



LOS ANGELES COUNTY
COMMISSION ON HIV



3530 Wilshire Boulevard, Suite 1140, Los Angeles, CA 90010
TEL. (213) 738-2816 · FAX (213) 637-4748
WEBSITE: <http://hiv.lacounty.gov> | EMAIL: hivcomm@lachiv.org

COMMISSION ON HIV MEETING

**Thursday, March 14, 2019
9:00 AM – 11:45 AM**

**St. Anne's Conference Center, Foundation Room
155 North Occidental Blvd.
Los Angeles CA 90026**



Join the movement in ending the HIV/AIDS epidemic in Los Angeles County, once and for all.

Visit www.LACounty.HIV



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VISION

A comprehensive, sustainable, accessible system of prevention and care that empowers people at-risk, living with or affected by HIV to make decisions and to maximize their lifespans and quality of life.

MISSION

The Los Angeles County Commission on HIV focuses on the local HIV/AIDS epidemic and responds to the changing needs of People Living With HIV/AIDS (PLWHA) within the communities of Los Angeles County.

The Commission on HIV provides an effective continuum of care that addresses consumer needs in a sensitive prevention and care/treatment model that is culturally and linguistically competent and is inclusive of all Service Planning Areas (SPAs) and Health Districts (HDs).



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GUIDELINES FOR CONDUCT

The Los Angeles County Commission on HIV has played an active role in shaping HIV services in this County and in the State for over a decade. The dedication to providing quality services to people with and at risk of HIV/AIDS by people who are members of this body, both past and present, is unparalleled.

In order to encourage the active participation of all members and to address the concerns of many Commissioners, consumers and other interested members of the community, it is important that meetings take place in a “safe” environment. A “safe” environment is one that recognizes differences, while striving for consensus and is characterized by consistent professional and respectful behavior. As a result, the Commission has adopted and is consistently committed to implementing the following Guidelines for Conduct for Commission, committee and associated meetings.

Similar meeting ground rules have been developed and successfully used in large group processes to tackle difficult issues. Their intent is not to discourage meaningful dialogue, but to recognize that differences and even conflict can result in highly creative solutions to problems when approached in a respectful and professional manner.

The following should be adhered to by all participants and stakeholders:

- 1) Be on Time for Meetings
- 2) Stay for the Entire Meeting
- 3) Show Respect to Invited Guests, Speakers and Presenters
- 4) Listen
- 5) Don't Interrupt
- 6) Focus on Issues, Not People
- 7) Don't just Disagree, Offer Alternatives
- 8) Give Respectful, Constructive Feedback
- 9) Don't Judge
- 10) Respect Others' Opinions
- 11) Keep an Open Mind to Others' Opinions
- 12) Allow Others to Speak
- 13) Respect Others' Time
- 14) Begin and End on Time
- 15) Have All the Issues on the Table and No “Hidden Agendas”
- 16) Minimize Side Conversations
- 17) Don't Monopolize the Discussion
- 18) Don't Repeat What Has Already Been Said
- 19) If Beepers or Cell Phones Must Be On, Keep Them on Silent or Vibrate

1. APPROVAL OF THE AGENDA:

- A. Agenda (**MOTION #1**)
- B. Membership Roster
- C. Committee Assignments
- D. Commission Member Conflict of Interest
- E. March – June 2019 Commission Meeting Calendar
- F. Geographic Maps



LOS ANGELES COUNTY
COMMISSION ON HIV



**[REVISED] AGENDA FOR THE REGULAR MEETING OF THE
LOS ANGELES COUNTY COMMISSION ON HIV (COH)**

(213) 738-2816 / FAX (213) 637-4748

EMAIL: hivcomm@lachiv.org WEBSITE: <http://hiv.lacounty.gov>

Thursday, March 14, 2019 | 9:00 AM – 11:45 AM

St. Anne's Conference Center
Foundation Room
155 N. Occidental Blvd., Los Angeles CA 90026

Notice of Teleconferencing Site:
California Department of Public Health, Office of AIDS
1616 Capitol Ave, Suite 74-616
Sacramento, CA 95814

AGENDA POSTED: March 8, 2019

ATTENTION: Any person who seeks support or endorsement from the Commission on any official action may be subject to the provisions of Los Angeles County Code, Chapter 2.160 relating to lobbyists. Violation of the lobbyist ordinance may result in a fine and other penalties. For information, call (213) 974-1093.

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 Dina Jauregui at (213) 738-2816 or via email at djauregui@lachiv.org.

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 Dina Jauregui al (213) 738-2816 (teléfono), o por correo electrónico á djauregui@lachiv.org, por lo menos 72 horas antes de la junta.

SUPPORTING DOCUMENTATION can be obtained at the Commission on HIV Website at: <http://hiv.lacounty.gov>. The Commission Offices are located in Metroplex Wilshire, one building west of the southwest corner of Wilshire and Normandie. Validated parking is available in the parking lot behind Metroplex, just south of Wilshire, on the west side of Normandie.

NOTES on AGENDA SCHEDULING, TIMING, POSTED and ACTUAL TIMES, TIME ALLOTMENTS, and AGENDA ORDER: Because time allotments for discussions and decision-making regarding business before the Commission's standing committees cannot always be predicted precisely, posted times for items on the meeting agenda may vary significantly from either the actual time devoted to the item or the actual, ultimate order in which it was addressed on the agenda. Likewise, stakeholders may propose adjusting the order of various items at the commencement of the committee meeting (Approval of the Agenda), or times may be adjusted and/or modified, at the co-chairs' discretion, during the course of the meeting.

If a stakeholder is interested in joining the meeting to keep abreast of or participate in consideration of a specific agenda item, the Commission suggests that the stakeholder plan on attending the full meeting in case the agenda order is modified or timing of the items is altered. All Commission committees make every effort to place items that they are aware involve external stakeholders at the top of the agenda in order to address and resolve those issues more quickly and release visiting participants from the obligation of staying for the full meeting.

External stakeholders who would like to participate in the deliberation of discussion of an a posted agenda item, but who may only be able to attend for a short time during a limited window of opportunity, may call the Commission's Executive Director in advance of the meeting to see if the scheduled agenda order can be adjusted accordingly. Commission leadership and staff will make every effort to accommodate reasonable scheduling and timing requests—from members or other stakeholders—within the limitations and requirements of other possible constraints.

Call to Order and Roll Call

9:00 A.M. – 9:02 A.M.

I. ADMINISTRATIVE MATTERS

- | | | | |
|----|-----------------------------|------------------|-----------------------|
| 1. | Approval of Agenda | MOTION #1 | 9:02 A.M. – 9:04 A.M. |
| 2. | Approval of Meeting Minutes | MOTION #2 | 9:04 A.M. – 9:06 A.M. |

II. REPORTS

- | | | | |
|----|------------------------------------------------------------------------------|--|-----------------------|
| 3. | Executive Director/Staff Report | | 9:06 A.M. – 9:10 A.M. |
| | A. Welcome and Introductions | | |
| | B. COH Website Review/Feedback | | |
| 4. | Co-Chair Report | | 9:10 A.M. – 9:15 A.M. |
| | A. Meeting Management Reminders | | |
| | B. Conflict of Interest Reminder | | |
| | C. Executive At-Large Member Open Nominations | | |
| | D. February 14, 2019 COH Meeting Follow-Up Items | | |
| | (1) National Black HIV/AIDS Awareness Day (NBHAAD) Panel Discussion | | |
| | E. Recognition of National Women and Girl's HIV/AIDS Awareness Day (NWGHAAD) | | |
| 5. | LA County Department of Public Health Report | | 9:15 A.M. – 9:30 A.M. |
| | A. Division of HIV/STD Programs (DHSP) Report | | |
| | Mario J. Pérez, MPH, Director | | |

III. DISCUSSION

- | | | | |
|----|--------------------------------------------------------------|--|------------------------|
| 6. | Los Angeles County HIV/AIDS Strategy (LACHAS) | | 9:30 A.M. – 10:30 A.M. |
| | A. Stigma Reduction Action Planning Series Tim Vincent, MS | | |

IV. REPORTS

- | | | | |
|----|---------------------------------------|--|-------------------------|
| 7. | California Office of AIDS (OA) Report | | 10:30 A.M. – 10:40 A.M. |
|----|---------------------------------------|--|-------------------------|

V. BREAK

10:40 A.M. – 10:45 A.M.

8. Standing Committee Reports 10:45 A.M. – 11:15 A.M.
- A. Operations Committee
 - (1) Assessment of the Administrative Mechanism (AAM)
 - (a) AAM Workgroup
 - (2) Membership Management
 - (3) Policies and Procedures
 - (4) Code of Conduct
 - B. Standards and Best Practices (SBP) Committee
 - (1) Ryan White Program Allowable Use of Funds
 - (2) Standards of Care Review
 - C. Planning, Priorities & Allocations (PP&A) Committee
 - (1) Strategies for Maximizing Part A Funding
 - (2) Multi-Year Advance Planning
 - D. Public Policy Committee
 - (1) County, State and Federal Legislation & Policy
 - (a) 2019 Legislative Docket
 - (b) LACHAS Policy Work Group
 - (2) County, State and Federal Budget
9. Caucus and Other Task Force and Work Group Reports 11:15 A.M. – 11:20 A.M.
- A. March 27, 2019 Consumer Advisory Board (CAB) Conference
Registration Open | California Endowment
 - B. Aging Task Force Update
10. LA County Department of Public Health Report 11:20 A.M. – 11:30 A.M.
- A. Vaccine Preventable Disease Control Program (VPDCP) |
Franklin D Pratt, MD, MPHTM, FACEP, Medical Director

VI. MISCELLANEOUS

11. Public Comment 11:30 A.M. – 11:36 A.M.
Opportunity for members of the public to address the Commission
On items of interest that are within the jurisdiction of the Commission.
12. Commission New Business Items 11:36 A.M. – 11:42 P.M.
Opportunity for Commission 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.

13. Announcements 11:42 A.M. – 11:45 A.M.
Opportunity for members of the public to announce community events, workshops, trainings, and other related activities.
14. Adjournment and Roll Call 11:45 A.M.
Adjournment in memory of former Commissioner, Jim Chud, for the meeting of March 14, 2019.

PROPOSED MOTION(s)/ACTION(s):	
MOTION #1:	Approve the Agenda Order, as presented or revised.
MOTION #2:	Approve the Commission meeting minutes, as presented or revised.

COMMISSION ON HIV MEMBERS:			
Al Ballesteros, MBA, Co-Chair	Grissel Granados, MSW, Co-Chair	Traci Bivens-Davis	Jason Brown
Alasdair Burton (Alternate)	Joseph Cadden, MD	Danielle Campbell, MPH	Raquel Cataldo
Michele Daniels	Erika Davies	Susan Forrest (Alternate)	Aaron Fox, MPM
Alexander Luckie Fuller	Jerry D. Gates, PhD	Joseph Green	Terry Goddard II, MA
Felipe Gonzalez	Bridget Gordon	Diamante Johnson	William King, MD, JD
Lee Kochems, MA	Bradley Land	David P. Lee, MPH, LCSW	Eric Paul Leue
Abad Lopez	Eduardo Martinez (Alternate)	Miguel Martinez, MSW, MPH	Anthony Mills, MD
Carlos Moreno	Derek Murray	Katja Nelson, MPP	Jazielle Newsome
Frankie Darling-Palacios	Raphael Peña	Mario Pérez, MPH	Juan Preciado
Ricky Rosales	Martin Sattah, MD	LaShonda Spencer, MD	Kevin Stalter
Yolanda Sumpter	Greg Wilson	Russell Ybarra	
MEMBERS:	42		
QUORUM:	22		



2019 MEMBERSHIP ROSTER | UPDATED 3/6/19

APPROVED BY COH ON 7/25/18

SEAT NO.	MEMBERSHIP SEAT	Commissioners Seated	Committee Assignment	COMMISSIONER	AFFILIATION (IF ANY)	TERM BEGIN	TERM ENDS	ALTERNATE
1	Medi-Cal representative	1	SBP	Vacant		July 1, 2017	June 30, 2019	
2	City of Pasadena representative	1	SBP	Erika Davies	City of Pasadena Department of Public Health	July 1, 2018	June 30, 2020	
3	City of Long Beach representative	1	PP	Vacant		July 1, 2017	June 30, 2019	
4	City of Los Angeles representative	1	PP	Ricky Rosales	AIDS Coordinator's Office, City of Los Angeles	July 1, 2018	June 30, 2020	
5	City of West Hollywood representative	1	PP&A	Derek Murray	City of West Hollywood	July 1, 2017	June 30, 2019	
6	Director, DHSP	1	EXC/PP&A	Mario Perez, MPH	DHSP, LA County Department of Public Health	July 1, 2018	June 30, 2020	
7	Part B representative	1	PP&A	Karl Hallman	California Department of Public Health	July 1, 2018	June 30, 2020	
8	Part C representative	1	EXC/PP	Aaron Fox, MPH	Los Angeles LGBT Center	July 1, 2017	June 30, 2020	
9	Part D representative	1	PP&A	LaShonda Spencer, MD	LAC + USC MCA Clinic, LA County Department of Health Services	July 1, 2018	June 30, 2020	
10	Part F representative	1	PP	Jerry D. Gates, PhD	Keck School of Medicine of USC	July 1, 2017	June 30, 2019	
11	Provider representative #1	1	EXC/ISBP	Joseph Cadden, MD	Rand Schradler Clinic (SPA1), LA County Department of Health Services	July 1, 2017	June 30, 2019	
12	Provider representative #2	1	SBP	David Lee, MPH, LCSW	Charles Drew University	July 1, 2018	June 30, 2020	
13	Provider representative #3	1	EXC/PP&A	Miguel Martinez, MSW, MPH	Children's Hospital Los Angeles	July 1, 2017	June 30, 2019	
14	Provider representative #4	1	EXC/OPS	Raquel Cataldo	Tarzana Treatment Center	July 1, 2018	June 30, 2020	
15	Provider representative #5	1	PP	Terry Goddard, MA	Alliance for Housing and Healing	July 1, 2017	June 30, 2019	
16	Provider representative #6	1	PP&A	Anthony Mills, MD	Southern CA Men's Medical Group	July 1, 2018	June 30, 2020	
17	Provider representative #7	1	PP&A	Frankie Darling-Palacios	Los Angeles LGBT Center	July 1, 2017	June 30, 2019	
18	Provider representative #8	1	PP	Martin Sattah, MD	Rand Schradler Clinic (SPA1), LA County Department of Health Services	July 1, 2018	June 30, 2020	
19	Unaffiliated consumer, SPA 1	1	OPS	Michele Daniels	Unaffiliated Consumer	July 1, 2017	June 30, 2019	
20	Unaffiliated consumer, SPA 2	1	PP&A	Abad Lopez	Unaffiliated Consumer	July 1, 2018	June 30, 2020	
21	Unaffiliated consumer, SPA 3	1	EXC/PP&A	Jason Brown	Unaffiliated Consumer	July 1, 2017	June 30, 2019	
22	Unaffiliated consumer, SPA 4	1	EXC/ISBP	Kevin Stalter	Unaffiliated Consumer	July 1, 2018	June 30, 2020	
23	Unaffiliated consumer, SPA 5	1	PP&A	Yolanda Sumpter	Unaffiliated Consumer	July 1, 2017	June 30, 2019	
24	Unaffiliated consumer, SPA 6	1	Vacant			July 1, 2018	June 30, 2020	
25	Unaffiliated consumer, SPA 7	1	PP&A	Raphael Pena	Unaffiliated Consumer	July 1, 2017	June 30, 2019	Alasdair Burton (PP)
26	Unaffiliated consumer, SPA 8	1	Vacant			July 1, 2018	June 30, 2020	Susan Forrest (PP&A)
27	Unaffiliated consumer, Supervisorial District 1	1	OPS	Carlos Moreno		July 1, 2017	June 30, 2019	
28	Unaffiliated consumer, Supervisorial District 2	1	Vacant			July 1, 2018	June 30, 2020	
29	Unaffiliated consumer, Supervisorial District 3	1	Vacant			July 1, 2017	June 30, 2019	
30	Unaffiliated consumer, Supervisorial District 4	1	Vacant			July 1, 2018	June 30, 2020	
31	Unaffiliated consumer, Supervisorial District 5	1	PP&A	Diamante Johnson	Unaffiliated Consumer	July 1, 2017	June 30, 2019	
32	Unaffiliated consumer, at-large #1	1	PP&A	Russell Ybarra	Unaffiliated Consumer	July 1, 2018	June 30, 2020	
33	Unaffiliated consumer, at-large #2	1	EXC/OPS	Joseph Green	Unaffiliated Consumer	July 1, 2017	June 30, 2019	
34	Unaffiliated consumer, at-large #3	1	SBP	Felipe Gonzalez	Unaffiliated Consumer	July 1, 2018	June 30, 2020	
35	Unaffiliated consumer, at-large #4	1	OPS	Bridget Gordon	Unaffiliated Consumer	July 1, 2017	June 30, 2019	
36	Representative, Board Office 1	1	EXC	Al Ballesteros, MBA	JWCH Institute, Inc.	July 1, 2018	June 30, 2020	
37	Representative, Board Office 2	1	EXC/OPS	Traci Bivens-Davis	N/A	July 1, 2017	June 30, 2019	
38	Representative, Board Office 3	1	EXC/PP	Katja Nelson, MPP	APLA	July 1, 2018	June 30, 2020	
39	Representative, Board Office 4	1	Vacant			July 1, 2017	June 30, 2019	
40	Representative, Board Office 5	1	SBP	Bradley Land	Unaffiliated Consumer	July 1, 2018	June 30, 2020	
41	Representative, HOPWA	1	Vacant			July 1, 2017	June 30, 2019	
42	Behavioral/social scientist	1	PP	Lee Kochems	Unaffiliated Consumer	July 1, 2018	June 30, 2020	
43	Local health/hospital planning agency representative	1	Vacant			July 1, 2017	June 30, 2019	
44	HIV stakeholder representative #1	1	EXC	Grissel Granados, MSW	Children's Hospital Los Angeles	July 1, 2018	June 30, 2020	
45	HIV stakeholder representative #2	1	PP	Greg Wilson	In the Meantime Men's Group	July 1, 2017	June 30, 2019	
46	HIV stakeholder representative #3	1	OPS	Juan Preciado	Northeast Valley Health Corporation	July 1, 2018	June 30, 2020	
47	HIV stakeholder representative #4	1	PP	Eric Paul Leue	Free Speech Coalition	July 1, 2017	June 30, 2019	
48	HIV stakeholder representative #5	1	OPS	Danielle Campbell, MPH	UCLA/MLKCH	July 1, 2018	June 30, 2020	
49	HIV stakeholder representative #6	1	OPS	Alexander Luckie Fuller	N/A	July 1, 2017	June 30, 2019	
50	HIV stakeholder representative #7	1	PP&A	William D. King, MD, JD, AAHIVS	W. King Health Care Group	July 1, 2018	June 30, 2020	
51	HIV stakeholder representative #8	1	SBP	Jazelle Newsome	St. John's Well Child & Family Center	July 1, 2018	June 30, 2020	
TOTAL:								41

LEGEND: EXC-EXECUTIVE COMM | OPS-OPERATIONS COMM | PP&A-PLANNING, PRIORITIES & ALLOCATIONS COMM | PPC-PUBLIC POLICY COMM | SBP-STANDARDS & BEST PRACTICES COMM



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COMMITTEE ASSIGNMENTS

(Updated: March 11, 2019)

Subject to Change

Committee Member Name/ Alternate	Member Category	Affiliation
<i>* = Primary Committee Assignment</i>	<i>** = Secondary Committee Assignment</i>	
EXECUTIVE COMMITTEE		
Regular meeting day: 4 th Thursday of the month		Regular meeting time: 1:00pm–3:00pm
Number of Voting Members: 13	Number of Quorum: 7	
Grissel Granados, MSW	Co-Chair, Comm./Exec.*	Commissioner
Al Ballesteros, MBA	Co-Chair, Comm./Exec.*	Commissioner
Traci Bivens-Davis	Co-Chair, Operations	Commissioner
Jason Brown	Co-Chair, PP&A	Commissioner
Miguel Martinez	Co-Chair, PP&A	Commissioner
Joseph Cadden, MD	Co-Chair, SBP	Commissioner
Raquel Cataldo	At-Large Member*	Commissioner
Aaron Fox, MPM	Co-Chair, Public Policy	Commissioner
Joseph Green	At-Large Member*	Commissioner
Katja Nelson	Co-Chair, Public Policy	Commissioner
Mario Pérez, MPH	DHSP Director	Commissioner
Juan Preciado	Co-Chair, Operations	Commissioner
Kevin Stalter	Co-Chair, SBP	Commissioner

OPERATIONS COMMITTEE			
Regular meeting day: 4 th Thursday of the month		Regular meeting time: 10:00am-12:00pm	
Number of Voting Members: 9		Number of Quorum: 5	
Traci Bivens-Davis	Committee Co-Chair*	Commissioner	
Juan Preciado	Committee Co-Chair*	Commissioner	
Danielle Campbell, MPH	*	Commissioner	
Raquel Cataldo	*	Commissioner	
Michele Daniels	*	Commissioner	
Bridget Gordon	*	Commissioner	
Joseph Green	*	Commissioner	
Carlos Moreno	*	Commissioner	
Alexander Luckie Fuller	*	Commissioner	

Committee Assignment List

Updated: March 11, 2019

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Committee Member Name	Member Category	Affiliation
* = <i>Primary Committee Assignment</i>	** = <i>Secondary Committee Assignment</i>	
PLANNING, PRIORITIES and ALLOCATIONS (PP&A) COMMITTEE		
Regular meeting day: 3 rd Tuesday of the month		Regular meeting time: 1:00-4:00 PM
Number of Voting Members: 14		Number of Quorum: 8
Jason Brown	Committee Co-Chair*	Commissioner
Miguel Martinez, MPH, MSW	Committee Co-Chair*	Commissioner
Susan Forrest	*	Alternate
Karl Halfman	*	Commissioner
William D. King, MD, JD, AAHIVS	*	Commissioner
Abad Lopez	*	Commissioner
Anthony Mills, MD	*	Commissioner
Derek Murray	*	Commissioner
Diamante Johnson	*	Commissioner
Frankie Darling Palacios	*	Commissioner
Raphael Pena	*	Commissioner
LaShonda Spencer, MD	*	Commissioner
Yolanda Sumpter	*	Commissioner
Russell Ybarra	*	Commissioner
TBD	DHSP staff	DHSP Staff

PUBLIC POLICY COMMITTEE		
Regular meeting day: 1st Monday of the month		Regular meeting time: 1:00 pm-3:00pm
Number of Voting Members: 12		Number of Quorum: 7
Aaron Fox, MPM	Committee Co-Chair*	Commissioner
Katja Nelson	Committee Co-Chair*	Commissioner
Jerry Gates, PhD	*	Commissioner
Lee Kochems, MA	*	Commissioner
Eduardo Martinez	*	Alternate
Terry Goddard, MA	*	Commissioner
Eric Paul Leue	*	Commissioner
Ricky Rosales	*	Commissioner
Martin Sattah, MD	*	Commissioner
Greg Wilson	*	Commissioner
Alasdair Burton	*	Alternate
Kyle Baker	DHSP staff	DHSP representative

Committee Assignment List

Updated: March 11, 2019

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Committee Member Name	Member Category	Affiliation
* = <i>Primary Committee Assignment</i>	** = <i>Secondary Committee Assignment</i>	

STANDARDS AND BEST PRACTICES (SBP) COMMITTEE		
Regular meeting day:	1 st Thursday of the month	Regular meeting time: 10:00am-12:00pm
Number of Voting Members: 8		Number of Quorum: 5
Joseph Cadden, MD	Committee Co-Chair*	Commissioner
Kevin Stalter	Committee Co-Chair*	Commissioner
Erika Davies	*	Commissioner
Felipe Gonzalez	*	Commissioner
Bradley Land	*	Commissioner
David Lee, MPH, LCSW	*	Commissioner
Jazielle Newsome	*	Commissioner
Wendy Garland, MPH	DHSP staff	DHSP representative

CONSUMER CAUCUS		
Regular meeting day:	Following Comm. mtg.	Regular meeting time: 1:00pm-3:00pm
<i>*Open membership to consumers of HIV prevention and care services*</i>		
Russell Ybarra	Co-Chair	Commissioner
Jorge Orellana-Merida (Geo)	Co-Chair	Commissioner
Al Ballesteros, MBA	Member	Commissioner
Jason Brown	Member	Commissioner
Alasdair Burton	Member	Alternate
Michele Daniels	Member	Commissioner
Grissel Granados, MSW	Member	Commissioner
Joseph Green	Member	Commissioner
Bridget Gordon	Member	Commissioner
Diamante Johnson	Member	Commissioner
Lee Kochems, MA	Member	Commissioner
Brad Land	Member	Commissioner
Abad Lopez	Member	Commissioner
Eduardo Martinez	Member	Alternate
Anthony Mills, MD	Member	Commissioner
Carlos Moreno	Member	Commissioner
Raphael Pena	Member	Commissioner
Jazeille Newsome	Member	Commissioner
Kevin Stalter	Member	Commissioner
Yolanda Sumpter	Member	Commissioner

Committee Assignment List

Updated: March 11, 2019

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Committee Member Name	Member Category	Affiliation
* = <i>Primary Committee Assignment</i>	** = <i>Secondary Committee Assignment</i>	

AGING TASK FORCE (ATF)			
Regular meeting day:		4 TH Thursday of the month	Regular meeting time: 10:00am-12:00pm
Al Ballesteros, MBA	Member		Commissioner
Jason Brown	Member		Commissioner
Alasdair Burton	Member		Commissioner
Bradley Land	Member		Commissioner
Mark McGrath	Community Member		
Craig Pulsipher, MPP, MSW	Member		

TRANSGENDER TASK FORCE
<i>On Hiatus Until Further Notice</i>

WOMEN'S CAUCUS		
Regular meeting day:	3 rd Wednesday of the month	Regular meeting time: 10:00am-12:00pm
Danielle Campbell	Member	Commissioner
Bridget Gordon	Member	Commissioner
Grissel Granados, MSW	Member	Commissioner
Natalie Sanchez	Member	
LaShonda Spencer, MD	Member	Commissioner



COMMISSION MEMBER "CONFLICTS-OF-INTEREST"

The following list identifies "conflicts-of-interest" for Commission members who represent agencies with Part A/B –and/or CDC HIV Prevention-funded service contracts with the County of Los Angeles. According to Ryan White legislation, HRSA guidance and Commission policy, Commission members are required to state their "conflicts-of-interest" prior to priority- and allocation-setting and other fiscal matters concerning the local HIV continuum of care, and to recuse themselves from discussions involving specific service categories for which their organizations have service contracts.

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
BROWN	Jason	Unaffiliated consumer	No Ryan White or prevention contracts
BALLESTEROS	AI	JWCH, INC.	Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Case Management, Transitional
			Health Education/Risk Reduction (HERR)
			HIV Counseling and Testing (HCT)
			Medical Care Coordination (MCC)
			Mental Health, Psychotherapy
			Mental Health, Psychiatry
			Oral Health
			Biomedical Prevention
BIVENS-DAVIS	Traci	No Affiliation	No Ryan White or prevention contracts
BURTON	Alasdair	No Affiliation	No Ryan White or prevention contracts
CADDEN	Joseph	Rand Schrader Health & Research Center	Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination
			Mental Health, Psychiatry
CAMPBELL	Danielle	UCLA/MLKCH	HIV/AIDS Oral Health Care (Dental) Services
			HIV/AIDS Medical Care Coordination Services
			HIV/AIDS Ambulatory Outpatient Medical Services
			HIV/AIDS Medical Care Coordination Services
			nPEP Services

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
CATALDO	Raquel	Tarzana Treatment Center	Case Management, Home-Based
			Case Management, Transitional - Jails
			Housing Services
			Medical Transportation
			Mental Health, Psychotherapy
			Oral Health
			Substance Abuse, Residential
			Substance Abuse, Transitional
			Substance Abuse, Detox
			Biomedical Prevention
DANIELS	Michele	Unaffiliated consumer	Medical Nutrition Therapy
			No Ryan White or prevention contracts
DARLING-PALACIOS	Frankie	Los Angeles LGBT Center	Ambulatory Outpatient Medical (AOM)
			Health Education/Risk Reduction (HERR)
			HIV Counseling and Testing (HCT)
			Housing Services
			Medical Care Coordination (MCC)
			Mental Health, Psychiatry
			Mental Health, Psychotherapy
			Non-Occupational HIV PEP
			Biomedical Prevention
			STD Screening and Treatment
DAVIES	Erika	City of Pasadena	HIV Counseling and Testing (HCT)
FORREST	Susan	Los Angeles Center for Alcohol and Drug Abuse	HIV/AIDS Health Education
			HIV/AIDS Substance Abuse
			Risk Reduction Prevention Services
			Residential Rehabilitation Services
LEVY	Aaron	Los Angeles LGBT Center	Ambulatory Outpatient Medical (AOM)
			Health Education/Risk Reduction (HERR)
			HIV Counseling and Testing (HCT)
			Housing Services
			Medical Care Coordination (MCC)

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
		Los Angeles LGBT Center	Mental Health, Psychiatry
			Mental Health, Psychotherapy
			Non-Occupational HIV PEP
			Biomedical Prevention
			STD Screening and Treatment
FULLER	Alexander	Unaffiliated consumer	No Ryan White or prevention contracts
GATES	Jerry	Keck School of Medicine of USC	No Ryan White or prevention contracts
GODDARD II	Terry	Alliance for Housing and Healing	Housing Services
GONZALEZ	Felipe	Unaffiliated consumer	No Ryan White or prevention contracts
GORDON	Bridget	Unaffiliated consumer	No Ryan White or prevention contracts
			Ambulatory Outpatient Medical (AOM)
			Case Management, Transitional - Youth
GRANADOS	Grissel	Children's Hospital Los Angeles	Health Education/Risk Reduction (HERR)
			HIV Counseling and Testing (HCT)
			Medical Care Coordination (MCC)
			Biomedical Prevention
GREEN	Joseph	Unaffiliated consumer	No Ryan White or prevention contracts
GONZALEZ	Felipe	Unaffiliated consumer	No Ryan White or prevention contracts
JOHNSON	Diamante	Unaffiliated consumer	No Ryan White or prevention contracts
KOCHEMS	Lee	Unaffiliated consumer	No Ryan White or prevention contracts
KING	William	W. King Health Care Group	No Ryan White or prevention contracts
LAND	Bradley	Unaffiliated consumer	No Ryan White or prevention contracts
			HIV/AIDS Benefits Specialty Services
LEE	David	Charles R. Drew University of Medicine and Science	HIV Counseling, Testing, and Referral Prevention Services
LEUE PAUL	Eric	Free Speech Coalition	No Ryan White or prevention contracts
LOPEZ	Abad	Unaffiliated consumer	No Ryan White or prevention contracts
			Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Medical Care Coordination (MCC)
			MH, Psychiatry
MARTINEZ	Eduardo	AIDS Healthcare Foundation	MH, Psychotherapy
			Medical Specialty

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
			Oral Health
			HIV Counseling and Testing (HCT)
			STD Screening and Treatment
MARTINEZ	Miguel	Children's Hospital, Los Angeles	Ambulatory Outpatient Medical (AOM)
			Case Management, Transitional - Youth
			Health Education/Risk Reduction (HERR)
			HIV Counseling and Testing (HCT)
			Medical Care Coordination (MCC)
			Biomedical Prevention
MILLS	Anthony	Southern CA Men's Medical Group	Biomedical Prevention
			Medical Care Coordination (MCC)
MORENO	Carlos	Unaffiliated consumer	No Ryan White or prevention contracts
MURRAY	Derek	City of West Hollywood	No Ryan White or prevention contracts
NELSON	Katja	APLA Health & Wellness	Benefits Specialty
			Case Management, Non-Medical (LCM)
			Case Management, Home-Based
			Health Education/Risk Reduction (HERR)
			HIV Counseling and Testing (HCT)
			Mental Health, Psychotherapy
			Nutrition Support
			Oral Health
			Biomedical Prevention
			Medical Care Coordination (MCC)
NEWSOME	Jaziele	Illumination Foundation	No Ryan White or prevention contracts
PEÑA	Raphael	Unaffiliated consumer	No Ryan White or prevention contracts
PERÉZ	Mario	Los Angeles County, Department of Public Health, Division of HIV and STD Programs	Ryan White/CDC Grantee
PRECIADO	Juan	Northeast Valley Health Corporation	Mental Health, Psychotherapy
			Benefits Specialty
			Mental Health, Psychiatry
			Oral Health
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
ROSALES	Ricky	City of Los Angeles AIDS Coordinator	No Ryan White or prevention contracts
SATTAH	Martin	Rand Schrader Clinic LA County Department of Health Services	Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			Mental Health, Psychiatry
SPENCER	LaShonda	LAC & USC MCA Clinic	Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
STALTER	Kevin	Unaffiliated consumer	No Ryan White or prevention contracts
SUMPTER	Yolanda	Unaffiliated consumer	No Ryan White or prevention contracts
WILSON	Gregory	In the Meantime Men's Group, Inc.	HIV/AIDS Health Education/Risk Reduction Prevention Services
YBARRA	Russell	Capitol Drugs	No Ryan White or prevention contracts

HIV Calendar

March 2019

Sun	Mon	Tue	Wed	Thu	Fri	Sat
24 Week 9	25	26 9:30 AM - 1:00 PM Board of Supervisors (BOS)	27 9:30 AM - 11:30 AM BOS Agenda Review	28 10:00 AM - 12:00 PM Operations Committee Meeting 1:00 PM - 3:00 PM Executive Committee Meeting	1	2
3 Week 10	4 10:00 AM - 12:00 PM LACHAS Policy Workgroup Meeting 1:00 PM - 3:00 PM Public Policy Committee	5 9:30 AM - 1:00 PM Board of Supervisors (BOS) 10:00 AM - 12:00 PM Standards & Best Practices (SBP)	6 9:30 AM - 11:30 AM BOS Agenda Review	7	8	9
10 Week 11	11	12 9:30 AM - 1:00 PM Board of Supervisors (BOS)	13 9:30 AM - 11:30 AM BOS Agenda Review	14 9:00 AM - 1:00 PM Commission Meeting 1:00 PM - 3:00 PM Consumer Caucus Meeting	15	16
17 Week 12	18	19 9:30 AM - 1:00 PM Board of Supervisors (BOS)	20 9:30 AM - 11:30 AM BOS Agenda Review	21	22	23
24 Week 13	25	26 9:30 AM - 1:00 PM Board of Supervisors (BOS) 1:00 PM - 4:00 PM Planning, Priorities & Allocations (PP&A)	27 9:30 AM - 11:30 AM BOS Agenda Review	28 10:00 AM - 12:00 PM Operations Committee Meeting 1:00 PM - 3:00 PM Executive Committee Meeting	29	30
31 Week 14	1 10:00 AM - 12:00 PM LACHAS Policy Workgroup Meeting 1:00 PM - 3:00 PM Public Policy Committee	2 9:30 AM - 1:00 PM Board of Supervisors (BOS) 10:00 AM - 12:00 PM Standards & Best Practices (SBP)	3 9:30 AM - 11:30 AM BOS Agenda Review	4	5	6

HIV Calendar

April 2019

Sun	Mon	Tue	Wed	Thu	Fri	Sat
31 Week 14	1 10:00 AM - 12:00 PM LACHAS Policy Workgroup Meeting 1:00 PM - 3:00 PM Public Policy Committee	2 9:30 AM - 1:00 PM Board of Supervisors (BOS) 10:00 AM - 12:00 PM Standards & Best Practices (SBP)	3 9:30 AM - 11:30 AM BOS Agenda Review	4	5	6
7 Week 15	8	9 9:30 AM - 1:00 PM Board of Supervisors (BOS)	10 9:30 AM - 11:30 AM BOS Agenda Review	11 9:00 AM - 1:00 PM Commission Meeting 1:00 PM - 3:00 PM Consumer Caucus Meeting	12	13
14 Week 16	15	16 9:30 AM - 1:00 PM Board of Supervisors (BOS) 1:00 PM - 3:00 PM Planning, Priorities & Allocations (PP&A)	17 9:30 AM - 11:30 AM BOS Agenda Review 10:00 AM - 12:00 PM Women's Caucus	18	19	20
21 Week 17	22	23 9:30 AM - 1:00 PM Board of Supervisors (BOS)	24 9:30 AM - 11:30 AM BOS Agenda Review	25 10:00 AM - 12:00 PM Operations Committee Meeting 1:00 PM - 3:00 PM Executive Committee Meeting	26	27
28 Week 18	29	30 9:30 AM - 1:00 PM Board of Supervisors (BOS) 10:00 AM - 12:00 PM Aging Task Force	1 9:30 AM - 11:30 AM BOS Agenda Review	2	3	4

HIV Calendar

May 2019

Sun	Mon	Tue	Wed	Thu	Fri	Sat
28 Week 18	29	30 9:30 AM - 1:00 PM Board of Supervisors (BOS) 10:00 AM - 12:00 PM Aging Task Force	1 9:30 AM - 11:30 AM BOS Agenda Review	2	3	4
5 Week 19	6 1:00 PM - 3:00 PM Public Policy Committee	7 9:30 AM - 1:00 PM Board of Supervisors (BOS) 10:00 AM - 12:00 PM Standards & Best Practices (SBP)	8 9:30 AM - 11:30 AM BOS Agenda Review	9 9:00 AM - 1:00 PM Commission Meeting 1:00 PM - 3:00 PM Consumer Caucus Meeting	10	11
12 Week 20	13	14 9:30 AM - 1:00 PM Board of Supervisors (BOS)	15 9:30 AM - 11:30 AM BOS Agenda Review	16	17	18
19 Week 21	20	21 9:30 AM - 1:00 PM Board of Supervisors (BOS) 1:00 PM - 3:00 PM Planning, Priorities & Allocations (PP&A)	22 9:30 AM - 11:30 AM BOS Agenda Review	23 10:00 AM - 12:00 PM Operations Committee Meeting 1:00 PM - 3:00 PM Executive Committee Meeting	24	25
26 Week 22	27	28 9:30 AM - 1:00 PM Board of Supervisors (BOS)	29 9:30 AM - 11:30 AM BOS Agenda Review	30	31	1

HIV Calendar

June 2019

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26 Week 22	27	28 9:30 AM - 1:00 PM Board of Supervisors (BOS)	29 9:30 AM - 11:30 AM BOS Agenda Review	30	31	1
2 Week 23	3 1:00 PM - 3:00 PM Public Policy Committee	4 9:30 AM - 1:00 PM Board of Supervisors (BOS) 10:00 AM - 12:00 PM Standards & Best Practices (SBP)	5 9:30 AM - 11:30 AM BOS Agenda Review	6	7	8
9 Week 24	10	11 9:30 AM - 1:00 PM Board of Supervisors (BOS)	12 9:30 AM - 11:30 AM BOS Agenda Review	13 9:00 AM - 1:00 PM Commission Meeting 1:00 PM - 3:00 PM Consumer Caucus Meeting	14	15
16 Week 25	17	18 9:30 AM - 1:00 PM Board of Supervisors (BOS) 1:00 PM - 3:00 PM Planning, Priorities & Allocations (PP&A)	19 9:30 AM - 11:30 AM BOS Agenda Review	20	21	22
23 Week 26	24	25 9:30 AM - 1:00 PM Board of Supervisors (BOS)	26 9:30 AM - 11:30 AM BOS Agenda Review	27 10:00 AM - 12:00 PM Operations Committee Meeting 1:00 PM - 3:00 PM Executive Committee Meeting	28	29
30 Week 27	1 1:00 PM - 3:00 PM Public Policy Committee	2 9:30 AM - 1:00 PM Board of Supervisors (BOS) 10:00 AM - 12:00 PM Standards & Best Practices (SBP)	3 9:30 AM - 11:30 AM BOS Agenda Review	4	5	6

2. APPROVAL OF THE MEETING MINUTES:

A. February 14, 2019 COH Meeting Minutes (**MOTION #2**)

3. EXECUTIVE DIRECTOR'S REPORT:

A. Welcome and Introductions

Tim Vincent, MS

Tim Vincent has worked as a licensed mental health clinician, social worker, trainer and consultant for over 25 years and managed a national capacity building assistance program funded through CDC. In his consulting work he has provided training, presentations, developed curriculum, conducted focus groups and helped to implement organizational change to promote health equity. His consulting projects have included work with pharmaceutical companies, state governments, healthcare organizations, educational programs focused on black communities, and a marketing firm focused on LGBT communities. Tim has served on statewide community planning groups, has developed and conducted training of trainers in order to nationally diffuse training initiatives he created through his work at the University of California San Francisco. He is asked to speak regularly at national conferences on such topics as engaging diverse communities, examining bias, and building strategies to provide inclusive services for LGBT in healthcare.

4. CO-CHAIR REPORT:

- B. Conflict of Interest Reminder
- C. Executive At-Large Member Open Nominations
- D. February 14, 2019 COH Meeting Follow-Up Items
 - (1) National Black HIV/AIDS Awareness Day (NBHAAD)
Panel Discussion
- E. Recognition of National Women and Girl's HIV/AIDS Awareness Day (NWGHAAD)

Policy/Procedure #06.1000: Commission Bylaws

Adopted: July 11, 2013

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Section 2. Committee Assignments. Commissioners are required to be a member of at least one standing committee, the member's "primary committee assignment," and adhere to attendance requirements of that committee.

- A. Commissioners who live and work outside of Los Angeles County as necessary to meet expectations of their specific seats on the Commission are exempted from the requirement of a primary committee assignment.
- B. Commissioners and Alternates are allowed to voluntarily request or accept "secondary committee assignments" upon agreement of the Co-Chairs.

Section 3. Conflict of Interest. Consistent with the Los Angeles County Code 3.29.046 (*Conflict of Interest*), Commission members are required to abide by the Conflict of Interest and Disclosure requirements of the Commission, the County of Los Angeles, the State of California (including Government Code Sections 87100, 87103, and 1090, et seq.), the Ryan White Program, as outlined in HRSA and relevant CDC guidance.

- A. As specified in Section 2602(b)(5) (42 U.S.C § 300ff-12) of the Ryan White legislation, the Commission shall not be involved directly or in an advisory capacity in the administration of Ryan White funds, and shall not designate or otherwise be involved in the selection of particular entities as recipients of those grant funds. While not addressed in the Ryan White legislation, the Commission shall adhere to the same rules for CDC and other funding.
- B. Section 2602(b)(5)(B) continues that a planning council member who has a financial interest in, is employed by, or is a member of a public or private entity seeking local Ryan White funds as a provider of specific services is precluded from participating in—directly or in an advisory capacity—the process of selecting contracted providers for those services.
- C. Further, in accordance with HRSA guidance, Commission Policy/Procedure #08.3105 (*Ryan White Conflict of Interest Requirements*) dictates that all members must declare conflicts of interest involving Ryan White-funded agencies and their services, and the member is required to recuse him/herself from discussion concerning that area of conflict, or funding for those services and/or to those agencies.

Section 4. Code of Conduct. All Commission members are expected to adhere to the Commission's approved code of conduct at Commission and related meetings and in the private conduct of Commission business.

Section 5. Comprehensive Training. Commissioners and Alternates are required to fulfill all training requirements, as indicated in the Commission's approved comprehensive training plan, including, but not limited to, the New Member Orientation(s), and Los Angeles County Ethics and Sexual Harassment trainings.



LOS ANGELES COUNTY COMMISSION ON HIV

3530 Wilshire Boulevard, Suite 1140 • Los Angeles, CA 90010 • TEL (213) 738-2816 • FAX (213) 637-4748
<http://hiv.lacounty.gov>

DUTY STATEMENT

AT-LARGE MEMBER, EXECUTIVE COMMITTEE

(APPROVED 3-28-17)

In order to provide effective direction and guidance for the Commission on HIV, there are three At-Large members of the Executive Committee, elected annually by the body, to provide the following representation, leadership and contributions:

COMMITTEE PARTICIPATION:

- ① Serve as a member of the Commission's Executive and Operations Committees, and participates, as necessary, in Committee meetings, work groups and other activities.
- ② As a standing member of the Executive Committee, fill a critical leadership role for the Commission; participation on the Executive Committee requires involvement in key Commission decision-making:
 - Setting the agenda for Commission regular and special meetings;
 - Advocating Commission's interests at public events and activities;
 - Voting and determining urgent action between Commission meetings;
 - Forwarding and referring matters of substance to and from other Committees and to and from the Commission;
 - Arbitrating final decisions on Commission-level grievances and complaints;
 - Discussing and dialoguing on a wide range of issues of concern to the HIV/AIDS community, related to Commission and County procedure, and involving federal, state and municipal laws, regulations and practices.

REPRESENTATION:

- ① Understand and voice issues of concern and interest to a wide array of HIV/AIDS and STI-impacted populations and communities
- ② Dialogue with diverse range perspectives from all Commission members, regardless of their role, including consumers, providers, government representatives and the public
- ③ Contribute to complex analysis of the issues from multiple perspectives, many of which the incumbent with which may not personally agree or concur
- ④ Continue to be responsible and accountable to the constituency, parties and stakeholders represented by the seat the member is holding
- ⑤ As a more experienced member, with a wider array of exposure to issues, voluntarily mentor newer and less experience Commission members
- ⑥ Actively assist the Commission and Committee co-chairs in facilitating and leading Commission discussions and dialogue
- ⑦ Support and promote decisions resolved and made by the Commission when representing the Commission, regardless of personal views

Duty Statement: Executive Committee At-Large Member

Page 2 of 2

KNOWLEDGE/BACKGROUND:

- ① CDC HIV Prevention Program, Ryan White Program (RWP), and other general HIV/AIDS and STI policy and information
- ② LA County Comprehensive HIV Plan and Comprehensive HIV Continuum
- ③ LA County's HIV/AIDS and other service delivery systems
- ④ County policies, practices and stakeholders
- ⑤ RWP legislation, State Brown Act, applicable conflict of interest laws
- ⑥ County Ordinance and practices, and Commission Bylaws
- ⑦ **Minimum of one year's active Commission membership prior to At-Large role**

SKILLS/ATTITUDES:






- ① Sensitivity to the diversity of audiences and able to address varying needs at their levels
- ② Life and professional background reflecting a commitment to HIV/AIDS and STI-related issues
- ③ Ability to demonstrate parity, inclusion and representation
- ④ Multi-tasker, take-charge, "doer", action-oriented
- ⑤ Unintimidated by conflict/confrontation, but striving for consensus whenever possible
- ⑥ Capacity to attend to the Commission's business and operational side, as well as the policy and advocacy side
- ⑦ Strong focus on mentoring, leadership development and guidance
- ⑧ Firm, decisive and fair decision-making practices
- ⑨ Attuned to and understanding personal and others' potential conflicts of interest

COMMITMENT/ACCOUNTABILITY TO THE OFFICE:

- ① Put personal agenda aside and advocate for what's in the best interest of the Commission
- ② Devote adequate time and availability to the Commission and its business
- ③ Assure that members' and stakeholders' rights are not abridged
- ④ Advocate strongly and consistently on behalf of Commission's and people living with and at risk for HIV, interests
- ⑤ Always consider the views of others with an open mind
- ⑥ Actively and regularly participate in and lead ongoing, transparent decision-making processes
- ⑦ Respect the views of others regardless of their race, ethnicity, sexual orientation, HIV status or other factors



Presentation Summary and Recommendations for Community Practice and Action

Date and Title	February 14, 2019: Panel Discussion on the Disproportionate Impact of HIV/AIDS in the African American Community
 SUMMARY	<p>In recognition of National Black HIV/AIDS Awareness Day, the Los Angeles County Commission on HIV (COH) convened a panel of Commissioners and community stakeholders to address the disproportionate impact of HIV/AIDS in the African American community. The discussion centered around Black perspectives on how racism, historical trauma and discrimination hinder our collective efforts to end HIV.</p>
 KEY TAKEAWAYS	<ul style="list-style-type: none"> • While there have been great scientific advancements in HIV prevention science and medicine, African Americans continue to lag behind in achieving similar health outcomes when compared to other populations. • Siloed funding, stigma, poverty, racism, and other social determinants of health contribute to the fragmentation of services and support for Black communities and leaders. • Policies and programs aimed at addressing affordable housing, access to care, and prison reform have not fully penetrated or benefited the Black community. • The unique needs of Black individuals across multiple and intersecting identities must be addressed in a holistic manner in order to create safe spaces for care, treatment and broad community support. • Trans men and women are misidentified in data collection practices or not represented in research which leads to the lack of competent health care for transgender individuals. • Mistrust is real and must be discussed from an Afro-centric approach.
 IDEAS FOR ACTION	<ul style="list-style-type: none"> • Recognize and understand the profound and ongoing unresolved impact of historical and modern day racism on the African American community. Historical trauma has shaped how the African American community views their environments and experiences. • Assist service providers who cater to the African American community in gaining access to funds and build their organizational capacities. • Recognize that there is great diversity in perspectives and experiences and that the “one size fits all” thinking will not work in the Black community. • While churches may be an avenue for education and outreach, not all churches welcome Blacks who are HIV-positive or identify as LGBTQ. Some churches may also have gender norms that impede the voices and representation of Black women.
 RECOMMENDATIONS FOR COMMISSIONERS	<ul style="list-style-type: none"> • Continue discussions on identifying concrete strategies to eliminate or reduce HIV stigma by using culturally appropriate interventions and policy change initiatives. • Be open to learning and understand the diverse experiences that African Americans face. • Follow-through on commitments and policy and programmatic recommendations. • Convene a Black Caucus to address the broad range of HIV/STD prevention, care, treatment, and social and health equity issues affecting the community.
 VIDEO LINK	<p>To view the video of the presentation, visit: https://www.youtube.com/playlist?list=PLEB64iMMVDIizWWzfZ0cLxt8-Dp0cT-mj Special thanks to: Tim Vincent; Jeffrey King, Founder and Chief Executive Director of In the Meantime Men’s Group (ITMT); JavonTae Wilson, Lead HIV Tester, ITMT; Alexander Luckie Fuller, Commissioner; Dr. William King, Commissioner; Traci Bivens-Davis, Commissioner</p>



*HIV prevention
starts with ME.*

What is National Women and Girls HIV/AIDS Awareness Day?

National Women and Girls HIV/AIDS Awareness Day (NWGHAAD) is an annual, nationwide observance, led by the U.S. Department of Health and Human Services' Office on Women's Health (OWH). Every year on March 10 — and throughout the month of March — local, state, federal, and national organizations come together to shed light on the impact of HIV and AIDS on women and girls and show support for those at risk of and living with HIV. This year marks the 14th annual observance of NWGHAAD.

Why is National Women and Girls HIV/AIDS Awareness Day important?

HIV and AIDS are still widespread public health issues, and women remain vulnerable to infection — especially African-American and Hispanic women.^{1,2} In fact, any woman who has sex can get HIV, regardless of race, ethnicity, age, or sexual orientation. Today, nearly 1 million people in the United States are diagnosed with HIV, and nearly 1 in 4 of them are women.³

The 2019 National Women and Girls HIV/AIDS Awareness Day theme, *HIV Prevention Starts with Me*, emphasizes the role everyone — women, men, community organizations, health care professionals, those who are HIV-negative, and those who are living with HIV — plays in HIV prevention. There are steps you can take to protect yourself, your partner, your patients, family, and neighbors from HIV infection:

- Get an HIV test, which is free and confidential. To find a location, visit gettested.cdc.gov.
- Practice safe sex.
- If you are HIV-negative and your partner has HIV, talk to a doctor about taking pre-exposure prophylaxis (PrEP), a daily pill that can reduce your risk of getting HIV from sex by more than 90 percent.⁴ Find a PrEP provider near you at www.prelocator.org.

March 10, 2019

In 2017, women accounted for 1 in 5 new HIV diagnoses.³



There are over 235,000 women and girls in the United States who have been diagnosed with HIV.³



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-  pinterest.com/womenshealth



www.womenshealth.gov | 1-800-994-9662

Join the conversation

#NWGHAAD



March 10, 2019

- If you are living with HIV, talk to your doctor about ways to stay healthy and take your medication as prescribed to achieve and maintain an undetectable viral load. It can help prevent spreading HIV to your sexual partner or, if you are pregnant, to your baby.
- If you think you may have been exposed to HIV, visit a doctor right away. The doctor may decide that you should get post-exposure prophylaxis (PEP). PEP is an anti-HIV medicine that you take within 72 hours of possible exposure to HIV to lower your chances of getting HIV.
- If you are a health care professional, you should know the screening guidelines, talk to patients about their risk, and encourage patients living with HIV to adhere to treatment.

Who should participate in National Women and Girls HIV/AIDS Awareness Day?

Any individual or organization can observe National Women and Girls HIV/AIDS Awareness Day. For more information, visit www.womenshealth.gov/nwghaad.

How do I observe National Women and Girls HIV/AIDS Awareness Day?

You can plan a National Women and Girls HIV/AIDS Awareness Day event; spread the word on Twitter, Facebook, Instagram, or Tumblr about the day; and use the hashtag #NWGHAAD on social media. Visit www.womenshealth.gov/nwghaad/resources to get started.



Learn more about HIV/AIDS and women's health at www.womenshealth.gov/hiv-and-aids.

¹ Centers for Disease Control and Prevention (CDC). (2018). *HIV Among Women* (PDF, 388 KB). <https://www.cdc.gov/hiv/pdf/group/gender/women/cdc-hiv-women.pdf>

² CDC. (2018). *HIV and Hispanics/Latinos*. <http://www.cdc.gov/hiv/group/racialethnic/hispaniclatinos/index.html>

³ CDC. (2018). *HIV Surveillance Report, 2017* (PDF, 6.4 MB). <http://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-2017-vol-29.pdf>

⁴ CDC. (2018). *HIV Basics: PrEP*. <http://www.cdc.gov/hiv/basics/prep.html>



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Join the conversation

#NWGHAAD

6. Los Angeles County HIV/AIDS Strategy (LACHAS):

- A. Stigma Reduction Action Planning Series | Tim Vincent, MS

MICROGRANTS REPORTS FROM THE FIELD



Washington State Department of Health Office of Infectious Disease

Fall 2018

Stigma Reduction

HIV Stigma and discrimination is complex. Researchers, organizations, communities, and individuals often have different definitions and priorities. Reducing stigma requires a recognition of that complexity as well as the interrelation of homophobia, transphobia, racism, and sexism. Maximizing limited resources requires acknowledging differing levels of expertise and an agreement to designate specific areas of focus for different entities. Stigma reduction microgrants one strategy to support community initiated and community specific work.

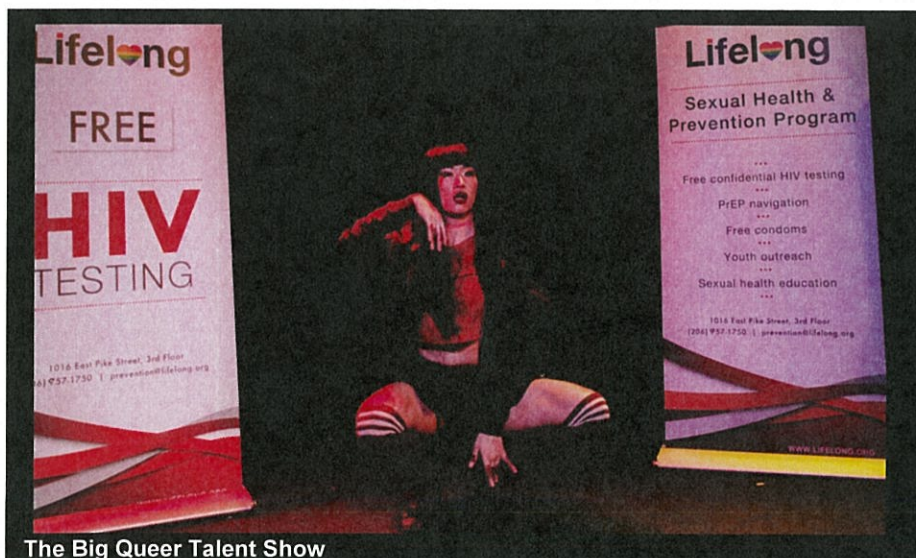
Community Engagement

End AIDS Washington calls upon us to invigorate and strengthen meaningful engagement of communities disproportionately impacted by HIV-related health disparities and stigma. Genuinely collaborative processes are challenging but worthwhile. There are no easy, quick solutions. Recognizing this, the Office of Infectious Disease provides microgrants to HIV Community Services partners to develop innovative community engagement projects.

U=U

"People living with HIV continue to live with the stigma that they are infectious and possibly harmful to their partners. This new evidence (U=U) is critical to changing public perception of HIV transmissibility"

*- John Wiesman,
Washington's Secretary
of Health.*



The Big Queer Talent Show

In This Issue

- Kenyan Health & Wellness Summit **CMCH**
- Mosaic Project **Gay City**
- Science NOT Stigma **PCAF**
- The Big Queer Talent Show **Lifelong**



Using Performance Art to Engage Community

Gay City hosted our Mosaic Project. We produced three nights of performance, followed by audience-performer Talk-Backs that center a population of People at High Risk and People Living with HIV—Queer and Trans Sex Workers who have experienced homelessness.

During the last 30 minutes of each performance we hosted a professionally facilitated audience-performer Talk Back in which we explored the issues raised during the performance. Among those issues were stigma around HIV, gender identity, homelessness, economic barriers, racism, transphobia, trauma, violence, access to healthcare, and more. One night of the performance was ASL interpreted for the Deaf and Hard of Hearing.

The capacity of our venue is 50 seats. Two of the nights were standing room only, and we hosted at total of 130 community members. We were thrilled with the level of community participation in these events.

Queer & Trans Sex Workers Share Stigma Experiences

Queer and Trans Sex Workers who have experienced homelessness face significant stigma and criminalization that has put them at increased risk of HIV. During the Talk Back, there were accounts of people choosing not to access shelters or medical care due to an expectation of harassment.

There was personal testimony about the impact of stigma and the barriers to accessing care and help. At each performance, we had a table of materials to help folks access organizations and resources, as well as lively, community-building post show discussion.

The discussion itself was a time in which performers and audience members alike were able to connect with one another and resources. Given that this is a population Gay City has not formerly hosted before, we are pleased to now be known as a place that is safe for Queer and Trans Sex Workers who have experienced homelessness, and anticipate an increase in attendance of this population in our Wellness Center.

Successes

The information was well received.

The data presented was well shared after the summit.

Every leader expressed the need of getting more information to create more awareness to their community.

Kenyan community leaders committed to lead as a role model in stigma reduction efforts and to support people with HIV and enhance access to HIV prevention, treatment and support.

Challenges

Making future events like these include everyone in the community.

The Kenyan community is diverse and consists of many groups divided in tribes or religious affiliation.

HIV information materials in different languages.

Training is needed for leaders on HIV and other chronic diseases like cancer etc.

Underlying social-economic and structural issues continue to fuel health disparities among black and African born communities.

Sustaining the commitment of religious leaders to continue being engaged and to prioritize HIV in their work.



Kenyan Spiritual Leaders Health & Wellness Summit

Partnering with Faith Communities

Center for Multicultural Health partnered with key religious and community leaders from Kenyan communities in South King County and organized a summit on Health and Wellness. One goal of the project was to engage the community leaders to start a community discussion on HIV and stigma in the Kenyan community. Another was to support the leaders in developing community solutions to reduce HIV stigma and address issues of racism and health disparities. 40 spiritual and community leaders attended the summit and are interested in pursuing future discussions to develop plans on how to inform their communities on the importance of getting tested and access to early treatment.

Future steps are:

- Training opportunities for leaders that teach strategies to engage the larger community on how to combat stigma
- More health and wellness screening events in different community settings.
- Educate the community in the importance of community based testing and inform community how to navigate the health system which can be complicated with most newly or recent immigrants.

CMCH plans to initiate a dialogue between people living with HIV and religious/community leaders to utilize the power of personal stories in calling to people to actions to reduce HIV related stigma. We will continue engaging religious leaders as ambassadors to empower their members to overcome self and societal stigma and to get involved in influencing policies and services provision to meet needs of their communities.



Vanderbilt Student Group

Partnerships with Academia

On March 5 and March 7, 2018, 11 students from Vanderbilt University's Alternative Spring Break worked with PCAF to create an Anti-Stigma Video Series. On March 5, the students spent time with PCAF's prevention staff learning about HIV, HIV transmission, PCAF's services, and common myths related to HIV. They also had conversations about the social constructs that can create barriers to HIV diagnosis and treatment. On March 7, the students separated into three groups to collect video footage of people's thoughts on HIV at the Tacoma Transit Center, Ruston Way waterfront, and UW Tacoma.

The videos focused on people's current understanding of HIV, the perceptions they had of people living with HIV, and ways they thought it could be transmitted. The students then shared facts about what HIV looks like in our community and provided facts on HIV transmission. The students captured the participants' reactions and responses to learning more about HIV.

PCAF is currently working with a video editor to bring these videos together in a meaningful way that we can use on our social media and digital platforms. We anticipate having final versions of the video series soon. The video editor is also creating a motion graphic template that will be used to brand PCAF's ongoing videos in the anti-stigma campaign over the long term. The micro-grant enabled PCAF to invest in equipment to collect quality video footage for this project and beyond.



Downtown



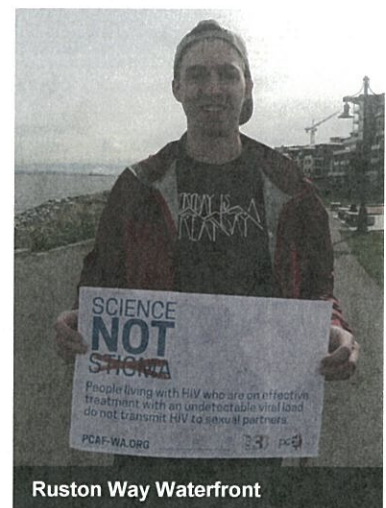
UW Tacoma

U=U

The Department of Health announced it has joined the HIV prevention campaign [Undetectable=Untransmittable](#), also known as U=U.

U=U describes the scientific findings that people living with HIV, who have undetectable levels of HIV in their blood for at least six months, have effectively no risk of transmitting HIV to their partners. Because treatment keeps these people from transmitting the virus, the concept is known as treatment as prevention.

Washington is the sixth state health department to join the campaign along with 18 other state and local health departments, and more than 700 organizations from 90 countries. The Centers for Disease Control and Prevention and the National Institutes of Health endorse the science behind U=U.



Ruston Way Waterfront

Successes

Emotional and honest conversations on-stage about queer adolescence

Sharing information about sexual health topics—U=U, HIV testing, PrEP

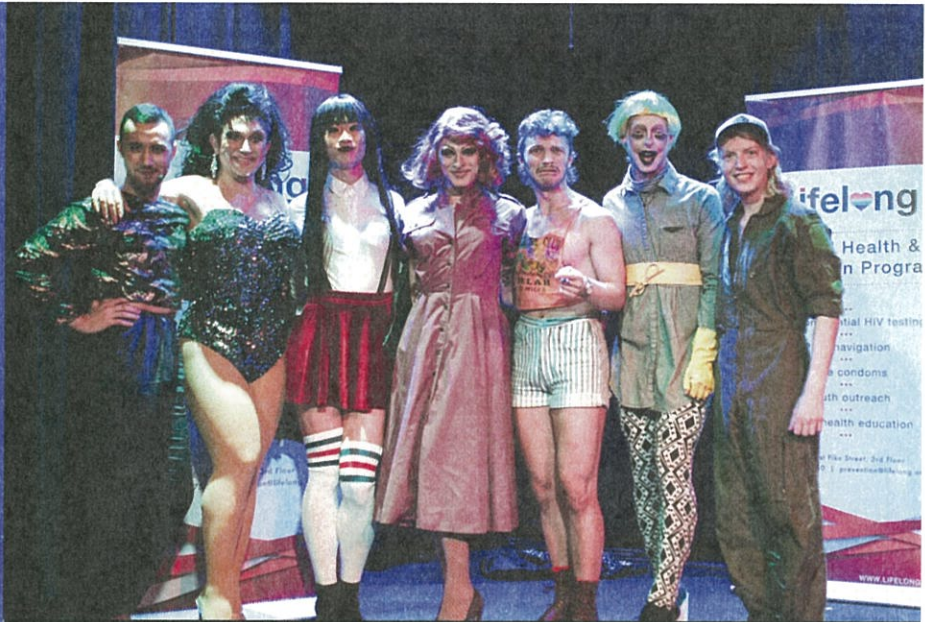
Youth got to watch their idol perform as well as meet BenDeLaCreme (youth were thrilled by this experience)

LGBTQ youth-serving organizations tabled and shared on-stage about their services

Large number of attendees

Challenges

Booking drag queens from RuPaul's Drag Race is logistically challenging, but ultimately worth it to reach a wider number of youth.



The Big Queer Talent Show

The Big Queer Talent Show

The Big Queer Talent Show - an inspiring event that brought together many parts of the LGBTQ community to enjoy thrilling performances and discuss the highs and lows of queer adolescence. Some of the themes discussed with the performers included finding queer community, using art as an outlet to overcome trauma, living authentically in the face of stigma and sexual health in the MSM community. One performer spoke in depth about their HIV positive status, and we discussed PrEP and U=U onstage. There were over 200 attendees—most of which were young queer folks under the age of 24. We have been receiving really positive feedback from the community and have high hopes to do this event again in the future.

This event informed stigma work by showcasing the power of sharing stories amongst disenfranchised groups. The effectiveness of the event came from the raw and authentic interviews that happened on-stage after the performances. Normalizing the queer struggle worked to de-stigmatized a lot of sexual, mental, and social health issues specific to the LGBTQ community. Youth felt connected to the performers who they idolized and inspired to be their best queer selves.



For persons with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).

DOH 150-121 August 2018

7. California Office of AIDS Programs (OA) Report:

A. February 2019 Report

This newsletter is organized to align the updates with Strategies from the *Laying a Foundation for Getting to Zero: California's Integrated HIV Surveillance, Prevention, and Care Plan* (Integrated Plan). The [Integrated Plan](http://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final.pdf) is available on the Office of AIDS' (OA) website at www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final.pdf.

General Office Updates:

2019 begins the third year of the five-year California Integrated HIV Surveillance, Prevention and Care Plan. During this year, progress on each of the twelve objectives will be reviewed for years one and two, and the plan will be reviewed and revised to ensure it remains aligned and coordinated with the National HIV/AIDS Strategy for the United States: Updated to 2020, the proposed Department of Health and Human Services "Ending the HIV Epidemic: A Plan for America" and the California Ending the Epidemics Consensus Document. The process of reviewing and revising the plan will include a workgroup comprised of CDPH staff and external stakeholders, and community input will be sought through a variety of methods to ensure providing input is accessible to all. For questions regarding this process, please contact Kevin.Sitter@cdph.ca.gov.

Staff Highlight:



OA is pleased to announce that Prevention Program Advisor, Keshia Lynch has been selected to be a recipient for NASTAD's Minority Leadership Program, 2019 cohort. She has spent the last 5 years educating, advocating, and caring for people living with, or at risk of HIV at both the state and local level. Her experience in HIV care began at Madera County Public Health Department, where she provided direct patient care and led the AIDS program for Madera County. In her current role, she is a Program Advisor with Office of AIDS, Prevention Branch, where she monitors numerous state and federally funded contracts. Keshia's background in direct patient care and passion for serving the community, has led her to a number of volunteer opportunities and mentoring roles for children and adults living with HIV.

Keshia's ultimate goal is to eliminate health disparities and promote racial and health equity, especially for those from minority groups. We are confident that the skills Keshia will obtain through her experience with NASTAD will not just aid in her personal career trajectories, but will make her a strong leader and asset to our OA team as we move forward with Getting to Zero.

In This Issue:

- General Office Updates
- Staff Highlight
- Strategy A
- Strategy G
- Strategy H
- Strategy J
- Strategy K

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

HIV Prevention Branch:

The February Monthly Prevention Branch & Prevention Evaluation and Monitoring Section Stakeholder Call included an OA presentation and discussion by OA's HIV Prevention Branch Transgender Health Specialist, Tiffany Woods, on transwoman and PrEP. She presented new data on substantial gaps in the PrEP continuum among transwomen compared with MSM in San Francisco, as recently presented in Madrid, October 2018 at the HIVR4P HIV Research for Prevention conference. The study conducted in San Francisco with 368 transwomen engaged in the PrEP continuum addresses several

guidance strategies and activities that LHJ's may also be experiencing with transwomen and the need to include in PrEP strategies such as PrEP awareness, PrEP navigation, PrEP adherence, use of data to identify and re-engage transwoman in PrEP in care, and adherence counseling. OA hopes that the presentation, study and their findings will inform LHJ's PrEP expansion efforts for transwoman. For a copy, e-mail: angelique.skinner@cdph.ca.gov.

PrEP Assistance Program (PrEP-AP):

As of February 15, there are 151 PrEP-AP enrollment sites covering 63 clinics that currently make up the PrEP-AP Provider Network. As of February 26, there are 1,303 clients enrolled in the PrEP-AP.

Clinical Provider Name	County	Number of Clinics on Contract
AIDS Healthcare Foundation	Alameda and San Francisco	2
Lifelong Medical Care	Alameda	2
Alameda Health System - Highland Hospital	Alameda	1
Asian Health Services	Alameda	1
East Bay AIDS Center (EBAC)	Alameda	1
Primary Care at Home, Inc.	Alameda	1
Clinicas de Salud del Pueblo	Imperial	4
Kern County Department of Public Health	Kern	1
Banj Health Center, Inc.	Los Angeles	4
Children Hospital Los Angeles	Los Angeles	1
Saban Community Clinic	Los Angeles	1
Planned Parenthood	Los Angeles	4
El Proyecto del Barrio, Inc. - Esperanza Clinic	Los Angeles	1
City of Long Beach	Los Angeles	1
Men's Health Foundation	Los Angeles	1
Tarzana Treatment Centers, Inc.	Los Angeles	1
Bartz-Altadonna Community Health Center	Los Angeles	1
Northeast Valley Health Corporation	Los Angeles	1
JWHC Institute, Inc.	Los Angeles	1
East Valley Community Health Center	Los Angeles	2
St. John Well Child and Family Center	Los Angeles	1
Los Angeles LGBT Center	Los Angeles	1

(continued from page 2)

Clinical Provider Name	County	Number of Clinics on Contract
Watts Healthcare Corporation	Los Angeles	1
APLA Health & Wellness	Los Angeles	3
Dignity Health - St. Mary's Medical Center	Los Angeles	1
Vista Community Clinic	Los Angeles and Orange	2
Desert AIDS Project, Inc.	Riverside	1
One Community Health	Sacramento	1
Regents UC San Diego Medical Center	San Diego	1
Vista Community Clinic	San Diego	1
San Ysidro Health	San Diego	2
Asian & Pacific Islander Wellness	San Francisco	1
HealthRIGHT360	San Francisco	4
UCSF 360 Positive Care	San Francisco	1
San Francisco AIDS Foundation	San Francisco	1
Community Action Partners	San Luis Obispo	2
County of San Luis Obispo Public Health Department	San Luis Obispo	2
Santa Rosa Community Health	Sonoma	1
West County Health Centers	Sonoma	4

As of March 4, 2019, there were 1,335 individuals with active PrEP-AP enrollment.

Clients with Active Enrollment in PrEP-AP - March 4, 2019																		
	Latinx		White		Black/ African American		Asian		American Indian/ Alaska Native		Native Hawaiian/ Pacific Islander		More than one race reported		Unknown/ Unreported		Grand Total	
Current Age	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
18-24	*	*	32	2%	9	1%	20	1%	*	*	*	*	*	*	*	*	100	7%
25-34	291	22%	234	18%	50	4%	75	6%	*	*	*	*	*	*	16	1%	672	50%
35-44	202	15%	119	9%	17	1%	30	2%	*	*	*	*	*	*	*	*	381	29%
45-64	72	5%	63	5%	*	*	*	*	*	*	*	*	*	*	*	*	150	11%
65+	*	*	28	2%	*	*	*	*	*	*	*	*	*	*	*	*	32	2%
Total	604	45%	476	36%	83	6%	131	10%	3	0%	6	0%	7	1%	25	2%	1,335	100%
Source: ADAP Enrollment System * Censoring applied to protect cells containing fewer than 10 enrollments.																		

Strategy G: Improve Availability of HIV Care

OA submitted the Housing Opportunities for Persons with AIDS Program (HOPWA) Annual Plan to the State Department of Housing and Community Development (HCD) on January 28, 2019. The annual plan is HCD's application for Housing and Urban Development's (HUD) Community Planning and Development funds and describes the intended use of federal funds administered by the State for various housing programs, including HOPWA. HCD will solicit public comment from March 22 through April 21, 2019. For [information on public comment](#), go to www.hcd.ca.gov and look under What's New. HCD will submit the final annual plan to HUD on May 13, 2019.

Strategy H: Improve Integration of HIV Services with Sexually Transmitted Disease (STD), Tuberculosis, Dental, and Other Services

In February, a "Dear Colleague" letter recommending extragenital (three-site) testing for STD screenings was issued jointly by Dr. Philip Peters, Medical Officer for the Office of AIDS and Dr. Eric Tang, Medical Officer for the STD Control Branch. When urine-only STD screening is conducted, up to 90% of rectal gonorrhea and 77% of rectal chlamydia infections are missed. Three-site testing can be incorporated easily into clinic flow, including

the use of patient self-collected samples and development of standing orders for screening. The [letter](#) is posted at: www.cdph.ca.gov/Programs/CID/DCDC/Pages/STDs-ClinicalGuidelines.aspx.

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

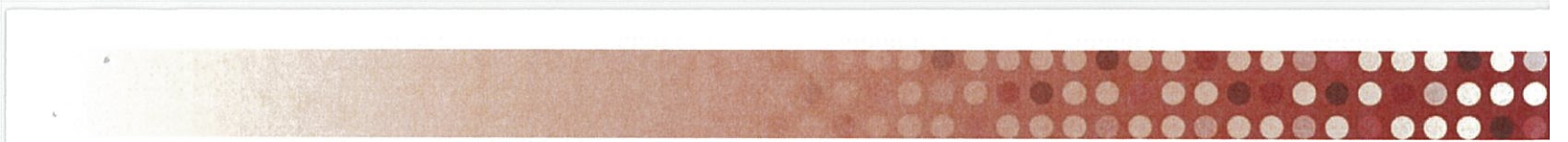
AIDS Drug Assistance Program (ADAP) Insurance Assistance Programs:

As of February 26, the number of ADAP clients enrolled in each respective ADAP Insurance Assistance Program are shown in the chart below.

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

In addition to addressing HIV and HCV prevention, the Office of AIDS also collaborates within CDPH and with other state agencies to address opioid and other health issues for people who use drugs. Much of the work of the Harm Reduction Unit focuses on expansion of syringe services programs (SSPs), which not only provide sterile injection equipment to reduce infectious disease transmission, but serve as drug user health hubs providing a range of other services. These include overdose prevention education and naloxone access, linkage or direct

ADAP Insurance Assistance Program	Number of Clients Enrolled	Percentage Change from January
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	432	+15%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	4,591	+5%
Medicare Part D Premium Payment (MDPP) Program	1,637	+3%
Total	6,660	+5%



provision of physical and mental health care and substance use disorder treatment, and a variety of social services. CDPH/OA regularly collaborates in this work with CDPH/Office of Viral Hepatitis Prevention, Safe and Active Communities Branch, Sexually Transmitted Disease (STD) Control Branch, and the Department of Health Care Services (DHCS).

Harm Reduction Unit activities have included:

- Authorized existing SSPs in Eureka and Sacramento to expand services to a total of eight additional communities in Humboldt and Sacramento counties through mobile outreach programs.
- Provided technical assistance to Siskiyou County Public Health Department in preparing their application for authorization of mobile syringe services. CDPH will issue a final decision regarding authorization in March 2019. Another SSP application, from ALM Mission of Clearlake (Lake County) proposes an outreach-based program serving homeless individuals and is currently under review.
- CDPH/OA is currently providing technical assistance to 12 local health jurisdictions where local providers are developing new SSPs for authorization by CDPH.
- A new analysis of the California Syringe Exchange Supplies Clearinghouse, which provides material support to more than 40 SSPs, found that in its first two years following its launch in 2015, it contributed to several changes. There was an almost 50% increase

in the number of people served by each program and a 147% increase in naloxone distributed. There was a 77% increase in the availability of on-site HIV testing and a 233% increase in HCV testing. SSPs continued to report that a lack of funding for staffing and infrastructure was a major barrier to program operations and stability.

- Provided technical assistance to SSPs to access the DHCS Naloxone Distribution Project, which launched on October 1, 2018. In the first month of the program, 37 SSPs applied for more than 54,000 doses, representing roughly one-quarter of the volume distributed by California SSPs in 2017.
- Provided assistance to medical and pharmacy staff at California Correctional Health Care Services as they explore avenues to expand naloxone access to inmates in correctional facilities.
- Provided assistance to several state and local health departments around the country that were seeking to replicate CDPH/OA's support for access to fentanyl test strips, which allow people at risk of fentanyl exposure to test drug samples before ingestion and take safety precautions as a result. Several other state health departments have begun funding purchase and distribution of the test strips, including those in New Jersey, North Carolina, Washington, Denver, New York City, and Philadelphia.

For questions regarding this newsletter, please contact: angelique.skinner@cdph.ca.gov.

9. CAUCUS and OTHER TASK FORCE AND WORK GROUP REPORTS:

- A. March 27, 2019 Consumer Advisory Board (CAB)
Conference | California Endowment



- Registration Open -

CAB Conference
Wednesday, March 27, 2019
9:00am – 4:00pm

California Endowment

1000 N. Alameda St,
Los Angeles, CA 90012

Register here: <https://tinyurl.com/March27thCABConference>

13. ANNOUNCEMENTS

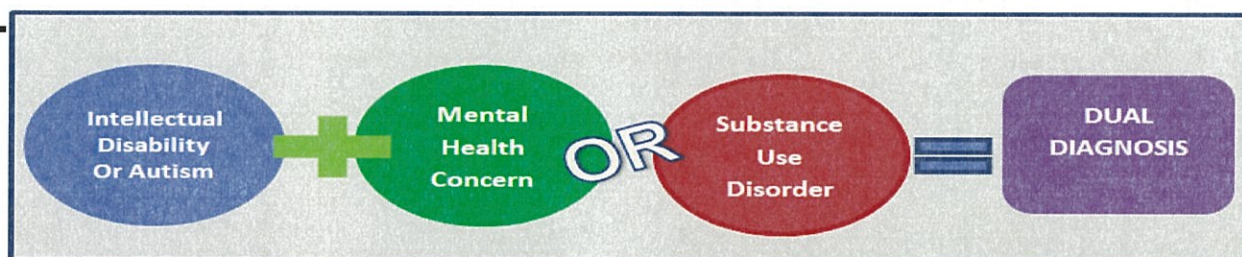
SCLARC Presents:

MHSA Grant

Substance Use Disorder Provider Training

WHAT:

FREE half-day training to Community Substance Use Disorder Providers on *Mental Health Interventions for Individuals with Dual Diagnosis (Intellectual Disability, Mental Health and/or Substance Use Disorder)*



WHEN:

Friday, April 5, 2019
9:00 to 12:00 pm

WHERE:

SOUTH CENTRAL LOS ANGELES REGIONAL CENTER
2500 S. Western Ave., Los Angeles, CA 90018
Golden State Auditorium

TRAINING TOPICS:

- * Addressing complicating factors of working with individuals with dual diagnosis disorders (ID/MH)
- * Developmental, emotional and cognitive considerations in treatment
- * Presentation of mental health disorders in adults with intellectual disabilities
- * How to use the Diagnostic Manual for Intellectual Disabilities
- * Ways to adapt treatment interventions for this unique population (**hands-on strategies that can be used right away**)

PRESENTER: Darlene Sweetland, PhD

Dr. Sweetland is a licensed clinical psychologist. She is the author of *Intellectual Disability and Mental Health: A Training Manual in Dual Diagnosis* (2011). She has worked in the field of dual diagnosis for over 20 years. She conducts training for psychiatric hospitals, substance abuse specialists, mental health agencies, teachers, counselors and direct support providers to better understand the complications of treating a person with dual diagnoses and coordinate care across the systems.

Please RSVP by March 29, 2019

Dr. Cynthia Davis

CynthiaD@sclarc.org

(213) 743-3028

or Beatriz Batres

BeatrizB@sclarc.org

14. ADJOURNMENT AND ROLL CALL:

Adjournment in memory of former Commissioner, Jim Chud, for the meeting of March 14, 2019

In Memory: Jim Chud, the Warm and Cantankerous Survivor of HIV, Has Died

Friday - March 8, 2019 by [Staff](#) | [6 Comments](#)



Jim Chud in L.A. Pride parade

His friends describe him as cantankerous and argumentative, and delightfully humorous and warmly social. He was a beefy and muscular gay man with a handicap that left him bent over and unable to move forward without a walker. He had been HIV positive for more than half his life, and at one point he was addicted to opioids.

He is Jim Chud, and earlier this week he died. The cause of death has not been determined.

Jim Chud, 62, a resident of the West Hollywood Community Housing Corp.'s Sierra Bonita building on Santa Monica Boulevard, was an expert in artificial intelligence and an architect and had a master's degree in psychotherapy. He had served on the city's Disabilities Advisory Board and on the L.A. County Commission on HIV. Chud also launched [Advance Abilities Inc.](#), a non-profit whose mission is to chronicle the stories of disabled seniors in the United States and also to provide tools to help them better experience life.



Jim Chud, at the age of 50

He also is one of the country's longest survivors of HIV – a disease Chud contracted more than 40 years ago.

Chud became infected with HIV when he was a 20-year-old athlete at Yale University. In an [interview with CNN](#), he said he then was leading a double life. He had a girlfriend, but also spent weekends at gay bathhouses in New York City.

In an essay published in [HIV Plus magazine](#), Chud, who in 1987 was living in Washington, D.C., said he “drove to the National Institutes of Health and volunteered for whatever clinical trial would take me. I was 29, and not expecting to see 35. If I somehow hit the jackpot and the drug in my study was an answer to AIDS, then fantastic. If not, and the drug was useless — which was the more likely result — then at least I had done something concrete, even if it was just helping eliminate one of the failing therapies.

“The study I was in combined high doses of AZT and DDC, a new drug by Roche Pharmaceuticals. DDC, while effective in the test-tube against HIV, was very toxic, and put all 80 of us study participants through a whole host of side effects ...

“About five weeks into the study I experienced the side effect that would change my life forever. At a restaurant, I started dropping my utensils for no apparent reason. In a surprisingly short time I couldn't open my mouth wide enough to put food in. Something was very wrong.”

Chud was taken off those drugs and his symptoms disappeared in a few days. But “I was told at the time that my immune system had mounted an attack on my cartilage, and that my condition was a lot like rheumatoid arthritis. What no one realized at the time was how much damage to my cartilage had occurred, or that the process would continue for years at a subclinical level.”

Chud was diagnosed in 1999 with a fungal infection of his sinus and brain that also required surgeries and many courses of toxic medication. It was a struggle that left him in Cedars-Sinai Medical Center for five months and, at one point, broke and homeless. Over time, he had more than 80 operations on his spine, neck and major joints, leaving him seven inches shorter than when he began that drug study in 1987.

“The gift of being broke made me more empathetic and aware of the ways that we can help each other,” Chud said in an interview in 2017 with West Hollywood Community Housing Corp.

As noted in an interview with WEHOville, Chud has spent years researching obstacles that disabled people face to living life. Among those are the failure of websites such as Yelp to note whether a restaurant is accessible by disabled people and issues with “rollators,” the devices used by some to assist them in walking, that no manufacturer seems to be addressing.

Chud cited his experience as a resident of the Sierra Bonita as part of the inspiration for creating AdvanceAbilities.

“Over the last seven years, I have lived in a building purpose built with both the funding and mission to house and provide social support services for disabled seniors and helping us create a mutually supportive community,” he said. “Sadly, I have watched the senseless decline of many neighbors merely because they have not received the support promised us all when we moved in. Adding in a lack of family support and unfamiliarity with American customs serves to make the situation even more dire for some.

"Now that I am well enough to give solving this problem my all, I simply cannot just sit by and watch anymore," Chud said. "... I feel confident about our documentaries' ability to inspire others to act with me. I have met many inspiring people along my way, and am certain to meet many others. I am more certain than ever before that we will make a difference – a big difference."

The LA County Commission on HIV is pleased to announce HIV Connect, an online tool for community members and providers looking for resources on HIV and STD testing, prevention and care, service locations, and housing throughout LA County.



HIV CONNECT
CONNECTING COMMUNITIES TO RESOURCES

Know HIV. Know Your Resources.
Visit hivconnect.org