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TRANSGENDER CAUCUS Virtual Meeting Tuesday, February 23, 2021 10:00AM -12:00PM (PST)

*Meeting Agenda + Packet will be available on our website at: <u>http://hiv.lacounty.gov/Meetings</u>

REGISTER + JOIN VIA WEBEX ON YOUR COMPUTER OR SMART PHONE: <u>https://tinyurl.com/4v3ahsv7</u>

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1-415-655-0001 US Toll Access Code: 145 807 1156

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PUBLIC COMMENTS

Public Comments will open at the time referenced on the meeting agenda. For those who wish to provide <u>live</u> public comment, you may do so by joining the WebEx meeting through your computer or smartphone and typing PUBLIC COMMENT in the Chat box. For those calling into the meeting via telephone, you will not be able to provide live public comment. However, you may provide written public comments or materials by email to <u>hivcomm@lachiv.org</u>. Please include the agenda item and meeting date in your correspondence. All correspondence and materials received shall become part of the official record.

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TRANSGENDER CAUCUS

Virtual Meeting Agenda

February 23, 2021 | 10am-12pm

TO JOIN BY COMPUTER/SMART PHONE: https://tinyurl.com/4v3ahsv7

TO JOIN BY PHONE: 1-415-655-0001 Event number (access code): 145 807 1156

- 1. Introductions
- 2. Co-Chair Report
- 3. Executive Director/Staff Report
 - a. Commission on HIV Committee Updates
 - b. 2021 COH Master Work Plan
- 4. Project Fiercea. Presentation by WeCanStopSTDsLA / Project Fierce
- 5. Meeting Confirmation and Agenda Development for Next Meeting
- 6. Announcements
- 7. Adjournment



VIRTUAL MEETING—TRANSGENDER CAUCUS Wednesday, December 2, 2020 | 10:00am to 12:00noon MEETING SUMMARY

In attendance:

| Luckie Alexander | Melissa Bernabe | Lashea Brown | |
|------------------|---------------------|---------------------------|--|
| Leopoldo Cabral | Michaé De La Cuadra | Kiana Dobson | |
| Jennifer Harbeck | Triana Maldonado | Xelestiál Moreno-Luz | |
| ZOh | Frankie Palacios | Devan Rose | |
| Kielly Sandoval | Melissa Schulz | Cheryl Barrit (COH Staff) | |
| | | Sonja Wright (COH Staff) | |

1. Introductions

Cheryl Barrit, COH Staff, welcomed participants and all attendees introduced themselves and their agency/organization affiliations.

2. Co-Chair Report

None

3. Executive Director's Report

<u>Commission on HIV Committee Updates.</u> Ms. Barrit provided an update on Commission activities.

<u>Standards and Best Practices Committee</u>: Childcare standards have been updated and the committee is waiting to hear from the Division of HIV and STD Programs on their provider survey to help shape the document. Universal standards are on track for approval.

The last meeting of the year for the COH will be on December 10, 2020.

4. (AB 2218) Transgender Wellness and Equity Fund

- A. Presentation by Michaé De La Cuadra TransLatin@Coalition The Journey of AB 2218: Where Are We Now & What's to Come
 - Approximately 2 years ago, the trans policy was put together offering 40 recommendations gathered from places like community and statewide surveys, regarding how to move the transgender community forward to allow for more long-term equity.
 - Beginning in 2019, the TransLatin@Coalition began engaging in the State budget process after the new CA Governor had released the budget. There were no line

items for transgender people, so the organization created a budget letter with recommendations for how the State can allocate money to address their needs. They were told that the organization needed to back up the money requested; thus, the coalition was born towards the end of 2019.

- The genesis of the bill involved expanding the capacity of transgender organizations, how to provide resources for this community, and how this community asks for accountability from the State as a community and a population who has historically not received resources from the State. This is what fueled the conversation around the bill.
- February 2020: a bill number was received, AB 2218. Assembly member Santiago agreed to carry the budget request and author the bill.
- March 2020: the global pandemic shifted the focus on trying to solicit emergency resources for the transgender community in response to COVID-19. A letter was created and nearly 100 organizations signed on to support the demands for keeping the trans-community safe.
- May 2020: AB 2218 went to its first committee, The Assembly Health Committee; the bill passed.
- June 2020: AB 2218 passed through the Assembly Appropriations Committee
- August 2020: AB 2218 passes the Senate Floor and was ushered back to the Assembly for a final review before going to the Governor's desk.
- September 2020: AB 2218 made it to the Governor's desk and was signed into law on September 26th, 2020.

B. Strategize ways to ensure AB 2218 meets the needs of the Transgender community

• Question: How can the Commission on HIV lend support without there being a conflict of interest?

Ms. Cheryl Barrit explained that the Board of Supervisors (BOS) sets policy for the County; the Commission may only offer policy recommendations to the Board; it is within the purview of the Commission to work with the BOS to support the budget ask of AB 2218. Ms. Barrit also offered the following options: (1) leveraging the induction of the new Supervisor Holly Mitchell, (2) providing individual support, (3) the Commission can strengthen the talking points of the TransLatin@Coalition by offering data in conjunction with DHSP (ex: holistic and overall health of the transgender community), and (4) the agencies/individuals which hold a seat on the Public Policy (PP) committee can also strategize ways to support the work of the TransLatin@Coalition *outside* of the Commission.

- 5. **Meeting Confirmation and Agenda Development for Next Meeting** Next meeting: Tuesday, February 23rd, 2021 from 10am -12pm.
 - Report back keyways the Commission can help in the next steps, particularly the budget. Public Policy meets 12.7.20, Ms. Barrit will work with the co-chairs to have AB 2218 as a standing item on the agenda.
 - The Commission will continue working with the TransLatin@Coalition and other organizations to ensure we can track other issues that may come up.

6. Announcements

- Kiana Dobson, WeCanStopSTDsLA announced that their organization was awarded a grant and they are using this funding to engage women of color in Los Angeles County (inclusive of transwomen), to drive the STD interventions that they take on.
- Lashea Brown added that the engagement (mentioned above) is called *Project Fierce* and it is currently in the recruitment phase for women of color, ages 18-24, throughout Los Angeles County. The application deadline is December 5th, 2020; however, they are willing to extend the deadline to December 15th, 2020 due to the short notice. Ms. Brown will send anyone who is interested an application and flyer.

7. Adjournment

Meeting adjourned at 11:27am.



DRAFT MEMBERSHIP APPLICATION

Introduction

Thank you for your interest in becoming a member on the Commission on HIV. Please complete the Membership Application (Application) in its entirety and submit where prompted. Once submitted, Commission staff will review the Application for completeness and will notify you about next steps.

A paper version of this Application can be accessed and printed by clicking here: [INSERT LINK]. You may email or mail the Application to the Commission office at:

Los Angeles County Commission on HIV 3530 Wilshire Blvd., Suite 1140 Los Angeles, CA 90010 Eml: <u>hivcomm@lachiv.org</u>

If you need assistance in completing the Application or have questions concerning the membership application process, please contact Commission staff at <u>hivcomm@lachiv.org</u> or at 213.738.2816.

For more information regarding the Commission, please visit our website at https://hiv.lacounty.gov

* 1. Are you applying as a NEW or RETURNING member?

NEW

RETURNING

* 2. Contact Information

| Name and Pronoun | |
|---|--|
| Agency/Organization (If none, leave blank or state "N/A") | |
| Address | |
| City/Town | |
| State/Province | |
| ZIP/Postal Code | |
| Primary Email Address | |
| Primary Phone Number | |

* 3. Were you recommended by an individual or organization? If so, please state the name of the recommending entity.

O Yes

O No

Recommending individual/organization:



DRAFT MEMBERSHIP APPLICATION

Demographic Information

This information will be used to determine membership eligibility, seat assignment, and to ensure federally mandated reflectiveness and representation requirements are met.

* 4. HIV Status **There is NO requirement to disclose your HIV status if you are not occupying an Unaffiliated Consumer seat on the Commission**

| Positive |
|-----------------------|
| Negative |
| Prefer not to specify |
| Unknown |

* 5. Are you a parent, guardian or direct caregiver of a child with HIV under 19?

- O Yes
- 🔵 No
- * 6. Are you a consumer of Ryan White Part A or CDC HIV prevention services in Los Angeles County?
 - Yes, I am a consumer of Ryan White Part A HIV care and treatment services in Los Angeles County
 - Yes, I am a consumer of HIV prevention services in Los Angeles County
 - \bigcirc No, I am not a consumer of Ryan White Program or CDC HIV prevention services in Los Angeles County
 - 🔵 I don't know

* 7. Are you affiliated with a Ryan White Program-funded agency? **Affiliated is defined as one who is either a board member, employee, or a consultant at the agency. Volunteers are considered unaffiliated.**

- O Yes
- 🔿 No

Not sure if my agency is Ryan White Program-funded; I need assistance to determine

| * 8. Age | |
|---|-----------------------------|
| 13-19 | 40-49 |
| 20-29 | 50-59 |
| 30-39 | 60+ |
| t 0. Condex Identification | |
| * 9. Gender Identification | |
| Female | Non-Gender Conforming |
| Male | Transgender: Female to Male |
| Non-Binary | Transgender: Male to Female |
| Other (please specify) | |
| | |
| | |
| * 10. Race/Ethnicity **Please select all that apply** | |
| American Indian or Alaska Native | Hispanic or LatinX |
| Asian/Pacific Islander | Multi-Race |
| Black or African American | White or Caucasian |
| Other (please specify) | |
| | |
| L | |

* 11. Please indicate which Supervisorial District and Service Provider Area (SPA) you work, live and/or receive HIV prevention, care and/or treatment services. ***Please select all that apply***

To determine your Supervisorial District and SPA, click here and **include your full address and zip code**: <u>https://appcenter.gis.lacounty.gov/districtlocater/</u>

| Supervisorial District 1 |
|--------------------------|
| Supervisorial District 2 |
| Supervisorial District 3 |
| Supervisorial District 4 |
| Supervisorial District 5 |
| SPA 1 |
| SPA 2 |
| SPA 3 |
| SPA 4 |
| SPA 5 |
| SPA 6 |
| SPA 7 |
| SPA 8 |
| I don't know |
| |
| |



DRAFT MEMBERSHIP APPLICATION

Representation

The Commission is composed of 51 members appointed by the Board of Supervisors and represent a broad and diverse group of providers, consumers, and stakeholders. Please select all categories that apply.

12. I represent and have been recommended by one of the following health and social service institutions, among whom are individuals with epidemiology skills or experience and knowledge of Hepatitis B, C and STDs.

| Medi-Cal, State of California | City of Los Angeles |
|-------------------------------|---------------------|
| City of Pasadena | City of Long Beach |
| City of West Hollywood | ○ N/A |

13. I represent and have been recommended by one of the following Ryan White grantees as specified below or by representative groups of Ryan White grant recipients in the County.

| Part B (California State Office of AIDS) Part C Part D | Part F (AIDS Education and Training Centers [AETCs], or local providers receiving Part F dental reimbursements) N/A |
|--|--|
| 14. I represent one or more of the following stakeho An HIV specialty physician from an HIV medical provider A Community Health Center/Federally Qualified Health C A mental health provider A substance abuse treatment provider A housing provider A provider of homeless services | |
| An AIDS Services Organization ("ASO") offering federally An ASO offering HIV care and treatment services A provider or administrative representative from the Hous recommended by the City of Los Angeles Department of | sing Opportunities for Persons with AIDS (HOPWA) program, |
| Health or hospital planning agency who is recommended Behavioral or social scientist who is recommended from a Faith-based entities engaged in HIV prevention and care | by health plans in Covered California among the respective professional communities |
| Local education agencies at the elementary or secondary The business community Union and/or labor | |
| Youth or youth-serving agencies Other federally funded HIV programs Organizations or individuals engaged in HIV-related resea | arch |
| Organizations or individuals performing harm-reduction set Employed as an advocate for incarcerated people living v the past three years and can represent the interests of inc | with HIV and/or I am a person living with HIV who was incarcerated in |

15. I am willing to publicly disclose that I have Hepatitis B or C.

Yes

16. I am a member of a a federally-recognized American Indian tribe or Native Alaskan village.

- YesNo
- LOS ANGELES COUNTY COMMISSION ON HIV

DRAFT MEMBERSHIP APPLICATION

Biographical Information

Please provide detailed information so that we may assess your interest in, knowledge of, and commitment to the Commission.

* 17. For new members, briefly state why you would like to become a member of the Commission. For renewing members, please share why you would like to continue your membership.

* 18. What skills, abilities, and/or experience do you have that can be helpful to the Commission?

19. If you have a resume/CV or other documents that will support your membership application, please upload here.

Choose File

Choose File

No file chosen

20. Please select any of the following trainings already taken. **These trainings are not required to be considered for membership**

Introduction to HIV/STI, HIV/STI 101, or a relate basic Informational HIV/STI training

Health Insurance Portability and accountability Act (HIPAA) training

Protection of Human Research Subjects

Other related trainings, please specify:

* 21. How prepared are you to serve on the Commission?

Not prepared; unfamiliarSomewhat prepared;with the work of thefamiliar with the work of theCommissionCommission

Fully prepared; well informed of the Commission's work

* 22. Would you consider being appointed as an Alternate? **An Alternate serves in the absence of a unaffiliated consumer member and has voting privileges in that capacity only. However, occupying an Alternate seat is a great way to learn the Commission and build capacity without the pressures of being a full member.**

O Yes

🔿 No

* 23. How can we support you so that you are able to fully participate and be effective on the Commission? Do you need special accommodations, i.e. translation services, etc?

24. Would you be interested in assuming a leadership role on the Commission?

O Yes

O No

25. Each member must be assigned to one of the Commission's four standing Committees: Operations (OPS); Public Policy (PP); Planning, Priorities & Allocations (PP&A); and Standards & Best Practices (SBP). Please click <u>here</u> to review the roles & responsibilities of each Committee and select below, in order of priority, which Committee(s) you would be interested in participating on. **A second Committee assignment is an option, contingent upon approval.*



Operations (OPS) Committee



Planning, Priorities & Allocations (PP&A) Committee



Public Policy (SBP) Committee



Standards and Best Practices (SBP) Committee



DRAFT MEMBERSHIP APPLICATION

Statement of Qualifications

The Board of Supervisors requires that all Commission member appointees complete a Statement of Qualifications before they can be appointed. Please click here to access the form: [INSERT LINK]. Please sure to complete all questions, note "N/A" if not applicable and sign where indicated.

26. Please upload your completed/signed Statement of Qualifications here.



DRAFT MEMBERSHIP APPLICATION

Application Submission

Upon submitting the Application, I agree to the following:

I will make every effort to attend all of the meetings and activities of the Commission; the committee to which I am assigned; and related caucuses, task forces and working groups, that I have joined voluntarily or that I have been asked to support. I will comply with the Commission's expectations, rules and regulations, conflict of interest guidelines and its code of conduct, consistent with all relevant policies and procedures.

As the applicant submitting this Application, I understand that governing legislation and/or guidance may be altered in the future, necessitating revision, modification, or elimination of specific Commission processes or practices—necessitating change with which I will be expected to comply as well. I further understand that sections of this application will be distributed publicly, as required by the Commission's Open Nominations Process and consistent with California's Ralph M. Brown Act.

I affirm that the information herein is accurate to the best of my knowledge

* 27. Please check the appropriate box before clicking the "Submit" button below.

Yes



LOS ANGELES COUNTY COMMISSION ON HIV (COH) 2021 MASTER WORK PLAN DRAFT/FOR REVIEW and DISCUSSION ONLY (1.5.21)

| Со | -Chairs: Bridget Gordon & David Lee | | |
|----|---|---------------------------|--|
| Ар | Approval Date: Revision Dates: | | |
| | rpose of Work Plan : To focus and prioritize key activities for COH Committees and subgroups for 2021. | | |
| | oritization Criteria: Select activities that 1) represent the core functions of the COH; 2) advance the goals of the local Ending the HIV Epic | | |
| 3) | align with COH staff and member capacities and time commitment; 4) ongoing COVID public health emergency response and recovery pr | iorities. | |
| # | ΤΑՏΚ/ΑCΤΙVΙΤΥ | TARGET COMPLETION DATE | |
| 1 | Collaborate with the Human Relations Commission and other trainers to design and implement trainings and facilitated discussions on managing conflicts, interpersonal relationships, and implicit bias. | Start February/Ongoing | |
| 2 | Planning Council effectiveness evaluation technical assistance provided by HealthHIV. Will evaluate the effectiveness of the structure, policies and procedures, membership, and stakeholder/consumer engagement integrated HIV planning groups. | June | |
| 3 | Conduct EHE focused strategic planning for the Commission. Strategic planning sessions will lead to the development of an EHE operational plan for the Commission. Conduct an in-depth analysis of EHE plan and operationalize relevant activities for the Commission. Determine how to best support and supplement the work of the DHSP EHE Steering Committee. Operationalize specific roles and goals for the Commission to end the HIV epidemic in LA County in 10 years. Collaborate with Commission Liaison to the DHSP EHE Steering Committee to learn and understand how to best support and supplement each other's work. | May-June | |
| 4 | Develop an EHE Community Engagement and HIV Service Promotion Speaker's Tool Kit for Commissioners to use in community outreach and presentations. Toolkit seeks to increase community awareness of EHE and local services. through Commission meetings, Virtual Lunch and Learn events; HIV Connect resource website; social media; virtual and in-person (pending DPH guidance) health and resource fairs (these may be ongoing activities) | March | |
| 5 | Implement National Minority AIDS Council (NMAC) BLOC training for consumers Customized training aimed at supporting consumer leadership development. | June | |
| 6 | Implement activities aimed at integrated prevention and care planning, priority setting and resource allocation. | Start Jan/Ongoing | |
| 7 | Review BAAC and ATF charge and implement recommendations best aligned with the purpose and capacity of the Commission | Start Jan/Ongoing | |
| | **Subject to change and does not include ongoing activities for Committees and subgroups.** | | |