

2023 CONSUMER CAUCUS RETREAT

JOIN US AS WE REFLECT ON THE STRIDES
AND CHALLENGES OF 2023, COLLECTIVELY
SHARING OUR LIVED EXPERIENCES.

TOGETHER, LET'S ENVISION AND PLAN FOR
AN IMPACTFUL 2024.

THURSDAY

12.14.23

11AM-2PM

510 S. Vermont Ave, 9th Floor (Press Room), LA 90020

Validated Parking @ 523 Shatto Pl, LA

**Inform parking attendant/building security you are attending a
Commission on HIV-sponsored meeting**

**** LUNCH & RAFFLES ****

**OPEN TO ALL CONSUMERS OF HIV
PREVENTION & CARE SERVICES**



LOS ANGELES COUNTY
COMMISSION ON HIV



Contact Dawn Mc Clendon at dmcclendon@lachiv.org for more information



LOS ANGELES COUNTY
COMMISSION ON HIV



2023 CONSUMER CAUCUS RETREAT AGENDA

THURSDAY, DECEMBER 14 @ 11AM-2PM
510 S. VERMONT AVE, 9TH FLR (PRESS ROOM), LA 90020

Welcome & Introductions (11AM-11:15AM)

Damone Thomas & Alasdair Burton, Co-Chairs

Retreat Purpose & Objective (11:15AM-11:30AM)

Damone Thomas & Alasdair Burton, Co-Chairs

Consumer Caucus Mission, Purpose & Scope (11:30AM-11:45AM)

Damone Thomas & Alasdair Burton, Co-Chairs

2023 Reflections (11:45AM-12:15PM)

What positive changes or advantages do you hope to experience through your engagement in the Consumer Caucus, and what specific benefits would you like to see resulting from your participation?

Consumer Caucus Group Discussion

Building Management Security Updates (12:15:-12:30PM)

Vermont Corridor Capital Projects/Security Services

****LUNCH & RAFFLES****

2024 Planning Discussion (12:30-1:45PM)

- Meeting Management & Logistics (Standing time/days & location)
- Creating Safe Spaces (Non COH/DHSP/Provider Participants)
- Capacity Building & Training Opportunities
- Consumer Education & Empowerment
- 2024 Consumer Caucus Open Nominations & Elections

Recap, Call to Action & Adjournment (1:45PM-2:00PM)

All are welcomed to attend the Planning, Priorities & Allocations (PP&A) Committee immediately following the Caucus retreat.


2023 CONSUMER CAUCUS RETREAT

PURPOSE, OBJECTIVE & GROUND RULES


PURPOSE:

The December 14, 2023 Consumer Caucus Retreat serves as a crucial platform for our community to come together, reflecting on the achievements of the past year, aligning with our mission, and strategizing for the future. It provides an opportunity to strengthen our collective commitment in improving services and programs in Los Angeles County for those living with and impacted by HIV.

OBJECTIVE:

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- A white magnifying glass icon with a yellow crescent moon inside the lens, positioned to the left of the objectives list.
- (1) **Align** individual goals with the broader mission of the Consumer Caucus.
 - (2) **Foster** open and constructive dialogue to enhance our understanding of each other's perspectives.
 - (3) **Share** experiences and insights that contribute to the empowerment of consumers within our community.
 - (4) **Establish** a foundation of respect and collaboration, ensuring a successful and meaningful retreat experience.

GROUND RULES:

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- A large white checkmark icon with an orange shadow, positioned to the right of the ground rules list.
- (1) **Punctuality:** Arrive on time for a smooth start and respect designated timeframes.
 - (2) **Respectful Participation:** Actively engage in discussions, sharing thoughts openly and respectfully.
 - (3) **Focus:** Keep discussions aligned with outlined objectives and the mission of the Consumer Caucus.
 - (4) **Inclusivity:** Foster an inclusive and safe environment, being mindful of language and actions.
 - (5) **Capacity Building:** Embrace opportunities for personal and collective growth; be receptive to training sessions.
 - (6) **Empowerment:** Support initiatives for consumer education and empowerment, sharing relevant experiences.
 - (7) **Collaboration Commitment:** Foster an atmosphere marked by respect and collaboration throughout the retreat.

SETTING THE TONE:

As we embark on this retreat, let us collectively commit to creating an atmosphere marked by respect, collaboration, and dedication to the Consumer Caucus's mission. By adhering to these ground rules, each participant plays a crucial role in shaping the success of this retreat. We look forward to your active participation and valuable contributions, making this gathering a cornerstone for the future success of the Consumer Caucus. - 2023 Consumer Caucus Co-Chairs, Damone Thomas & Alasdair Burton



POLICY/PROCEDURE #08.3107	Consumer Definitions and Health Resources Administration and Services (HRSA) Related Rules and Requirements	Page 1 of 6
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Approved & Adopted
October 13, 2016

SUBJECT: The working definitions the Commission on HIV uses for “consumer” membership.

PURPOSE: To define consumer membership and the rules respective to consumer membership.

POLICY:

Following the updated ordinance of the Commission as an integrated HIV prevention and care planning body, a "Consumer" is defined as an HIV-positive and/or AIDS-diagnosed individual who uses Ryan White-funded services or is the caretaker of a minor with HIV/AIDS who receives those services, or an HIV-negative prevention services client.

For the purposes of meeting planning membership requirements from the Health Resources Services Administration (HRSA), specific procedures and definitions are described in this policy. Recruitment and representation of individuals who are HIV positive and negative shall be attained by using the HIV/AIDS epidemiologic data in Los Angeles County.

PROCEDURE(S):

- 1. HIV Status:** Both a member’s HIV and consumer status are defined solely by self-disclosure.
 - a. An individual who is HIV+ but chooses not to disclose his/her HIV status publicly cannot be considered an HIV+ or consumer member of the Commission, and is not eligible to fill one of the Commission’s consumer seats.
 - b. The Commission’s membership application does not ask for HIV status, but only asks if the applicant is willing to disclose his/her HIV+ status publicly. That disclosure designates whether the member is or is not an HIV+ member of the Commission.
 - c. While that disclosure alone qualifies the member to participate in the Commission’s consumer caucus, it does not automatically qualify him/her to fill one of the Commission’s consumer seats.
- 2. Consumer Caucus Membership:** Consumer Caucus membership and participation is open to any HIV-positive and negative members of the Commission, regardless of the system from which they receive their care.

Policy #08.3107: Consumer Definitions and Related Rules and Requirements

Prepared: April 18, 2011, Updated 9/26/16

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- a. The Consumer Caucus may open membership and/or invite the regular participation of other consumers beyond Commission membership at its discretion.
- 3. Commission Consumer Status: In order to fulfill HRSA requirements for planning council membership,** an HIV+ Commission applicant or member is only eligible to fill one of the Commission's consumer seats if he/she voluntarily discloses his/her consumer status.
 - a. An HIV+ member who does not disclose that he/she is a consumer of Ryan White Part A-funded services is not eligible to fill a consumer seat on the Commission.
 - b. In disclosing his/her consumer status, the applicant/member is not required to disclose which services he/she receives nor where he/she receives them.
 - c. Likewise, other Commission members are not entitled to request that information for Commission purposes from that individual.
- 4. Commission Consumer Membership:** The Commission designates one-third of its seats specifically for unaffiliated consumer members.
 - a. Those seats constitute the Commission's "consumer membership." While any Commission member may be HIV+ and a consumer, he/she is not designated as a consumer member unless filling one of those seats.
 - b. Those seats guarantee that the Commission meets HRSA requirements for consumer membership when all Commission seats are filled. At any time when there are vacancies in Commission membership, the consumer seats must be filled in at least a one-third proportion of all of the Commission's voting seats that are currently filled.
- 5. Consumer Members:** Commission consumer members must be consumers of Ryan White services and unaffiliated with Ryan White-funded providers/organizations.
 - a. To qualify for a Commission consumer seat, the applicant/member must disclose that he/she has received at least one Ryan White Part A-funded service within the last year. Those services may entail medical care, support services and/or testing and screening from a Ryan White Part A-funded agency or provider.
 - b. Additionally, the applicant/member must verify that he or she is not affiliated or aligned with a Ryan White Part A-funded organization, provider or agency.
 - c. Since Part A and Part B funds are intermingled in service procurement and contracting, the Ryan White Part A share of resources is significantly larger than the Part B share, and because the breakdown of those funds by service or agency is not provided to the Commission, and since consumer members are not required to detail the services they receive or where, it is assumed that a services or providers funded by Ryan White Parts A or B meet the threshold of "Ryan White Part A-funded" services.
 - d. Similarly, because Net County Costs (NCC) are used to supplement Ryan White funding and resources, because allocation of NCC resources may change at any time during the year, and, again, because consumer members are not required to supply service- or agency-level detail about their consumership, it is assumed that Division of HIV and STD Programs (DHSP)-contracted services funded by NCC also comply with the Ryan White Part A-funded service requirement.

Policy #08.3107: Consumer Definitions and Related Rules and Requirements

Prepared: April 18, 2011, Updated 9/26/16

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- 6. “Unaffiliated” or “Non-Aligned” Status:** “Unaffiliated” and “Non-Aligned” are terms designated for consumers who do not serve in a decision-making capacity at a Ryan White Part A-funded provider organization, such as a member of the Board of Directors, an employee and/or a consultant.
 - a. Volunteering for a Part A-funded organization does not automatically “affiliate” or “align” the consumer to the organization, unless that volunteer service is in a decision-making capacity.
- 7. Disclosure:** For Commission purposes, an individual’s HIV or consumer status may only be disclosed by that individual or someone who the member has designated to disclose that information.
 - a. If the applicant/member discloses his/her HIV+ status on the membership application, it is implied that his/her HIV status is public information.
 - b. Similarly, if that applicant discloses that he/she is a consumer of Ryan White-funded services on the application, in the membership interview, and/or in public discussions, it is implied that information is publicly available.
 - c. A member may voluntarily disclose what services he/she receives and/or where he/she receives them, but under no circumstances for Commission business is that information required or necessary.
 - d. Only details of the member’s HIV service consumership that he/she has previously made public or that he/she deems appropriate should only be referenced in Commission discussions.
- 8. Verification:** In accordance with HIPAA rules and requirements, only consumer members are entitled to disclose their HIV and consumer status eligibility for the Commission’s consumer seats.
 - a. No administrative partner, such as DHSP and/or a funded agency or provider, is allowed to provide the Commission with information that might entail undisclosed patient-level HIV or consumer information about a member of the Commission or public.
 - b. If queried by another member of the Commission or a member of the public about details of his/her HIV condition or consumer activities that he/she has not disclosed, a Commission member is entitled to decline to answer.
- 9. Appropriate Behavior:** Under no circumstances does the Commission require information beyond an individual’s self-disclosed HIV and/or consumer status.
 - a. Members should exercise all due respect of their colleagues and members of the public, which prohibits seeking or querying additional information beyond the HIV and consumer information that an individual has previously disclosed.
 - b. Continued queries/pressure from a Commission member for additional information beyond what an individual has disclosed or if the individual has declined to answer will subject to discipline, as outlined in Procedure #11 below.

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- 10. Prohibitions:** Violations of these prohibitions will be considered violation of Commission policy and the Commission's adherence to HIPAA rules and requirements.
- a. Under no circumstances should any member of the Commission query another Commission member or a member of the public about his/her HIV status if that individual has not already disclosed that information publicly.
 - b. Under no circumstances may any member of the Commission query another Commission member or a member of the public about HIV care or services they received if that individual has not already divulged that information.
 - c. Under no circumstances may any member of the Commission provide details about the HIV status/condition and/or services he/she another Commission member or a member of the public receives beyond what that individual has already disclosed.
- 11. Discipline:** When a Commission member has violated any of the foregoing prohibitions, he/she is subject to any and all Commission disciplinary actions at the Executive Committee's discretion.
- a. Any Executive Committee discussion of Commission member discipline will be held in closed, Executive Session, in accordance with the Ralph M. Brown Act.
 - b. The Commission member whose behavior/actions that may have led to Executive Committee disciplinary consideration may or may not be invited to the Executive Session, at the Co-Chair's discretion.
 - c. In accordance with County Ordinance 3.29 and the Commission By-Laws, discipline may include removal from office, committee and other working group re-assignment and/or recommendation for removal from the Commission to the Los Angeles County Board of Supervisors.

**NOTED AND
APPROVED:**



**EFFECTIVE
DATE:**

10/13/16

Original Approval:

Revision(s): 9/26/16

Consumer Committees and Caucuses: Elevating Consumer Voices

This document addresses common questions about Consumer (or People with HIV) Committees and Caucuses as part of Ryan White HIV/AIDS Program (RWHAP) Part A Planning Councils/Planning Bodies (PC/PBs).

WHAT IS A CONSUMER OR PEOPLE WITH HIV (PWH) COMMITTEE OR CAUCUS?

A Consumer or PWH Committee or Caucus is a body associated with a RWHAP Part A PC/PB that is designed to provide input from Part A consumers and other people with HIV (PWH) to all PC/PB activities, and to serve as a link between the PC/PB and the PWH community. A Consumer Committee or Caucus usually has flexible or open membership, including both members of the PC/PB and other consumers and PWH from the community and their caregivers. The focus is often on unaligned consumers, since the RWHAP legislation requires that at least 33% of voting members of a PC be individuals receiving RWHAP Part A services who are not affiliated with a Part A subrecipient as board members, employees, or paid consultants.¹ A Consumer or PWH Committee or Caucus typically provides information and training to members and the community, engages PWH including community residents in the work of the PC/PB, and creates a pool of potential PC/PB consumer members. As with other standing committees or PC/PB caucuses, the PC/PB may reimburse Consumer Committee or Caucus members' expenses for attending meetings, based on established policies.²

Why "Consumer" rather than "People with HIV"?

PC/PBs have many names for these committees. Most avoid using "people with HIV" in the committee's name because of stigma – and many use terms like "community" instead of either "PWH" or "consumer." For example, a look at PC/PB Bylaws for 48 of the 52 PC/PBs shows that 35 – nearly three-fourths – have committees or caucuses of RWHAP consumers and other PWH.³ Their names are extremely varied:

- 12 have "consumer" in their names – e.g., Consumer, Consumer Advocacy, Consumer Access, Consumer Involvement, Consumer Liaison.
- 13 have "community" in their name – e.g., Affected Communities, Community Access, Community Empowerment, Community Engagement, Community Involvement, Community Voices.
- 3 are called PLWH Committees.
- 7 have other names unique to them – e.g., Community Meetings, Empowerment, Our Voices, Client, + Plus, People Who Care, People's, Positive Voices.
- Town hall meetings can also be used to hear from service providers instead of or in addition to people with HIV.

Who are the members of Consumer Committees and Caucuses?

Most of these committees and caucuses have members that include both unaligned RWHAP Part A consumers and other people with HIV, regardless of where they are receiving care, as well as their caregivers. Some committees have clearly defined membership eligibility – e.g., only unaligned consumers, or in a few cases, only PC/PB members who are consumers or other PWH – but many are open to anyone with HIV, and some are open to anyone from the community who wishes to attend. However, only consumers utilizing Ryan Whites services count toward the legislative expectation that 33% of PC/PB members are consumers.



Consumers utilizing RWHAP services must represent 33% of a PC/PB's members

What is the difference between a Consumer Committee and a Consumer Caucus?

Sometimes the difference between a Consumer Committee and a Consumer/PWH Caucus is only the name. For example, five PCs have groups called caucuses. Three of these are listed in the Bylaws of their PC as standing committees, one is in the Bylaws as a named caucus, and one is not named in the Bylaws, but the Bylaws do provide specifically for the formation of caucuses of PWH or specific subpopulations. A few PC/PBs that are official boards or commissions sometimes prefer to call the group a caucus because using this term makes it easier for the group to have different membership requirements and procedures from other committees.

In cases where a caucus is not a standing committee, there are often other differences:

- **A Consumer Committee** is typically a standing committee of a RWHAP PC/PB, with its roles and membership described in the Bylaws. It typically ensures consumer input into the work of the PC/PB, both to the other committees and to the PC/PB as a whole. It also serves as the PC/PB's liaison to the community. As a standing committee, it can be the primary committee assignment for consumer members. A Consumer Committee generally has more flexible membership requirements and operational processes than other standing committees. Membership is often open to any person with HIV, though sometimes there are limitations on number or types of members, and sometimes voting rights require a certain level of attendance.
- **A Consumer Caucus** that is either included in the Bylaws as a caucus or not named in the Bylaws usually serves a similar function to a Consumer Committee: providing PWH input to the work of the PC/PB and enabling the PC/PB to serve as a link with the PWH community. However, it does not serve as a committee assignment for members of the PC/PB, and it may or may not be regularly asked for input by various committees as they do their work. A caucus may exist for a short period or be an ongoing body. The current caucuses all appear to have been established by the PC/PB, but some communities also have PWH caucuses that developed independently to serve as advocates for PWH and at some point established a formal relationship with the PC/PB.

What benefits does a Consumer Committee or Caucus bring to a PC/PB?

A Consumer Committee or Caucus, with its ability to involve PWH who are both PC/PB members and non-members, has many benefits, for example:

- **Ensuring that the PC/PB and its committees receive regular input from consumers**
 - Assisting the committee responsible for needs assessment to develop survey questions and appropriate response categories
 - Helping with other PWH-focused needs assessment activities
 - Helping to review and update Service Standards, and ensure that they are both appropriate and written in language useful for consumers
 - Offering consumer input at data presentations and discussions
 - Providing a consumer perspective at roundtables and other discussions about services
- **Serving as a liaison between the PC/PB and the PWH community**
 - Making community presentations on behalf of the PC/PB
 - Encouraging consumers and other PWH to attend PC/PB events
 - Taking the lead on planning and managing town halls and other community meetings
- **Engaging consumers and recruiting consumer members for the PC/PB**
 - Helping to recruit unaligned consumers and other potential PC/PB members from the community, often with emphasis on disproportionately affected and underserved communities
 - Providing a place for consumers and other PWH to learn about available services and other topics of interest to them in a safe and comfortable setting
 - Offering unaligned consumers and other PWH an opportunity to become involved with the PC/PB and to learn about and contribute to its work, and perhaps decide to become members
 - Providing ongoing leadership training for consumers
- **Supporting retention of consumer members of the PC/PB, to maintain consumer membership at 33% or more**
 - Providing calendar-based training important to consumer members, on topics related to PC/PB responsibilities, such as Needs Assessment and Priority Setting and Resource Allocation
 - Offering sessions on how to review and use data, with a focus on data-based decision making
 - Reviewing key materials related to upcoming PC/PB agenda topics prior to meetings, so the consumer members feel fully prepared for active participation
 - Providing leadership training on such topics as planning and chairing meetings, developing committee work plans, and building high-performing teams
 - Providing leadership opportunities for consumer members by having an elected Chair and Vice Chair, with the Chair serving as a member of the Executive Committee and the Vice Chair gaining experience in committee leadership
 - Offering consumer members the opportunity to represent the PC/PB in the community, making presentations and informing the community about the work of the PC/PB
 - Enabling consumer members to serve as mentors for other committee/caucus members

What do Bylaws typically say about a Consumer Committee or Caucus?

Here are several slightly edited samples of Bylaws provisions from Part A PC/PBs.

CONSUMER COMMITTEE THAT IS A STANDING COMMITTEE AND LIMITS MEMBERSHIP TO UNALIGNED CONSUMERS:

IV. Consumers Committee

Section 1. Duties. The Consumers Committee is charged with the following duties:

- a. Oversee efforts to ensure meaningful and substantial involvement of people living with HIV/AIDS in all Planning Council activities.
- b. Collaborate with the Rules and Membership Committee in recruitment measures, such as outreach efforts, to secure appropriate consumer representation on the Planning Council.
- c. Collaborate with the Rules and Membership Committee in retention measures, including orientation, training, and mentoring, to help consumer members stay engaged and participate fully.
- d. Work with staff to see that issues of financial support for consumer involvement are addressed appropriately and follow local and federal guidelines.

Section 2. Composition. Membership is limited to no more than 30 in number. In composition, it must meet the following conditions:

- a. Committee membership includes Planning Council members who are unaligned consumers.
- b. The remainder are unaligned consumers who are not voting members of the Planning Council.



CONSUMER COMMITTEE THAT IS A STANDING COMMITTEE AND HAS OPEN MEMBERSHIP:

These Bylaws provide information on roles, responsibilities, membership, leadership, and voting.

Section 5.1 Standing Committees

(B) CONSUMER ADVOCACY COMMITTEE

(i) Mission: The mission of the Consumer Advocacy Committee is to recruit, advocate for, and empower people living with HIV/AIDS in the TGA for participation in Planning Council activities. This is done in conjunction with the Planning Council Support Staff by:

1. Creating a safe place for open discussion and education about the problems and possibilities facing the HIV/AIDS community;
2. Developing and providing leadership and training for the infected and affected community; and
3. Educating the community at large about the purpose of the Planning Council and its relationship with the continuum of HIV Care in the TGA.

The Consumer Advocacy Committee supports PLWHA involvement with the Planning Council by providing outreach to and serving as liaison with consumers. The Committee helps ensure ongoing consumer input to Planning Council activities, with special emphasis on needs assessment and the identification of individuals who know their HIV status but are not receiving regular primary medical care and/or case management. Providing the Planning Council with advice about issues affecting consumers is a major responsibility of this Committee.

(ii) Duties: The duties of the Consumer Advocacy Committee include but are not limited to:

1. Conducting PLWHA outreach and recruitment in collaboration with the Membership and Training Committee;
2. Ensuring PLWHA member and potential member orientation, training, and leadership development in collaboration with the Membership and Training Committee;
3. Providing input to needs assessment planning and reviewing needs assessment findings in collaboration with the Needs Assessment and Comprehensive Planning Committee;
4. Collaborating with Planning Council Support Staff to arrange and advertise consumer forums;
5. Providing input from the consumer perspective on the TGA's Standards of Care in collaboration with the Care Strategies Committee;
6. Providing input for Planning Council Directives to the Grantee on how to best meet service priorities in collaboration with the Priority Setting and Resource Allocation Committee and the Care Strategies Committee; and
7. Ensuring active PLWHA representation on all standing, special, and ad-hoc committees.



In addition, as all other Standing Committees could benefit from focused consumer input, the Consumer Advocacy Committee collaborates with all other Standing Committees to provide input from PLWHA.

(iii) Composition: The membership of the Consumer Advocacy Committee is open to anyone infected/affected by HIV disease, but must include at least one (1) Planning Council member who is a consumer.

(iv) Co-Chairs: The Consumer Advocacy Committee has two elected Co-Chairs, one of whom must be a Planning Council member. At least one Co-Chair must also be a PLWHA. Both Co-Chairs are expected to attend monthly Executive Committee meetings. Nominees for Co-Chair must have attended at least four Consumer Advocacy Committee meetings within the past 12 months to be eligible for election.

(v) Voting: All who attend may vote. Meetings are open to PLWHA and non-PLWHA (including the general public).

CONSUMER CAUCUS THAT IS A STANDING COMMITTEE:

ARTICLE VI - COMMITTEES

The Bylaws and the Council determine the work of committees. Committees develop recommendations which they present to the Executive Committee and full Council. The Council reviews and thoroughly discusses all committee recommendations. The full Council then either approves the recommendations or rejects them. If the recommendations are rejected, they are returned to the committee for modification, based on Planning Council feedback. The exception is for technical or copy-editing corrections. Each committee shall develop an annual work plan which will be reviewed, adjusted, and approved by the Executive Committee.

In rare circumstances, the normal flow of decision-making may be changed by both co-chairs in urgent situations.

Each committee shall have two co-chairs, with the Co-Chairs of the Council serving as the Executive Committee chairs. While having both chairs be Council members is preferable, the Standards of Care committee and +Caucus committee may each have one non-Council committee member serve in this role.

Standing Committees:

E. +Caucus: A committee comprised of HIV+ people including aligned and unaligned people, both Council members and non-Council members, will be responsible for:

- a. Increasing knowledge of issues brought before the Council;
- b. Training people living with HIV on leadership;
- c. Mentorship and education of people living with HIV in the TGA;
- d. Outreaching to other people living with HIV in the community.



CONSUMER CAUCUS THAT IS NOT A STANDING COMMITTEE:

ARTICLE VII. CAUCUSES

SECTION 1. Authority: The Chair may authorize the creation and define the power and duties of any Council Caucus which may be deemed appropriate to allow for the full and adequate representation of and participation by, certain communities in the EMA which have been particularly impacted by the HIV epidemic.

SECTION 2. Membership: Membership in any and all Caucuses shall not be limited to Members of the Planning Council, but shall be limited to the specific population for which the Caucus was established.

SECTION 3. Consumer Caucus. At a minimum, the Council shall have a Consumer Caucus made up of HIV-positive individuals who are consumers of Ryan White Part A-funded services. Consumers are defined as persons living with HIV disease who are recipients of Ryan White Part A-funded services.

SECTION 4. Meetings. The Caucuses shall meet when issues of interest have been brought to their attention and/or at regularly scheduled times.



What other materials are available to help a PC/PB develop or strengthen a Consumer or PWH Committee or Caucus?

Hila Berl, EGM Consulting, LLC, Building a Strong Consumer Committee – Tips for Non-Consumers, May 2020. Available at <https://egmc-dc.com/planning-council-support-resource/planning-council-support-materials/>; click on Consumer and Consumer Engagement. Provides principles and procedures that PC/PBs can use to build strong and engaged consumer committees. Builds on work done with the St. Louis Consumer Advocacy Committee.

Planning CHATT, Elevating Consumer Voices (webinar), January 2020. Available at <https://targethiv.org/planning-chatt/webinars>. This webinar featured presenters from the Atlanta and San Francisco EMAs sharing their strategies for engaging and elevating consumers' voices. Presenters discussed training approaches to build consumers' capacity to participate in and lead PC/PB activities.

REFERENCES

- 1 See Section 2602(b)(5)(C)(1).
- 2 The PC/PB should have policies and procedures that govern reimbursement of meeting-related expenses – primarily transportation but sometimes child care or other costs – for PC/PB members and for committee and caucus members, and those policies should be consistent with guidance from the HIV/AIDS Bureau.
- 3 All 35 are PCs; the 3 PBs do not appear to have such committees or caucuses.

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U69HA39085: National Training and Technical Assistance (Planning CHATT) Cooperative Agreement. The contents of this resource are those of the author(s) and do not necessarily represent the official views of or an endorsement by HRSA/HHS or the U.S. Government.





LOS ANGELES COUNTY
COMMISSION ON HIV



POLICY/PROCEDURE #08.1102	Subordinate Commission Working Units	Page 1 of 12
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**FINAL Revised
Approved 8/11/16**

SUBJECT: The role(s), structures and governing rules of the Commission's various types of subordinate committees and working groups.

PURPOSE: To describe the purpose, status, structure, rules, work and timeframes of various subordinate working groups that facilitate advancement, review and completion/fulfillment of Commission responsibilities, tasks, work and projects.

BACKGROUND:

- Federal Ryan White legislation is the largest source of non-entitlement funding for HIV care and treatment in the country. Part A funding is directed to the most impacted urban jurisdictions across the country. The Ryan White Treatment and Modernization Act of 2009 requires all Part A jurisdictions established before 2008 to create local HIV planning councils. The Health Resources and Services Administration (HRSA) in the US Department of Health and Human Services (DHHS) administers the Ryan White Program nationally.
- The Los Angeles County Commission on HIV serves as LA County's Ryan White and Centers for Disease Control (CDC) prevention HIV planning council. The County has chartered the Commission in County Code, Ordinance 3.29. Both roles as the Ryan White HIV planning council and a County-chartered commission carry specific responsibilities and expectations. The Commission's annual work plan is driven and governed by all of these sources (Ryan White legislation, HRSA and CDC guidance, and County directive/need), yielding an annual schedule of review, discussion, decision-making and work product.
- In order to fulfill its responsibilities and accomplish the work assigned to it, the Commission adopted a strategy in 2003 that relies almost entirely on its committees to perform initial analysis of, generate recommendations to and implement actions for the full Commission. Since then, the Commission's committees have had an indispensable impact on the Commission's capacity to fulfill its varied responsibilities and advance significant initiatives benefiting people with HIV/AIDS/STDs in LA County.

Policy #08.1102: Subordinate Commission Working Units

Prepared: *November 4, 2010, Revised 7/25/16, Approved 8/11/16*

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- While the Commission generates, modifies and/or finalizes work and/or decisions, it rarely prepares the work directly as a full body. Rather, it relies on the standing committees and other working groups to forward recommended decisions or work for consideration by the full body. As a result, the Commission counts on the committees and related work units to complete more focused analysis. The committees, in turn, may rely on different types of working units to which they assign/delegate the work. This policy details the various working units the Commission and its committees can access to advance and expedite its decisions and work as needed.

POLICY:

- 1) Policy/Procedure Description:** These policies and descriptions define and detail the organization, structure and governing rules/procedures of various working units the Los Angeles County Commission on HIV can engage to generate, develop and complete tasks and work necessary to fulfill its mission and purpose.
- 2) Committee-Driven Process:** The Commission is an HIV community planning body that regularly generates planning and implementation decisions and work product consistent with federal Ryan White legislative and Los Angeles County Charter requirements and guidance. Generally, the Commission's work flow and process is "committee-driven," meaning that recommended decisions, actions and work are typically proposed by the Commission's standing committees or other working units to the full Commission for review, consideration, and final decision-making. While the Commission generates, modifies and/or finalizes work and/or decisions, it rarely performs the work directly as a full body.
- 3) Standing Committees:** The Commission's primary working units are the five standing committees—the Executive, Public Policy (PP), Operations, Planning, Priorities and Allocations, (PP&A) and Standards and Best Practices (SBP). Each of the standing committees has specific responsibilities detailed in the Commission's By-Laws, which they, in turn, implement through ongoing analysis, study, discussion, debate, decision-making, work product, action and/or implementation.
- 4) Annual Work Planning:** The Executive Director in consultation with the Co-Chairs and Committee Co-Chairs will develop an Annual Work Plan at the beginning of the program year (March – February). The annual work plan will be aligned with the Comprehensive HIV Plan's Goals and Objectives Section.
- 5) Role of the Working Units:** The Commission, its Co-Chairs, the Executive Committee and the Commission's standing committees are entitled to establish caucuses, subcommittees, ad-hoc committees, task forces and various types of working groups to more thoroughly address responsibilities, decisions, work, tasks and projects in accordance with their and the Commission's work plan.

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- 6) **Openness and Transparency Requirements:** Like the Commission, the standing committees are covered by the Ralph M. Brown Act, comply with HRSA guidance and other “sunshine” law requirements regarding meeting transparency and related agendas, notices and preparations; meeting conduct, voting procedures and decision-making; public participation; and meeting record-keeping.
- 7) **Caucus(es):** The Commission establishes caucuses, as needed, to provide a forum for Commission members of designated “special populations” to discuss their Commission-related experiences and to strengthen that population’s voice in Commission deliberations. Caucuses are not, by definition, Brown Act-covered bodies, and are not required to comply with open meeting, public participation and other, related “sunshine” requirements. With Commission consent, caucuses determine their membership, meeting conduct and timelines, work plans, and activities.
- 8) **Ad-Hoc Committee(s):** The Commission, its Co-Chairs and/or the Executive Committee can create ad-hoc committees to address longer-term Commission special projects or initiatives that require more than one standing committee’s input, involvement and/or representation. Once the project has been completed, the ad-hoc committee automatically sunsets. The Commission Co-Chairs are responsible for assigning Commission members to the ad-hoc committees, and during their tenure, ad-hoc committees maintain the same stature and reporting expectations as other standing committees. Ad-hoc committees are required to comply with all of the same Brown Act and other transparency requirements as the Commission and its standing committees.
- 9) **Subcommittee(s):** Standing Committees and/or their co-chairs may establish subcommittees to address and carry out work, tasks and activities to address one of the committee’s primary responsibilities. Consequently, subcommittees are not necessarily time-limited, but the committee can extend, suspend, amend and or conclude the subcommittee’s work at any time. The committee may delegate certain authorities to the subcommittee, and the subcommittee’s work plan is incorporated into the committee work plan. The committee’s co-chairs assign committee, and possibly other Commission, members to the subcommittee. Sub-committees are required to comply with all of the same Brown Act and other transparency requirements as their respective committees.
- 10) **Task Forces(s):** Task Forces can be created by the Commission, its Co-Chairs and/or the Executive Committee, and are intended to address a significant Commission priority that may entail multiple levels of work or activity and are envisioned as longer-term in nature. Task forces are similar to ad-hoc committees, except that their membership is expected to include at least as many non-Commission members as Commission members. Task force decisions, work, activities and plans must be reported to and approved by the Executive Committee. While, technically, task forces do not have to comply with Brown Act and other

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transparency requirements, it is encouraged that they do so in the spirit of the law. Various community task forces are **not** formal Commission working units, unless recognized as such by the Commission; however, they are invited to report and recommend actions to the Commission.

11) Work Group(s): Work groups are primarily created by the committees for work on a single, short-term project that the committee cannot as thoroughly address during its regular meetings. By definition, work groups—which can come in many different forms—are only operational for short, time-limited periods. Commission and non-Commission members may participate in a work group, but no more Commission members than the originating committee’s quorum. Work groups are not covered by the Brown Act and other transparency laws, and the final decisions/recommendations/work serve as a record of the work group’s deliberations and must be forwarded to the originating committee for review, consideration and modification/approval.

12) Organizational Purpose, Structure and Responsibilities: The following procedures comprehensively describe the various types of subordinate Commission working units; their role(s) and purpose(s); the conditions under which they can be established; and what rules, governance, processes and expectations guide their activities. Each working unit description approximates the following organization:

- Establishing authority
- Definition, standing and reporting responsibilities
- Role and purpose
- Necessary conditions/provisions
- Legal requirements
- Organization, membership and leadership
- Scope of responsibility and timeframe
- Staff support, and
- Other distinctions.

PROCEDURE(S):

1. Work Plan Implementation: The Commission develops an annual work plan for the federal Ryan White program year (March – February) detailing the tasks and work projects it expects to complete in the year and that serves as the Commission’s primary work outline. Each of the Commission’s standing committees and caucuses prepares an individual work plan, and the compilation of those work plans is modified/ approved by the Commission.

- a. Commission decisions and work products are guided by federal Ryan White legislation, Health Resources and Services Administration (HRSA), Centers for Disease Control and Prevention (CDC) and County Ordinance requirements and guidance.
- b. The work plan is a “living document” that may change as unanticipated pressing, urgent and/or time-sensitive issues need to be addressed during the course of the year.

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- c. Various types of subordinate working units are created at the Commission to carry out and fulfill work and decision-making responsibilities in accordance with that workplan. The organization, structures, rules, work activities and timelines for each type of working group are defined in the following procedures.
- d. The group's work objectives and timeframe for completing them will dictate which type of working unit is necessary to carry out those responsibilities.

2. Standing Committee(s): The Commission's standing committees and their respective responsibilities are authorized by and defined in the Commission's By-Laws (*see Pol/Proc #06.1000: Commission By-Laws*). The standing committees:

- are continuing work units;
 - meet monthly or more frequently;
 - concurrently juggle multiple tasks and activities within their respective purviews; and
 - are the Commission's primary means of discharging its duties and responsibilities.
- a. All of the Commission's major function(s) and responsibilities are assigned to at least one of the standing committees. While the standing committees primarily generate recommendations and propose work products for the Commission's modification/approval, they are authorized to make some limited final decisions—such as document revisions in the Operations and Standards and Best Practices (SBP) Committees, policy position modifications in the Public Policy (PP) Committee, and final appeals at the Planning, Priorities and Allocations (PP&A) Committee.
 - b. Standing committees forward reports, completed work and Committee-approved decisions/recommendations to the Executive Committee and the Commission, as appropriate, understanding agenda items at those meetings.
 - c. As the Commission's fundamental working units and in the spirit of transparent and open decision-making, the standing committees are subject to Ralph M. Brown Act, HRSA and other applicable sunshine law requirements. As such, the standing committees must adhere to the relevant rules governing:
 - meetings open to the public;
 - public participation and comment periods;
 - development, notification and posting of agendas;
 - quorums and voting procedures; and
 - meeting record-keeping, audio-recording, and minutes.
- 1) The Commission's standing committees perform their work, conduct their business, and discuss and deliberate in open, public settings and meetings (except for rare closed Committee sessions that are consistent with Brown Act provisions).
 - 2) Members of the public are encouraged to attend and participate in standing committee meetings.

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- 3) Agendas detailing topics to be addressed are developed for all meetings, and meeting agendas are posted 72 hours in advance.
 - 4) A quorum must be present at any meeting in which votes are taken and only Board of Supervisor (BOS)-appointed Commission members are entitled to cast votes.
 - 5) All meetings are electronically recorded and minutes summarizing meeting discussions and actions are subsequently produced and approved.
- d. Standing committee voting privileges are only conferred on Board of Supervisors (BOS)-appointed Commission members who have been assigned to the Committee by the Commission's Co-Chairs, or designated OAPP representatives consistent with the By-Laws.
- 1) There is no limit to the number of Commission members who can be assigned to a standing committee.
 - 2) The standing committee quorum equals one member more than 50% of the assigned membership.
 - 3) A quorum is required before votes can be taken at a meeting. While all of the Commission's working groups aim for consensus, votes may be necessary to arrive at a decision or for record-keeping purposes.
 - 4) A motion is successful when more than half of the voting members at the meeting support it.
- e. Standing committees elect their committee co-chairs from among their designated membership.
- 1) Although a standing committee meeting can proceed without a quorum (however no voting allowed), it cannot proceed without at least one of the Committee or Commission Co-Chairs to lead the meeting.
 - 2) The Commission's Ordinance and By-Laws dictate that all standing committee co-chairs also serve on the Commission's Executive Committee.
- f. Standing committees determine their scope of responsibilities in accordance the standing committee's charge in the Commission By-Laws. The committee outlines how it intends to fulfill those responsibilities by detailing the projecting work tasks/activities and when they will be performed in its annual work plan.
- 1) Work priorities are determined by the committee and its co-chairs, shifted accordingly throughout the year due to unforeseen circumstances.
 - 2) The Commission, its Co-Chairs and/or Executive Committee may also shift standing committee work priorities in consideration of overall Commission priorities and/or existing resources to support the entirety and scheduling of the anticipated Commission workload.
- g. The Executive Director assigns each standing committee one lead and at least one support staff person from among the Commission Office staff.

3. Caucus(es): Only the Commission is authorized to create Commission caucuses. When establishing a caucus, the Commission must balance the number of existing caucuses, their

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workloads and schedules, and determine that staff resources exist to provide adequate support to the roster of caucuses and committees.

- a. Only caucuses created by the Commission with BOS-appointed membership are formally recognized as formal working units of the Commission.
 - 1) Commission caucuses maintain the same stature as the Commission's standing committees, including monthly reporting responsibilities to the Commission.
 - 2) Consistent with the Commission's By-laws, caucuses do not maintain representative seats on the Executive Committee.
- b. The caucus was developed as a vehicle to provide a safe and judgement-free setting where the Commission's caucus members can easily and freely discuss their reactions and experiences, share their insights, and exchange perceptions of issues addressed by the Commission among other Commission members who are more likely to share/understand those perspectives. Second, the caucus was intended to develop a more organized voice to ensure that the caucus population's perspective is effectively heard when relevant issues are raised and discussed at the Commission. Thus, each caucus has four primary responsibilities:
 - 1) Facilitating a forum for a dialogue among the caucus members;
 - 2) Developing the caucus voice at the Commission and in the community;
 - 3) Providing the caucus perspective on various Commission issues; and
 - 4) Cultivating leadership in the caucus membership and population.
- c. When forming a caucus, the Commission must adhere to the following criteria:
 - 1) the population proposed to be represented by the caucus must be one of the Commission's designated "special populations" ;
 - 2) the Commission must conclude that the population's voice can be strengthened by caucus representation; and
 - 3) caucus membership must include more than five Commission members and fewer members than the Commission quorum.
- d. Since the caucus structurally does not comprise a quorum of the Commission or any of its standing committees, the Commission's caucuses are not governed by the Brown Act, HRSA, CDC or other rules and requirements that apply to the Commission's other committees. Consequently:
 - 1) the caucus is not required to adhere to quorum requirements;
 - 2) posted agendas are not required for the Caucuses; and
 - 3) caucus meetings are not open to Commission membership or the public, unless the caucus chooses to do so;
 - 4) caucus meetings are not audio recorded and meeting minutes are not produced, however the caucus may use meeting summaries to ensure operational efficiency.
- e. Decisions about the caucus organization, structure, membership, process and schedule are left to the caucus membership:

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- 1) all Commission members of the designated population are considered members of the established caucus, whether or not they choose to participate;
 - 2) the caucus determines its leadership and leadership responsibilities;
 - 3) the caucus determines how and when to involve the broader Commission and community in its meetings and activities;
 - 4) the caucus determines its internal organization and meeting/activity schedule.
- f. The caucus determines what and how many issues it will address throughout the year by establishing its own scope of responsibility and identifying the work and type of activities in which it will engage. Among the activities it may use to advance its work are education and dialogue, mobilization and advocacy, written communications, presentations, member recruitment, improved representation, events, community involvement, and other options.
- 1) Like the standing committees, caucuses are expected to develop annual workplans, which, in turn, are included in the Commission's annual workplan.
 - 2) The Executive Committee's and Commission's modifications to caucus workplans and final approval of the annual Commission workplan constitute acceptance of the caucus' self-defined scope and timeframe of responsibility.
- g. The Executive Director is responsible for determining who among the Commission staff is the most suited to provide staff support to the caucus.
- 4. Subcommittee(s):** Standing committees create subcommittees, as needed, to carry out one or more of the standing committee's major areas of responsibility. The standing committee can "sunset" a subcommittee or continue, amend, suspend, extend and/or reclaim the work or responsibility or parts of it at will.
- a. The subcommittee's work priorities are established by its respective standing committee as the standing committee deems appropriate as it endeavors to fulfill its responsibilities and determines that it does not have the time to address the topic as specifically as needed in the context of its regular meetings.
 - b. Subcommittees must forward their decisions, recommendations and work products to their respective standing committees for consideration, review, modification and/or approval, unless the standing committee has instructed otherwise.
 - 1) Subcommittee reports are regularly agendaized for their respective standing committee meetings.
 - 2) The standing committee may delegate a portion of the committee's decision-making authority to the subcommittee or instruct the subcommittee to report its decisions/actions directly to the full Commission.
 - c. During its tenure, the subcommittee is considered a formal working unit of the Commission, and, as such, must comply with the same Brown Act, HRSA and other, related legal operational rules and requirements as standing committees (*see Procedure #2.c*).

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- d. The standing committee co-chairs are entitled to assign members of their committee to any subcommittees the committee establishes, and to determine if they will accept other Commission members who volunteer for the designated subcommittee(s).
 - 1) Standing committee rules governing membership, voting privileges and meeting conduct also apply to subcommittees (*see Procedure #2.d*)
 - 2) Only Commission or standing committee members with voting privileges are entitled to membership on subcommittees—although the public are invited to attend and participate in subcommittee meetings.
 - 3) Like the standing committees, subcommittees elect their own co-chairs. At least one of the standing committee co-chairs should attend and lead the first subcommittee meeting in order for the subcommittee to choose its own leadership.
- e. While the standing committee determines the subcommittee's scope and limits of responsibility, the subcommittee may elaborate on that topic, extend, revise or modify it, and design the appropriate work strategies to address it, with the standing committee's or its co-chairs' consent.
 - 1) The subcommittee's annual work plan is incorporated into the standing committee's annual work plan.
 - 2) That responsibility may be time-limited or assumed to be a long-term or permanent delegation of the standing committee's authority.
- f. The respective standing committee staff support also staffs its subcommittees.
 - 1) With the Executive Director, the standing committee must balance the number of its subcommittees, its work-load and schedule to determine if staff resources are adequate to provide the necessary support to a subcommittee.

5. Ad-Hoc Committee(s): The Commission, its Co-Chairs or the Executive Committee are entitled to create ad-hoc committees, as needed and appropriate.

- a. For the duration of an ad-hoc committee's work, the ad-hoc committee maintains the stature of Standing Committees, including regular inclusion on the agenda and reports to the Executive Committee and the Commission.
 - 1) Consistent with the Commission By-Laws, ad-hoc committees do not maintain representative seats on the Executive Committee.
- b. Ad-hoc committees are "special project"-focused in nature, meaning they are assigned one significant project, versus limited-activity or short-term projects that can be addressed by other working units or as part of a standing committee's or subcommittee's more expansive agenda.
- c. Ad-hoc committees are created for special projects that extend beyond a single standing committee's authority or purview and require membership from multiple committees.
 - 1) The Commission Co-Chairs determine who will serve on an ad-hoc committee by assigning members and/or accepting volunteers.

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- d. The ad-hoc committee determines rules, activities and schedules regarding its organization, membership and leadership.
 - 1) Ad-hoc committees must comply with all of the same legal requirements and guidance governing meeting preparations and their conduct as standing committees and subcommittees.
 - e. Given its defined purpose to address a single, significant Commission special project, an ad-hoc committee is established for a distinct time period and automatically sunsets at the conclusion or completion of the project.
 - f. Executive Committee staff support provides staff support to ad-hoc committees, unless the Executive Director designates other staff support.
- 6. Task Force(s):** Task Forces can be created by the Commission, its Co-Chairs or the Executive Committee. Task forces are intended to address a topic that is broader and more expansive in nature, encompassing multiple activities and a continuing, longer-term time frame.
- a. Unlike ad-hoc committees or subcommittees with similar purposes, task forces are created to include Commission members and non-Commission members alike, generally at equal proportions, or with Commission members forming a minority of the task force membership.
 - b. Task forces report to the Executive Committee, to which they forward their recommendations and work. Since membership is not confined to solely Commission members, any recommendation or action from a Task Force must be approved by the Executive Committee before advancing it to the full Commission.
 - 1) The Commission's task forces are expected to provide periodic reports to the full body.
 - c. Technically—only unless the Task Force membership comprises a majority of Commission members from one of its working units—it does not have to comply with public noticing and other Brown Act rules; practicality, though, suggests compliance with those rules, even if not specifically mandated.
 - d. The task force membership is empowered to determine its own leadership, structure, and schedule.
 - e. The task force assumes its scope of responsibility and develops its work plan(s) in consultation with the Executive Committee and the Executive Director.
 - 1) The task force work plan, scheduling and timeline is incorporated into the Executive Committee's annual work plan.
 - f. Executive Committee staff support provides staff support to ad-hoc committees, unless the Executive Director designates other staff support.

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- g. It is important to note that the HIV community has created a number of population- and service-centered task forces that are **not** Commission working units, unless formally recognized by the Commission.

- 1) Community task forces are welcome, though, to report their recommendations or work to the Commission under the standing "Task Force" agenda item, as needed and appropriate.

7. Work Groups: The committees are primarily responsible for establishing work groups, the most informal of the Commission's subordinate working units. Work groups are created to complete a specific short-term, single-focused task, resulting in a final work product that concludes the work group's activities.

- a. Most frequently, work groups are established to work in more specific detail on a task that the committee does not have time to address in its regular meetings, or to finish a task that requires direct involvement and input from the work group members (e.g., such as developing plans, reviewing and generating documents and/or conducting studies, among other possible activities).
 - 1) All work group actions must be approved by the committee of origin, as work groups are only performing work on the committee's behalf and request.
- b. Due to their short-term timeframe, specific work assignment and limited membership, work groups are not governed by the Brown Act or other sunshine law requirements.
- c. Work groups cannot include more members than the originating standing committee's quorum, otherwise additional meeting preparation, membership, timeline and management requirements will be invoked.
 - 1) Work group meetings are not intended to be open to the public, or subject to transparency and public participation requirements.
 - 2) Work group meetings are, instead, intended to be working meetings that produce decisions, documents and/or other products that will be presented for open, public discussion, debate and/or consideration at the originating standing or other committee.
 - 3) Agendas and meeting minutes are not needed for work groups. Summaries may be provided, if needed, to capture information discussed at prior meetings or to ensure continuity and progress of meeting discussions.
 - 4) Generally, the final documentation and/or work product from the work group serves as a record of the work group meeting proceedings.
- d. Work groups can come in many forms: as a committee work group, an expert review panel, a focus group or in other formats.
- e. Non-Commission members can be included in the work group with the consent of the standing committee or the Executive Director, as needed.
 - 1) Due to the mix of Commission and non-Commission members on work groups, votes and voting procedures are not used at work group meetings.

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- 2) Due to its short-term nature, work groups do not require formal leadership.
- f. The work group's scope of responsibility is defined by the originating committee, are short-term limited, and range from one to a dozen meetings in total.
 - 1) More frequently work groups meet only once or twice and finish their assigned projects within a month (for example, by the committee's next meeting).
- g. Work groups are staffed by one of the committee's support staff and the work is not intended to exceed six months, at the maximum.

**NOTED AND
APPROVED:**



**EFFECTIVE
DATE:**

December 9, 2010;
8/11/16

Original Approval: 12/9/10

Revision(s): 7/25/16

RESOURCES

RESOURCES

RESOURCES



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**HIV + STD Services
Customer Support Line**

(800) 260-8787

Why should I call?

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

Will I be denied services for reporting a problem?

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

Can I call anonymously?

Yes.

Can I contact you through other ways?

Yes.

By Email:

dhspsupport@ph.lacounty.gov

On the web:

<http://publichealth.lacounty.gov/dhsp/QuestionServices.htm>





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**Servicios de VIH + ETS
Línea de Atención al Cliente**

(800) 260-8787

¿Por qué debería llamar?

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

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

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

¿Puedo llamar de forma anónima?

Si.

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

Si.

Por correo electrónico:
dhspsupport@ph.lacounty.gov

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





Los Angeles County HOPWA Program

Housing Opportunities For Persons with HIV/AIDS (HOPWA) is a federally-funded program that provides assistance with housing and supportive services for low-income persons living with HIV/AIDS and their families. The program goals are to maintain stable housing, reduce the risk of homelessness, and increase access to care. Services are provided countywide.

Housing Information and Referral – Locates vacant units within the County of Los Angeles and maintains a user-friendly website that includes rental listings, housing resources, and additional community resources.

Housing Specialist/Crisis Housing – Performs comprehensive assessments and housing plan to address barriers to finding and sustain stable housing. Emergency and transitional housing for clients homeless or at-risk of homelessness.

Short Term Financial Assistance – Short-Term Rent, Mortgage, and Utility (STRMU) program provide short term financial assistance to maintain housing and Permanent Housing Placement (PHP) provides move-in grant to help households with first month's rent, security deposits and utility switch on fees.

Tenant Based Rental Assistance (TBRA) – Funded through four housing authorities, operates similarly to a Section-8 voucher program. Households who remain eligible after 12 months may convert to the Section-8 program.

Scattered Site Master Leasing – Households living in units leased by a non-profit agency scattered throughout multiple buildings and receive supportive services.

Residential Service Coordination – Households living in affordable permanent housing (PH) receive supportive services and linkages to other community resources.

Legal Services – Assists with evictions, issues related to eligibility for public benefits, and informs tenants of rights regarding fair housing laws.

Animal Advocacy – Teaches tenants' rights regarding service animals for emotional support as well as supportive services for animals.



HOUSING SPECIALIST, CRISIS HOUSING OR FINANCIAL ASSISTANCE

- Antelope Valley (SPA 1) – Tarzana Treatment Center (661) 948-8559
- San Fernando Valley (SPA 2) – Tarzana Treatment Center (818) 342-5897
- San Gabriel Valley/Pasadena (SPA 3) – Foothill AIDS Project (909) 482-2066
- Hollywood/ Metro/Westside (SPA 4/5) – Alliance for Housing and Healing (323) 656-1107
- Downtown Los Angeles (SPA 4) – JWCH Institute Inc. (Wesley Health Centers) (213) 285-4260
- South Los Angeles Area (SPA 6) – APLA Health (213) 201-1637
- East LA/Great Whittier Area (SPA 7) – Foothill AIDS Project (909) 482-2066
- Greater Long Beach area (SPA 8) – Alliance for Housing and Healing (562) 294-5500

LEGAL SERVICES

- Inner City Law Center (213) 891-2880

ANIMAL ADVOCACY & SUPPORT

- PAWS/LA (213) 741-1950

For more information please contact, **CHIRPLA** at **(877) 724-4775** or visit their website at www.chirpla.org.

You may also contact the **HOPWA Hotline** at **(213) 808-8805** or via e-mail at lahd-hopwa@lacity.org.



Comprehensive Housing
Information & Referrals for
People Living with HIV/AIDS

Are you HIV+?
Are you looking for housing?
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SERVING RESIDENTS OF LOS ANGELES COUNTY
WHO ARE LIVING WITH HIV/AIDS

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Eres VIH+?
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Pagina de Internet
www.CHIRPLA.org

Telefono
(213) 741-1951

Llamada sin Costo
(877) 7-CHIRPLA

Correo Electronico
info@chirpla.org

Food Bank Guide



Agency	Address and Contact	Time and Requirements	SPA
Iglesia El Lirio De Los Valles	45029 North Trevor Avenue Lancaster, CA 93534 (661) 418-7178	Every 2 nd and 4 th Saturday from 9am – 11am	1
NOLP/Wesley Health Centers	45104 10th St. West Lancaster, CA 93534 (213)201-1433	Every Thursday from 9am – 12pm and 1pm – 3pm. Must be HIV+ and enrolled in the program.	1
Shekinah Worship Center	42640 10th Street West Lancaster, CA 93534 (661) 940-8378	Distribution every last Saturday of the month from 9am – 12pm.	1
United Methodist Church	918 West Avenue J Lancaster, CA 93534 (661) 942-0419	Lunch is provided every Monday & Thursday from 12pm – 1pm (meals to go only).	1
Grace Resource Center	45134 Sierra Hwy Lancaster, CA 93534 (661) 940-5272	Distribution: every Tuesday, Wednesday, and Thursday from 10am – 2pm. Spanish speakers are available every Tuesday and Thursday at 10am. Drive-thru distribution: 10am – 11:15am. Hot meals: every Tuesday, Wednesday, Friday at 5:30pm and Sunday at 1:30pm until supplies last.	1
Antelope Valley Partners for Health	44226 10th West Lancaster, CA 93534 (661) 942-4719	Drive – thru food pantry every 2nd and 4th Friday from 8am – 11am. Emergency meals are provided every day from 10am – 12pm (first come, first served).	1
South Antelope Valley Emergency Services	1002 Avenue Q-12 Palmdale, CA 93550 (661) 267-5191	Distribution every Tuesday, Wednesday, and Thursday from 11am – 4pm. Must provide picture ID, proof of income, and address.	1
A.V. Living Water Worship Center	111 West Avenue L-12 Lancaster, CA 93535 (661) 313- 6240	Every Monday and Wednesday, it begins at 1pm. Every Saturday begins at 10:45am.	1
NOLP/ North Hollywood	7336 Bellaire Avenue North Hollywood, CA 91605 (213) 201-1413	Open every Thursday from 10am – 4:30pm. Every 3 rd Thursday of the month from 10am – 3pm. Must be HIV+, can enroll on site with photo ID and diagnosis. *An HIV medication can be used as proof of diagnosis.	2
Our Redeemer Lutheran Church Pantry	20025 Chase Street Winnetka, CA 91306 (818) 341-3460	Grocery distribution every Thursday from 11:30 am – 1 pm. A hot lunch is served at noon.	2
Meet Each Need with Dignity (MEND)	10641 North San Fernando Rd. Pacoima, CA 91331 (818) 896-0246	Bring any form of identification. Open to the public, walk – ins are welcome. Distribution every Tuesday and Friday from 9am – 12pm. Every 1 st Saturday from 9am – 12pm.	2

Food Bank Guide



Agency	Address and Contact	Time and Requirements	SPA
Santa Clarita Valley Food Pantry	24133 Railroad Avenue Newhall, CA 91321 (661) 255-9078	Distribution every Monday from 11am – 2pm, Tuesday and Thursday from 9am – 12pm, Wednesday from 2pm – 5pm, and Saturday from 9am – 12pm. Must provide ID. For *Santa Clarita residents only.	2
North Hollywood Interfaith Food Pantry	11634 Moorpark Street Studio City, CA 91604 (818) 760-3575	Distribution every Monday and Friday from 7:30am – 11am. Drive – thru and walk – ins welcome.	2
Catholic Charities of LA, Guadalupe Community Center	21600 Hart Street Canoga Park, CA 91303 (213) 251-3549	Distribution every Monday, Wednesday, and Friday from 9am – 12pm. Must provide proof of income, proof of address, photo ID, and birth certificates of the children in the home.	2
West Valley Food Pantry	5700 Rudnick Avenue Woodland Hills, CA 91367 (818) 346-5554	Distribution every Monday - Thursday from 9:30am - 2pm and Friday from 9:30am – 12pm. Must provide ID. If there is no address on the picture ID, bring a utility bill with the address. Drive-thru	2
Loaves & Fishes Glendale	4322 San Fernando Road Glendale, CA 91204 (213) 318-5707	Monday, Tuesday, Wednesday, and Friday from 9am – 2pm. Must provide proof of income, proof of address, and photo ID for every member of the family. If homeless, only ID	2
Making It Happen Inc.	9666 Foothill Place Sunland, CA 91040 (818) 398-6232	Distribution every Saturday at 1:30pm until supplies last. Healthy, fresh, and frozen food for individuals and families. Open to the public.	2
Salvation Army Glendale	320 West Winsdor Glendale, CA 91204 (818) 246-5586	Distribution every Monday – Thursday from 12pm – 3pm. Must be a local resident of Glendale. Must provide photo ID.	2
NOLP/Pasadena JWCH (Wesley Health Center)	1845 North Fair Oaks Avenue Pasadena, CA 91103 (213)201-1433	Every Friday from 9am – 12pm / 1pm – 3pm. Must be HIV+ and enrolled in the program.	3
Shepherd's Pantry Irwindale	1418 Arrow Hwy Irwindale, CA 91706 (626) 305-0392	Distribution every Tuesday from 4:30pm - 7pm, must provide picture ID and proof of residency. If children are present, must provide picture ID. Participant may only pick up food twice a month in any of the Shepherd's Pantry locations. If homeless, every Monday, Wednesday, and Friday from 10:30am – 11:30am.	3

Food Bank Guide

Agency	Address and Contact	Time and Requirements	SPA
Salvation Army Pasadena Tabernacle	960 East Walnut St. Suite 102 Pasadena, CA 91106 (626) 773-4404	Monday, Wednesday, and Friday from 9am - 11am. Tuesday and Thursday for housed individuals and families by appointment from 9am – 11:45am. Must provide ID, proof of address near service area (Pasadena, South Pasadena, Altadena, Sierra Madre, and San Marino), and proof of income.	3
San Juan Diego Community Services Center	4171 North Tyler Avenue El Monte, CA 91731 (626) 575-7652	Distribution every Monday through Friday from 9am – 12pm. Must provide photo ID.	3
Shepherd's Pantry Glendora	657 East Arrow Hwy Suite J Glendora, CA 91740 (626) 852-7630	Distribution every Wednesday and Thursday from 5pm - 7pm, must provide picture ID and proof of address. Participant may only pick up food three times a month in any of the Shepherd's Pantry locations. Must be Los Angeles County resident.	3
NOLP/ Claremont Foothill AIDS Project	233 West Harrison Avenue Claremont, CA 91711 (213) 201-1433	Distribution every 2nd and 4th Wednesday from 1:30pm – 3:30pm. Must be HIV+, can enroll on site with photo ID and diagnosis.	3
Foothill Unity Center	191 North Oak Avenue Pasadena, CA 91107 (626) 584-7420	Drive-thru distribution Tuesday, Wednesday, and Friday from 9am - 11:30am. Must provide picture ID, 2 utility bills, proof of income (within the current year). Unless no income, must fill out a no income form.	3
Friends In Deed	444 East Washington Boulevard Pasadena, CA 91104 (626) 797-2402	Distribution every Tuesday and Wednesday from 10am – 3pm. Thursday from 10am – 1pm. Must provide photo ID.	3
St. Andrew Catholic Church	140 Chestnut Street Pasadena, CA 91103 (626) 792-4183	Distribution every Wednesday from 9am – 10:30am and Saturday from 7:30am – 10:30am.	3
San Gabriel Mission Food Pantry	428 South Mission Drive San Gabriel, CA 91776 (626) 457-3035	Distribution every 2 nd and 4 th Sunday from 7am – 9am. Drive thru only. Must show an ID.	3
L.A Regional Food Bank	1441 Santa Anita Avenue South El Monte, CA 91733 (626) 575-5431	Distribution once a month by appointment only.	3
The Dream Center Mobile Food Bank Santa Ynez	2127 Santa Ynez Street Los Angeles, CA 90012 (213) 273-7042	Distribution every Saturday from 10:30am – 11:30am.	4
The Dream Center Mobile Food Bank William Mead	293 Cardinal Street Los Angeles, CA 90012 (213) 273-7042	Distribution every Saturday from 10:30am – 11:30am.	4

Food Bank Guide



Agency	Address and Contact	Time and Requirements	SPA
The Dream Center Mobile Food Bank Pueblos	54th Street and Long Beach Ave Los Angeles, CA 90011 (213) 273-7042	Distribution every Saturday from 10:30am – 11:30am.	4
Brownson House Community Services Center	1307 Warren Street Los Angeles, CA 90033 (213) 251-3512	Distribution every Monday – Friday from 9am – 1pm. Must provide photo ID.	4
Downtown Women's Center	442 South San Pedro Street Los Angeles, CA 90013 (213) 213-28	Breakfast is served every day from 8am – 9am. Lunch is served every day from 11:30am – 12:30pm. Afternoon snacks served at 2pm.	4
NOLP/ The David Geffen	611 South Kingsley Drive Los Angeles, CA 90005 (213) 201-1433	Every Wednesday and Friday 10:30am – 11:30am and 12:30pm – 5pm. Must be HIV+, can enroll on site with photo ID and diagnosis form.	4
NOLP/ Project Angel Food	922 Vine Street Los Angeles, CA 90038 (213) 201-1433	Every Saturday from 1pm – 4pm. Must be HIV+, can enroll on site with photo ID and diagnosis.	4
NOLP/ Wesley Health Centers - Vermont	954 N. Vermont Ave. Los Angeles, CA 90029 (213) 201-1433	Every Wednesday 9am – 12pm / 1pm – 3pm Must be HIV+, can enroll on site with photo ID and diagnosis.	4
St. James Episcopal Church	3903 Wilshire Boulevard Los Angeles, CA 90010 (213) 388-3417	Grab & Go meals are served Tuesday from 4:30pm and Friday from 3:30pm – 5pm. Food pantry is distributed on Thursday from 8am – 9am. Breakfast and clothes available on Saturday from 9am – 1pm.	4
Silverlake Community Church	2930 Hyperion Avenue Los Angeles, CA 90027 (323) 663-3151	Distribution every Wednesday from 5:00pm – 6:30pm. Must provide an ID, proof of income and proof of address.	4
Wilshire Presbyterian Church	309 South Oxford Avenue Los Angeles, CA 90020 (213) 387-5387	Distribution every Monday from 8am – 10am. Must provide an ID.	4
St. Francis Center	1835 South Hope Street Los Angeles, CA 90015 (213) 747-5347	Must bring Pantry Card – to obtain one, must register online or in – person on Fridays from 12pm – 1pm. Distribution Wednesday, Thursday, and Saturday from 11am – 12:30pm. For seniors, Friday from 11am – 12:30pm.	4
Bread of Life Foursquare Gospel Church	5179 West Washington Blvd Los Angeles, CA 90016 (323) 939-4716	Distribution every Wednesday at 11am – 12:30pm.	4

Food Bank Guide

Agency	Address and Contact	Time and Requirements	SPA
Manos Que Sobreviven	3010 Estara Avenue Los Angeles, CA 90065 (323) 561- 5504	Food distribution every Wednesday from 11am – till supplies last.	4
Hollywood Lutheran Church	1733 North New Hampshire Ave Los Angeles, CA 90027 (323) 667-1212	Distribution is every Wednesday from 11am – 1pm.	4
Centro Maravilla	4716 East Cesar Chavez Avenue Los Angeles, CA 90022 (323) 260-2805	Must live around the service area. Must schedule an appointment to pick up once a month on Monday afternoon or Tuesday morning/afternoon. To make an appointment, call Friday from 8:30am – 4pm.	4
Immanuel Presbyterian Church	663 South Berendo Street Los Angeles, CA 90005 (213) 389-3191	Distribution every Wednesday, and Friday from 9am – 12pm. No requirements needed.	4
Venice Food Drive	415 E. Indiana Ct Venice, CA 90291 Alleyway between Brooks Ave. & Indiana Ave. venicefooddrive@gmail.com	Every Monday and Saturday from 1:30pm – 3pm. Every Saturday from 1pm – 3pm. *Closed the 1 st & 3 rd Saturday of the month.	5
Catholic Charities	211 3rd Avenue Venice, CA 90291 (310) 392-8701	Lunch distribution every Saturday from 9am – 11am.	5
Allies for Every Child	12120 Wagner Street Culver City, CA 90230 (310) 846-4100	Drive-thru for produce and meals twice a month from 10:30am – 12:30pm. Dates may vary, please call for more information.	5
St. Gerard's Catholic Church	4439 Inglewood Boulevard Los Angeles, CA 90066 (310) 390-5034	Distribution every Tuesday and Thursday from 9am – 12pm and from 1pm – 3pm. Must bring photo ID, proof of address, and proof of income. (Local residents only)	5
St. Joseph Center	204 Hampton Drive Venice, CA 90291 (310) 396-6468 x313	Distribution every Monday from 10am – 11:50am, Tuesday and Thursday from 12pm – 2:50pm.	5
The Bible Tabernacle	1761 Washington Way Venice, CA 90291 (310) 821-6116	Distribution every Monday, Wednesday, and Friday from 9:30am – 12pm.	5
Turning Point Food Drive	3756 Santa Rosalia Dr Suite #617 Los Angeles, CA 90008 (323) 296-1840	Distribution every 2nd and 4th Friday from 12pm – 2:30pm.	6
Let's Be Whole	4395 Leimert Blvd Los Angeles, CA 90008 (877) 594-1292	Distribution every Wednesday from 12pm until supplies last.	6

Food Bank Guide

Agency	Address and Contact	Time and Requirements	SPA
McCarty Memorial Christian Church	4103 W Adams Blvd Los Angeles, CA 90018 (323) 377-7740	Every Thursday from 12:30pm – 3pm.	6
St Paul Evangelical Lutheran Church	3901 W Adams Blvd Los Angeles, CA 90018 (760) 947-3317	Every Friday from 12pm – 2:30pm or until supplies last.	6
Galilee Baptist Church	3220 W 48 th Street Los Angeles, CA 90043 (323) 377-7740	Every 3 rd Wednesday of the month from 11:30am – 4pm	6
St. Agnes Parish	2625 S Vermont Ave Los Angeles, CA 90007 (323) 731-2464	Distribution every Tuesday at 9am – 10:30am. For first time, please bring ID.	6
NOLP / Oasis	1679 E. 120th St. (Parking lot) Los Angeles, CA 90059 (213) 201-1451	Distribution every Thursday from 10am – 12pm / 1:30pm – 4pm. Must be HIV+, must be enrolled. Closed at 3pm on 3 rd Thursday of the month.	6
All Peoples Community Center	822 East 20th Street Los Angeles, CA 90011 (213) 747-6357	Please call for more information or visit allpeoplescc.org	6
Paramount Care Foundation	8206 Alondra Boulevard Paramount, CA 90723 (562) 531-6820	Distribution every Friday 8:00am – 10:00am.	6
Word of Faith Center	107 West Artesia Boulevard Compton, CA 90220 (310) 632-7337	Distribution every Saturday at 10am until supplies last.	6
Ministerio a la Luz de la Palabra	111 North Long Beach Boulevard Compton, CA 90221 (310) 365-2277	Distribution every Saturday from 8am–10am. First come first serve.	6
Shields for Families Social Service Agency	11705 Deputy Yamamoto Place Lynwood, CA 90262 (323) 242-5000	Walk up and drive-thru food distribution every Thursday from 10am - 2pm, arrive early.	6
New Direction Community Program	8200 South Western Avenue Los Angeles, CA 90047 (323) 291-0035	Distribution every 4th Saturday of the month from 12pm – 2pm.	6
First African American Methodist (FAME)	2249 South Harvard Boulevard Los Angeles, CA 90018 (323) 735-1251	Distribution every 4th Saturday from 9am – 12pm. Must provide photo ID.	6
St. John's Cathedral	514 West Adams Boulevard Los Angeles, CA 90007 (213) 747-6285	Distribution every 3rd Saturday from 8:30am – 10:30am.	6

Food Bank Guide

Agency	Address and Contact	Time and Requirements	SPA
Central City Neighborhood Partners	501 South Bixel Street Los Angeles, CA 90017 (213) 482-8618	Food bank distribution every Thursday from 10am – 1pm. First come first serve basis, no requirements needed.	6
Gospel Mission Baptist Church	7301 South Avalon Boulevard Los Angeles, CA 90003 (In the parking lot) (323) 759-8087	Distribution every Wednesday from 11am – 12pm.	6
Catholic Rainbow Outreach	11419 Carmenita Road Whittier, CA 90605 (562) 781 – 8247	Distribution every Monday, Tuesday, Wednesday, Friday from 10:30am until supplies last. Every 2 nd and 4 th Saturday at 10:30am. Distribution every Friday from 10:30am until supplies last.	7
Bienestar East Los Angeles	5326 East Beverly Boulevard Los Angeles, CA 90022 (323) 727-7896	Distribution every Tuesday from 11am – 2pm, Wednesday from 10:30am – 12:30pm, Thursday from 12pm – 4pm. Must be HIV+. Must show ID, proof of income, address, and medical insurance.	7
Door of Hope Community Center	1325 South Atlantic Boulevard Los Angeles, CA 90022 (323) 262-2777	Please call for food distribution hours.	7
Mexican- American Opportunity Foundation	401 North Garfield Avenue Montebello, CA 90640 (323) 890-9600	Distribution every Thursday from 8am – 12pm. Must provide photo ID.	7
Hawaiian Gardens Food Bank	22121 Norwalk Boulevard Hawaiian Gardens, CA 90716 (562) 860-9097	Distribution every Tuesday and Thursday from 10am – 3pm and Wednesday from 10am – 5pm. Must be a resident in the service area.	7
Centro Cristiano Manantial De Vida	10035 Washington Street Bellflower, CA 90706 (562) 481-1642	Distribution every Monday from 6pm – 7pm. Except the last Monday of the month and holidays.	7
St. Margaret's Center	10217 Inglewood Avenue Lennox, CA, 90304 (310) 672-2208	Must call and schedule an appointment and register. Distribution is Tuesday – Friday from 9:30am – 3:30pm by appointment only. Must be a resident in the service area.	8
NOLP / AIDS Food Store In Long Beach	590 East Willow Street Long Beach, CA, 90806 (562) 676-4554	Distribution every Tuesday from 9am – 2pm. Must be HIV+, must be enrolled.	8
Beacon Light Mission	525 Broad Avenue Wilmington, CA 90744 (310) 830-7063	Dinner is served 7 days a week from 7:45pm. Must attend Chapel before 7pm to participate.	8
First United Methodist Church	1551 El Prado Avenue Torrance, CA 90501 (310) 328-3242	Food box distribution every 4th Saturday from 11am until supplies last.	8

Food Bank Guide

Agency	Address and Contact	Time and Requirements	SPA
Grant A.M.E Church	1129 Alamitos Avenue Long Beach, CA 90813 (562) 437-1567	Distribution every Wednesday from 9am – 12pm.	8
San Pedro Service Center	769 West 3rd Street San Pedro, CA 90731 (310) 519-6091	Distribution Monday from 2pm – 4:30pm, Tuesday from 9am – 11:30am and 2pm – 4:30pm.	8
Help Me Help You Oropeza Elementary School	700 Locust Avenue Long Beach, CA 90813 (562) 612-5001	Distribution every 2nd and 4th Friday at 11:30am – 12:30pm.	8
Help Me Help You MOLAA Museum	628 Alamitos Avenue Long Beach, CA 90802 (562) 612-5001	Enter 6 th Street. Distribution every 1 st and 3 rd Wednesday from 4pm – 5pm.	8
Harbor Interfaith Services	670 West 9th Street San Pedro, CA 90731 (310) 831-9123	Distribution every Monday – Friday from 9am – 5pm. Must provide photo ID for every attending member, proof of income, residency for the first time.	8
Light and Life Christian Fellowship	5951 Downey Avenue Long Beach, CA 90805 (562) 630-6074	Distribution every Wednesday from 10am – 12pm. To participate for grocery, register www.llcf.org/ . Must register by Thursday. Free Farmers Market every 2 nd Saturday from 10am – 12pm.	8
Christian Outreach in Action	515 East 3rd Street Long Beach, CA 90802 (562) 432-1440	Distribution every Monday, Tuesday, Thursday, and Friday from 10am – 12:30pm. Seniors (55+) only on Wednesday from 10am – 12:30pm, must have ID	8
Hope in Action	2420 Pacific Coast Hwy Hermosa Beach, CA 90254 (310) 374-4673	Distribution every Wednesday and Friday from 9am – 12pm and 1pm – 4pm.	8
Toberman Neighborhood Center	131 North Grand Avenue San Pedro, CA 90731 (310) 832-1145 ext. 168 or 106	For the food pantry and delivery program you must call to register and provide proof of address, proof of income, and photo ID.	8
Let's Be Whole	437 W. 9th Street San Pedro, CA 90731 (877) 594-1292	Distribution every Friday from 1pm until supplies last.	8

LOS



Ending
the
HIV
Epidemic

LOS ANGELES COUNTY RYAN WHITE HIV/AIDS PROGRAM: MEDICAL & SUPPORTIVE SERVICES FACT SHEETS

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Ryan White HIV/AIDS Program

Free or Low-Cost Services for People with HIV

What is the Ryan White HIV/AIDS Program?

The Ryan White HIV/AIDS Program (RWHAP) is a federal program under the Health Resources & Services Administration (HRSA) that supports a variety of free or low-cost services for people with HIV (PWH) in the United States. Eligible PLWH are able to receive medical care, HIV medications, and other support services to help them remain in care and achieve viral suppression. RWHAP services are available to anyone with HIV regardless of insurance, citizenship, and immigration status.

What are the goals of the RWHAP?

- Provide HIV medical care, treatment, and support services for PWH
- Help clients achieve viral suppression
- Reduce or eliminate HIV transmission

What medical and supportive services can I access through the RWHAP?

Medical Services	Description
Ambulatory Outpatient Medical (AOM) Services	HIV medical care accessed through a medical provider
Home-Based Case Management	Specialized home care for homebound clients
Medical Care Coordination (MCC)	HIV care coordination through a team of health providers to improve quality of life
Medical Specialty Services	Medical care referrals for complex and specialized cases
Mental Health Services	Psychiatry, psychotherapy, and counseling services
Oral Health Services (General & Specialty)	General and specialty dental care services

Supportive Services	Description
Benefits Specialty Services (BSS)	Assistance navigating public and/or private benefits and programs (health, disability, etc.)
Language Services	Translation and interpretation services for non-English speakers and deaf and/or hard of hearing individuals
Legal Services	Legal information, representation, advice, and services
Nutrition Support Services	Home-delivered meals, food banks, and pantry services
Residential Care Facility for the Chronically Ill (RCFCI)	Home-like housing that provides 24-hour care
Substance Use Disorder Transitional Housing (SUDTH)	Housing services for clients in recovery from drug or alcohol use disorders
Transitional Case Management	Support for incarcerated individuals transitioning from County jails back to the community
Transitional Residential Care Facility (TRCF)	Short-term housing that provides 24-hour assistance to clients with independent living skills
Transportation Services	Ride services to medical and social services appointments





Ryan White HIV/AIDS Program

Free or Low-Cost Services for People with HIV

How do I access these services?

If you are interested in any of these services, please refer to the corresponding fact sheet for a list of providers. If you are not already receiving any of these services, our RWHAP agencies can help you confirm if you are eligible. They may ask you to provide documentation for the following:

- HIV diagnosis;
- Current income (if any and below the 500% Federal Poverty Level (FPL) for one person);
 - *500% FPL 2022 \$67,950 – Please note this amount is adjusted every year.*
- Health insurance (if any) – If you do not have health insurance or have insurance and are responsible for out-of-pocket costs, including medication co-pays or coinsurance for office visits; and
- Live in Los Angeles County

RWHAP services are not included under public charge and are available to anyone with HIV, regardless of insurance, citizenship, and immigration status.





Programa Ryan White de VIH/SIDA

Servicios gratis o de bajo costo para Personas con VIH

¿Qué es el Programa Ryan White de VIH/SIDA?

El Programa Ryan White de VIH/SIDA (RWHAP) es un programa federal bajo la Administración de Recursos y Servicios de Salud (HRSA) que apoya una variedad de servicios gratis o de bajo costo para personas con VIH (PWH) en los Estados Unidos. Las PWH elegibles pueden recibir atención médica, medicamentos contra el VIH y otros servicios de apoyo para ayudarlas a que permanezcan en cuidado médico y así lograr la supresión viral. Los servicios de RWHAP están disponibles para cualquier persona con VIH, independientemente de su estado legal, o si tiene o no seguro médico.

¿Cuáles son los objetivos del RWHAP?

- Proporcionar atención médica, tratamiento y servicios de apoyo para las PWH
- Ayudar a los clientes a lograr la supresión viral
- Reducir o eliminar la transmisión del VIH

¿Cuáles son los servicios médicos y de apoyo que puedo acceder a través del RWHAP?

Servicios Médicos	Descripción
Servicios Médicos Ambulatorios para Pacientes Ambulatorios (AOM)	Atención médica especializada para el VIH
Manejo de Casos en el Hogar	Atención a domicilio especializada para clientes que no pueden salir de casa
Coordinación de Atención Médica (MCC)	Coordinación para el manejo de casos a través de un equipo de proveedores de salud que trabaja junto con su médico
Servicios de Especialidad Médica	Referencias de atención médica para casos complejos y especializados (cardiología, neurología, etc.)
Servicios de Salud Mental	Servicios de psiquiatría, psicoterapia y consejería.
Servicios de Salud Oral (General y Especialidad)	Servicios de atención dental general y especializada. Esto puede incluir limpieza, extracción, o implantes.

Servicios de Apoyo	Descripción
Servicios de Especialidad en Beneficios (BSS)	Asistencia para navegar beneficios y programas públicos y/o privados (salud, discapacidad, etc.).
Servicios de Traducción o Interpretación	Servicios de interpretación o traducción para personas que no hablan inglés y personas sordas y/o con problemas de audición
Servicios Legales	Información legal, asesoramiento y representación legal
Servicios de Apoyo Nutricional	Servicio de comidas a domicilio, bancos de comida y despena
Centro de Atención Residencial para Personas con Enfermedades Crónicas (RCFCI)	Vivienda tipo hogar que brinda atención las 24 horas
Vivienda Transitoria para el Trastorno por Uso de Sustancias (SUDTH)	Servicios de vivienda temporal tipo hogar para clientes con historia de consumo de drogas o alcohol
Manejo de Casos Transitorios en la Cárcel	Apoyo a las personas que están en la cárcel para ayudarles con la transición a la comunidad
Centro de Atención Residencial de Transición (TRCF)	Servicios de vivienda temporal tipo hogar para clientes mientras identifican vivienda permanente
Servicios de Transporte	Servicios de transporte a citas de servicios médicos y sociales





Programa Ryan White de VIH/SIDA

Servicios gratis o de bajo costo para Personas con VIH

¿Cómo accedo a estos servicios?

Si está interesado en alguno de estos servicios, consulte la hoja informativa correspondiente para obtener una lista de proveedores. Si aún no está recibiendo ninguno de estos servicios, nuestras agencias por RWHAP pueden ayudarle a confirmar si es elegible. Es posible que le pidan que proporcione documentación para lo siguiente:

- Diagnóstico de VIH;
- Ingreso actual (por debajo del Nivel Federal de Pobreza (FPL) del 500 % para una persona);
 - *500% FPL 2022 es \$67,950 anual – Tenga en cuenta que esta cantidad se ajusta cada año.*
- Seguro médico (si lo hay) – Si no tiene seguro médico o si tiene seguro y es responsable de los gastos de bolsillo, incluidos los copagos de medicamentos o a citas al consultorio; y
- Que vive en el Condado de Los Ángeles.

Los servicios de RWHAP no están incluidos bajo carga pública y están disponibles para cualquier persona con VIH, independientemente del seguro, la ciudadanía y el estado migratorio.





Ambulatory Outpatient Medical Services

for People with HIV

What are Ambulatory Outpatient Medical (AOM) Services?

Ambulatory Outpatient Medical (AOM) Services is a program that provides HIV specialty medical services for people with HIV (PWH). These services are provided by licensed health care professionals who have received advanced training in the management of HIV/AIDS.

What are the goals of the AOM Services program?

- To connect you to high-quality care and medication even if you do not have health insurance
- Help you achieve low/undetectable viral load to improve your health and prevent HIV transmission ([Undetectable=Untransmittable](#))
- Prevent and treat opportunistic infections
- Provide education and support with risk reduction strategies

What services can I access through the AOM Services program?

The AOM Services program offers a variety of services which include medical exams and treatment, laboratory testing, nutrition education support, and sexually transmitted infection (STI) prevention and screening.

How do I access these services?

You can access these services by contacting any of the providers listed on the next page. If you are not already receiving services at one of the listed providers, you may need to confirm that you are eligible for the Ryan White HIV/AIDS Program (RWHAP). They may ask you to provide documentation confirming your HIV diagnosis, current income (if any), health insurance (if any), and that you live in Los Angeles County. AOM services are free for those with a qualifying income regardless of immigration status.

Continue to next page





Ambulatory Outpatient Medical Services

for People with HIV

Agency	Contact	Phone Number	Email Address/Webpage
AIDS Healthcare Foundation	Practice Managers	(888) 243-727	www.hivcare.org/contact-ahf/
AltaMed Health Services	Ernesto Vicencio	(323) 803-8425	giovhernandez@altamed.org
APLA Health & Wellness	Dr. Jerome de Vente (Long Beach) Dr. Kevin Tangonan (La Brea) Dr. Jay Gladstein (Olympic)	(562) 247-7740 (323) 239-9900 (323) 215-1725	info@apla.org
Children's Hospital Los Angeles	Mark Casas, MSW	(323) 361-3028	mcasas@chla.usc.edu
East Valley Community Health Center	Deborah Lara Rivera	(909) 620-8088 x3200	dlara@evchc.org
El Proyecto del Barrio	Leopoldo Cabral Sandra Salazar	(818) 830-7181	lcabral@elproyecto.us ssalazar@elproyecto.us
JWCH Institute, Inc.	Call Center	(866) 733-5924	
Long Beach, Department of Health and Human Services	Rosie Tufuga Stephanie Silva	(562) 570-4316 (562) 570-4317	rosie.tufuga@longbeach.gov stephanie.silva@longbeach.gov
Los Angeles LGBT Center	Joseph Martinez	(323) 993-7495	jmartinez@lalgbtcenter.org
Men's Health Foundation	Virginia Cabrera	(310) 550-1010	virginia.cabrera@menshealthfound.org
Northeast Valley Health Corporation	Andrew Braga, RN	(818) 988-6335	andrewbraga@nevhc.org
St. John's Community Center	Xavier Laporte	(323) 541-1600 x1079	xsanchez@wellchild.org
St. Mary Medical Center	Eddie Felix	(562) 624-4999	careprogram@dignityhealth.org
Tarzana Treatment Centers	Christian Espinoza	(818) 432-5897 x2170	cespinoza@tarzanatc.org
T.H.E. Health & Wellness Centers	Tracy Horn Clinic General Line	(323) 730-1920 x3225 (323) 730-1920	thorn@tohelpeveryone.org
The Regents of the University of California (UCLA)	Rosa Ramos	(310) 557-2273; #3	AOM.carecenter@mednet.ucla.edu
Venice Family Clinic	Julie Garcia Joslynn Cerrato	(310) 382-6041 (310) 664-7994	juliegarcia@mednet.ucla.edu jcerratto@mednet.ucla.edu
Watts Healthcare Corporation	Anthony Corona Alicia Chavez	(323) 564-4331	anthony.corona@wattshealth.org alicia.chavez@wattshealth.org





Servicios Médicos Ambulatorios para Pacientes Ambulatorios para Personas con VIH

¿Qué son los Servicios Médicos Ambulatorios para Pacientes Ambulatorios (AOM)?

Servicios Médicos Ambulatorios para Pacientes Ambulatorios (AOM) es un programa que proporciona servicios médicos especializados para personas con VIH (PWH). Estos servicios son proporcionados por profesionales de la salud que han recibido capacitación avanzada en el manejo del VIH/SIDA.

¿Cuáles son los objetivos del programa AOM?

- Conectar personas con atención y medicamentos de alta calidad, incluso si no tiene seguro médico
- Ayudarle a lograr una carga viral baja/indetectable para mejorar su salud y prevenir la transmisión del VIH ([Indetectable=Intransmisible](#))
- Prevenir y tratar infecciones oportunistas
- Proporcionar educación y apoyo con estrategias de reducción de riesgos

¿Qué servicios puedo acceder a través del programa AOM?

El programa ofrece una variedad de servicios que incluyen exámenes y tratamientos médicos, pruebas de laboratorio, apoyo de educación nutricional, y prevención y detección de infecciones de transmisión sexual (ITS).

¿Cómo puedo acceder estos servicios?

Puede acceder estos servicios poniéndose en contacto con cualquiera de los proveedores enumerados en la próxima página. Si aún no está recibiendo servicios con uno de los proveedores enumerados, es posible que deba confirmar que es elegible para el Programa Ryan White de VIH/SIDA (RWHAP). Es posible que le pidan que proporcione documentación que confirme su diagnóstico de VIH, ingresos actuales (si los hay), seguro de salud (si corresponde) y que vive en el condado de Los Ángeles. Los servicios de AOM son gratuitos para aquellos con un ingreso calificado independientemente de su estado migratorio.

Continuar a la página siguiente





Servicios Médicos Ambulatorios para Pacientes Ambulatorios para Personas con VIH

Agencia	Contacto	Número de teléfono	Correo electrónico/ página web
AIDS Healthcare Foundation	Gerentes de Práctica	(888) 243-727	www.hivcare.org/contact-ahf/
AltaMed Health Services	Ernesto Vicencio	(323) 803-8425	giovhernandez@altamed.org
APLA Health & Wellness	Dr. Jerome de Vente (Long Beach) Dr. Kevin Tangonan (La Brea) Dr. Jay Gladstein (Olympic)	(562) 247-7740 (323) 239-9900 (323) 215-1725	info@apla.org
Children's Hospital Los Angeles	Mark Casas, MSW	(323) 361-3028	mcasas@chla.usc.edu
East Valley Community Health Center	Deborah Lara Rivera	(909) 620-8088 x3200	dlara@evchc.org
El Proyecto del Barrio	Leopoldo Cabral Sandra Salazar	(818) 830-7181	lcabral@elproyecto.us ssalazar@elproyecto.us
JWCH Institute, Inc.	Centro de Llamadas	(866) 733-5924	
Long Beach, Department of Health and Human Services	Rosie Tufuga Stephanie Silva	(562) 570-4316 (562) 570-4317	rosie.tufuga@longbeach.gov stephanie.silva@longbeach.gov
Los Angeles LGBT Center	Joseph Martinez	(323) 993-7495	jmartinez@lalgbtcenter.org
Men's Health Foundation	Virginia Cabrera	(310) 550-1010	virginia.cabrera@menshealthfound.org
Northeast Valley Health Corporation	Andrew Braga, RN	(818) 988-6335	andrewbraga@nevhc.org
St. John's Community Center	Xavier Laporte	(323) 541-1600 x1079	xsanchez@wellchild.org
St. Mary Medical Center	Eddie Felix	(562) 624-4999	careprogram@dignityhealth.org
Tarzana Treatment Centers	Christian Espinoza	(818) 432-5897 x2170	cespinoza@tarzanatc.org
T.H.E. Health & Wellness Centers	Tracy Horn Clínica Línea General	(323) 730-1920 x3225 (323) 730-1920	thorn@tohelpeveryone.org
The Regents of the University of California (UCLA)	Rosa Ramos	(310) 557-2273; #3	AOM.carecenter@mednet.ucla.edu
Venice Family Clinic	Julie Garcia Joslynn Cerrato	(310) 382-6041 (310) 664-7994	juliegarcia@mednet.ucla.edu jcerratto@mednet.ucla.edu
Watts Healthcare Corporation	Anthony Corona Alicia Chavez	(323) 564-4331	anthony.corona@wattshealth.org alicia.chavez@wattshealth.org





Benefits Specialty Services

for People with HIV

What are Benefits Specialty Services (BSS)?

Benefits Specialty Services (BSS) is a program that helps people with HIV (PWH) access public and/or private health and disability benefits and programs. Benefits Specialists can assist in making sure you are getting all available health and disability benefits at no cost to you.

What is the goal of the BSS program?

BSS helps you learn and enroll in different public and private benefit and entitlement programs (CalFresh; Medicaid/Medi-Cal; Medicare; Social Security; Women, Infants, Children (WIC); and many more) for which you may be eligible.

What services can I access through the BSS program?

BSS program offers a variety of services that may include checking your benefit need and eligibility, helping you complete any applications and/or paperwork, and managing your benefits.

Where can I access these services?

Agency	Contact	Phone Number	Email Address
AIDS Healthcare Foundation	Nubia Treminio	(310) 657-9353	nubia.treminio@aidhealth.org
AltaMed Health Services	Francisco Valdes	(323) 869-5414	fvaldes@altamed.org
APLA Health & Wellness	BSS Appointment Line	(213) 201-1615	tmonteilh@apla.org
East Valley Community Health Center	Marta Melendez	(909) 620-8088 x3202	ammelendez@evchc.org
JWCH Institute, Inc.	Heshan Wijegunaratne	(626) 744-6140 x5220	hwijegunaratne@jwch.org
Long Beach, Department of Health and Human Services	Rosario (Rosie) Gutierrez-Tufuga	(562) 570-4316	rosie.tufuga@longbeach.gov
Minority AIDS Project	Juan Soto	(323) 936-4949 x203	jsoto@minorityaidsproject.org
Northeast Valley Healthcare Corporation	Yusseth Sanchez	(818) 988-6335 x50745	yussethsanchez@nevhc.org
St. Mary's Medical Center	Randy Hope	(562) 624-4934	randy.hope@dignityhealth.org
Tarzana Treatment Centers	Rudolph O'Murray Danielle Barron-Pena	(818) 996-1051 x1285 (818) 342-5897 x2153	romurray@tarzanatc.org dbarron@tarzanatc.org
Venice Family Clinic	Bonnie Smullin	(310) 664-7797	bsmullin@mednet.ucla.edu

How do I access these services?

You can access these services by contacting any of the providers listed above. If you are not already receiving services at one of the listed providers, you may need to confirm that you are eligible for the Ryan White HIV/AIDS Program (RWHAP). They may ask you to provide documentation confirming your HIV diagnosis, current income (if any), health insurance (if any), and that you live in Los Angeles County. BSS are free for those with a qualifying income regardless of immigration status.





Servicios de Especialidad en Beneficios

para Personas con VIH

¿Qué son los Servicios de Especialidad en Beneficios (BSS)?

Servicios de Especialidad en Beneficios (BSS) es un programa que ayuda a las personas con VIH (PWH) a tener acceso a los beneficios y programas públicos y/o privados de salud y discapacidad. Los Especialistas en Beneficios pueden ayudarle a asegurarse de que usted esté recibiendo todos los beneficios de salud y discapacidad disponibles sin ningún costo.

¿Cuál es el objetivo del programa BSS?

BSS le ayuda a conocer e inscribirse en diferentes programas públicos y privados de beneficios para los cuales usted puede ser elegible (CalFresh; Medicaid/Medi-Cal; Medicare; Seguro Social; Mujeres, Infantes, Niños (WIC); y muchos más).

¿A qué servicios puedo acceder a través del programa BSS?

BSS ofrece una variedad de servicios que pueden incluir verificar su necesidad y elegibilidad de beneficios, ayudarlo a completar cualquier solicitud y/o papeleo, y administrar sus beneficios.

¿Dónde puedo acceder a estos servicios?

Agencia	Contacto	Número de teléfono	Correo electrónico
AIDS Healthcare Foundation	Nubia Treminio	(310) 657-9353	nubia.treminio@aidhealth.org
AltaMed Health Services	Francisco Valdes	(323) 869-5414	fvaldes@altamed.org
APLA Health & Wellness	Línea de citas de BSS	(213) 201-1615	tmonteilh@apla.org
East Valley Community Health Center	Marta Melendez	(909) 620-8088 x3202	ammelendez@evchc.org
JWCH Institute, Inc.	Heshan Wijegunaratne	(626) 744-6140 x5220	hwijegunaratne@jwch.org
Long Beach, Department of Health and Human Services	Rosario (Rosie) Gutierrez-Tufuga	(562) 570-4316	rosie.tufuga@longbeach.gov
Minority AIDS Project	Juan Soto	(323) 936-4949 x203	jsoto@minorityaidsproject.org
Northeast Valley Healthcare Corporation	Yusseth Sanchez	(818) 988-6335 x50745	yussethsanchez@nevhc.org
St. Mary's Medical Center	Randy Hope	(562) 624-4934	randy.hope@dignityhealth.org
Tarzana Treatment Centers	Rudolph O'Murray Danielle Barron-Pena	(818) 996-1051 x1285 (818) 342-5897 x2153	romurray@Tarzanatc.org dbarron@tarzanatc.org
Venice Family Clinic	Bonnie Smullin	(310) 664-7797	bsmullin@mednet.ucla.edu

¿Cómo accedo a estos servicios?

Puede acceder a estos servicios poniéndose en contacto con cualquiera de los proveedores enumerados anteriormente. Si aún no está recibiendo servicios en uno de los proveedores enumerados, es posible que deba confirmar que es elegible para el Programa Ryan White de VIH/SIDA (RWHAP). Es posible que le pidan que proporcione documentación que confirme su diagnóstico de VIH, ingresos actuales (si los hay), seguro de salud (si corresponde) y que vive en el condado de Los Ángeles. BSS es gratis para cualquier persona con un ingreso calificado, independientemente de su estado migratorio.





Home-Based Case Management

for People with HIV

What is Home-Based Case Management?

Home-Based Case Management is a program that focuses on specialized home and/or community-based care for people with HIV (PWH) who may have medical or physical needs that keep them from seeing their HIV care providers in person. Services are provided to you by certified Registered Nurse (RN) case managers and social workers in your home. They evaluate, educate, counsel, and work with you to achieve the best possible health outcomes.

What are the goals of the Home-Based Case Management program?

- Assess and manage in-home services
- Help you develop self-management skills and support your independence
- Support you to continue your medical care and treatment
- Connect you with health care and supportive services
- Help you manage your medical needs
- Educate you on how to reduce HIV transmission

What services can I access through the Home-Based Case Management program?

The Home-Based Case Management program includes medical assessments, service planning, attendant care (like accompanying you to your medical appointments, going to the market, etc.), homemaker services (helping you with cooking and cleaning), and mental health therapy.

Where can I access these services?

Agency	Contact	Phone Number	Email Address
AltaMed Health Services	TBD	(323) 869-5408	
APLA Health & Wellness	Scott Blackburn	(213) 201-1422	sblackburn@apla.org
Minority AIDS Project	Dr. Robert J. Olivo	(323) 936-4949	rob@minorityaidsproject.org
Tarzana Treatment Centers	Sindy Membreno	(818) 342-5987 x2119	smembreno@tarzanatc.org
St. Mary Medical Center	Stephanie Glass	(562) 624-4935	stephanie.glass@dignityhealth.org

How do I access these services?

Home-Based Case Management is available to eligible clients who are referred by their medical provider. If you are interested in learning more, please contact any of the providers listed above.





Manejo de Casos en el Hogar

para Personas con VIH

¿Qué es el Manejo de Casos en el Hogar?

El Manejo de Casos en el Hogar es un programa que se centra en la atención especializada en el hogar para las personas con VIH (PWH) que pueden tener necesidades médicas o físicas que les impiden ver a sus proveedores de atención del VIH en persona. Los servicios son proporcionados por enfermeras registradas (RN) y trabajadores sociales en su hogar. Evalúan, educan, aconsejan y trabajan con usted para lograr los mejores resultados de su salud posible.

¿Cuáles son los objetivos del programa de Manejo de Casos en el Hogar?

- Evaluación y administración de los servicios en el hogar
- Ayudarle a desarrollar habilidades de autogestión y apoyar su independencia
- Apoyarlo para continuar su atención médica y tratamiento
- Conectarlo con atención médica y servicios de apoyo
- Ayudarle a manejar sus necesidades médicas
- Educarlo sobre cómo reducir la transmisión del VIH

¿A qué servicios puedo acceder a través del programa de Manejo de Casos en el Hogar?

El programa de Manejo de Casos en el Hogar incluye evaluaciones médicas, planificación de servicios, atención de asistentes (como acompañarlo a sus citas médicas, ir al mercado, etc.), servicios de ama de casa (ayudarlo con la cocina y la limpieza) y terapia de salud mental.

¿Dónde puedo acceder a estos servicios?

Agencia	Contacto	Número de teléfono	Correo electrónico
AltaMed Health Services	<i>por determinar</i>	(323) 869-5408	
APLA Health & Wellness	Scott Blackburn	(213) 201-1422	sblackburn@apla.org
Minority AIDS Project	Dr. Robert J. Olivo	(323) 936-4949	rob@minorityaidsproject.org
Tarzana Treatment Centers	Sindy Membreno	(818) 342-5987 x2119	smembreno@tarzanatc.org
St. Mary Medical Center	Stephanie Glass	(562) 624-4935	stephanie.glass@dignityhealth.org

¿Cómo accedo a estos servicios?

El programa de Manejo de Casos en el Hogar está disponible para clientes elegibles que son referidos por su proveedor médico. Si está interesado en obtener más información, comuníquese con cualquiera de los proveedores enumerados anteriormente.





Medical Care Coordination

for People with HIV

What is Medical Care Coordination (MCC)?

Medical Care Coordination (MCC) is a program that helps people with HIV (PWH) improve their health status, receive, and stay in care, and take their HIV medications. MCC services connect you with a team that works with your HIV medical provider (e.g., a doctor) to help you improve your quality of life and achieve your full health potential. The MCC team includes a Medical Care Manager, Patient Care Manager, Case Worker, and a Retention Outreach Specialist.

What are the goals of the MCC program?

- Help you access the HIV care services you may need and stay in HIV care
- Provide education and support you in taking your HIV medication in order to reach and maintain a low HIV viral load ([Undetectable=Untransmittable](#))
- Connect you to any needed mental health, substance use, housing support, and other supportive services
- Help you prevent transmission of HIV and sexually transmitted infections (STIs) to partners through education and counseling (if needed)

What services can I access through the MCC program?

The MCC program offers a variety of services, including case management, health education, linkage to mental health services, substance use treatment, financial assistance, housing assistance, legal services, transportation, and individual counseling sessions.

How do I access these services?

You can access MCC services by contacting any of the providers listed on the next page. Your HIV doctor or another social service provider can also refer you to the MCC program. If you are not already receiving services at one of the listed providers, you may need to confirm that you are eligible for the Ryan White HIV/AIDS Program (RWHAP). They may ask you to provide documentation confirming your HIV diagnosis, current income (if any), health insurance (if any), and that you live in Los Angeles County. MCC services are for PWH regardless of insurance and immigration status and are likely free of charge.

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Medical Care Coordination

for People with HIV

Agency	Contact	Phone Number	Email Address
AIDS Healthcare Foundation	Amy Croft	(323) 793-5275	amy.croft@ahf.org
AltaMed Health Services	Giovan Hernandez	(323) 247-3155	giovhernandez@altamed.org
APLA Health & Wellness	Scott Blackburn	(213) 201-1422	sblackburn@apla.org
Children's Hospital Los Angeles	Miguel Martinez	(323) 361-3908	mimartinez@chla.usc.edu
East Valley Community Health Center	Debbie Lara Rivera	(909) 620-8088 x3202	dlara@evchc.org
El Proyecto del Barrio	Leopoldo Cabral	(818) 830-7181	lcabral@elproyecto.us
JWCH Institute, Inc.	James Cook	(626) 744-6140	jcook@jwch.org
Long Beach, Department of Health and Human Services	Marina Ohlson-Smorick Iris Gibbs	(562) 570-4329 (562) 570-4544	marina.ohlson-smorick@longbeach.gov iris.gibbs@longbeach.gov
Los Angeles LGBT Center	MCC Direct Line	(323) 993-7414	MCC_Programs@lalgbtcenter.org
Men's Health Foundation	Rob Lester	(310) 550-1010 x3466	rob.lester@menshealthfound.org
Northeast Valley Healthcare Corporation	Andrew Braga	(818) 988-6335	andrewbraga@nevhc.org
St. John's Community Center	Elena Fernandez	(323) 541-1600 x1079	efernandez@wellchild.org
St. Mary Medical Center	Randy Hope	(562) 624-4934	randy.hope@dignityhealth.org
T.H.E. Health & Wellness Centers	Tracy Horn	(323) 730-1920 x3225	thorn@tohelpeveryone.org
Tarzana Treatment Centers	Olivia Lawlor Gina Larco	(661) 729-9000 x4366 (818) 342-5897 x2203	olawlor@tarzanatc.org glarco@tarzanatc.org
University of California, Los Angeles (UCLA)	Jeannie Acdan	(310) 843-2014	jacdan@mednet.ucla.edu
Venice Family Clinic	Julie Garcia	(310) 664-7613	juliegarcia@mednet.ucla.edu
Watts Healthcare Corporation	Rosalynd Williams	(323) 564-4331 x3324	rosalynd.williams@wattshealth.org





Coordinación de Atención Médica para Personas con VIH

¿Qué es la Coordinación de Atención Médica (MCC)?

Coordinación de Atención Médica (MCC) es un programa que ayuda a las personas con VIH (PWH) a mejorar su estado de salud, recibir y permanecer en cuidado médico, y tomar sus medicamentos contra el VIH. Los servicios de MCC le conectan con un equipo que trabaja con su proveedor médico de VIH para ayudarle a mejorar su calidad de vida y alcanzar su máximo potencial de salud. El equipo de MCC incluye un Gerente de Atención Médica, Gerente de Atención al Paciente, Trabajador Social y un Especialista en Retención.

¿Cuáles son los objetivos del programa de MCC?

- Ayudarle a acceder a los servicios de atención del VIH que pueda necesitar y permanecer en el cuidado médico para el VIH
- Brindarle educación y apoyo para que tome su medicamento contra el VIH a fin de alcanzar y mantener una carga viral del VIH baja ([Indetectable=Intransmisible](#))
- Conectarlo con servicios de salud mental, uso de sustancias, apoyo de vivienda y otros servicios necesarios
- Ayudarle a prevenir la transmisión del VIH y las infecciones de transmisión sexual (ITS) a sus parejas a través de la educación y el asesoramiento (si es necesario)

¿A qué servicios puedo acceder a través del programa de MCC?

El programa MCC ofrece una variedad de servicios, que incluyen administración de casos, educación para la salud, vinculación a servicios de salud mental, tratamiento para el uso de sustancias, asistencia financiera, asistencia para la vivienda, servicios legales, transporte y sesiones de consejería individuales.

¿Cómo accedo a estos servicios?

Puede acceder a estos servicios poniéndose en contacto con cualquiera de los proveedores enumerados en la próxima página. Si aún no está recibiendo servicios en uno de los proveedores enumerados, es posible que deba confirmar que es elegible para el Programa Ryan White de VIH/SIDA (RWHAP). Es posible que le pidan que proporcione documentación que confirme su diagnóstico de VIH, ingresos actuales (si los hay), seguro de salud (si corresponde) y que vive en el condado de Los Ángeles. Los servicios de MCC son para PWH independientemente del seguro y el estado migratorio y probablemente sean gratis.

Continuar a la página siguiente





Coordinación de Atención Médica para Personas con VIH

Agencia	Contacto	Numero de teléfono	Correo electrónico
AIDS Healthcare Foundation	Amy Croft	(323) 793-5275	amy.croft@ahf.org
AltaMed Health Services	Giovan Hernandez	(323) 247-3155	giovhernandez@altamed.org
APLA Health & Wellness	Scott Blackburn	(213) 201-1422	sblackburn@apla.org
Children's Hospital Los Angeles	Miguel Martinez	(323) 361-3908	mimartinez@chla.usc.edu
East Valley Community Health Center	Debbie Lara Rivera	(909) 620-8088 x3202	dlara@evchc.org
El Proyecto del Barrio	Leopoldo Cabral	(818) 830-7181	lcabral@elproyecto.us
JWCH Institute, Inc.	James Cook	(626) 744-6140	jcook@jwch.org
Long Beach, Department of Health and Human Services	Marina Ohlson-Smorick Iris Gibbs	(562) 570-4329 (562) 570-4544	marina.ohlson-smorick@longbeach.gov iris.gibbs@longbeach.gov
Los Angeles LGBT Center	Línea directa MCC	(323) 993-7414	MCC_Programs@lalgbtcenter.org
Men's Health Foundation	Rob Lester	(310) 550-1010 x3466	rob.lester@menshealthfound.org
Northeast Valley Healthcare Corporation	Andrew Braga	(818) 988-6335	andrewbraga@nevhc.org
St. John's Community Center	Elena Fernandez	(323) 541-1600 x1079	efernandez@wellchild.org
St. Mary Medical Center	Randy Hope	(562) 624-4934	randy.hope@dignityhealth.org
T.H.E. Health & Wellness Centers	Tracy Horn	(323) 730-1920 x3225	thorn@tohelpeveryone.org
Tarzana Treatment Centers	Olivia Lawlor Gina Larco	(661) 729-9000 x4366 (818) 342-5897 x2203	olawlor@tarzanatc.org glarco@tarzanatc.org
University of California, Los Angeles (UCLA)	Jeannie Acdan	(310) 843-2014	jacdan@mednet.ucla.edu
Venice Family Clinic	Julie Garcia	(310) 664-7613	juliegarcia@mednet.ucla.edu
Watts Healthcare Corporation	Rosalynd Williams	(323) 564-4331 x3324	rosalynd.williams@wattshealth.org





Mental Health Services

for People with HIV

What are Mental Health Services?

Mental Health Services is a program to help people with HIV (PWH) who are also experiencing mental health challenges that affect their everyday functioning and quality of life. These services are provided by a Mental Health provider who specializes in HIV.

What is the goal of the Mental Health Services program?

The Mental Health Services program seeks to help improve your mental and physical health status by addressing mental health stressors and challenges.

What services can I access through the Mental Health Services program?

- ✓ Individual Counseling
- ✓ Family Counseling
- ✓ Group Counseling
- ✓ Multi-Family Counseling
- ✓ Medical Management
- ✓ Crisis Intervention

Where can I access these services?

Agency	Phone Number
AIDS Healthcare Foundation	(818) 380-2626 x5733
AltaMed Health Services	(323) 869-5408
Being Alive	(323) 874-4322
JWCH Institute, Inc.	(213) 475-7574
Northeast Valley Health Corporation	(818) 988-6335
Special Services for Groups	(213) 375-3830
St. John's Community Center	(323) 541-1411
Tarzana Treatment Centers	(818) 342-5897 x2195
Venice Family Clinic	(310) 664-7613

How do I access these services?

You can access these services by contacting the providers listed above. It is important to note that you do not need to receive mental health services in the same clinic where you access your HIV medical care. If you are not already receiving services at one of the listed providers, they may need to confirm that you are eligible for the Ryan White HIV/AIDS Program (RWHAP). They may ask you to provide documentation confirming your HIV diagnosis, current income (if any), health insurance (if any), and that you live in Los Angeles County.





Servicios de Salud Mental

para Personas con VIH

¿Qué son los Servicios de Salud Mental?

Los Servicios de Salud Mental es un programa para ayudar a las personas que viven con el VIH (PLWH) que también están experimentando problemas de salud mental que afectan su funcionamiento diario y su calidad de vida. Estos servicios son proporcionados por un proveedor de salud mental que se especializa en el VIH.

¿Cuál es el objetivo del programa de Servicios de Salud Mental?

El programa de Servicios de Salud Mental busca ayudar a mejorar su estado de salud mental y física al abordar los factores estresantes y los desafíos de la salud mental.

¿A qué servicios puedo acceder a través del programa de Servicios de Salud Mental?

- ✓ Consejería Individual
- ✓ Consejería de La Familia
- ✓ Consejería de Grupo
- ✓ Consejería Multi-Familiar
- ✓ Gestión Médica
- ✓ Intervención de Crisis

¿Dónde puedo acceder a estos servicios?

Agencia	Número de teléfono
AIDS Healthcare Foundation	(818) 380-2626 x5733
AltaMed Health Services	(323) 869-5408
Being Alive	(323) 874-4322
JWCH Institute, Inc.	(213) 475-7574
Northeast Valley Health Corporation	(818) 988-6335
Special Services for Groups	(213) 375-3830
St. John's Community Center	(323) 541-1411
Tarzana Treatment Centers	(818) 342-5897 x2195
Venice Family Clinic	(310) 664-7613
County of Los Angeles: Department of Mental Health	(213) 738-4717
County of Los Angeles: LAC+USC Medical Center	(323) 409-8258

¿Cómo accedo a estos servicios?

Puede acceder a estos servicios poniéndose en contacto con los proveedores enumerados anteriormente. Es importante tener en cuenta que no necesita recibir servicios de salud mental en la misma clínica donde accede a su atención médica sobre el VIH. Si aún no está recibiendo servicios en uno de los proveedores enumerados, es posible que deba confirmar que es elegible para el Programa Ryan White de VIH/SIDA (RWHAP). Es posible que le pidan que proporcione documentación que confirme su diagnóstico de VIH, ingresos actuales (si los hay), seguro de salud (si corresponde) y que vive en el condado de Los Ángeles.





Oral Health Services

for People with HIV

What are Oral Health Services?

Oral Health Services is a program that helps people with HIV (PWH) access free dental services. These services will be provided by dental professionals who have experience serving PWH.

What are the goals of the Oral Health Services program?

- Promote dental health
- Improve the quality of life among PWH
- Provide reliable dental health services

What services can I access through the Oral Health Services program?

General Dentistry: Regular dental checkups, X-rays, cleanings, fillings, and access to any necessary and related medication, treatment, or referrals to specialty dentistry services.

Specialty Dentistry Services: Additional procedures such as crowns, dentures, implants, and dental surgery. These services are to help you improve your dental health and function.

Where can I access these services?

Agency	Phone Number	General	Specialty
AIDS Healthcare Foundation	(323) 744-1752	✓	
AltaMed Health Services	(323) 869-5459	✓	
APLA Health & Wellness	(213) 201-1541	✓	✓
East Valley Community Health Center	(909) 620-8088 x3200	✓	
El Proyecto del Barrio	(818) 221-4600	✓	
JWCH Institute, Inc.	(866) 733-5924	✓	
Northeast Valley Health Corporation	(818) 988-6335	✓	
St. John's Community Center	(323) 541-1411	✓	
St. Mary Medical Center	(562) 624-4949	✓	✓
UCLA School of Dentistry	(310) 794-4348	✓	✓
USC Herman Ostrow School of Dentistry	(213) 740-9626 (213) 740-9151	✓	✓
Watts Healthcare Foundation	(323) 564-4331 x3315	✓	

How do I access these services?

You can access these services by contacting any of the providers listed above. If you are not already receiving services at one of the listed providers, you may need to confirm that you are eligible for the Ryan White HIV/AIDS Program (RWHAP.) They may ask you to provide documentation confirming your HIV diagnosis, current income (if any), health insurance (if any), and that you live in Los Angeles County.





Servicios de Salud Oral

para Personas con VIH

¿Qué son los Servicios de Salud Oral?

Los Servicios de Salud Oral es un programa que ayuda a las personas con VIH (PWH) a acceder a atención dental gratis. Estos servicios serán proporcionados por profesionales que tienen experiencia en el servicio de PWH.

¿Cuáles son los objetivos del programa de Servicios de Salud Oral?

- Promover la salud dental
- Mejorar la calidad de vida de las PWH
- Proporcionar servicios confiables de salud dental

¿A qué servicios puedo acceder a través del programa de Servicios de Salud Oral?

Odontología General: Revisiones dentales periódicas, radiografías, limpiezas, empastes y acceso a cualquier medicamento, tratamiento o remisiones para servicios de odontología especializada.

Servicios de Odontología Especializada: Procedimientos adicionales como coronas, dentaduras postizas, implantes y cirugía dental. Estos pueden ser servicios que mejoran la salud dental y la función.

¿Dónde puedo acceder a estos servicios?

Agencia	Número de teléfono	General	Especialidad
AIDS Healthcare Foundation	(323) 744-1752	✓	
AltaMed Health Services	(323) 869-5459	✓	
APLA Health & Wellness	(213) 201-1541	✓	✓
East Valley Community Health Center	(909) 620-8088 x3200	✓	
El Proyecto del Barrio	(818) 221-4600	✓	
JWCH Institute, Inc.	(866) 733-5924	✓	
Northeast Valley Health Corporation	(818) 988-6335	✓	
St. John's Community Center	(323) 541-1411	✓	
St. Mary Medical Center	(562) 624-4949	✓	✓
UCLA School of Dentistry	(310) 794-4348	✓	✓
USC Herman Ostrow School of Dentistry	(213) 740-9626 (213) 740-9151	✓	✓
Watts Healthcare Foundation	(323) 564-4331 x3315	✓	

¿Cómo accedo a estos servicios?

Puede acceder a estos servicios poniéndose en contacto con cualquiera de los proveedores mencionados anteriormente. Si aún no está recibiendo servicios de uno de los proveedores enumerados, es posible que deba confirmar que es elegible para el Programa Ryan White de VIH/SIDA (RWHAP). Es posible que le pidan que proporcione documentación que confirme su diagnóstico de VIH, ingresos actuales (si los hay), seguro médico (si corresponde), y que vive en el condado de Los Ángeles.





Residential Care Facility for the Chronically III

for People with HIV

What is a Residential Care Facility for the Chronically III (RCFCI)?

A Residential Care Facility for the Chronically III (RCFCI) is licensed to provide services in a non-institutional, home-like environment, which is maintained and operated to provide 24-hour care and supervision to the following people with HIV (PWH):

- Adults 18 years of age or older
- Emancipated minors
- People who are unable to work

What is the goal of the RCFCI program?

The goal of the RCFCI program is to improve the health status of PWH who need to receive care, support, and supervision in a stable living environment to improve their health status.

What services can I access through the RCFCI program?

The RCFCI program offers a variety of services that may include 24/7 care for PWH and who are facing mental health issues or other chronic or life-threatening illnesses. Additional services can include case management, counseling, nutrition, and consultative services regarding housing, health benefits, financial planning, and referrals to other community or public resources.

Where can I access these services?

Agency	Contact	Phone Number	Email Address
Alliance for Housing and Healing	Christina Mancilla	(562) 594-4877	cmancilla@alliancehh.org
Project New Hope	Kerry Anderson	(213) 384-5031	kanderson@projectnewhope.org
	Savoy Toney	(657) 789-2691	stoney@projectnewhope.org
The Salvation Army	Ana Aguirre	(323) 454-4201	ana.aguirre@usw.salvationarmy.org

How do I access these services?

You can access these services by contacting any of the providers listed above. If you are not already receiving services at one of the listed providers, you may need to confirm that you are eligible for the Ryan White HIV/AIDS Program (RWHAP). They may ask you to provide documentation confirming your HIV diagnosis, current income (if any), health insurance (if any), and that you live in Los Angeles County. RCFCI services are free for those with a qualifying income regardless of immigration status.





Centro de Atención Residencial para Personas con Enfermedades Crónicas

para Personas con VIH

¿Qué es un Centro de Atención Residencial para Personas con Enfermedades Crónicas (RCFCI)?

Un Centro de Atención Residencial para Personas con Enfermedades Crónicas (RCFCI) tiene licencia para proporcionar servicios en un entorno similar al hogar, que se mantiene y opera para proporcionar atención y supervisión las 24 horas para las siguientes personas con VIH (PWH):

- Adultos mayores de 18 años
- Menores emancipados
- Personas que no pueden trabajar

¿Cuál es el objetivo del programa RCFCI?

El objetivo del programa RCFCI es mejorar el estado de salud de las PWH que necesitan recibir atención, apoyo y supervisión en un entorno de vida estable para mejorar su estado de salud.

¿A qué servicios puedo acceder a través del programa RCFCI?

El programa RCFCI ofrece una variedad de servicios que pueden incluir atención 24/7 para PWH y que enfrentan problemas de salud mental u otras enfermedades crónicas o potencialmente mortales. Los servicios adicionales pueden incluir administración de casos, consejería, nutrición y servicios de consulta con respecto a vivienda, beneficios de salud, planificación financiera y referencias a otros recursos comunitarios o públicos.

¿Dónde puedo acceder a estos servicios?

Agencia	Contacto	Número de teléfono	Correo electrónico
Alliance for Housing and Healing	Christina Mancilla	(562) 594-4877	cmancilla@alliancehh.org
Project New Hope	Kerry Anderson	(213) 384-5031	kanderson@projectnewhope.org
	Savoy Toney	(657) 789-2691	stoney@projectnewhope.org
The Salvation Army	Ana Aguirre	(323) 454-4201	ana.aguirre@usw.salvationarmy.org

¿Cómo accedo a estos servicios?

Puede acceder a estos servicios poniéndose en contacto con cualquiera de los proveedores enumerados anteriormente. Si aún no está recibiendo servicios en uno de los proveedores enumerados, es posible que deba confirmar que es elegible para el Programa Ryan White de VIH/SIDA (RWHAP). Es posible que le pidan que proporcione documentación que confirme su diagnóstico de VIH, ingresos actuales (si los hay), seguro de salud (si corresponde) y que vive en el condado de Los Ángeles. RCFCI es gratis para cualquier persona con un ingreso calificado, independientemente de su estado migratorio.





Transitional Residential Care Facility

for People with HIV

What is a Transitional Residential Care Facility (TRCF)?

A Transitional Residential Care Facility (TRCF) provides short-term housing with ongoing supervision and assistance with independent living skills for people with HIV (PWH) who may be at risk of becoming homeless. TRCFs are 24-hour alcohol/drug-free facilities that are secure and home-like.

What is the goal of the TRCF program?

The goal of the TRCF program is to help you be safely housed while you find a more permanent, stable housing situation. This service focuses on removing housing-related barriers that negatively impact your ability to access and/or maintain HIV care or treatment.

What services can I access through the TRCF program?

The TRCF program offers a variety of services that may include an assessment of your needs, individual and/or group counseling, and case management. Clients must have the ability to work to be eligible for TRCF services.

Where can I access these services?

Agency	Contact	Phone Number	Email Address
Project New Hope	Kerry Anderson Savoy Toney	(213) 384-5031 (657) 789-2691	kanderson@projectnewhope.org stoney@projectnewhope.org

How do I access these services?

Project New Hope has multiple housing locations across Los Angeles County. You can access these services by contacting the provider listed above. If you are not already receiving services at the listed provider, you may need to confirm that you are eligible for the Ryan White HIV/AIDS Program (RWHAP). They may ask you to provide documentation confirming your HIV diagnosis, current income (if any), health insurance (if any), and that you live in Los Angeles County. TRCF services are free for those with a qualifying income regardless of immigration status.





Centro de Atención Residencial de Transición

para Personas con VIH

¿Qué es un Centro de Atención Residencial de Transición (TRCF)?

Un Centro de Atención Residencial de Transición proporciona vivienda a corto plazo con supervisión continua y asistencia para personas con VIH (PWH) que pueden estar en riesgo de quedarse sin hogar. Los TRCFs son instalaciones libres de alcohol/drogas de 24 horas que son seguras y hogareñas.

¿Cuál es el objetivo del programa TRCF?

El objetivo del programa TRCF es ayudarlo a estar alojado de forma segura mientras encuentra una situación de vivienda más estable y permanente. Este servicio se centra en eliminar las barreras relacionadas con la vivienda que afectan negativamente a su capacidad de acceder y/o mantener la atención o el tratamiento del VIH.

¿A qué servicios puedo acceder a través del programa TRCF?

El programa TRCF ofrece una variedad de servicios que pueden incluir una evaluación de sus necesidades, consejería individual o en grupo, y manejo de casos. Los clientes deben tener la capacidad de trabajar para ser elegibles para los servicios de TRCF.

¿Dónde puedo acceder a estos servicios?

Agencia	Contacto	Número de teléfono	Correo electrónico
Project New Hope	Kerry Anderson Savvy Toney	(213) 384-5031 (657) 789-2691	kanderson@projectnewhope.org stoney@projectnewhope.org

¿Cómo accedo a estos servicios?

Project New Hope tiene múltiples ubicaciones de vivienda en todo el condado de Los Ángeles. Puede acceder a estos servicios poniéndose en contacto con el proveedor mencionado anteriormente. Si aún no está recibiendo servicios en uno de los proveedores enumerados, es posible que deba confirmar que es elegible para el Programa Ryan White de VIH/SIDA (RWHAP). Es posible que le pidan que proporcione documentación que confirme su diagnóstico de VIH, ingresos actuales (si los hay), seguro de salud (si corresponde) y que vive en el condado de Los Ángeles. Los servicios de TRCF son gratuitos para cualquier persona con un ingreso calificado, independientemente de su estado migratorio.





Transportation Services

for People with HIV

What are Transportation Services?

Transportation Services is a program that is available to people with HIV (PWH) and their immediate family members (when they accompany the client to access services) who need transportation to medical and social services appointments.

What is the goal of the Transportation program?

The goal of Transportation Services is to make sure that you are able to get to your primary health care and related social service provider appointments.

What services can I access through the Transportation program?

The Transportation program offers eligible clients for the following services:

- Monthly bus or Metro passes
- Taxi services
- Ride share services (Uber, Lyft)
- Van transportation services

How do I access these services?

You can access these services by contacting any of the providers listed on the next page. You can also access these services by contacting your Medical Care Coordination (MCC) team, HIV medical provider, or your Benefits Specialist.

Continue to next page





Transportation Services

for People with HIV

Agency	Contact	Phone Number	Email Address
AIDS Healthcare Foundation	Nubia Treminio	(310) 657-9353	nubia.treminio@ahf.org
AltaMed Health Services	Francisco J. Valdes	(323) 869-5414	fvaldes@altamed.org
APLA Health & Wellness	Tiana Monteilh	(213) 201-1305	tmonteilh@apla.org
Bienestar Human Services	Brendan O'Connell	(866) 590-6411	boconnell@bienestar.org
Children's Hospital Los Angeles	Mark Casas, MSW	(323) 361-3028	mcasas@chla.usc.edu
El Proyecto del Barrio	Sandra Salazar	(818) 830-7182	ssalazar@elproyecto.us
JWCH Institute, Inc.	Heshan Wijegunaratne	(626) 744-6140 x5220	hwijegunaratne@jwch.org
	Kimberly Banuelos	(626) 744-6140 x5231	kbanuelos@jwch.org
	Rafael Santiago	(626) 744-6140 x5214	rsantiago@jwch.org
Long Beach, Department of Health and Human Services	Iris Gibbs	(562) 570-4544	iris.gibbs@longbeach.gov
	Elsa Orozco	(562) 570-4057	elsa.orozco@longbeach.gov
Los Angeles LGBT Center	Linda Santiman, Integrated Services Manager	(323) 993-7610	lsantiman@lalgbtcenter.org
Men's Health Foundation	Virginia Cabrera, Supportive Services Manager	(310) 550-1010 x344	virginia.cabrera@menshealthfound.org
Northeast Valley Health Corporation	Pedro Rodriguez	(818) 988-6335	pedrorodriguez@nevhc.org
	Aracely Diaz		aracelydiaz@nevhc.org
Project New Hope	Kerry Anderson		kanderson@projectnewhope.org
Special Service for Groups	Jean David, Case Manager	(213) 375-3830	jeand@apaitonline.org
St. John's Community Center	Xavier Laporte-Sanchez	(323) 944-3349	xsanchez@wellchild.org
St. Mary Medical Center	Randy Hope	(562) 624-4934	randy.hope@dignityhealth.org
	Stephanie Glass	(562) 625-4935	stephanie.glass@dignityhealth.org
Tarzana Treatment Centers	Karla Cordero (SPA 1)	(661) 723-4829 x4116	kcordero@tarzanatc.org
	Danielle Barron-Pena (SPA 2)	(818) 342-5897 x2153	dbarron@tarzanatc.org
T.H.E. Health & Wellness Centers	Tracy Horn	(323) 730-1920 x3225	thorn@tohelpeveryone.org
The Regents of the University of California (UCLA)	Rosa Ramos	(310) 916-7920	rlramos@mednet.ucla.edu
The Salvation Army	Ana Aguirre, Director	(323) 454-4201	ana.aguirre@usw.salvationarmy.org
	Raul Villalobos	(323) 454-4202	raul.villalobos@usw.salvationarmy.org
Watts Healthcare Corporation	Anthony Corona	(323) 564-4331 x3326	anthony.corona@wattshealth.org
	Stacey Foster		stacey.foster@wattshealth.org





Servicios de Transporte

para Personas con VIH

¿Qué son los Servicios de Transporte?

Servicios de transporte es un programa para personas con VIH (PWH) y sus familiares inmediatos (cuando acompañan al cliente a acceder a los servicios) que necesitan transporte a citas médicas y de servicios sociales.

¿Cuál es el objetivo del programa de Transporte?

El objetivo de los Servicios de Transporte es asegurarse de que pueda llegar a su atención primaria de salud y citas relacionadas con el proveedor de servicios sociales.

¿A qué servicios puedo acceder a través del programa de Transporte?

El programa de transporte ofrece clientes elegibles los siguientes servicios:

- Pases mensuales de autobús o metro
- Servicios de taxi
- Servicios de viaje compartido (Uber, Lyft)
- Servicios de transporte en furgoneta

¿Cómo accedo a estos servicios?

Puede acceder a estos servicios poniéndose en contacto con cualquiera de los proveedores enumerados en la próxima página. También puede acceder a estos servicios comunicándose con su equipo de Coordinación de Atención Médica (MCC), proveedor médico de VIH o su Especialista en Beneficios.

Continuar a la página siguiente





Servicios de Transporte

para Personas con VIH

Agencia	Contacto	Número de teléfono	Correo electrónico
AIDS Healthcare Foundation	Nubia Treminio	(310) 657-9353	nubia.treminio@ahf.org
AltaMed Health Services	Francisco J. Valdes	(323) 869-5414	fvaldes@altamed.org
APLA Health & Wellness	Tiana Monteilh	(213) 201-1305	tmonteilh@apla.org
Bienestar Human Services	Brendan O'Connell	(866) 590-6411	boconnell@bienestar.org
Children's Hospital Los Angeles	Mark Casas, MSW	(323) 361-3028	mcasas@chla.usc.edu
El Proyecto del Barrio	Sandra Salazar	(818) 830-7182	ssalazar@elproyecto.us
JWCH Institute, Inc.	Heshan Wijegunaratne	(626) 744-6140 x5220	hwijegunaratne@jwch.org
	Kimberly Banuelos	(626) 744-6140 x5231	kbanuelos@jwch.org
	Rafael Santiago	(626) 744-6140 x5214	rsantiago@jwch.org
Long Beach, Department of Health and Human Services	Iris Gibbs	(562) 570-4544	iris.gibbs@longbeach.gov
	Elsa Orozco	(562) 570-4057	elsa.orozco@longbeach.gov
Los Angeles LGBT Center	Linda Santiman, Gerente de Servicios Integrados	(323) 993-7610	lsantiman@lalgbtcenter.org
Men's Health Foundation	Virginia Cabrera, Gerente de servicios de apoyo	(310) 550-1010 x344	virginia.cabrera@menshealthfound.org
Northeast Valley Health Corporation	Pedro Rodriguez Aracely Diaz	(818) 988-6335	pedrorodriguez@nevhc.org aracelydiaz@nevhc.org
Project New Hope	Kerry Anderson		kanderson@projectnewhope.org
Special Service for Groups	Jean David, Gerente de casos	(213) 375-3830	jeand@apaitonline.org
St. John's Community Center	Xavier Laporte-Sanchez	(323) 944-3349	xsanchez@wellchild.org
St. Mary Medical Center	Randy Hope	(562) 624-4934	randy.hope@dignityhealth.org
	Stephanie Glass	(562) 625-4935	stephanie.glass@dignityhealth.org
Tarzana Treatment Centers	Karla Cordero (SPA 1)	(661) 723-4829 x4116	kcordero@tarzanatc.org
	Danielle Barron-Pena (SPA 2)	(818) 342-5897 x2153	dbarron@tarzanatc.org
T.H.E. Health & Wellness Centers	Tracy Horn	(323) 730-1920 x3225	thorn@tohelpeveryone.org
The Regents of the University of California (UCLA)	Rosa Ramos	(310) 916-7920	rlramos@mednet.ucla.edu
The Salvation Army	Ana Aguirre, Director	(323) 454-4201	ana.aguirre@usw.salvationarmy.org
	Raul Villalobos	(323) 454-4202	raul.villalobos@usw.salvationarmy.org
Watts Healthcare Corporation	Anthony Corona	(323) 564-4331 x3326	anthony.corona@wattshealth.org
	Stacey Foster		stacey.foster@wattshealth.org



RESOURCES

LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH, DIVISION OF HIV AND STD PROGRAMS

www.publichealth.lacounty.gov/dhsp/

ENDING THE HIV EPIDEMIC IN LOS ANGELES COUNTY

www.LACounty.HIV

GETPROTECTEDLA

www.GetProtectedLA.com