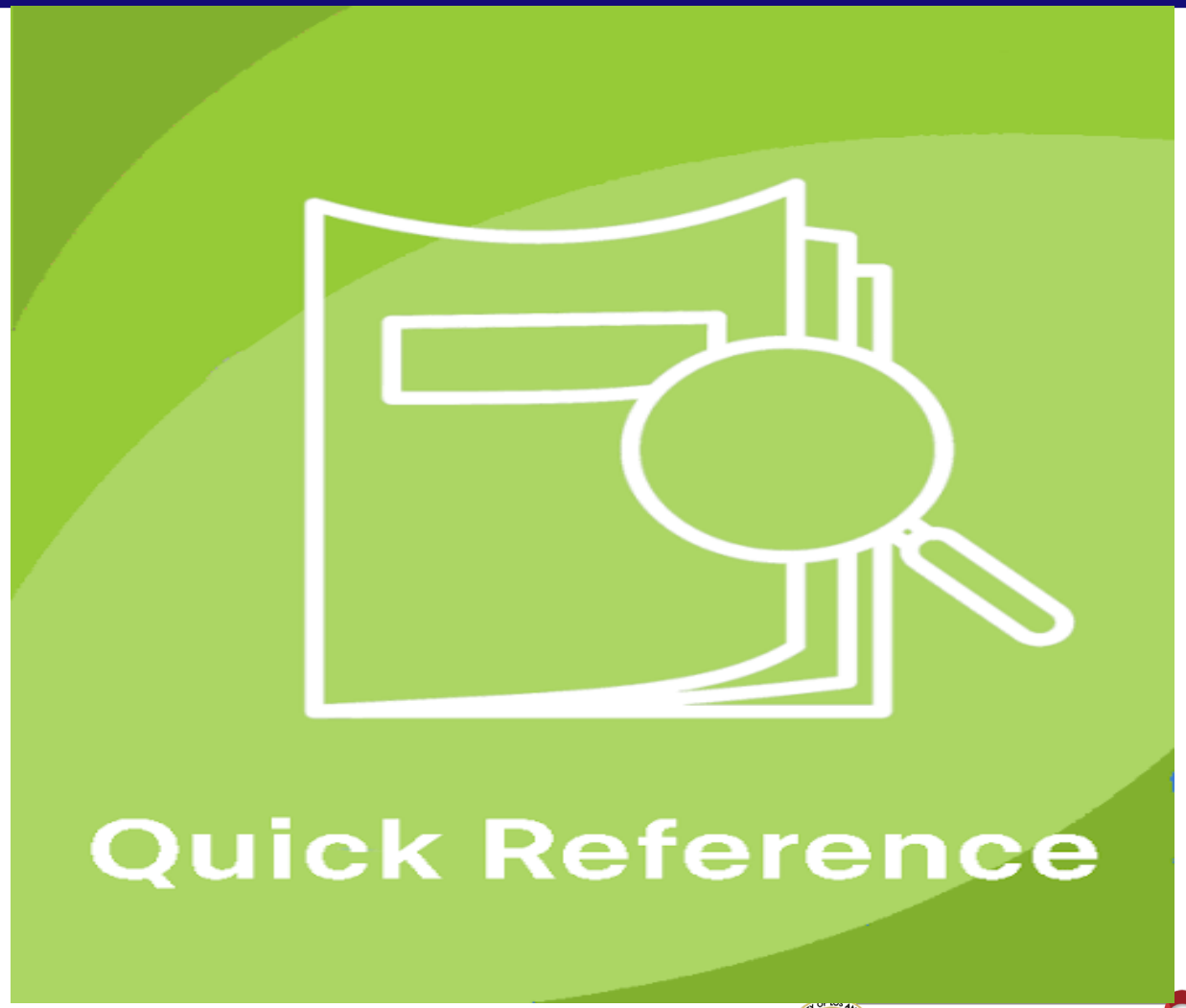
COMMISSION ON HIV

Quick Reference: Reporting an Absence

Before the meeting:

- Notify the appropriate staff member.
- Provide your name, meeting, and reason.
- Use email whenever possible.
- Confirm that staff acknowledged receipt.



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COMMISSION ON HIV

Questions?



LOS ANGELES COUNTY
COMMISSION ON HIV

HRSA REQUIRED SEAT CATEGORY REFERENCE SHEET

For Full Members Appointed to HRSA-Required Categories

All Full Members are expected to follow the general Commissioner Duty Statement, including active participation, two-way communication, committee service, and voting in the best interest of Los Angeles County. In addition, members appointed to HRSA-required categories are expected to help bring forward the perspective connected to their seat category.

How to use this sheet: Members in these seats should know which category they represent, stay informed about issues and trends connected to that category, bring that perspective into Commission discussions, and share relevant Commission information back to the sector, community, or system connected to their seat, as appropriate.

HRSA Seat Category	What this category represents	What this member is expected to help bring forward
Health Care Provider	Providers delivering HIV-related or general health care services, including FQHCs	Clinical realities, care access issues, treatment barriers, service delivery challenges, and opportunities to improve health outcomes
Community-Based Organization / AIDS Service Organization	Organizations rooted in community and serving populations affected by HIV	Community perspective, service access issues, outreach realities, and barriers experienced by clients and communities
Social Service Provider	Providers of support services, including housing and homeless services	Social and structural needs affecting care engagement, stability, and quality of life
Mental Health Provider	Providers delivering mental health services	Mental health needs, behavioral health access issues, and how mental health affects engagement in care and wellness
Substance Use Provider	Providers delivering substance use services	Substance use trends, treatment access issues, harm reduction needs, and the impact of substance use on HIV outcomes
Local Public Health Agency	Local government public health representation	Public health system perspective, population-level trends, coordination across systems, and local public health priorities
Hospital Planning Agency / Health Care Planning Agency	Health care planning entities or hospital-related planning bodies	Health system planning perspective, coordination issues, capacity concerns, and broader service system needs

LOS ANGELES COUNTY
COMMISSION ON HIV

HRSA Seat Category	What this category represents	What this member is expected to help bring forward
Affected Communities	People and communities most impacted by HIV, including people with HIV and historically underserved populations	Lived and community experience, disparities, barriers, unmet need, and what affected communities are experiencing on the ground
Non-Elected Community Leader	Community leaders without elected office who are engaged in civic or community life	Grassroots community perspective, leadership insight, and connections to local priorities and concerns
State Medicaid Agency	The state agency overseeing Medicaid/Medi-Cal	Medi-Cal policy and system perspective, coverage and access issues, and implications for low-income people with HIV
Ryan White Part B Representative	The agency administering Ryan White Part B	State-funded Ryan White system perspective, coordination across Parts, and service access issues relevant to Part B
Ryan White Part C Representative	Part C grantees providing outpatient early intervention services	Early intervention and outpatient care perspective, service delivery issues, and care access for people with HIV
Ryan White Part D Representative / Equivalent	Part D grantees, or equivalent entities serving women, infants, children, youth, and families	The needs of women, children, youth, and families affected by HIV, including family-centered service considerations
Other Federal HIV Program Representative, including HIV Prevention	Grantees of other federal HIV programs, including prevention providers	Prevention system perspective, linkage between prevention and care, and opportunities for coordination across the continuum
Formerly Incarcerated Person with HIV	Individuals with HIV who were formerly incarcerated and released within the prior 3 years	Reentry realities, continuity of care needs, structural barriers, stigma, and justice-involved community perspective

LOS ANGELES COUNTY
COMMISSION ON HIV

Membership Roster

(Approved by COH 2/12/26; BOS Appointment Effective 3/17/26)

Seat Code	Seat Category	First Name	Last Name	Membership Type	Org/Agency Affiliation *RWP Contracted	Proposed Committee Assignment(s)	Term: Start Date	Term: End Date	Alternates
1	Health Care Providers (FQHCs)	Byron	Patel, RN, ACRN		LGBTQ+ Center	SBP	3/17/26	3/1/27	
2	Community-Based & AIDS Service Orgs (CBO/ASO)	Robert	Bolan, MD		LGBTQ+ Center	SBP	3/17/26	3/1/28	
3	Social & Housing Service Providers	Ceasar	Corona		Tarzana Treatment Center	MCE	3/17/26	3/1/27	
4	Mental Health Providers	TJ	Griffin, LMSW		Men's Heath Foundation	MCE	3/17/26	3/1/28	
5	Substance Use Providers	Eric	Mattern		Tarzana Treatment Center	SBP	3/17/26	3/1/27	
6	Local Public Health Agencies (Division of HIV/STD Programs [DHSP]) ***Non-Voting**	Mario	Pérez, MPH		DHSP	EXEC	3/17/26	3/1/28	
7	Health & Hospital Planning Agencies	Tony	Mills, MD		Men's Health Foundation		3/17/26	3/1/27	
8	Affected & Disproportionately Impacted Communities	Emmanuel	Sanchez-Ramos, DrPH, MPH		APLA Health	SBP	3/17/26	3/1/28	
9	Non-Elected Community Leaders	Raniyah	Copeland, MPH		No affiliation/Equity & Impact Solutions	PP&A	3/17/26	3/1/27	
10	State Government (Medicaid/Medi-Cal) ***Non-Voting**						3/17/26	3/1/28	
11	Ryan White Part B Administrator (CDPH Office of AIDS) ***Non-Voting**	LeRoy	Blea		CDPH, Office of AIDS	PP&A	3/17/26	3/1/27	
12	Ryan White Part C Recipients	Jasmine	Brown, MSW		Charles Drew University	PP&A	3/17/26	3/1/28	
13	Ryan White Part D / CYF Providers	Mikhaela	Cielo, MD		LAC Dept of Health Services	SBP	3/17/26	3/1/27	
14	Other Federally Funded HIV Programs	Paola	Buenrostro		East Los Angeles Wome's Center		3/17/26	3/1/28	
15	Formerly Incarcerated Individuals Living with HIV						3/17/26	3/1/27	
16	Unaffiliated Representative - SPA 1	Montana	Volby		No affiliation	SBP	3/17/26	3/1/28	
17	Unaffiliated Representative - SPA 2	Shawn	Pleasants		No affiliation	PP&A	3/17/26	3/1/27	
18	Unaffiliated Representative - SPA 3	Felipe	Gonzalez		No affiliation	PP&A	3/17/26	3/1/28	
19	Unaffiliated Representative - SPA 4	Jeronimo	Barajas		No affiliation	PP&A	3/17/26	3/1/27	
20	Unaffiliated Representative - SPA 5						3/17/26	3/1/28	Christopher Webb (REACH LA)
21	Unaffiliated Representative - SPA 6	Angela	Hunt		No affiliation	MCE	3/17/26	3/1/27	Malik Henry (AMAAD)
22	Unaffiliated Representative - SPA 7	Vilma	Mendoza		No affiliation	MCE	3/17/26	3/1/28	
23	Unaffiliated Representative - SPA 8						3/17/26	3/1/27	Stevie Bieneman (AHF)
24	Unaffiliated Representative - At Large #1	Ish	Herrera		No affiliation	MCE	3/17/26	3/1/28	
25	Unaffiliated Representative - At Large #2						3/17/26	3/1/27	Dontá Morrison, PhD (UCLA CARES)[Exec A
26	Unaffiliated Representative - At Large #3	Jack	Miller		No affiliation	PP&A	3/17/26	3/1/28	
27	Board of Supervisors Office #1 Representative	Al	Ballesteros, MBA		JWCH Institute	PP&A	3/17/26	3/1/27	
28	Board of Supervisors Office #2 Representative	Darryn	Harris		St. Johns Community Health	PP&A	3/17/26	3/1/28	
29	Board of Supervisors Office #3 Representative	Katja	Nelson, MPP		APLA Health	PP&A	3/17/26	3/1/27	
30	Board of Supervisors Office #4 Representative	Nolan	Ross Samé-Weil		LA. CADA	SBP	3/17/26	3/1/28	
31	Board of Supervisors Office #5 Representative	Jonathan	Weedman		Via Care	MCE	3/17/26	3/1/27	
32	HIV Academic/Scientist Representative	Paul	Nash, Cpsychol, AFBPsS, FHEA		No Affiliation/USC	SBP	3/17/26	3/1/28	
	TOTAL MEMBERSHIP: 32								
	TOTAL VOTING MEMBERSHIP (SEATED): 28								
	QUORUM: 14								
	Vacant Seats								
	**To establish staggered terms for the new membership cohort, one half of members were appointed to an initial one-year term and the other half to an initial two-year term. Thereafter, all terms will be two years. Staggered terms support continuity and are denoted by blue and white shading.*								

Planning Council/Planning Body Reflectiveness Table
(Use most recent HIV Prevalence data)

Provide data source and year of data: 2024 Annual HIV Surveillance Report: PLWDH as of 2024

Race/Ethnicity	HIV Prevalence in EMA/TGA		Total Members of the PC/PB		Unaffiliated RWHAP Part A Clients on PC/PB		
	Number	Percentage (include % with #)	Number	Percentage (include % with #)	Number	Percentage (include % with #)	**If you do NOT meet reflectiveness, please describe the efforts being done to improve upon that demographic category.**
White, not Hispanic	11735	22.52%	8	29.63%	1	12.50%	
Black, not Hispanic	9689	18.59%	7	25.93%	3	37.50%	
Hispanic	25865	49.63%	10	37.04%	4	50.00%	
Asian/Pacific Islander	2171	4.17%	1	3.70%		0.00%	
American Indian/Alaska Native	350	0.67%		0.00%		0.00%	
Multi-Race	2223	4.27%	1	3.70%		0.00%	
Other/Not Specified	79	0.15%		0.00%		0.00%	
Total	52112	100%	27	100%	8	100%	

Sex	Number	Percentage (include % with #)	Number	Percentage (include % with #)	Number	Percentage (include % with #)	
Male	46059	88.38%	20	74.07%	6	75.00%	
Female	6053	11.62%	7	25.93%	2	25.00%	*(1) NGC
Total	52112	100%	27	100%	8	100%	

Age	Number	Percentage (include % with #)	Number	Percentage (include % with #)	Number	Percentage (include % with #)	
13-19 years	89	0.17%		0.00%		0.00%	
20-29 years	2995	5.75%	1	3.70%		0.00%	
30-39 years	10508	20.16%	6	22.22%	2	25.00%	
40-49 years	10742	20.61%	8	29.63%	1	12.50%	
50-59 years	12884	24.72%	5	18.52%	3	37.50%	
60+ years	14894	28.58%	7	25.93%	2	25.00%	
Total	52112	100%	27	100%	8	100%	

LOS ANGELES COUNTY
COMMISSION ON HIV

Policy #09.5203

Priority Setting and Resource Allocations (PSRA) Framework and Process

September 2026

Purpose

To establish the process used by the Los Angeles County Commission on HIV to set service priorities and allocate Ryan White HIV/AIDS Program Part A and Minority AIDS Initiative funds, as applicable, consistent with its federally mandated planning responsibilities.

Policy

This policy supports an informed, transparent, and data-driven process for setting priorities, allocating resources, and developing recommendations for the Recipient, the Division of HIV and STD Programs (DHSP). The process is informed by data, community input, public comment, committee review, and final Commission action.

The PSRA process is led by the Commission's Planning, Priorities and Allocations (PP&A) Committee. Final approval of the complete priorities and allocations shall be presented by the PP&A Co-Chairs to the full Commission for a roll-call vote.

PSRA may be conducted on a multi-year planning basis to support continuity and long-term planning. Allocations shall be reviewed at least annually and revised as needed to remain responsive to the final grant award, community needs, service gaps, expenditure and utilization trends, and federal requirements.

The PSRA Framework and Process shall be reviewed regularly and updated as needed.

Definitions

Priorities: The list of Ryan White HIV/AIDS Program service categories ranked in order of importance based on the needs of people with HIV in Los Angeles County. A service category must be prioritized before it can be considered for funding.

Allocations: The amount or percentage of Ryan White Part A and Minority AIDS Initiative funds, as applicable, assigned to each prioritized service category.

Directives: Guidance from the Commission to the Recipient on how to best address identified priorities, service needs, gaps, and barriers. Directives may include recommendations related to service interventions, populations, geographic areas, access issues, and provider capacity.

Minority AIDS Initiative (MAI): A Ryan White HIV/AIDS Program funding component intended to improve access to HIV care and health outcomes for racial and ethnic minority communities disproportionately impacted by HIV.

Community Agreement

Community agreements are shared expectations established at the beginning of the PSRA process to support respectful dialogue, active listening, transparency, shared accountability, and consensus-building.

Voting Eligibility

Voting eligibility helps ensure that members participating in PSRA decisions have completed the required disclosures, training, and data review needed to make informed and transparent decisions. To be eligible to vote, members must:

- **A.** Submit annual Conflict-of-Interest form before participating in priority setting and resource allocation discussions or meetings.
- **B.** Complete the mandatory annual Needs Assessment and PSRA training before participating in priority setting and resource allocation discussions or meetings. Committee-only members of the PP&A Committee and Standards and Best Practices Committee must complete this training to be eligible to vote on PSRA-related matters.
- **C.** Attend or view recordings of all required data presentations before participating in priority setting and resource allocation discussions or meetings.

Conflict of Interest

Conflict of Interest requirements help protect the integrity of the PSRA process by ensuring that members disclose any real or perceived conflicts and refrain from participating in decisions where those conflicts may affect, or appear to affect, their objectivity.

- **A.** Members affiliated with a funded Ryan White HIV/AIDS Program Part A or Minority AIDS Initiative provider must disclose all funded service categories in which they have a real or perceived conflict of interest at the beginning of the applicable meeting or discussion.

B. Members with a conflict of interest may not initiate discussion on a service category for which they have a conflict. However, they may answer direct questions from other members, staff, or the facilitator when clarification is needed.

C. Members are expected to self-monitor and disclose conflicts during PSRA discussions.

D. Members with a conflict of interest must abstain from voting on individual service categories for which they have a conflict. Members who must abstain due to conflict of interest on individual service category votes shall be counted as abstentions for those specific votes.

E. Conflict of interest does not apply when voting on the final slate. A slate consists of all prioritized service categories and proposed allocations.

Voting

A consensus-building approach shall be used during PSRA discussion and deliberation to help members review data, consider options, and work toward general agreement.

Consensus-building shall guide the development of recommendations but shall not replace formal voting requirements.

Formal action, including approval of service priorities, allocation recommendations, amendments, and final approval of the complete priorities and allocations, shall be made by roll-call vote.

Data Sources

The PSRA process shall be informed by multiple data sources made available throughout the program year and during the PSRA process. Eligible voting members shall consider the full body of information provided, including documented needs, service gaps, utilization, expenditures, community input, and applicable federal requirements when setting priorities and allocating resources.

Examples of data sources for decision-making include, but are not limited to:

A. Epidemiologic data, including incidence, prevalence, HIV-related health outcomes, co-occurring conditions, and trends among communities most impacted by HIV.
B. Needs assessment findings, including service needs, barriers to care, and gaps identified by people with HIV.
C. Expenditure and service utilization data.
D. HRSA performance measures, clinical outcomes, and quality management data.
E. HIV testing, linkage to care, and early identification data.
F. Unmet need and out-of-care data.
G. Information regarding other funding streams and resources, including Ending the HIV Epidemic, HOPWA, SAMHSA, Medi-Cal, and other relevant programs.

H. Plans and strategies for engaging people with HIV who are newly diagnosed, out of care, not retained in care, or not virally suppressed.
I. Community input gathered through listening sessions, focus groups, public meetings, surveys, community forums, and other engagement activities.
J. Service system capacity, provider capacity, and service availability.
K. Final grant award amounts, funding availability, and applicable federal requirements.
L. California and Los Angeles County Integrated HIV Prevention and Care Plans.

Public Comment

Public comment shall be provided in accordance with the Brown Act and the Commission's public comment procedures.

Members of the public shall have an opportunity to provide comment before the body takes formal action on PSRA-related items. Public comment is intended to inform the process and ensure community voice is heard.

Once member deliberation begins, members of the public may observe the discussion but may not participate in deliberations or decision-making unless permitted under the Commission's meeting procedures.

Principles and Criteria for Decision-Making

The following principles and criteria are intended to guide PSRA discussions and decisions. They help ensure that priorities and allocations are based on documented need, community voice, service gaps, equity, and the overall responsibility to support a strong HIV care continuum for people with HIV in Los Angeles County.

A. Decisions shall be based on documented needs.
B. Services shall be responsive to the epidemiology of HIV in the Los Angeles County service area.
C. Consumer perspectives, lived experience, and community preferences shall be considered in setting priorities and allocating resources.
D. Priorities should strengthen the HIV care continuum, including access to basic health care, medications, supportive services, and services that help reduce avoidable hospitalization.
E. Decisions should address the overall needs of people with HIV in the service area and should not be based solely on narrow advocacy interests or in the interests of providers.
F. Services should be culturally responsive and accessible to the communities most impacted by HIV.
G. Services should focus on the needs of underserved communities and people experiencing the greatest barriers to care.
H. Equitable access to services should be considered across geographic areas, populations, and service needs.

I. When a decision must be made between funding a wider range of services and ensuring access to key services that support entry into and retention in care, priority shall be given to services that help people with HIV access and remain connected to essential HIV care, including primary medical care and medications.

Priority Setting Process

The priority setting process shall consider the full range of services needed to support a comprehensive HIV care continuum for people with HIV, regardless of how those services are currently funded. The process shall also consider unmet need, service gaps, and demonstrated demand for services.

A. The list of HRSA-fundable service categories, including core medical and support services, and the definitions of those services shall be presented.

B. Prioritization Worksheet

1. Each eligible voting member shall receive a Prioritization Tool that lists all allowable service categories.
2. In making their decisions, members should rely on data provided during presentations, information shared throughout the program year, and other approved data sources.
3. Each eligible voting member shall individually rank the allowable service categories using the Prioritization Tool.
4. Prioritization selections shall not be confidential. Results of Prioritization Tools shall be tallied by Commission staff.

C. Aggregating the Prioritization

1. Commission staff shall collect and tally the results of Prioritization Tools.
2. The service category demonstrating the highest rated need shall be ranked number 1. The service category with the second highest rated need shall be ranked number 2, and so on.
3. All service categories receiving a vote shall be ranked and placed on the list of categories to be considered for funding. Service categories that receive no votes shall not be considered for funding.
4. Commission staff and/or the facilitator shall present the ranked list of service categories to the PP&A Committee for discussion and roll-call vote.

Resource Allocation Process

Resource allocation is the process of assigning available Ryan White Part A and MAI funds, as applicable, to prioritized service categories. Resource allocation occurs after service priorities have been established and is intended to ensure that funding decisions are data-informed, responsive to community needs, aligned with the approved priorities and consistent with Ryan White HIV/AIDS Program requirements.

A. Resource allocation shall occur after priority setting has been completed.
B. Resource allocation decisions shall consider relevant data and requirements, including but not limited to documented need, service gaps, expenditure trends, utilization data, service capacity, community input, funding availability, MAI requirements, and the Ryan White requirement that at least 75% of service funds be used for core medical services, unless a waiver has been approved.
C. Recipient staff, Commission staff, and/or PP&A co-chairs, or any combination thereof, may provide allocation recommendations based on service gaps, expenditure trends, utilization data, service capacity, funding requirements, and other relevant information.
D. An explanation shall be provided regarding how the proposed allocation slate was developed.
E. The floor shall be opened for members to make a motion to adopt, amend, or reject the proposed allocation slate.
F. Once a motion has been made and seconded, discussion shall occur before a vote is taken. Discussion may include up to three comments in support of the motion and three comments in opposition to the motion, unless otherwise modified by the Chair or facilitator to support fair and orderly discussion.
    1. Eligible, non-conflicted members may discuss data previously provided during data presentations or shared as part of the PSRA process and may ask clarifying questions.
    2. Members may not introduce new, unsupported, or anecdotal information that has not been previously provided or made available for review as part of the PSRA process.
G. If the proposed allocations are rejected or amended, members may make motions to adjust allocations by service category. Each category shall be considered independently on a line-by-line basis, beginning with the highest-ranked priority.
    1. Allocation discussions shall continue through the list of prioritized services until a complete allocation slate is developed.
    2. The motion, discussion, and voting process shall continue until the total allocation equals the available funding amount or the original funding amount presented for allocation.
    3. Not all prioritized service categories are required to receive funding.
H. Once complete allocations have been developed and seconded, a final vote may be taken. Members may vote on the final proposed slate, subject to the Commission's Conflict of Interest policy.
I. Once approved by the PP&A Committee, the recommended allocations shall be forwarded to the Executive Committee and full Commission for final review and approval.
J. Once approved by the full Commission, the final priorities and allocations shall be transmitted to the Recipient for use in the Ryan White Part A application, Notice of Award implementation, contracting, and other grant management processes, consistent with federal requirements and Commission-approved directives.

Directives

The Standards and Best Practices (SBP) Committee, in collaboration with the PP&A Committee, is responsible for developing recommended directives to be submitted to the Commission for approval.

Following the PSRA process, the SBP Committee and the PP&A Committee shall review gaps, barriers, service needs, and recommendations identified through data presentations, reports, community input, and other information shared throughout the program year. Together, the committees shall discuss, refine, and develop recommended directives for Commission consideration and approval.

Once approved by both committees, the recommended directives shall be forwarded to the Executive Committee and then to the full Commission for review and approval.

Approved directives shall be transmitted to the Recipient, DHSP, for consideration and implementation, if deemed feasible by DHSP.

DHSP shall provide a written response to both committees identifying which directives are feasible, which are not feasible, and, where applicable, the anticipated timeline for implementation. DHSP shall also provide periodic updates to the Commission regarding implementation.

Allocation Adjustments and Reallocation

The Commission recognizes that allocation adjustments and reallocations may be needed during the grant year to respond to expenditure trends, utilization, provider capacity, service demand, final award amounts, or other grant management needs.

For purposes of this policy, allocation adjustment refers to any change to Commission-approved funding amounts during the grant year. Reallocation refers specifically to moving funds between approved service categories after the initial allocations have been adopted.

Any change to Commission-approved allocations must remain consistent with Ryan White HIV/AIDS Program requirements and Commission-approved priorities, allocations, and directives. Changes must also be documented and communicated to the Commission in a timely and transparent manner.

The Planning, Priorities and Allocations (PP&A) Committee shall review expenditure and utilization information **at least quarterly** to identify significant variances and determine whether an allocation adjustment, reallocation, or other Commission action is needed.

A. Adjustments or Reallocations Within an Approved Threshold

The Recipient may make allocation adjustments or reallocations of up to 25% within or across approved funded service categories, provided the change remains consistent with Commission-approved priorities, allocations, directives, and Ryan White requirements.

Any adjustment or reallocation made under this authority shall be reported to the PP&A Committee, Executive Committee, and/or full Commission at the earliest scheduled meeting. The Commission reserves the right to modify or remove this allowance if it no longer supports transparency or alignment with Commission-approved priorities.

B. Adjustments or Reallocations Above the Approved Threshold

Proposed allocation adjustments or reallocations exceeding 25% shall be reviewed by the PP&A Committee and forwarded to the Executive Committee and/or full Commission for review and approval before implementation, unless urgent grant management timelines require expedited action.

When expedited action is needed and the full Commission is not scheduled to meet in time, the matter may be brought to the Executive Committee for review and direction, consistent with the Commission's bylaws, policies, and Brown Act requirements. Any expedited action shall be reported to the full Commission at the earliest opportunity.

The PP&A Committee will be notified of all reallocations, including instances where urgent, last-minute adjustments must be communicated at the earliest opportunity. Any proposal to allocate funding to a Service Category not included in the original service category allocation must receive approval from the Commission.

Beginning ninety (90) days prior to the end of the grant term, DHSP shall have full authority to shift allocations across service categories as necessary to ensure full utilization of grant funds, provided such shifts do not alter the scope of work, performance outcomes, or compliance with funding requirements. DHSP must document and justify all shifts executed during this period and communicate them in writing to the PP&A Committee at the earliest opportunity.

C. Use of Funds Within the Same Service Category First

When possible, unexpended funds should first be used within the same service category to support providers, programs, or services that can use the funds and meet demonstrated need.

If funds cannot reasonably be used within the same service category, the Recipient may move funds to another approved service category within the 25% threshold or recommend a reallocation above the threshold based on expenditure trends, service demand, provider capacity, documented need, and Commission-approved priorities.

D. Final Allocation Reporting

DHSP shall provide a report of final allocations for the grant term no later than ninety (90) days following the close of the grant year. The final allocation report shall include a summary of expenditures, allocation shifts, and any variances from the approved budget.

E. Documentation

All allocation adjustments and reallocations shall include written documentation of the service categories affected, amount moved, reason for the change, supporting data or expenditure trend. This process is intended to provide the Recipient with reasonable flexibility to manage the grant while ensuring the Commission remains informed and engaged in its priority setting, resource allocation, and reallocation responsibilities.

Quarterly Financial Reporting

The Planning, Priorities and Allocations (PP&A) Committee shall receive a written expenditure report by service category at least once per quarter. The report shall be provided **at least five business days** before the scheduled PP&A Committee meeting.

The report shall include a spreadsheet showing approved allocations, year-to-date expenditures, remaining balances, and unobligated funds by service category, along with a written explanation of any significant over- or underspending, unobligated balances, expenditure concerns, and any recommended allocation adjustments or reallocations.

A Recipient representative shall provide an update to the PP&A Committee highlighting any unexpected expenditure levels, projected shortfalls, projected underspending, or recommended adjustments requiring Committee review or Commission action.

APPROVED BY: _____ DATED: _____

Dawn P. Mc Clendon, Interim Executive Director

Original Approval: May 1, 2011
Revision(s): July 11, 2024; September 15, 2026

Policies and Procedures Review Tracker – October 2026

MCE Committee Working Draft

Purpose: This working tracker helps the MCE Committee review the Commission's policies and procedures, identify items that need revision, confirm items that are moot or reference-only, and flag where new policies may be needed.

Review tracks: Keep As-Is | Revise | Cross-Committee Review | Moot / Retire | Use the MCE Notes / Decision column to document the committee's direction and next steps.

Master Policy and Procedure Tracker

#	Area	Policy / Procedure	Staff Notes	Review Track	Lead / Partner	MCE Notes / Decision
01.0000	**Federal**					
01.0000	Federal	Ryan White Care Act Legislation	Sunset; policy not needed.	**Moot / Retire**	Federal	
01.3000	Federal	Health Resource and Services Administration (HRSA) Guidelines	Sunset; policy not needed.	**Moot / Retire**	Federal	
02.0000	**State of California**			**Moot/Retire**		
03.0000	**Los Angeles County**					
03.2000	Los Angeles County	Commission Ordinance	**Duplicate**	**Moot/Retire**		
03.2005	Los Angeles County	County Ordinance 3.29	Revised March 17, 2026	**Reference Only Priority: Medium**	Staff / County Counsel as needed	Bylaw updates can trigger Ordinance changes.
04.0000	**DPH**			**Moot/Retire**		

#	Area	Policy / Procedure	Staff Notes	Review Track	Lead / Partner	MCE Notes / Decision
05.0000	**LAC Service Delivery System**					
05.8001	LAC Service Delivery System	COH Grievance Continuum of Care Grievance Process	Last approved in 2013. Revise policy; content remains relevant but needs updating. Refer to SBP.	**Cross-Committee Review Priority: Medium**	SBP / MCE	
05.8002	LAC Service Delivery System	COH Grievance Process for PP&A Priority Setting & Resource Allocation (PSRA) of HIV Services	Last approved in 2012 Revise policy; content remains relevant but needs updating. Refer to PP&A.	**Cross-Committee Review Priority: Medium**	PP&A / MCE	
06.0000	**Commission Governance**					
06.1000	Commission Governance	Commission By-Laws v9	Revised 12/2025. Annual review scheduled for Nov/Dec 2026. As part of the revised Bylaws, the Commission must conduct an annual review for relevancy and accuracy.	**Cross-Committee Review Priority: High**	MCE/All Committees/Caucuses	

#	Area	Policy / Procedure	Staff Notes	Review Track	Lead / Partner	MCE Notes / Decision
07.0000	**Duty Statements**					
07.1001	Duty Statements	Duty Statement, Commissioner	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.1002	Duty Statements	Duty Statement, Alternate	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.1003	Duty Statements	Duty Statement, Committee Member	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.2001	Duty Statements	Duty Statement, Commission Co-Chair	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.2002	Duty Statements	Duty Statement, Executive Committee At-Large Member	Updated 2026 as part of restructure	**Cross-Committee Review** **Priority: Medium**	MCE	
07.2003	Duty Statements	Duty Statement, Committee Co-Chair	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.3001	Duty Statements	Duty Statement, Supervisorial District Office Representative	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.3003	Duty Statements	Duty Statement, Service Planning Area (SPA) Unaffiliated Consumer Representative	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.3005	Duty Statements	Duty Statement, City of Los Angeles Representative	No longer full members; moot?	**MCE Review Needed** **Priority: Medium**	MCE	
07.3006	Duty Statements	Duty Statement, City of Long Beach Representative	No longer full members; moot?	**MCE Review Needed** **Priority: Medium**	MCE	
07.3007	Duty Statements	Duty Statement, City of Pasadena Representative	No longer full members; moot?	**MCE Review Needed** **Priority: Medium**	MCE	

#	Area	Policy / Procedure	Staff Notes	Review Track	Lead / Partner	MCE Notes / Decision
07.3008	Duty Statements	Duty Statement, City of West Hollywood Representative	No longer full members; moot?	**MCE Review Needed** **Priority: Medium**	MCE	
07.3009	Duty Statements	Duty Statement, Department of Public Health (DPH), Part A Representative	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.3010	Duty Statements	Duty Statement, Part B Representative	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.3011	Duty Statements	Duty Statement, Part C Representative	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.3012	Duty Statements	Duty Statement, Part D Representative	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.3014	Duty Statements	Duty Statement, Healthcare System Representative	Updated 2026 as part of restructure – merged with 07.3015	**Keep As-Is** **Priority: Low**	MCE	
07.3015	Duty Statements	Duty Statement, Healthcare Provider				
07.3016	Duty Statements	Duty Statement, State Office of AIDS (OA) Representative	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
07.3017	Duty Statements	Duty Statement, Medi-Cal Representative	Updated 2026 as part of restructure	**Keep As-Is** **Priority: Low**	MCE	
08.0000	**Commission Policies**					
08.1102	Commission Policies	Subordinate Commission Working Units	Revised in 2016.	**MCE Review Needed** **Priority: Medium**	MCE / Executive	
08.1104	Commission Policies	Commission and Committee Co-Chair Elections and Terms	Revised in 2026 as part of restructure.	**Keep As-Is** **Priority: Low**	MCE / Executive	
08.1302	Commission Policies	Commission Sponsorship of Events	Revised in 2016.	**MCE Review Needed** **Priority: Medium**	MCE / Executive	

#	Area	Policy / Procedure	Staff Notes	Review Track	Lead / Partner	MCE Notes / Decision
08.1306	Commission Policies	Commission Compliance with the Health Insurance Portability and Accountability Act (HIPPA)	Moot/Retire. Item is operational rather than policy-level.	**Moot/Retire** **Priority: Low**	MCE / Executive	
08.2104	Commission Policies	Transfer of Meeting Authority to the Parliamentarian in the Absence of Co-Chairs	Convert to procedure; item is operational rather than policy-level. Refer to Roberts' Rules of Order.	**Moot/Retire** **Priority: Low**	MCE / Executive	
08.2107	Commission Policies	Consent Calendar	Adopted 2008	**Keep As-Is** **Priority: Low**	MCE / Executive	
08.2109	Commission Policies	Meeting Minutes and Summaries	Revised 2008. Convert to guidance/reference; does not establish a formal requirement.	**Moot/Retire** **Priority: Low**	MCE/Staff	
08.2110	Commission Policies	Speaker Time Limits at Commission and Committee Meetings	Convert to guidance/reference; does not establish a formal requirement	**MCE Review Needed** **Priority: Medium**	MCE / Executive	
08.2203	Commission Policies	Teleconferencing at Commission/Committee Meetings	Sunset; covered elsewhere – Brown Act.	**Moot/Retire** **Priority: Low**	MCE / Executive	
08.2301	Commission Policies	Voting Procedures	Approved in 2019. Aligns with Robert's Rules of Order, Brown Act & HRSA Guidance	**Keep As-Is** **Priority: Low**	MCE / Executive	
08.2303	Commission Policies	Document Distribution at Meetings	Convert to procedure/guidance; item is operational rather than policy-level.	**Moot / Retire**	MCE / Executive	
08.3100	Commission Policies	Representation of Commission by Members	Approved 2016. Revise policy; content remains relevant but may updating	**MCE Review Needed** **Priority: Low**	MCE / Executive	

#	Area	Policy / Procedure	Staff Notes	Review Track	Lead / Partner	MCE Notes / Decision
08.3106	Commission Policies	Voting Privileges of Non-Commissioners	Sunset; covered elsewhere – Bylaws & Voting.	**Moot / Retire**	MCE / Executive	
08.3107	Commission Policies	Consumer Definitions and Health Resources Administration and Services (HRSA) Related Rules and Requirements	Convert to guidance/reference; does not establish a formal requirement.	**Moot / Retire**	MCE / Executive	
08.3108	Commission Policies	Conflict of Interest	Revise policy; content remains relevant but needs updating.	**MCE Review Needed Priority: Medium**	MCE / Executive	
08.3201	Commission Policies	Attendance	Retain as policy; still needed for governance and consistency.	**MCE Review Needed Priority: Medium**	MCE	**Pending Final Review 10/22/26**
08.3204	Commission Policies	Commission and Committee Meeting Absences	Consider sunset/merge with Attendance Standards	**MCE Review Needed Priority: Medium**	MCE	
08.3302	Commission Policies	Intra-Commission Grievance Process	Approved 2020. Revise policy; content remains relevant but needs updating	**MCE Review Needed Priority: Medium**	MCE	
09.0000	**Committee Policies**					
09.1007	Committee Policies	Non-Commission Committee Appointment	Approved 2019. Revise policy; content remains relevant but needs updating due to restructure.	**MCE Review Needed Priority: High**	MCE	**Pending Final Review 10/22/26**
09.2102	Committee Policies	Executive Committee At Large Elections	Sunset; covered elsewhere (Voting)	**Moot; Retire**	EXEC/MCE	
09.2203	Committee Policies	Executive Director Performance Appraisal Procedure	Refer to EXEC	**EXEC Review Needed Priority: Medium**	Executive	

#	Area	Policy / Procedure	Staff Notes	Review Track	Lead / Partner	MCE Notes / Decision
09.4204	Committee Policies	Commission Candidate Interviews	Approved 2011. Revise policy; content remains relevant but needs updating. Consider merge with 09.4205.	**MCE Review Needed** **Priority: High**	MCE	**Pending Final Review 10/22/26**
09.4205	Committee Policies	Commission Membership Evaluation, Nomination and Approval Process	Approved 2018. Revise policy; content remains relevant but needs updating. Consider merge with 09.4204.	**MCE Review Needed** **Priority: High**	MCE	
09.5203	Committee Policies	Priority- and Allocation-Setting Process and Framework	Currently pending revisions by PP&A; will come back to MCE for adoption.	**Cross-Committee Review** **Priority: Medium**	PP&A / MCE	**PP&A Updated at its September meeting; moving through approval process.**
09.6202	Committee Policies	Standards of Care Development & Oversight	Refer to SBP	**Cross-Committee Review** **Priority: Medium**	SBP / MCE	
09.7201	Committee Policies	Unaffiliated Member Stipends	Updated April 2026 as part of the restructure	**Keep As-Is** **Priority: Low**	MCE / Executive/CC	
10.0000	**Office and Staffing**					
10.1002	Office and Staffing	e-Dissemination of Non-Commission Sponsored Information and Materials	Convert to procedure; item is operational rather than policy-level.	**Moot; Retire** **Priority: Low**	Staff/County	

New Policy / Procedure Development Log

Use this section when MCE identifies a gap that is not covered by an existing policy or procedure.

Potential Policy / Procedure	Why It May Be Needed	Recommended Lead / Partner	MCE Direction / Next Step
08.3201/Attendance	Update to align with revised Bylaws and practices post-restructure	MCE	Final review pending at 10/22 MCE meeting
08.3204: Commission & Committee Meeting Absences	Update to align with revised Bylaws and practices post-restructure	MCE	Final review pending at 10/22 MCE meeting
09.4204: Commission Candidate Interviews	Update to align with revised Bylaws and practices post-restructure	MCE	Final review pending at 10/22 MCE meeting
09.4205: Commission Membership, Evaluation, Nomination and Approval Process	Update to align with revised Bylaws and practices post-restructure	MCE	Final review pending at 10/22 MCE meeting
09.5203: Committee Policies Priority- and Allocation-Setting Process and Framework	Update to align with revised Bylaws and practices post-restructure	PP&A	PP&A approved at its September meeting; moving through approval process.

Potential Policy / Procedure	Why It May Be Needed	Recommended Lead / Partner	MCE Direction / Next Step

MCE Committee Policy & Procedure Review Guide

Companion guide for the MCE Committee tracker tool - June 2026

Purpose: Use this guide when reviewing each policy/procedure item to determine whether it should be retained, revised, converted, combined, sunset, or developed as a new policy. The goal is to keep the Commission's policies and procedures current, useful, and tied to governance, compliance, transparency, and accountability.

HRSA basis: The HRSA HAB Ryan White HIV/AIDS Program Part A Manual states that planning council/planning body operations depend on structures that include comprehensive policies and procedures subject to periodic review and revision. It also notes that bylaws, policies and procedures, MOUs, grievance procedures, and trainings are crucial to PC/PB success. [1]

Policy vs. Procedure

Item	Plain-language meaning	Use when the item...
Policy	What is required, allowed, prohibited, or expected.	Creates a rule, standard, authority, formal expectation, member responsibility, compliance requirement, or decision-making framework.
Procedure	How the work gets done.	Explains steps, timelines, responsible parties, templates, staff workflow, or implementation details that support a policy or recurring task.

Quick Review Test

Ask these questions

1. Does this create a rule, requirement, or formal expectation?
2. Does it affect members, consumers, voting, appointments, grievances, funding decisions, public participation, or compliance?
3. Is it required by HRSA, County Code, the Brown Act, bylaws, ordinance, or another authority?
4. Does it need to be applied consistently over time?
5. Would confusion, inconsistency, or challenge be likely if it was not written down?

Simple decision rule: If the item tells people what must happen or protects fairness, compliance, authority, or accountability, it may need to be policy. If it mainly explains how to complete a task, it is likely a procedure, guidance, checklist, template, or desk reference.

[1] Source: HRSA HAB, Ryan White HIV/AIDS Program Part A Manual, Section III, Chapter 5, Planning Council and Planning Body Operations, pp. 35-37. The manual states that bylaws, policies and procedures, MOUs, grievance procedures, and trainings are crucial for PC/PB success and that comprehensive policies and procedures should be subject to periodic review and revision.

LOS ANGELES COUNTY
COMMISSION ON HIV

Commission and Committee Attendance Policy #08.3204

Original approval November 24, 2008 | Last revision August 10, 2023 | Proposed revision pending 10/22/26 MCE approval

Purpose. This policy explains attendance expectations, how to report an absence, and how the Commission reviews attendance concerns.

Who this applies to. This policy applies to Full Members, Alternates, and Committee-only members. Attendance is recorded separately for Commission meetings and each committee assignment. Committee-only membership does not, by itself, require attendance at Commission meetings.

Overall attendance expectations. All members are expected to attend meetings and required activities connected to their role, come prepared to participate, and tell Commission staff as soon as possible when they cannot attend. Regular attendance and active participation help the Commission and its committees maintain quorum and carry out their work.

Full Members and Alternates. Full Members and Alternates are expected to attend regularly scheduled Commission meetings, their assigned committee meetings, priority-setting and allocation meetings, orientation, required trainings, and the Annual Conference.

Committee-only members. Committee-only members are expected to attend meetings of the committee to which they are assigned and required activities relevant to their role. Their committee attendance is reviewed under this policy.

Regular review and staff follow-up. The MCE Committee (MCE) will regularly review attendance records for Full Members, Alternates, and Committee-only members to identify people who may need follow-up. Staff will contact a member when two consecutive absences from meetings of the same body remain without notice after the 14-day reporting period. Staff may contact a member sooner when attendance or participation raises a concern.

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Formal attendance letter. After reviewing the attendance record and any staff follow-up, if a member has been deemed out of compliance with this Attendance Policy, MCE will decide whether to issue a formal attendance letter. The letter will list the meetings missed, explain how the member has fallen short of attendance expectations, and set a deadline for the member to contact the Executive Director about whether they wish to continue serving. The member may correct the record or explain their circumstances. If the member wishes to continue serving, the Executive Director will work with them on a corrective action plan, which may include a leave of absence or reassignment to another committee, where appropriate. Voluntary resignation may also be discussed. Staff will document the outcome and report back to MCE.

Action for Full Members and Alternates. Under Article III, Section 6 of the Bylaws, the Commission may recommend that a Full Member's or Alternate's seat be vacated after three months of consecutive absences. The Board of Supervisors decides whether to remove or replace a Full Member or Alternate. An attendance letter or corrective action plan does not itself remove the member or suspend voting privileges.

Action for committee-only members. If excessive absences remain unresolved, MCE may recommend removal of a Committee-only member to the Executive Committee and/or the full Commission, as appropriate. Committee-only members are approved by the Commission, rather than appointed by the Board of Supervisors. An attendance letter or corrective action plan does not itself end a committee appointment or suspend voting privileges.

Reporting an absence. Members should tell Commission staff as soon as they know they will miss a meeting, preferably before it begins. Notice may be sent by email or text and should identify the member and meeting. A member may give the reason in general terms; medical or other sensitive details are not required. Staff will record the absence as excused when the member provides a reason within 14 calendar days after the meeting. Without notice by that deadline, staff will record it as unexcused.

Excused absences. Reasons may include illness, personal or family emergency, vacation or travel, work conflicts, and other circumstances that make attendance impractical. Staff will consider circumstances individually, including disability-related needs, caregiving, transportation, technology, and other participation barriers. An excused absence remains an absence in the attendance record.

Extended absence. A member who expects an extended absence should contact the Executive Director as soon as practicable, share an estimated return date if known, and update staff if it changes. A leave of absence may be granted for up to three months. The Executive Director and MCE will review the circumstances and discuss next steps if a longer absence is anticipated. A leave does not waive the Bylaws' separate provision allowing a recommendation after three months of consecutive absences.

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Recordkeeping. Staff will maintain separate attendance records for the Commission and each committee and document notices, follow-up, letters, and corrective action plans. MCE will review the records regularly. Staff will report Full Member and Alternate attendance to the Board of Supervisors quarterly as required by Los Angeles County Code section 3.29.060 and Article III, Section 1 of the Bylaws. Any membership recommendation will follow the Bylaws and applicable Commission procedures.

Related authority. Commission Bylaws, Article II, Section 1, and Article III, Sections 1, 2, 5, and 6; Los Angeles County Code section 3.29.060. Required training and voting eligibility are governed by the applicable Bylaws and policies.

Approved By: _____ Date: _____

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Committee review points

- Staff follow-up after two consecutive absences without notice is proposed; the Bylaws separately allow a recommendation after three months of consecutive absences. However, given the reduced meeting schedule, follow-up after two consecutive absences may be most appropriate.
- Confirm whether to retain the 14-day notice period or shorten it to seven.
- Confirm the Committee-only membership review route under the forthcoming revised membership policy.

Changes from the August 2023 policy

- ✓ **Purpose**: Replaced the explanation of how to claim an absence with a short statement of the policy's attendance and follow-up purpose.
- ✓ **Scope:** Separated Full Members and Alternates from committee-only members. Attendance is tracked separately for the Commission and each assigned committee.
- ✓ **Participation:** Added overall expectations and separate expectations for Full Members and Alternates and for committee-only members.
- ✓ **Thresholds**: Removed the old three-consecutive meeting and six-per-year prohibition, which no longer fits the reduced schedule. Added staff follow-up when two consecutive absences from the same body remain without notice after the 14-day reporting period. MCE reviews attendance regularly and decides whether a formal letter is warranted.
- ✓ **Formal response**: Added an MCE-directed attendance letter, a stated deadline to contact the Executive Director, and an individualized corrective action plan. Listed leave, committee reassignment where appropriate, and voluntary resignation as possible outcomes.
- ✓ **Authority**: Distinguished Board-appointed Full Members and Alternates from Commission-approved committee-only members. MCE may recommend committee-only removal to the

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Executive Committee and/or full Commission. Removed the old link between absences and possible suspension of voting privileges.

- ✓ **Excused reasons and notice**: Retained the 14-day period pending MCE review, broadened examples beyond the old limited list, allowed general descriptions of sensitive circumstances, and retained email or text notice.
- ✓ **Extended absence**: Retained a leave of absence of up to three months, removed the outdated Operations Committee reference, and clarified that a leave does not waive the Bylaws' three-month consecutive-absence provision.
- ✓ **Equity and records**: Replaced a separate unaffiliated-consumer exception with individualized consideration of barriers for all members. Added records of notices, letters, and plans; retained quarterly Board reporting.

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Committee-Only Membership Policy #09.1007

Original approval January 11, 2007 | Last approved revision July 11, 2019; Proposed revision pending 10/22/26 MCE approval

Purpose. This policy explains how a standing committee identifies, reviews, nominates, and welcomes a Committee-only member. Committee-only membership brings lived and professional experience into committee work and creates another way for community members to participate.

Who may serve. A Committee-only member serves on one or more standing committees without holding a seat on the full Commission. The member may vote and count toward quorum on a committee to which the Commission has approved their assignment, but may not vote on matters before the full Commission. Committee-only members are approved by the Commission; they are not appointed by the Board of Supervisors.

Committee needs and size. Each standing committee will periodically review the skills, lived experience, community perspectives, workload, and quorum needed to do its work. Before recruiting, it will identify the need for additional members and the criteria it will use to consider applicants. The committee will consider its total size and ability to maintain quorum. To limit the influence of any one organization, no more than two voting members affiliated with the same agency may serve on a standing committee.

Recruitment and application. Commission staff will promote opportunities and invite applications from people with relevant lived or professional experience. Applicants will complete the Commission's universal membership application, including their interest, relevant experience, committee preference, and disclosures required for the role. A Board of Supervisors appointment application is not required for Committee-only service. Staff will explain the meeting, training, attendance, and conflict-of-interest expectations before the committee acts.

Review by the standing committee. The committee seeking a member will review applications against its stated needs and criteria, provide a fair opportunity for applicants to be considered, and vote on whether to recommend a candidate. The committee's recommendation will identify the proposed assignment and explain how the candidate meets its needs. A Committee-only candidate cannot be nominated to a committee without that committee's recommendation.

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MCE review and Commission approval. The committee will forward its recommendation and application to the Membership and Community Engagement (MCE) Committee. MCE will verify that the application and required disclosures are complete, review the committee's criteria and process for consistency with this policy, and forward its recommendation to the Executive Committee and/or full Commission through the normal agenda process. If MCE has a concern, it will return the matter to the recommending committee for discussion before making a different recommendation. The full Commission decides whether to approve the appointment. Voting membership begins on the date of Commission approval; staff will then update the roster and orientation records.

Participation and leadership. An approved Committee-only member has the same voting and quorum status as other voting members of their assigned committee and may participate in its working groups. Committee-only members may be considered for committee co-chair roles under the Bylaws' election process; committee co-chairs also serve on the Executive Committee. A Committee-only member already assigned to MCE may also be considered for election by the full Commission as an Executive Committee At-Large member. Neither role gives them a vote at full Commission meetings unless the Board of Supervisors separately appoints them to a Commission seat.

Terms and renewal. The term begins on the date the Commission approves the Committee-only appointment and lasts two years. A member may serve up to three consecutive two-year terms, subject to the Bylaws. Before a term ends, the member should submit a renewal application and the committee should review the continuing need and the member's participation. Renewal requires a new committee recommendation and Commission approval. Any exception to term limits must follow the Bylaws and applicable authority.

Member responsibilities. Committee-only members must follow the Commission's Code of Conduct, conflict-of-interest requirements, attendance policy, applicable trainings, and the duty statement for their role. They should prepare for meetings, contribute respectfully, and disclose circumstances that affect their eligibility or ability to participate.

Attendance, resignation, and removal. Members should notify staff if they can no longer serve. MCE will review attendance concerns under Policy 08.3204 and may recommend removal for excessive unresolved absences to the Executive Committee and/or full Commission. For other concerns, MCE will coordinate with the committee, provide the member an opportunity to respond, and bring any proposed action through the appropriate Commission process. The Commission decides whether to end a Committee-only appointment.

Records and notice. Staff will retain the application, committee recommendation, MCE review, Commission action, term dates, training record, and any renewal or departure notice. Staff will notify the applicant and committee of the Commission's decision and provide orientation after approval.

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Related authority. Los Angeles County Code sections 3.29.010(G), 3.29.050, and 3.29.060(E); Commission Bylaws, Article II, Sections 1, 3, and 10, and Articles VIII through XI; Attendance Policy 08.3204.

Approved By: _____ Date: _____

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Committee review points

Committee size. Members who provided feedback suggested a standard cap to protect quorum. Decide whether to set one limit for all standing committees, e.g., suggested 20ppl max; allow committee-specific limits approved by MCE or the Commission, or use the proposed size review without a fixed cap. The old two-per-agency rule is retained here with a Commission exception; confirm whether it should remain.

Changes from the August 2023 policy

- ✓ **Name and authority**. Replaces "Non-Commissioner Committee Appointments" with "Committee-Only Membership." Removes the obsolete 2004 ordinance quotation and Board appointment rationale.
- ✓ **Application and selection.** The old Board appointment and committee-specific application are removed.
- ✓ **Appointment and voting**. The standing committee recommends; the Executive Committee and/or Commission approves. A committee-only member votes and counts toward quorum on their approved committee, but has no full Commission vote.
- ✓ **Membership need**. Participates in committee-driven recruitment and criteria, adds review of committee size and quorum, and keeps a proposed two-per-agency limit for MCE discussion.
- ✓ **Application**. Uses the Commission's universal membership application and removes the Board appointment application.
- ✓ **Co-chair eligibility**. The old policy barred committee-only co-chairs. The revised Bylaws elect committee co-chairs from committee membership and include committee co-chairs and committee-only members in Executive Committee membership.
- ✓ **MCE review**. Replaces Operations Committee references with MCE and clarifies the review and referral path while preserving the originating committee's recommendation.
- ✓ **Leadership**. Removes the old bar on committee-only co-chairs and clarifies that Committee-only members assigned to MCE may be considered for Executive Committee At-Large election by the full Commission. Neither role provides a full Commission vote.

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- ✓ **Terms**. Retains two-year terms, adds the Bylaws' three-term limit and renewal process, and ties the start date to Commission approval.
- ✓ **Accountability**. Adds attendance, training, conflict-of-interest, recordkeeping, resignation, and removal steps consistent with Commission approval authority.

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Commission Membership Application Review and Selection Policy #09.4205

Original Approval: 9/6/2004 | Revision(s): 5/12/2011; 2013; 4/27/16; 4/12/16; 5/12/16; 5/2/17; 5/22/17; 9/14/17; 05/10/18; 2/9/23; 1/11/24 | Proposed revision pending 10/22/26 MCE approval

Purpose. This policy sets out how the Commission recruits, reviews, evaluates, and nominates candidates for Full Member and Alternate seats, including renewals. It supports an open process using publicized criteria, representation requirements, and clear communication with applicants.

Scope and authority. This policy applies to candidates for Board of Supervisors (Board)-appointed Commission seats. Alternates follow the same open nomination, evaluation, and scoring process as Full Members. Committee-only membership is addressed in Policy 09.1007; those members are approved by the Commission rather than appointed by the Board of Supervisors.

Recruitment and open applications. The Membership & Community Engagement Committee (MCE) will develop recruitment strategies and lead efforts to fill vacancies. MCE will regularly review the Commission's overall composition to identify recruitment needs and opportunities. HRSA requires planning council membership to reflect the demographics of the local HIV epidemic. DHSP provides the HIV prevalence information used to assess how well the Commission's composition reflects Los Angeles County. Recruitment is a Commission-wide effort, and members are encouraged to support outreach and help connect prospective applicants with the Commission. Candidates may apply directly or be recommended by stakeholders, including a member of the Board of Supervisors or a Supervisorial office. Board-recommended applicants will receive full consideration and follow the same application, interview, evaluation, and nomination process as all other applicants. The Commission, with support from staff and MCE, will seek candidates who meet the requirements for available membership categories and help the Commission reflect the communities affected by HIV across Los Angeles County. Recruitment should include meaningful outreach to unaffiliated consumers and populations disproportionately impacted by HIV.

Application and initial review. To initiate the Commission's application review process, candidates must submit the Commission-approved application. Staff will acknowledge receipt, check completeness and seat qualifications, request missing information, and explain the time commitment, committee assignments, orientation, training, and appointment steps. Staff will help applicants complete the form when needed, and verify relevant information or references when appropriate. Applicants employed by agencies contracted to provide Ryan White Program services through DHSP must submit a letter from their employer confirming support for their Commission

service. Staff will complete its review and schedule the interview within 60 days of receiving the application, barring reasonable delays, such as missing information or scheduling conflicts. Staff will document the reason for any delay and keep the candidate informed. The Board of Supervisors' Statement of Qualifications remains a separate County appointment requirement. A candidate may withdraw at any time before Board appointment by contacting staff.

Interview and conflicts. Eligible candidates for Full Member or Alternate seats will be interviewed. Candidates applying for Committee-only membership may be referred to a committee. Renewing members must reapply and may be interviewed if MCE determines an interview would be useful.

Staff will convene an interview panel of at least three MCE members and provide the panel with a consistent set of core questions approved by MCE, along with the scoring criteria, in advance. The interview is a two-way conversation: reviewers may ask the core questions and relevant follow-up questions, and candidates will have time to ask questions.

Reviewers will avoid unnecessary questions about private health or other sensitive matters. Any information needed to establish a seat qualification will be handled confidentially. A reviewer with a personal, employment, reference, or other material conflict involving a candidate must disclose the conflict and recuse from evaluating that candidate. Staff will arrange a replacement reviewer as needed and document the recusal.

Evaluation and scoring. The interview panel will evaluate and score each candidate using Commission-approved criteria and forms, then submit its recommendation to the MCE Committee for consideration.

The criteria should address the qualifications for the open seat, relevant lived or professional experience, ability to fulfill member duties, and contribution to required representation and reflectiveness. Reviewers will score candidates independently using the adopted form and submit a summary score sheet, including whether the candidate met any applicable threshold. If more than one candidate is interviewed for the same seat, the panel will also document any material reasons for recommending one qualified candidate over another.

Scores will inform the decision but will not, by themselves, guarantee a nomination. Changes to the evaluation criteria or scoring forms require Commission approval. MCE may maintain or update routine instructions for using the approved forms, provided those instructions do not change the criteria or scoring method. MCE may request clarification or a second interview and update the documented evaluation accordingly.

Seat and composition review. Before recommending a candidate, MCE will verify the seat description and vacancy, applicable qualifications, term information, and current Commission and committee composition. The review will address the Bylaws' required representation, the requirement that at least 33 percent of Commission members be unaffiliated RWHAP Part A

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consumers, reflectiveness of both the full membership and unaffiliated consumers, and participation by impacted communities.

To support balanced representation, limit the potential for undue influence by any one agency, and protect and lift the consumer voice, no more than two individuals affiliated with the same agency may serve on the Commission at one time. No more than two individuals affiliated with the same agency may serve on any one committee at a time. Committee counts include Commission members assigned to the committee and Committee-only members.

Staff will maintain a current vacancy and nominations matrix that tracks Commission and committee composition. MCE will consider more than one candidate for a seat when feasible and document outreach and the reason for proceeding with one candidate when the pool is limited.

Renewal review. A member seeking another term must submit a renewal application before the term expires. MCE will review the member's eligibility, seat fit, attendance and participation under the current Attendance Policy, committee service, required training, and any documented corrective action plan. MCE will consider the member's explanation and support needs. A member may request an interview to discuss their renewal. A concern does not automatically bar renewal; MCE will document its recommendation and any conditions or follow-up. Term limits follow the Bylaws.

MCE recommendation and Commission action. MCE will consider the evaluation, seat fit, composition needs, and any conflicts in a committee meeting and recommend a candidate for a specified seat to the Executive Committee, followed by the full Commission. Staff will provide the Commission with the recommendation and appropriate supporting materials while protecting sensitive applicant information. The Commission decides whether to nominate the candidate to the Board of Supervisors. MCE may defer a recommendation for a stated reason and revisit it when the issue is resolved.

Board appointment and onboarding. After Commission approval, staff will forward the nomination through the County's appointment process and keep the candidate informed. The Board will provide the applicant its Statement of Qualifications through its own electronic process. The Board of Supervisors appoints Full Members and Alternates. Commission approval alone does not confer a seat or voting rights. Staff will notify the candidate of Board action, record the appointment and term, coordinate committee assignment with the Commission Co-Chairs, and arrange orientation and required training. A seat change requiring Board action will follow the same approval and appointment route.

Applicant communication and records. Staff will communicate with applicants when an application is incomplete, when MCE defers or declines to recommend, when the Commission acts, and when the Board acts. For a deferral, staff will state the next review step and whether updated materials are needed. MCE will keep evaluations, scoring records, recusal records, vacancy and composition

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reviews, recommendations, and notices in accordance with County retention and confidentiality requirements. Applicants may correct factual information and may reapply for a future opportunity.

Policy consolidation. Upon Commission adoption, this policy supersedes former Policies 09.4203 (Commission Membership Applications) and 09.4204 (Commission Candidate Interviews) for Full Member and Alternate applications and interviews. Committee-only application and selection procedures remain in Policy 09.1007.

Related authority. Commission Bylaws, Articles II, III, IV, and XI; Los Angeles County Code Chapter 3.29; Policies 09.1007 and 08.3204; applicable Ryan White Part A membership requirements. The Commission-approved application, seat duty statements, and evaluation forms implement this policy.

Approved By: _____ Date: _____

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Committee review points

Confirm the target time for application review and applicant updates. The prior 60-day evaluation deadline should be considered considering MCE meeting frequency and staff capacity.

Changes from the former policies

- ✓ **Combined Policy 09.4205 (membership evaluation and nominations), Policy 09.4203 (applications), and Policy 09.4204** (candidate interviews) into one process for Board-appointed Full Members and Alternates. Committee-only membership remains under Policy 09.1007.
- ✓ **Transferred recruitment, screening, interviews, evaluation, scoring, and recommendations** from the former Operations Committee to MCE, while making recruitment a Commission-wide effort supported by members.
- ✓ **Added review of HIV prevalence information provided by DHSP** to assess reflectiveness of the Commission and unaffiliated consumers, alongside required membership categories and the 33 percent unaffiliated consumer requirement among voting Commission members.
- ✓ **Applied the no-more-than-two-per-agency limit** to Commission membership and to membership on each committee. Added tracking of committee composition and stated the purpose of limiting imbalance and undue agency influence while protecting and lifting the consumer voice.
- ✓ **Clarified open recruitment and public availability of selection criteria upon request,** outreach to unaffiliated consumers and disproportionately affected communities, and full, consistent consideration of applicants recommended by Board of Supervisors members or Supervisorial offices.

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- ✓ **Retained staff support, completeness checks, and relevant verification**. Set a 60-day application-to-interview target, subject to reasonable documented delays; require an employer support letter before MCE review for applicants employed by DHSP-contracted Ryan White service agencies; and treat the Board Statement of Qualifications as a separate County appointment requirement.
- ✓ **Updated interviews to use a panel of at least three MCE members**, approved core questions, an applicant FAQ, time for candidate questions, conflict disclosure and recusal, staff-arranged replacement reviewers, and careful handling of sensitive information. Retained MCE discretion to interview renewing members and applicable open-meeting requirements.
- ✓ **Clarified that the interview panel evaluates and scores independently** using Commission-approved criteria and forms, then submits a summary scoresheet and recommendation to MCE. Added comparative review and documented reasons when more than one qualified candidate seeks the same seat; a score alone does not guarantee nomination.
- ✓ **Removed the former automatic 60-point cutoff and highest-score selection rule**. Any qualifying threshold must be established through the Commission-approved process and reflected on the summary scoresheet.
- ✓ **Replaced the categorical two-application requirement and one-year temporary hold** with consideration of more than one candidate when feasible, documented outreach, and a recorded reason when the pool is limited.
- ✓ **Replaced outdated absence thresholds** for renewals with the current Attendance Policy and individualized review of participation, training, committee service, and corrective action.
- ✓ **Clarified the sequence**: MCE recommendation, Executive Committee recommendation, full Commission nomination, Board appointment, then onboarding. Commission approval alone does not confer a Board-appointed seat or vote.

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