



LOS ANGELES COUNTY
COMMISSION ON HIV



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OPERATIONS COMMITTEE Virtual Meeting

Wednesday, December 7, 2022

10:00AM -12:00PM (PST)

*Meeting Agenda + Packet will be available on our website at:

<https://hiv.lacounty.gov/operations-committee>

REGISTER + JOIN VIA WEBEX ON YOUR COMPUTER OR SMART PHONE:

<https://tinyurl.com/58vnz5ke>

**link is for members of the public only*

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video: <https://www.youtube.com/watch?v=iQSSJYcrgIk>

PUBLIC COMMENTS

Public Comment is an opportunity for members of the public to comment on an agenda item, or any item of interest to the public, before or during the Commission's consideration of the item, that is within the subject matter jurisdiction of the Commission.

To submit Public Comment, you may join the virtual meeting via your smart device and post your Public Comment in the Chat box -or- email your Public Comment to hivcomm@lachiv.org -or- submit your Public Comment electronically via https://www.surveymonkey.com/r/PUBLIC_COMMENTS.

All Public Comments will be made part of the official record.

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LOS ANGELES COUNTY
COMMISSION ON HIV



AGENDA FOR THE **VIRTUAL** MEETING OF THE
LOS ANGELES COUNTY COMMISSION ON HIV
OPERATIONS COMMITTEE

Wednesday, December 7, 2022 10:00 AM – 12:00 PM

To Register + Join by Computer:

<https://tinyurl.com/58vnz5ke>

**Link is for non-Committee members + members of the public*

To Join by Phone: 1-415-655-0001

Access code: 2594 738 0376

Operations Committee Members:			
Alexander Fuller <i>Co-Chair</i>	Justin Valero, MA <i>Co-Chair</i>	Miguel Alvarez	Everardo Alvizo
Jayda Arrington	Joe Green	Jose Magaña	Carlos Moreno
QUORUM*:	5		

AGENDA POSTED: December 2, 2022

VIRTUAL MEETINGS: Assembly Bill (AB) 361 amends California's Ralph M. Brown Act Section 54953 to allow virtual board meetings during a state of emergency. Until further notice, all Commission meetings will continue to be held virtually via WebEx. For a schedule of Commission meetings, please click https://assets-us-01.kc-usercontent.com/0234f496-d2b7-00b6-17a4-b43e949b70a2/5a71641f-af76-43c8-b7f8-0a592a1ed9d7/Calendar%202022_Ongoing01-19-22.pdf

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All Public Comments will be made part of the official record.

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

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

Los servicios de interpretación para personas con problemas de audición y los servicios de traducción para otros idiomas además del inglés están disponibles sin cargo con al menos 72 horas de anticipación antes de la fecha de la reunión. Para coordinar estos servicios, comuníquese con la oficina de la Comisión en hivcomm@lachiv.org o deje un mensaje de voz al 213.738.2816.

SUPPORTING DOCUMENTATION can be obtained via the Commission’s website at <http://hiv.lacounty.gov> or at the Commission office located at 510 S. Vermont Ave., 14th Floor, Los Angeles CA 90020. Complimentary parking available at 523 Shatto Place, Los Angeles CA 90020.

NOTES on AGENDA SCHEDULING, TIMING, POSTED and ACTUAL TIMES, TIME ALLOTMENTS, and AGENDA ORDER: Because time allotments for discussions and decision-making regarding business before the Commission’s standing committees cannot always be predicted precisely, posted times for items on the meeting agenda may vary significantly from either the actual time devoted to the item or the actual, ultimate order in which it was addressed on the agenda. Likewise, stakeholders may propose adjusting the order of various items at the commencement of the committee meeting (Approval of the Agenda), or times may be adjusted and/or modified, at the co-chairs’ discretion, during the course of the meeting. If a stakeholder is interested in joining the meeting to keep abreast of or participate in consideration of a specific agenda item, the Commission suggests that the stakeholder plan on attending the full meeting in case the agenda order is modified or timing of the items is altered. All Commission committees make every effort to place items that they are aware involve external stakeholders at the top of the agenda in order to address and resolve those issues more quickly and release visiting participants from the obligation of staying for the full meeting.

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

Call to Order | Introductions | Statement - Conflict of Interest 10:00 AM – 10:02 AM

I. ADMINISTRATIVE MATTERS

- 1. Approval of Agenda **MOTION #1** 10:02 AM – 10:07 AM
- 2. Approval of Meeting Minutes **MOTION #2**

II. PUBLIC COMMENT 10:07 AM – 10:11 AM

- 3. Opportunity for members of the public to address the Commission of items of interest that are within the jurisdiction of the Commission. For those who wish to provide public comment, you may do so in-person, virtually by registering via WebEx or submit in writing at hivcomm@lachiv.org.

III. COMMITTEE NEW BUSINESS ITEMS 10:11 AM – 10:15 AM

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

IV. REPORTS

- 5. Executive Director/Staff Report** 10:15 AM – 10:20 AM
- A. Operational Updates
 - B. Comprehensive HIV Plan (CHP) 2022-2026 | Update
- 6. Co-Chair's Report** 10:20 AM – 10:35 AM
- A. Committee Co-Chair Open Nominations + Elections
 - B. Workgroup to Review Co-Chair Elections Policy #08.1104
 - C. 2022 Work Plan | Review
 - D. 2022 Training Series | REMINDER
- 7. Membership Management Report** 10:35 AM – 10:55AM
- A. New Membership Application Interview Work Group | Updated Questions
 - B. Proposed Membership Seat Changes MOTION #3
 - C. Resignation – Dr. Michael Cao, Seat #40
- 8. Policies and Procedures** 10:55AM – 11:50AM
- A. Policy Discussions
 - (1) Proposed Revision to Policy #09.4205 | Review + Discussion
 - Two-Person per Agency Rule
 - Contracted Provider Support Documentation
- 9. Recruitment, Retention and Engagement** 11:50AM - 11:55AM
- Member Contributions/Participation | Report Out
- V. NEXT STEPS** 11:55 AM – 11:57 AM
- 10.** Task/Assignments Recap
- 11.** Agenda Development for the Next Meeting
- By-Laws Review Planning
 - . Proposed Code of Conduct Recommendations | Jose Garibay
- VI. ANNOUNCEMENTS** 11:57 AM – 12:00 PM
- 12.** Opportunity for members of the public and the committee to make announcements
- VII. ADJOURNMENT** 12:00 PM
- 13.** Adjournment for the meeting of December 7, 2022

PROPOSED MOTION(s)/ACTION(s):

MOTION #1:	Approve the Agenda Order, as presented or revised.
MOTION #2:	Approve the Operations Committee minutes, as presented or revised.
MOTION #3:	Approve Proposed Membership Seat Changes, as presented or revised.



LOS ANGELES COUNTY
COMMISSION ON HIV



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Presence at virtual meetings is recorded based on the attendance roll call. Only members of the Commission on HIV are accorded voting privileges and must verbally acknowledge their attendance in order to vote. Approved meeting minutes are available on the Commission's website; meeting recordings are available upon request.

DRAFT
OPERATIONS VIRTUAL MEETING MINUTES
October 27, 2022

OPERATIONS MEMBERS

P=Present | A=Absent

Alexander Fuller <i>Co-Chair</i>	P	Justin Valero <i>Co-Chair</i>	P	Miguel Alvarez	P	Everardo Alvizo	P	Jayda Arrington	P
Joe Green	EA	Jose Magaña	P	Carlos Moreno	P				

COMMISSION STAFF & CONSULTANTS

Cheryl Barrit, MPIA	Dr. Sonja Wright, DACM	Dawn McClendon	Jose Rangel-Garibay, MPH	Catherine Lapointe, MPH
Lizette Martinez, MPH				

*Some participants may not have been captured electronically. Attendance can be corrected by emailing the Commission.

*Members of the public may confirm their attendance by contacting Commission staff at hivcomm@lachiv.org.

*Meeting minutes may be corrected up to one year from the date of approval

Meeting agenda and materials can be found on the Commission's website at

https://assets-us-01.kc-usercontent.com/0234f496-d2b7-00b6-17a4-b43e949b70a2/f8807669-007d-4b8a-9bf2-2a92e69e4d25/Pkt-OPS_10.27.22-updated.pdf

CALL TO ORDER – INTRODUCTIONS – CONFLICTS OF INTEREST: Operations Co-Chairs called the meeting to order at 10:00 am. Committee Members introduced themselves and identified care and/or prevention conflicts of interest.

I. ADMINISTRATIVE MATTERS

1. APPROVAL OF AGENDA

MOTION #1: Approve the Agenda Order, as presented (***Passed by Consensus***).

2. APPROVAL OF MEETING MINUTES

MOTION #2: September 22, 2022, minutes (***Passed by Consensus***).

II. PUBLIC COMMENT

3. OPPORTUNITY FOR PUBLIC TO ADDRESS COMMISSION ON ITEMS OF INTEREST WITHIN COMMISSION JURISDICTION:

Commissioner K. Donnelly mentioned the lack of support from employers for Unaffiliated Consumers (UA) participating as members of the Commission on HIV (COH). K. Donnelly suggested that the Operations Committee discusses this in the future.

III. COMMITTEE NEW BUSINESS ITEMS

4. OPPORTUNITY FOR COMMISSIONERS TO RECOMMEND ITEMS FOR FUTURE AGENDAS, OR ITEMS REQUIRING IMMEDIATE ACTION DUE TO AN EMERGENCY, OR IF NEED FOR ACTION AROSE AFTER POSTING AGENDA:

None.

IV. REPORTS

5. EXECUTIVE DIRECTOR/STAFF REPORT

A. Operational Updates

- Executive Director, Cheryl Barrit, informed the Operations Committee of the hiring of new staff member Lizette Martinez on September 16th. L. Martinez will lead the Planning, Priorities and Allocations (PP&A) Committee, the Prevention Planning Work Group, and monitoring the Comprehensive HIV Plan (CHP). L. Martinez briefly introduced herself to the Operations Committee.
- C. Barrit reminded the Operations Committee that the Annual Meeting will take place on Thursday, November 10th and the "Save the Date" flyer has been distributed on GovDelivery and social media. C. Barrit encouraged everyone to share the flyer and to invite colleagues and friends to the Annual Meeting. The goal of the meeting is to provide a space where attendees will learn key issues around advancing the Commission's goals in Ending The Epidemic (EHE), the Comprehensive HIV Plan (CHP), among other topics.

B. Comprehensive HIV Plan (CHP) 2022-2026

- The public comment period for the first draft of the CHP will be held from November 1st through November 21st. The draft CHP will be available on the Commission's website and promoted widely on social media. Currently, AJ King is working on downsizing the number of document pages and providing guidance and instructions for the community on how to provide feedback on the CHP.

C. Assessment of Administrative Mechanism (AAM) Findings Presentation

- C. Barrit presented slides to the Operations Committee highlighting the Assessment of the Administrative Mechanism (AAM) for Ryan White Program Year 31. See PowerPoint (PPT) slides in meeting packet. C. Barrit explained part of the COH's responsibility as a PC is conducting the AAM. The AAM is used to evaluate the speed and efficiency that Ryan White dollars are allocated and dispersed to support programs in the community.
- The first set of slides highlights commissioners' responses, while the second set addresses the providers and their experience with the contracting process and the speed in which the County is able to release funding.
 - The AAM covered March 1st, 2020 to February 8th, 2021
 - The commissioner survey was sent out between April 4th to May 19th
 - 19 responses were received and of the 19 responses the time served on the Commission was captured: (1) there were a few commissioners who were seated on the Commission for less than one year, (2) six who had served for five or more years, and (3) the majority fell between two to three years of service.
 - The recurrent theme is while there are challenges in terms of contracting procedures, improvements have been made to make the administrative process more efficient; some respondents noted the need for the contracting process to be more transparent. Also, additional technical assistance is needed on invoicing, conducting site visits, and budget development.
 - Appreciation was expressed for changes already instituted by DHSP regarding the RFP and invoicing processes.

6. CO-CHAIR'S REPORT

A. 2022 Work Plan | Review

- Operations Co-chair J. Valero discussed the updated 2022 training series dates as follows:
 - The Co-chairs Roles and Responsibilities training has been changed from November 17th to November 14th.
 - The mandatory training titled, "Development of the Legislative Docket" will be held on November 16th.
 - The final virtual study hour will be held on December 13th.

B. Committee Co-Chair Open Nominations

- The following commissioners were nominated as Operations Co-chairs for year 2023:
 - Everardo Alvizo: nomination **accepted**
 - Joe Green:
 - Carlos Moreno: nomination **declined**
 - Justin Valero: nomination **accepted**

C. Attendance Award Acknowledgement | Discussion

- The Operations Committee discussed attendance awards. The Operations Committee decided the following: (1) there will be two award categories, one for stellar attendance and the other for perfect attendance according to the COH's Attendance policy, (2) the first award ceremony will be held at the November 10th Annual Meeting and would include the attendance period of January 2022 to October 2022, and (3) next year's award ceremony will cover the time frame of November 2022 through October 2023. Plaques will be awarded to those with stellar attendance, while those who have perfect attendance according to the Attendance policy will receive \$25 gift cards.

D. Holiday Meeting Schedule

- The Operations Committee will follow the Executive Committee's lead in determining its meeting schedule for November and December. Staff will report back to the Committee as to the Executive Committee's decision.

7. Membership Management Report

A. New Membership Application | Mary Cummings

- **MOTION #3** Approve New Membership Application for Mary Cummings, as presented or revised, and forward to the Executive Committee for approval. (✓Passed by Majority, Roll Call: M. Alvarez (Yes), E. Alvizo (Yes), J. Arrington (Yes), J. Magana (Yes), C. Moreno (Yes), A. Fuller (Yes), J. Valerio (Yes).

B. New Membership Application Interview Work Group | Update

- Operations Co-chair J. Valero introduced the revised questions and explained that the primary goals of the New Membership Application Interview Work Group were: (1) to make the consumer questions more relevant to individuals with lived experiences and (2) to simplify the epidemiological language for stakeholders and renewing commissioners. The Committee continued discussions around the 2 person/per agency policy addendum and provider support documentation for new applicants and will prioritize for resolution at its next meeting.

8. POLICY AND PROCEDURES

A. Code of Conduct | Review

- The Operations Committee determined no changes are needed at this time.

Operations Meeting Minutes

October 27, 2022

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B. Two Person per Agency Rule | Discussion

- The Operations Committee tabled the discussion and requested that it is agendaized for the next meeting.
 - Agendaize Two Person per Agency Rule.

C. Contracted Provider Support Documentation

- The Operations Committee tabled the discussion and requested that it is agendaized for the next meeting.
 - Agendaize provider support documentation.

8. MEMBERSHIP MANAGEMENT REPORT

- The draft proposed membership roster was presented to the Operations Committee as follows:
 - Seat #12: Provider representative #2 - Andre Molette
 - Seat #21: Unaffiliated consumer, SPA 3 - Joseph Green
 - Seat #28: Unaffiliated consumer, Supervisorial District 2 - Bridget Gordon
 - Seat #29: Unaffiliated consumer, Supervisorial District 3 - Arlene Frames
 - Seat #31: Unaffiliated consumer, Supervisorial District 5 - Felipe Gonzalez
 - Seat #44: HIV stakeholder representative #1 - Alasdair Burton
 - Seat #46: HIV stakeholder representative #3 Pearl Doan
 - Seat #47: HIV stakeholder representative #4 - Redeem Robinson
 - Seat #48: HIV stakeholder representative #5 - Mary Cummings

9. Recruitment, Retention, and Engagement

- C. Barrit reported that the COH participated in the AIDSWalk.
- D. McClendon provided a Commission overview and recruited for the Unaffiliated Consumer SPA 4 vacancy at the Provider Network meeting held October 18th.

10. By-Laws Review Planning

- The Operations Committee tabled the discussion and requested that it is agendaized for the next meeting.
 - Initiate agendaizing By-Laws review planning for January 2023.

VI. NEXT STEPS

11. TASK/ASSIGNMENTS RECAP:

- Agendaize Work Plan (standing item).
- Agendaize Training Series (standing item).
- Agendaize Code of Conduct (standing item).
- Agendaize continued discussions re: "two person per agency" rule.
- Agendaize provider support documentation.
- Agendaize proposed membership roster as a motion.

12. AGENDA DEVELOPMENT FOR NEXT MEETING: There were no additional items.

Operations Meeting Minutes

October 27, 2022

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VII. ANNOUNCEMENTS:

- The Executive Office is holding a Brown Act training on October 27th at 1:00 pm. Staff called for commissioners not attending the Executive Committee meeting to please attend the Brown Act training.

VIII. ADJOURNMENT

13. ADJOURNMENT: The meeting adjourned at 12:10pm.



LOS ANGELES COUNTY COMMISSION ON HIV



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CODE OF CONDUCT

We welcome commissioners, guests, and the public into a space where people of all opinions and backgrounds are able to contribute. We create a safe environment that celebrates differences while striving for consensus and is characterized by consistent, professional, and respectful behavior. Our common enemies are HIV and STDs. We strive to be introspective and understand and clarify our assumptions, while appreciating the complex intersectionality of the lives we live. We challenge ourselves to be self-reflective and committed to an ongoing understanding. As a result, the Commission has adopted and is consistently committed to implementing the following guidelines for Commission, committee, and associated meetings.

All participants and stakeholders should adhere to the following:

- 1) We strive for consensus and compassion in all our interactions.**
- 2) We respect others' time by starting and ending meetings on time, being punctual, and staying present.**
- 3) We listen, don't repeat what has already been stated, avoid interrupting others, and allow others to be heard.**
- 4) We encourage all to bring forth ideas for discussion, community planning, and consensus.**
- 5) We focus on the issue, not the person raising the issue.**
- 6) We give and accept respectful and constructive feedback.**
- 7) We keep all issues on the table (no "hidden agendas"), avoid monopolizing discussions and minimize side conversations.**
- 8) We have no place in our deliberations for homophobic, racist, sexist, and other discriminatory statements and "-isms" (including transphobia, ableism, and ageism).**
- 9) We give ourselves permission to learn from our mistakes.**

Approved (11/12/1998); Revised (2/10/2005; 9/6/2005); **Revised (4/11/19)**



COMMISSION MEMBER "CONFLICTS-OF-INTEREST"

Updated 11/30/22

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

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
ALVAREZ	Miguel	No Affiliation	No Ryan White or prevention contracts
ALVIZO	Everardo	Long Beach Health & Human Services	Benefits Specialty
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			HIV and STD Prevention
			HIV Testing Social & Sexual Networks
			HIV Testing Storefront
ARRINGTON	Jayda	Unaffiliated consumer	No Ryan White or prevention contracts
BALLESTEROS	AI	JWCH, INC.	HIV Testing Storefront
			HIV Testing & Syphilis Screening, Diagnosis, & inked Referral...(CSV)
			STD Screening, Diagnosis, and Treatment
			Health Education/Risk Reduction (HERR)
			Mental Health
			Oral Healthcare Services
			Transitional Case Management
			Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
Transportation Services			
BURTON	Alasdair	No Affiliation	No Ryan White or prevention contracts

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
CAMPBELL	Danielle	UCLA/MLKCH	Oral Health Care Services
			Medical Care Coordination (MCC)
			Ambulatory Outpatient Medical (AOM)
			Transportation Services
CIELO	Mikhaela	LAC & USC MCA Clinic	Ambulatory Outpatient Medical (AOM)
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
DAVIES	Erika	City of Pasadena	HIV Testing Storefront
			HIV Testing & Sexual Networks
DOAN	Pearl	No Affiliation	No Ryan White or prevention contracts
DONNELLY	Kevin	Unaffiliated consumer	No Ryan White or prevention contracts
FINDLEY	Felipe	Watts Healthcare Corporation	Transportation Services
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			Oral Health Care Services
			Biomedical HIV Prevention
			STD Screening, Diagnosis and Treatment
FRAMES	Arlene	Unaffiliated consumer	No Ryan White or prevention contracts
FULLER	Luckie	APLA Health & Wellness	Case Management, Home-Based
			Benefits Specialty
			HIV Testing Specialty
			HIV Testing Storefront
			HIV Testing Social & Sexual Networks
			STD Screening, Diagnosis and Treatment
			Sexual Health Express Clinics (SHEX-C)
			Health Education/Risk Reduction
			Health Education/Risk Reduction, Native American
			Biomedical HIV Prevention
			Oral Healthcare Services
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			HIV and STD Prevention Services in Long Beach
			Transportation Services
Nutrition Support			

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
GATES	Jerry	AETC	Part F Grantee
GONZALEZ	Felipe	Unaffiliated consumer	No Ryan White or Prevention Contracts
GORDON	Bridget	Unaffiliated consumer	No Ryan White or prevention contracts
GREEN	Joseph	Unaffiliated consumer	No Ryan White or prevention contracts
GREEN	Thomas	APAIT (aka Special Services for Groups)	HIV Testing Storefront
			Mental Health
			Transportation Services
HALFMAN	Karl	California Department of Public Health, Office of AIDS	Part B Grantee
KOCHEMS	Lee	Unaffiliated consumer	No Ryan White or prevention contracts
KING	William	W. King Health Care Group	No Ryan White or prevention contracts
MAGANA	Jose	The Wall Las Memorias, Inc.	HIV Testing Storefront
			HIV Testing Social & Sexual Networks
MARTINEZ	Eduardo	AIDS Healthcare Foundation	Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Medical Care Coordination (MCC)
			Mental Health
			Oral Healthcare Services
			STD Screening, Diagnosis and Treatment
			HIV Testing Storefront
			HIV Testing Social & Sexual Networks
			Sexual Health Express Clinics (SHEX-C)
			Transportation Services
			Medical Subspecialty
			HIV and STD Prevention Services in Long Beach
MARTINEZ (PP&A Member)	Miguel	Children's Hospital Los Angeles	Ambulatory Outpatient Medical (AOM)
			HIV Testing Storefront
			STD Screening, Diagnosis and Treatment
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			Transitional Case Management - Youth
Promoting Healthcare Engagement Among Vulnerable Populations			

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
MILLS	Anthony	Southern CA Men's Medical Group	Biomedical HIV Prevention
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			Promoting Healthcare Engagement Among Vulnerable Populations
			Sexual Health Express Clinics (SHEX-C)
			Transportation Services
MINTLINE (SBP Member)	Mark	Western University of Health Sciences (No Affiliation)	No Ryan White or prevention contracts
MOLLETTE	Andre	Southern CA Men's Medical Group	Biomedical HIV Prevention
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			Promoting Healthcare Engagement Among Vulnerable Populations
			Sexual Health Express Clinics (SHEX-C)
			Transportation Services
MORENO	Carlos	Children's Hospital, Los Angeles	Ambulatory Outpatient Medical (AOM)
			HIV Testing Storefront
			STD Screening, Diagnosis and Treatment
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			Transitional Case Management - Youth
			Promoting Healthcare Engagement Among Vulnerable Populations
MURRAY	Derek	City of West Hollywood	No Ryan White or prevention contracts
NASH	Paul	University of Southern California	Biomedical HIV Prevention
			Oral Healthcare Services

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
NELSON	Katja	APLA Health & Wellness	Case Management, Home-Based
			Benefits Specialty
			HIV Testing Storefront
			HIV Testing Social & Sexual Networks
			STD Screening, Diagnosis and Treatment
			Sexual Health Express Clinics (SHEX-C)
			Health Education/Risk Reduction
			Health Education/Risk Reduction, Native American
			Biomedical HIV Prevention
			Oral Healthcare Services
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			HIV and STD Prevention Services in Long Beach
			Transportation Services
Nutrition Support			
OROZCO	Jesus ("Chuy")	HOPWA-City of Los Angeles	No Ryan White or prevention contracts
PERÉZ	Mario	Los Angeles County, Department of Public Health, Division of HIV and STD Programs	Ryan White/CDC Grantee
ROBINSON	Mallery	We Can Stop STDs LA (No Affiliation)	No Ryan White or prevention contracts
ROBINSON	Redeem	All Souls Movement (No Affiliation)	No Ryan White or prevention contracts
ROSALES	Ricky	City of Los Angeles AIDS Coordinator	No Ryan White or prevention contracts
SATTAH	Martin	Rand Schrader Clinic LA County Department of Health Services	Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
SAN AGUSTIN	Harold	JWCH, INC.	HIV Testing Storefront
			HIV Testing & Syphilis Screening, Diagnosis, & inked Referral...(CSV)
			STD Screening, Diagnosis and Treatment
			Health Education/Risk Reduction
			Mental Health
			Oral Healthcare Services
			Transitional Case Management
			Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			Transportation Services
SPENCER	LaShonda	Oasis Clinic (Charles R. Drew University/Drew CARES)	Ambulatory Outpatient Medical (AOM)
			HIV Testing Storefront
			HIV Testing Social & Sexual Networks
			Medical Care Coordination (MCC)
STALTER	Kevin	Unaffiliated consumer	No Ryan White or prevention contracts
VALERO	Justin	No Affiliation	No Ryan White or prevention contracts



POLICY/PROCEDURE #08.1104	Commission and Committee Co-Chair Elections and Terms	Page 1 of 8
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SUBJECT: The process and scheduling for Commission and Committee Co-Chair elections.

PURPOSE: To outline the steps and timing for the Commission's and standing committees' Co-Chair elections.

BACKGROUND:

- Federal Ryan White legislation mandates that all Part A jurisdictions establish local HIV planning councils to develop a comprehensive HIV plan, rank priorities and determine allocations, create standards of care, and to carry out a number of other responsibilities. The Los Angeles County Commission on HIV serves as the local Ryan White Part A HIV planning council for the Los Angeles County.
- In accordance with Ryan White rules and Ordinance 3.29 of the Los Angeles County Charter, the Commission on HIV comprises 51 voting members, meets monthly, and fulfills its various responsibilities through an open, transparent meeting process. The meetings comply with appropriate provisions of California's Ralph M. Brown Act, and are run according to Robert's Rules of Order.
- Elected leadership is necessary to represent the planning council, facilitate the meetings, and oversee planning council work, among other responsibilities. The Health Resources and Services Administration (HRSA), the federal agency responsible for administering the Ryan White Program, recommends that planning councils elect Co-Chairs for these functions. The Commission on HIV has adopted HRSA's guidance with two Co-Chairs elected by the membership.
- The Commission on HIV relies on a strong committee structure to discharge its work responsibilities. Consistent with the Commission's By-Laws, the Commission organizational structure comprises five standing committees: Executive, Public Policy (PP), Operations, Priorities, Planning, and Allocations (PP&A), and Standards and Best Practices (SBP). Except for the Executive Committee (where the Commission Co-Chairs serve as the Committee Co-Chairs), the standing committees are led by two Co-Chairs elected by the Committee membership.

Policy #08.1104: Commission and Committee Co-Chair Elections and Terms

Page 2 of 7

- The Commission Co-Chairs' duties, responsibilities, rights and expectations are detailed in *Duty Statement, Commission Co-Chair*). The Committee Co-Chairs' duties, responsibilities, rights and expectations are detailed in *Duty Statement, Committee Co-Chair*.

POLICY:

1. The Commission Co-Chairs are elected to two-year terms, and each Co-Chair seat expires in December of alternate years. Except for the Executive Committee, each of the standing committees annually elects two Committee Co-Chairs to one-year terms that expire in February. There are no limits to the number of terms to which a Commission or committee Co-Chair can be re-elected. Co-Chairs elected to fill mid-term vacancies are elected for the remaining duration of the term, until it expires.
2. The Commission Co-Chairs are considered members of all committees, and also serve as Executive Committee Co-Chairs. Committee Co-Chairs cannot serve as Co-Chair to more than one committee at a time.
3. Nominations for the vacant Commission Co-Chair seat are normally opened in August, unless unexpected circumstances arise (meeting cancellations, absence of quorum, etc.) prevent it. Nominations for the Committee Co-Chair seats are usually opened in January, following election of the Commission Co-Chairs and final committee assignments, unless otherwise delayed. Members can nominate themselves or can be nominated by other stakeholders throughout the period in which the nominations are open.
4. Except for immediate vacancies in both Co-Chair seats, nominations must be open at the monthly meeting prior to the Co-Chair elections. Unless delayed or postponed, the Co-Chair elections are held at following month's regular meeting.
5. Commission Co-Chair candidates must have at least a year's service on the Commission. At least one of them must be HIV-positive and at least one of them must be a person of color. Only Commissioners can serve as the Co-Chairs. Only Commissioners serving in their primary committee assignment may serve as Committee Co-Chairs, but at least one of the Committee Co-Chair seats must be filled by a Commissioner. Unaffiliated HIV-positive consumers are highly encouraged to seek leadership roles and run for a Commission or Committee Co-Chair seat whenever possible.
6. Co-Chairs are elected through a sequential voting process until there are only one or two candidates remaining, as need dictates. The Commission/committee must approve the final candidate(s) through a consent vote of approval or through individual roll call votes. All Co-Chairs must be elected by a majority of the voting membership. A Co-Chair candidate's failure to earn a majority vote disqualifies that member as a Co-Chair candidate for that term, closes the election for that meeting, extends the nominations period, and postpones the election to the subsequent meeting.

7. Commission and Committee Co-Chair terms are allowed to be extended to accommodate delayed meeting schedules, lack of suitable candidates, or when the body cannot determine definitive, final Co-Chair candidates. A single Co-Chair may also continue to serve, when needed, until a second Co-Chair candidate is identified and elected.

PROCEDURE(S):

1. **Terms of Office:** The Commission Co-Chairs are elected to office for staggered two-year terms. Aside from the Executive Committee, standing committee Co-Chairs are elected for two-year terms.
 - a. Commission Co-Chair terms expire in alternate years to ensure leadership continuity. The Commission Co-Chairs also serve as Co-Chairs of the Executive Committee, and serve in those roles for the duration of their tenure as Commission Co-Chairs.
 - b. The four, remaining standing committees [Public Policy (PP), Operations, Priorities Planning and Allocations (PP&A) and Standards and Best Practices (SBP)] elect their Co-Chairs for one-year terms that expire concurrently.
 - c. Commission Co-Chair terms expire in December of the calendar year, unless the November and/or December monthly Commission meeting(s) are cancelled, quorum is not achieved at the meeting at which the Co-Chair is scheduled to be elected, or by majority vote of the Commission to accommodate an extension of the Co-Chair election process.
 - d. Committee Co-Chair terms expire in February of the calendar year, but may be extended, if needed, until new Co-Chairs are elected to fill the leadership positions.
 - e. In the case of a mid-term vacancy in one of the Commission Co-Chair seats, the Commission Co-Chair is subsequently elected to fill the unfinished term resulting from the vacancy. Likewise, committee Co-Chairs elected to fill mid-term vacancies are elected for the respective unfinished terms.
 - f. Commission Co-Chairs are considered voting members of all Committees and subcommittees, but are not counted towards quorum unless present.
2. **Commission Co-Chair Election Process:** Normally—unless adjusted for unexpected circumstances—the Commission Co-Chair elections proceed according to the following schedule:
 - a. The Co-Chairs are elected by a majority vote of Commissioners or Alternates present at a regularly scheduled Commission meeting **at least four months prior to the start date of their term**, after nominations periods opened at the prior regularly scheduled meeting.
 - b. The term of office begins at the start of the calendar year. When a new Co-Chair is elected, this individual shall be identified as the Co-Chair-Elect and will have four months of mentoring and preparation for the Co-Chair role.
 - c. The Co-Chairs delegate facilitation of the Co-Chair election to the Parliamentarian, Executive Director or other designated staff.

- d. Commission members who have been nominated, meet the qualifications, and who accept their nominations are presented for Commission vote.
- e. The Parliamentarian (or Executive Director/staff) leads Commission voting to elect the new Commission Co-Chair.
- g. Following the new Co-Chair's election, the Commission Co-Chairs and the Executive Director must determine Commission members' final committee assignments by the end of December in order to open committee Co-Chair nominations the following month.

3. Committee Co-Chair Election Process: Normally—unless adjusted for unexpected circumstances—the committee Co-Chair elections proceed according to the following schedule:

- a. Aside from the Executive Committee (the Commission Co-Chairs serve as the Executive Committee Co-Chairs), the standing committees open candidate nominations for both Co-Chair seats at their January meetings (following final committee assignments).
- b. Nominations are closed the following month when Committee Co-Chair elections are opened under the Co-Chair reports.
- c. The current Co-Chairs delegate facilitation of the Co-Chair election to the Executive Director or another assigned staff representative.
- d. Committee members who have been nominated, meet the qualifications, and who accept their nominations are presented for Committee vote.
- e. The Executive Director (or other designated staff) leads Committee voting to elect the new Co-Chairs.
- f. The newly elected Co-Chairs begin service at the following committee meeting.

As per Robert's Rules of Order, The Commission Co-Chairs should maintain a position of neutrality and not vote in Committee co-chair elections unless there is a tie vote for a position, then they may (but are not required to) vote to break the tie.

4. Co-Chair Qualifications/Eligibility: Only voting Commissioners may serve as Commission Co-Chairs. In order to ensure leadership diversity and representation, eligible Commission Co-Chair candidates must have at least one year of service and experience on the Commission. Among the two Commission Co-Chairs, at least one of the Co-Chairs must be HIV-positive, and at least one of them must be a person of color. Additionally, it is strongly preferred that at least one of the two Co-Chairs is female.

The Commission does not impose eligibility or qualification requirements for Committee Co-Chairs, although it is strongly encouraged that nominees acquire at least one year's experience with the Committee before standing as a Co-Chair candidate.

- a. Any Committee member nominated as a Co-Chair candidate must be serving on that Committee in his/her primary Committee assignment.
- b. Only Commissioners may serve as Co-Chairs.
- b. Alternates, members serving on the committee in secondary Committee assignments, and BOS-appointed non-Commission committee members may not serve as Co-Chairs.

- 5. Co-Chair Nominations:** Outside the rare possibility of immediate vacancies in both Commission Co-Chair seats, all Commission and Committee Co-Chair elections must follow a nominations period opened at the respective body's prior regular meeting. The nominations period is designed to give potential candidates the opportunity to consider standing for election and the responsibility of assuming a leadership position. Candidates may nominate themselves or participants may nominate other members. Any stakeholder may nominate Co-Chair candidates.

Candidates can be nominated in public when the nominations are opened or any time prior to the closure of the nominations—including just prior to when the Co-Chair elections are opened at the subsequent meeting—or by contacting the Executive Director through phone, email and/or in writing at any time during the period in which nominations are open. Nominations are formally closed when the eligible candidates begin making their statements.

All Commission Co-Chair candidates nominated prior to the meeting of the Co-Chair election are given the opportunity to provide a brief (single paragraph, single page) statement about their candidacy. All Co-Chair candidates should be given the opportunity to make a short oral statement about their candidacy prior to the election.

- 6. Co-Chair Election Voting Procedures:** Co-Chairs are elected by a majority vote:
- a. Roll call voting for elections requires each voting member to state the name of the candidate for whom he/she is voting, or to abstain, in each round of votes.
 - b. If there are more than two candidates nominated for Commission Co-Chair, voting will proceed in sequential roll calls until a final candidate earns a majority of votes and is elected by a consent or roll call vote. If no candidates earn a majority of votes in a single round, the candidate earning the least number of votes will be eliminated from the subsequent round of roll call voting. The process continues until there is a majority vote for one candidate, or only one candidate remains and the others have been eliminated. Once the final candidate has been selected, the Commission must approve that candidate for the Co-Chair seat in a consent or roll call vote.

- c. When there is only one Commission Co-Chair candidate, the vote serves as approval or rejection of the nominated candidate.
 - 1) A consent vote may be used to approve the final candidate(s) for the Co-Chair seat(s). A roll call vote is not necessary for a final candidate unless there are objections to the election of the candidate.
 - d. If there are two Commission Co-Chair vacancies to fill, voting adheres to the process outlined above except that the final two candidates are identified as the final Co-Chair candidates. A consent vote may be used to approve both final candidates, but a subsequent roll call vote is necessary to identify which candidate will fill the longer term; the candidate earning more votes fills the seat with the longer term.
 - 1) A roll call vote to approve both candidates to fill the Co-Chair seats is not necessary unless there are objections to the election of one or both of the candidates.
 - 2) When there are objections to the election of one or both of the candidates, each candidate must be approved by a majority through an individual roll call vote.
 - e. If there are three or more candidates nominated for the two Committee Co-Chair seats, the same process described for Commission Co-Chair election voting (Procedure #4a) is followed. If there are only two Committee Co-Chair candidates, the Committee is entitled to unanimously accept the “slate of Co-Chair nominees”; otherwise an individual roll call vote is necessary to approve the election of each candidate to a Co-Chair seat.
 - f. In the case of a tie during the final vote, the body can re-cast its vote to accommodate changes in voting. If the body cannot resolve the tie after a new vote, the current Co-Chair(s) remain in office, voting is closed, nominations remain open until the subsequent meeting, and a new election is resumed at that meeting. The process will repeat monthly until a clear majority vote-earner is identified.
 - g. If a majority of the voting members oppose a final candidate’s/final candidates’ nominations, the current Co-Chair(s) retain their seat until the subsequent meeting, nominations remain open, and a new election is held at the next meeting. The final candidates’ whose nominations were opposed are no longer eligible to fill the seat in the current term. The process will repeat monthly until the body finds majority support for a final candidate(s).
- 7. Co-Chair Election Contingencies:** A number of factors may impede the normal Co-Chair election timelines outlined in Procedures #2, #3 and #6. Following are potential challenges that can result in process delays, and how those challenges should be resolved:
- a. Inadequate Number of Qualified Co-Chair Candidates:** The Co-Chair whose term has expired may continue in the seat with the term extended until a new Co-Chair is elected. If the Co-Chair does not choose to continue, or has resigned, a Commission or Committee Co-Chair may temporarily serve as a single Co-Chair until a second Co-Chair can be identified and elected. Co-Chair nominations will remain open indefinitely until qualified candidate(s) are identified and elected.

- b. Cancelled Meeting(s) or Quorum(s) Not Realized:** Nominations can be opened at a subsequent meeting and/or extended to accommodate the cancelled meeting(s) or absence of quorum(s). If the meeting for which the election is scheduled is cancelled or a quorum is not present, nominations remain open an additional month and the election proceeds the following month.

**NOTED AND
APPROVED:**



**EFFECTIVE
DATE:**

September 12, 2019

Original Approval:

Revision(s):10/19/16; 7/24/17; 9/12/19



LOS ANGELES COUNTY
COMMISSION ON HIV



3530 Wilshire Boulevard, Suite 1140 • Los Angeles, CA 90010 • TEL (213) 738-2816 • FAX (213) 637-6748

HIVCOMM@LACHIV.ORG • <http://hiv.lacounty.gov>

**POLICY/PROCEDURE
#08.2301**

**(Revised) Voting
Procedures**

Page 1 of 3

FINAL: APPROVED BY COH: 9/12/2019

SUBJECT: The process for formally supporting or opposing Commission, committee or subcommittee actions.

PURPOSE: To describe the procedures for formally determining specific actions proposed at formal Commission or committee meetings.

BACKGROUND:

- Article V (*Meetings*), Section 8 (*Robert's Rules of Order*) of Policy/Procedure #06.1000 (*Bylaws of the Los Angeles County Commission on HIV*) states the following: "All meetings of the Commission shall be conducted according to the current edition of 'Robert's Rules of Order, Newly Revised', except where superseded by the Commission's Bylaws, policies/procedures, and/or applicable laws."
- All Commission member voting is subject to the conditions and provisions of state and federal conflict of interest requirements as detailed in Article VII (*Policies and Procedures*), Section 5 (*Conflict of Interest Procedures*) of Policy/Procedure #06.1000 (*Bylaws of the Los Angeles County Commission on HIV*) and Policies/Procedures #08.3108 (*Adherence to State Conflict of/Interest Rules and Requirements*).

POLICY:

- 1) Specific actions by the Commission or a committee can be taken as a result of co-chair instruction or following a successful motion by a quorum of a voting body in attendance.
 - a. In accordance with Commission Bylaws, and/or Robert's Rules of Order, certain votes are required of the body in spite of broad agreement.
 - b. All allocation decisions require motions and roll call votes.

- 2) All Commissioners (or their alternates in their absence) who are appointed by the Board of Supervisors may vote on matters before the Commission, unless they have recused themselves. All members assigned to or appointed to committees (or their alternates in their absence) may vote on motions before those committees, unless they have recused themselves.
 - a. "Recusal" is dictated by Policies/Procedures#08.3108 (*Adherence to State Conflict of Interest Rules and Requirements*).
- 3) The Commission or its committee may vote on a motion in one of two ways:
 - a. Unanimous voice vote (with abstentions as noted), commonly called "consensus," or
 - b. Roll call vote
 - c. While they do not count as votes, nor count in the vote tally, abstentions will be recorded and noted in meeting and motion summaries and minutes.

PROCEDURES:

1. **Co-Chairs' Prerogative:** If all in attendance are in agreement, and there is no motion on the floor, it is the co-chairs' prerogative to direct that an action be taken without a specific vote.
2. **Content of Motions:** Motions are made by members of the body and must be acted on for one of three reasons:
 - a. They are "procedural" in nature: required by law or rule, such as the Ralph M. Brown Act or Robert's Rules of Order (e.g., approving the agenda, minutes);
 - b. They are "Action" in nature: either to lend credibility and/or formality to an action already agreed upon by the body; or to determine an action in a way about which there may be varied opinion/disagreement among the members and/or those in attendance.
3. **Submission of Motions:** In accordance with Policy/Procedure #08.1102 (*Subordinate Commission Working Units*), motions are made and acted on in several ways, subject to Robert's Rules of Order:
 - a. They can be included on the agenda in advance of the meeting by a formal subunit of the body (e.g., committee, subcommittee or task force). Motions on the agenda are deemed "moved" by adoption of the agenda, and do not require a second, for a vote.
 - b. They can be made at the meeting in response to a specific agendized item of discussion. These motions require an individual to "move" the action, and a "second" from a person who agrees that the motion should be placed "before the body".
 - c. They can be moved to the agenda by action at a previous meeting and treated appropriately as agendized.
4. **Voting Privileges:** Motions can only be voted when there is a quorum of the members of the body with voting privileges present:
 - a. All Commissioners (or their Alternates when they are not present) appointed by the Board of Supervisors have voting privileges at Commission meetings;
 - b. All Commission members assigned or appointed to a committee, or their Alternates when they are not present, have voting privileges at the respective committee meetings;
 - c. All members with voting privileges at the Commission or committee meetings who have not recused themselves may vote on any motion "before the body";
 - d. In accordance with Policies/Procedures #08.3108 (*Adherence to State Conflict of Interest Rules and Requirements*), members must recuse themselves when they have an appropriate conflict of interest.

5. **Action Following a Motion:** Once a motion is made, any discussion may follow, unless prohibited by Robert’s Rules of Order. The motion can be amended, postponed or referred, etc., by vote, in accordance with Robert’s Rules of Order.
6. **Consensus on a Motion:** When the body is ready to vote on a motion, it is the Co-Chairs’ responsibility to poll the body by voice, and ask if there is any objection. If there is objection from at least one member of the body, a roll call must be taken (*see Procedure #7*).
 - a. After the co-chair determines if there are no objections, the co-chair will call for abstentions.
 - b. Abstentions are not considered objections, do not count in the final vote, and, thus, do not affect the decision of whether or not the vote is considered unanimous or if a roll call vote must be taken. Abstentions will be noted in the public record.
 - c. If there are no objections, the motion is considered “passed by consensus”.
7. **Roll Call Votes:** A roll call vote is taken by a staff member of non-voting member reading the members’ names aloud who are present and entitled to vote, and recording the members’ votes for the public record.
 - a. The roll call can be taken in alphabetical or reverse alphabetical order.
 - b. Co-Chairs’ votes are taken at the end of the roll call vote; Co-Chairs are not required to vote unless there is a tie in voting (“Co-Chair Prerogative”).
8. **Motion Pass or Fail:** At the end of the roll call, the Parliamentarian or reader tallies the supporting and opposing votes cast and gives the number to the Co-Chair to announce whether the motion has passed or failed according to which vote has the greater number.
 - a. A motion passes if there are a greater number of supporting votes than opposing votes.
 - b. A motion fails if there are a greater number of opposing votes than supporting votes, or if there is a tie between opposing and supporting votes.
9. **Final Decision:** All votes and abstention notes are final when a Co-Chair announces the decision.

**NOTED AND
APPROVED:**



EFFECTIVE

DATE: 9/12/2019

Original Approval: 7/13/2006	Revision(s): 3/14/2012; Updated: 01/20/17; 9/12/2019
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LOS ANGELES COUNTY COMMISSION ON HIV 2022 OPERATIONS WORKPLAN

Co-Chairs: Luckie Fuller, Justin Valero				
Approval Date: 2.24.22 Updated: 2.24.22, 4.21.22, 5.17.22, 6.14.22, 8.31.22, 9.15.22, 10.25.22, 12.5.22				
Purpose of Work Plan: To focus and prioritize key activities for COH Committees and subgroups for 2022.				
#	TASK/ACTIVITY	DESCRIPTION	TARGET COMPLETION DATE	STATUS/NOTES/OTHER COMMITTEES INVOLVED
1	Develop the Comprehensive HIV Plan (CHP) 2022-2026	The Committee will gather, discuss, develop, and provide planning priorities for inclusion in the plan.	10/2022	
2	Assessment of the Administrative Mechanism (AAM)	Evaluate the speed and efficiency with which Ryan White Program funding is allocated and disbursed for HIV services in Los Angeles County. The Health Resources Administration (HRSA) expects planning council to complete the AAM on an annual basis.	June-July 2022	Survey sent to all commissioners. Survey will be sent to providers mid-June. AAM findings presentation in October.
3	Implement HealthHIV - Planning Council effectiveness assessment recommendations	Address Areas of Improvement from the HealthHIV Planning Council Effectiveness Assessment: (1) Member Recruitment and Retention; (2) Community Engagement/Representation; and (3) Streamlining the LAC COH's Work	Ongoing	See summary and recommendations
4	Implement 2022 Training Plan	Implement member-facilitated virtual trainings and discussions for ongoing learning and capacity building opportunities.	Feb-Dec 2022	Training Plan appvd 2.24.22. General orientation 3.29.21, virtual study hour 4.12.22; Ryan White Overview 7.21.22. Priority Setting and Resource Allocation Process + Service Standards Development 9/15 @ 3pm. Virtual Study Hour 10.20.22 @ 3pm - cancelled. Co Chairs Roles and Responsibilities 11.14.22 @ 4-5pm, Policy Priorities and Legislative Docket Development 11.16.22 @ 4-5pm. 12/13 Virtual Study Hour 3pm-4pm.

LOS ANGELES COUNTY COMMISSION ON HIV 2022 OPERATIONS WORKPLAN

		*Additional training may be integrated at all COH subgroups as determined by members and staff		
5	Consumer Engagement and Retention Strategies	Development of engagement and retention strategies to align with CHP efforts: COH social media campaign	Ongoing	<ul style="list-style-type: none"> ● January 27th: New Social Media initiative: Presentation/discussion led by C. LaPointe ● Selected members will be participating in the CHATT PLANNING Learning Collaborative co-hort to develop a formal recruitment and retention plan. Updates to follow.
6	Membership Application Process: Update Application Interview Questions	Update application interview questions to a more condensed and community friendly format; strategize ways to streamline the interview process	April- May/2022	Updates/status provided: January, February, March, April, May, June Application to be presented to Operations in October.
7	Review Membership to Ensure PIR	Review membership to ensure PIR is reflected throughout the membership, to include Alternate seat review, seat changes, attendance	Quarterly	PIR reviewed in January. PIR updated in August, reflects current body.
8	Attendance Review	Review Attendance Matrix Quarterly	Quarterly	Attendance reviewed in January, April, December.



LOS ANGELES COUNTY
COMMISSION ON HIV

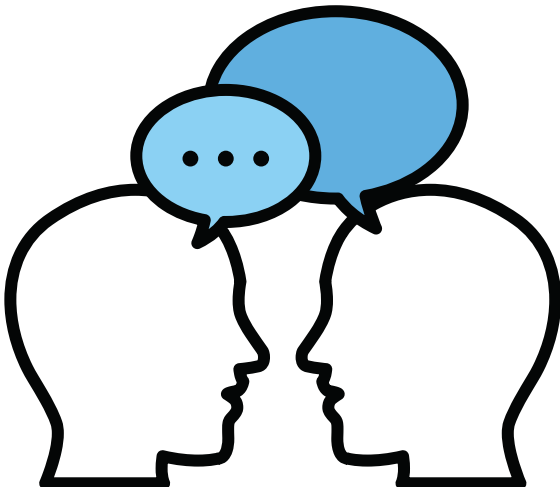


Los Angeles County Commission on HIV Training Schedule 2022

Come learn with us!

All trainings are open to the public. Virtual study hours will be available for all commissioners and members of the public who have any questions about the purpose and functions of the Commission on HIV.

Trainings are mandatory for all Commissioners.



UPDATED SCHEDULE

(AS OF 9.27.22)

March 29

General Orientation

Commission on HIV Overview

3:00 - 4:30 PM - Register [here](#).

April 12

Virtual Study Hour

3:00 - 4:00 PM - Register [here](#).

July 21

Ryan White Care Act Legislative Overview Membership Structure and Responsibilities

3:00 - 4:30 PM - Register [here](#).

August 17

Virtual Study Hour

3:00 - 4:00 PM - Register [here](#).

September 15

Priority Setting and Resource Allocation Process Service Standards Development

3:00 - 4:30 PM - Register [here](#).

October 20 **CANCELLED**

Virtual Study Hour

3:00 - 4:00 PM - Register [here](#).

November 16

Policy Priorities and Legislative Docket Development Process

4:00 - 5:00 PM - Register [here](#).

November 17 **CHANGED TO NOV 14 @ 4-5PM**

Co-Chair Roles and Responsibilities (Virtual live)

4:00 - 5:00 PM - Register [here](#).

December 13

Virtual Study Hour

3:00 - 4:00 PM - Register [here](#).



New Member Applicant Interview FAQs

Thank you for your interest in becoming a member of the Los Angeles County Commission on HIV (Commission). The following information is provided to assist in preparing for your interview:

1. All candidates for Commission membership are expected to sit for an interview with the Operations Committee and to attend at least one full Commission meeting and one standing committee meeting.
2. Your interview will be conducted by panel of 2-3 Commission members who will engage in a series of questions to assess your breadth of knowledge, experience, and commitment to fulfilling the duties of a member of the Commission. This is intended to be an interactive process.
3. The Commission is a planning body governed not only by statute but also by regulations from HRSA and the CDC.
4. It is important to understand that we are community planners NOT activists. We plan for ALL those at risk for and affected by HIV in Los Angeles County to ensure that they get full access to quality care and prevention services.
5. The Commission is comprised of 51 members, of which 1/3 must be HIV positive consumers of Ryan White services.
6. The entire membership of the Commission should meet Parity, Inclusion and Reflectiveness of HIV
 - a. Parity – As a body, we have done everything possible to provide members the tools, skills and training to be effective planners;
 - b. Inclusion – Everyone has an opportunity to weigh in and contribute to the debate and are actively involved;
 - c. Reflective (Representation) – The full membership and the subset of Unaffiliated Consumer members proportionally reflect the ethnic, racial, and gender characteristics of HIV disease prevalence in the County
7. After the interviews are complete, the Operations Committee weighs your application and interview against other applicants, open seats, and the principals of Parity, Inclusiveness & Reflectiveness described above.
8. Those who are moved forward are sent to the Executive Committee and the full Commission and are then moved to the Board of Supervisors for the final approval. The process can take 2-3 months. We can also hold your application for up to a year to possibly fill future vacancies.
9. There are 4 standing committees (Operations, Standards and Best Practices, Public Policy, and Planning, Priorities & Allocations) of the Commission and, while your application is under review, we strongly recommend you attend at least one meeting of each of the four Committees which meet monthly. Commission members are required to sit on one of these 4 Committees, and it is in these smaller groups where most of the “work” of the Commission is done. See attached Committee Description and Preference form.
10. The following is a link to the Commission’s Glossary of Terms: <https://tinyurl.com/4fajyys9>

New Member Application Evaluation and Scoring Form

We have about 25-30 minutes to complete your interview. We ask you to help us be mindful of the time and recognize we may move you along in order to complete our work and give all applicants equitable time and attention.

Please review membership application and any attached professional qualifications of nominee before completing evaluation and scoring sheet. See below for definition of HIV Workforce Service Provider, Returning Commissioner or those with Planning Council Experience, and Consumers/Unaffiliated Stakeholders. Guidance questions are provided to encourage nominees to communicate their breadth of knowledge, experience, and commitment to fulfilling the duties of a member of the Los Angeles County Commission on HIV. Applicants for Commission membership must meet a minimum score of 60 points to be deemed qualified for appointment.

Name of Nominee _____

Evaluated/Scored by _____

Date of Evaluation/Interview _____

Unaffiliated Consumer

Provider

Definition of terms

1. **HIV Workforce/ Service Provider Representatives:** Professional currently employed with a minimum of 2 years of employment with an organization that provides HIV care, prevention, or STI related services.
2. **Returning Commissioners or those with Planning Council Experience:** Previously appointed Commissioner seeking to retain membership. These candidates are subject to all eligibility guidelines as established by ordinance or compliance with COH policy/procedures.
3. **Consumers/Unaffiliated Individuals:** Applicant has no current affiliation with an HIV care, prevention, or STI related provider. This category includes members of the public.

New Member Application Evaluation and Scoring Form

To determine Supervisorial Districts and SPAs, click here: <https://www.lavote.net/apps/precinctsmaps>

In which Supervisorial District and SPA do you work? Check all that apply.					
District 1	<input type="checkbox"/>	SPA 1	<input type="checkbox"/>	SPA 5	<input type="checkbox"/>
District 2	<input type="checkbox"/>	SPA 2	<input type="checkbox"/>	SPA 6	<input type="checkbox"/>
District 3	<input type="checkbox"/>	SPA 3	<input type="checkbox"/>	SPA 7	<input type="checkbox"/>
District 4	<input type="checkbox"/>	SPA 4	<input type="checkbox"/>	SPA 8	<input type="checkbox"/>
District 5	<input type="checkbox"/>				
In which Supervisorial District and SPA do you live?					
District 1	<input type="checkbox"/>	SPA 1	<input type="checkbox"/>	SPA 5	<input type="checkbox"/>
District 2	<input type="checkbox"/>	SPA 2	<input type="checkbox"/>	SPA 6	<input type="checkbox"/>
District 3	<input type="checkbox"/>	SPA 3	<input type="checkbox"/>	SPA 7	<input type="checkbox"/>
District 4	<input type="checkbox"/>	SPA 4	<input type="checkbox"/>	SPA 8	<input type="checkbox"/>
District 5	<input type="checkbox"/>				
In which Supervisorial District and SPA do you receive HIV (care or prevention) services? Check all that apply.					
District 1	<input type="checkbox"/>	SPA 1	<input type="checkbox"/>	SPA 5	<input type="checkbox"/>
District 2	<input type="checkbox"/>	SPA 2	<input type="checkbox"/>	SPA 6	<input type="checkbox"/>
District 3	<input type="checkbox"/>	SPA 3	<input type="checkbox"/>	SPA 7	<input type="checkbox"/>
District 4	<input type="checkbox"/>	SPA 4	<input type="checkbox"/>	SPA 8	<input type="checkbox"/>
District 5	<input type="checkbox"/>				

New Member Application Evaluation and Scoring Form

DEMOGRAPHIC INFORMATION						
RACE/ETHNICITY ** Please select all that apply.**						
<input type="checkbox"/> American Indian or Alaska Native **Please specify Nation in Comment Box below**	<input type="checkbox"/> Asian	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Hispanic or LatinX	<input type="checkbox"/> Multi-Race		
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> White or Caucasian	If your RACE/ETHNICITY is not listed, please use this space to share how you self-identify or to specify Nation if representing American Indian or Alaska Native:				
GENDER IDENTITY						
<input type="checkbox"/> Non-Binary/ Gender Non-Conforming	<input type="checkbox"/> Transgender: Female to Male	<input type="checkbox"/> Transgender: Male to Female	<input type="checkbox"/> Female	<input type="checkbox"/> Male		
If your gender identity is not listed above, please use this space to share how you self-identify						
AGE						
<input type="checkbox"/> 13-19	<input type="checkbox"/> 20-29	<input type="checkbox"/> 30-39	<input type="checkbox"/> 40-49	<input type="checkbox"/> 50-59	<input type="checkbox"/> 60+	<input type="checkbox"/> Prefer not to state
PROVIDER INFORMATION: Check all that apply.						
<input type="checkbox"/> Incarcerated	<input type="checkbox"/> Healthcare	<input type="checkbox"/> Social Service	<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> Mental Health		
<input type="checkbox"/> Prevention	<input type="checkbox"/> CBO	<input type="checkbox"/> Other Federal	<input type="checkbox"/> Healthcare Planning	<input type="checkbox"/> Public Health		
Has attended at least one Commission meeting			<input type="checkbox"/> Yes <input type="checkbox"/> No			
INTERVIEW: All candidates for Commission membership are expected to sit for an interview with the Operations Committee and to attend at least one full Commission meeting and one standing committee meeting. The interview is intended to help the Committee better familiarize themselves with the candidate, and for the candidate to better determine their expectations of, interest in, and plans for Commission membership.						
INTRODUCTORY QUESTIONS (all applicants)						
1. Tell us a little bit about yourself and how you see yourself fitting into the Commission?						
2. What do you think about the meetings you attended?						
<input type="checkbox"/> Yes Meetings/Dates: Click or tap here to enter text.						
3. Returning Commissioners: Can you detail the reason(s) why you left the Commission and why you want to return?						

Scoring Criteria		Points Available	Points Earned
I. Commitment & Communication: Individuals who have expressed a desire to commit and demonstrated support necessary to fulfill the duties of a Commissioner as described in the membership application form.			
HIV Workforce/Service Provider Representatives: <ul style="list-style-type: none"> Why do you want to be on the COH? What do you hope to accomplish by your membership in the COH? 	Renewing/Returning Commissioners or those with Planning Council Experience: <ul style="list-style-type: none"> How has your commission membership been beneficial for you? What are you hoping to accomplish by continuing your membership? What are your priorities as a commissioner? 	Consumers/Unaffiliated Individuals: Questions UA HIV+ and Negatives <ul style="list-style-type: none"> Why do you want to be on the COH? What do you hope to accomplish by your membership in the COH? Are you willing to participate in further trainings? 	
Oral Communication		5	
Written Communication: (based on application and other material)		5	
Commitment & Communication Sub-total (10)		10	

Scoring Criteria		Points Available	Points Earned
II. HIV/AIDS/STIs Knowledge: Professional, personal, and/or academic knowledge about HIV/AIDS and related issues including STIs.			
HIV Workforce/Service Provider Representatives: <ul style="list-style-type: none"> How knowledgeable are you about LA County's STI/HIV epidemiological profile and service delivery network? What have you learned from your work or community service experience on how to improve health outcomes for PLWHA? 	Renewing/Returning Commissioners or those with Planning Council Experience: <ul style="list-style-type: none"> What areas of the County's STD/HIV epidemiological profile and service delivery network are underrepresented in the COH's discussions? What have you learned from your experience with the Commission on how to improve health outcomes? What type of additional support will you need to increase your capacity? 	Consumers/Unaffiliated Individuals: Questions UA HIV+ and Negatives <ul style="list-style-type: none"> What is it that you know about HIV/STIs in Los Angeles County? What challenges are you aware of? 	
HIV/AIDS KNOWLEDGE Sub-total (15)		15	

<p>III. PRIOR COMMUNITY PLANNING EXPERIENCE: Planning experience can be measured by work performed with the commission or other, similar body(ies) or community groups, effective participation at the committee level and/or work groups. Candidate should demonstrate data-driven critical thinking across broad issues affecting multiple target populations, good judgement, consensus building skills and experience, respect for colleagues, and a track record for substantively contributing to a group work and effectiveness.</p>		
<p>HIV Workforce/Service Provider Representatives:</p> <ul style="list-style-type: none"> • What qualities are essential to being an effective planner? • What other planning experience have you had within this field or the community. • What do you hope to learn professionally/personally from being a member of the COH? 	<p>Renewing/Returning Commissioners or those with Planning Council Experience:</p> <ul style="list-style-type: none"> • (Returning/Renewing) What challenges have you experienced in your time on the Commission? If those challenges arise again, how do you plan to overcome them? • In what ways have you become a more effective collaborative planner? 	<p>Consumers/Unaffiliated Individuals: Questions UA HIV+ and Negatives</p> <ul style="list-style-type: none"> • Have you been a part of any group related to HIV or healthcare? If so, tell us about those experiences. • Would you like to tell us about any times where you had to consider opinions different than your own?
PRIOR PLANNING EXPERIENCE Sub-total (10)		10
<p>IV. COLLABORATION: Ability to create unique partnerships with fellow Commissioners, organizations, bodies, and / or the public that improve community health.</p>		
<p>HIV Workforce/Service Provider Representatives:</p> <ul style="list-style-type: none"> • Provide some examples of how you have collaborated with other agencies and individuals to meet the needs of your clients? 	<p>Renewing/Returning Commissioners or those with Planning Council Experience:</p> <ul style="list-style-type: none"> • How have you used your COH membership to demonstrate or advance community-based collaborations? • What steps have you taken to encourage others to collaborate? • (Returning) What conflicts, if any, have you had with other commissioners? Have those conflicts been resolved? 	<p>Consumers/Unaffiliated Individuals: Questions UA HIV+ and Negatives</p> <ul style="list-style-type: none"> • Would you like to tell us what you would like to work on as a member of the Commission on HIV? • What are some times that you worked with a team?
COLLABORATION Sub-total (10)		10

Scoring Criteria		Points Available	Points Earned
V. HIV Experience: Prior work/volunteer experience in HIV/AIDS service delivery (practical experience) and/or in public policy, or legislative fields.			
HIV Workforce/Service Provider Representatives: <ul style="list-style-type: none"> What skills and abilities have you developed because of your past/current work in the HIV/STI field? How will you use those skills as a potential new member? What are one or two goals you have to improve health outcomes for people living with HIV? 	Renewing/Returning Commissioners or those with Planning Council Experience: <ul style="list-style-type: none"> How have you grown personally or professionally from your Commission membership? What areas of professional or personal development do you feel would make you a more efficient member of the Commission? 	Consumers/Unaffiliated Individuals: Questions UA HIV+ and Negatives <ul style="list-style-type: none"> What experience or knowledge do you have around HIV to be an effective member of the Commission on HIV? How can we help you to develop skills or experience to help you become a more effective member of the Commission on HIV? 	
HIV Experience Sub-total (10)		10	
VI. UNDERSTANDING OF THE NEEDS OF HIGHLY IMPACTED POPULATIONS: This domain can be measured by examples of past and current activities that promote awareness and personal responsibility towards understanding the needs of highly impacted populations. Populations are defined as different genders, races, ethnicities, youth, Unaffiliated Consumers (UA), and people with HIV/AIDS (PLWHA). Examples of activities include, but not limited to, participation in training tackling HIV and racism, cultural and linguistic sensitivity, knowledge of the needs of diverse populations, and ability to understand and interpret data accurately. *Please do not skip this section.			
HIV Workforce/Service Provider Representatives: <ul style="list-style-type: none"> What issues of concern to impacted populations (“populations” defined above) would you like to bring to the Commission’s discussions? How can the Commission help you to gain a better understanding of impacted populations you are unfamiliar with? 	Renewing/Returning Commissioners or those with Planning Council Experience: <ul style="list-style-type: none"> What populations have you learned about in your time on the COH? What are some populations you are still unfamiliar with? What types of info or resources do you need to support your education with these populations? How would you use existing resources and information to respectfully engage with those populations? 	Consumers/Unaffiliated Individuals: Questions UA HIV+ and Negatives <ul style="list-style-type: none"> What do you feel is being missed in HIV/STI care and prevention in Los Angeles County? 	
UNDERSTANDING OF THE NEEDS OF HIGHLY IMPACTED POPULATIONS Sub-total (10)		10	

Scoring Criteria		Points Available	Points Earned
VII. EFFECTIVE REPRESENTATION: The candidate’s demonstrated ability to act as a subject matter expert and use their expertise to represent their constituency and other perspectives represented in the COH by respectfully communicating needs, interests and concerns of the whole planning body and to present opportunities for the Commission to meet those needs. The Commission membership requires and provides ongoing training on the needs of all populations affected by HIV and STIs.			
HIV Workforce/Service Provider Representatives: <ul style="list-style-type: none"> Which populations do you work with? What is your understanding of equity versus equality? Why do you feel it’s important? 	Renewing/Returning Commissioners or those with Planning Council Experience: <ul style="list-style-type: none"> As a Commissioner, how have you sought out education to gain an understanding of HIV and STIs in those populations you have the least experience with? From your perspective, what other population(s) are underserved in Los Angeles County? 	Consumers/Unaffiliated Individuals: Questions UA HIV+ and Negatives <ul style="list-style-type: none"> What specific population(s) are you familiar with? Can you think of an example of how the Commission might help you understand unfamiliar populations? 	
EFFECTIVE REPRESENTATION Sub-total (10)		10	
VIII. RELIABILITY: Capacity to use and apply unique abilities and proficiencies to fulfill membership responsibilities and in the overall improvement of Commission work quality and decision-making.			
HIV Workforce/Service Provider Representatives: <ul style="list-style-type: none"> How does reliability play a role in achieving your goals in your professional/personal life? How would you use your reliability in the Commission? 	Renewing/Returning Commissioners or those with Planning Council Experience: <ul style="list-style-type: none"> Beyond your Commission membership, how have you demonstrated reliability in your community? What type of help would you need to continue your efforts? 	Consumers/Unaffiliated Individuals: Questions UA HIV+ and Negatives <ul style="list-style-type: none"> What does reliability mean to you? 	
RELIABILITY Sub-total (10)		10	
X. <ul style="list-style-type: none"> Are any questions you want to ask us? Are there any questions that you came prepared to answer that we did not ask you? 			
INTERVIEW FEEDBACK: This is the interviewee’s opportunity to give us feedback. Sub-total (15)		15	
TOTAL		100 pts. Max	

INTERVIEWER NOTES:



2022 MEMBERSHIP ROSTER | UPDATED 11.30.22

SEAT NO.	MEMBERSHIP SEAT	Commissioners Seated	Committee Assignment	COMMISSIONER	AFFILIATION (IF ANY)	TERM BEGIN	TERM ENDS	ALTERNATE
1	Medi-Cal representative			Vacant		July 1, 2021	June 30, 2023	
2	City of Pasadena representative	1	EXC SBP	Erika Davies	City of Pasadena Department of Public Health	July 1, 2022	June 30, 2024	
3	City of Long Beach representative	1	OPS	Everardo Alvizo, LCSW	Long Beach Health & Human Services	July 1, 2021	June 30, 2023	
4	City of Los Angeles representative	1	PP	Ricky Rosales	AIDS Coordinator's Office, City of Los Angeles	July 1, 2022	June 30, 2024	
5	City of West Hollywood representative	1	PP&A	Derek Murray	City of West Hollywood	July 1, 2021	June 30, 2023	
6	Director, DHSP	1	EXC PP&A	Mario Pérez, MPH	DHSP, LA County Department of Public Health	July 1, 2022	June 30, 2024	
7	Part B representative	1	PP&A	Karl Halfman, MA	California Department of Public Health, Office of AIDS	July 1, 2022	June 30, 2024	
8	Part C representative			Vacant		July 1, 2022	June 30, 2024	
9	Part D representative	1	SBP	Mikhaela Cielo, MD	LAC + USC MCA Clinic, LA County Department of Health Services	July 1, 2021	June 30, 2023	
10	Part F representative	1	PP	Jerry D. Gates, PhD	Keck School of Medicine of USC	July 1, 2022	June 30, 2024	
11	Provider representative #1	1	OPS	Carlos Moreno	Children's Hospital Los Angeles	July 1, 2021	June 30, 2023	
12	Provider representative #2	1	TBD	Andre Molette	Men's Health Foundation	July 1, 2022	June 30, 2024	
13	Provider representative #3	1	SBP	Harold Glenn San Agustin, MD	JWCH Institute, Inc.	July 1, 2021	June 30, 2023	
14	Provider representative #4	1	PP&A	LaShonda Spencer, MD	Charles Drew University	July 1, 2022	June 30, 2024	
15	Provider representative #5	1	SBP	Thomas Green	APAIT/Special Services for Groups (SSG)	July 1, 2021	June 30, 2023	
16	Provider representative #6	1	PP&A	Anthony Mills, MD	Men's Health Foundation	July 1, 2022	June 30, 2024	
17	Provider representative #7	1	EXC OPS	Alexander Luckie Fuller	APLA	July 1, 2021	June 30, 2023	
18	Provider representative #8	1	PP	Martin Sattah, MD	Rand Shrader Clinic, LA County Department of Health Services	July 1, 2022	June 30, 2024	
19	Unaffiliated consumer, SPA 1			Vacant		July 1, 2021	June 30, 2023	
20	Unaffiliated consumer, SPA 2			Vacant		July 1, 2022	June 30, 2024	
21	Unaffiliated consumer, SPA 3			Vacant		July 1, 2021	June 30, 2023	Alasdair Burton (PP)
22	Unaffiliated consumer, SPA 4			Vacant		July 1, 2022	June 30, 2024	
23	Unaffiliated consumer, SPA 5	1	EXC SBP	Kevin Stalter	Unaffiliated Consumer	July 1, 2021	June 30, 2023	
24	Unaffiliated consumer, SPA 6	1	OPS	Jayda Arrington	Unaffiliated Consumer	July 1, 2022	June 30, 2024	
25	Unaffiliated consumer, SPA 7			Vacant		July 1, 2021	June 30, 2023	Mallery Robinson (SBP)
26	Unaffiliated consumer, SPA 8	1	EXC PP&A	Kevin Donnelly	Unaffiliated Consumer	July 1, 2022	June 30, 2024	
27	Unaffiliated consumer, Supervisorial District 1			Vacant		July 1, 2021	June 30, 2023	
28	Unaffiliated consumer, Supervisorial District 2			Vacant		July 1, 2022	June 30, 2024	
29	Unaffiliated consumer, Supervisorial District 3	1	TBD	Arlene Frames	Unaffiliated Consumer	July 1, 2021	June 30, 2023	Eduardo Martinez (SBP/PP)
30	Unaffiliated consumer, Supervisorial District 4			Vacant		July 1, 2022	June 30, 2024	
31	Unaffiliated consumer, Supervisorial District 5			Vacant		July 1, 2021	June 30, 2023	Jose Magana (OPS)
32	Unaffiliated consumer, at-large #1			Vacant		July 1, 2022	June 30, 2024	
33	Unaffiliated consumer, at-large #2	1	OPS PP&A	Joseph Green	Unaffiliated Consumer	July 1, 2021	June 30, 2023	
34	Unaffiliated consumer, at-large #3	1	PP&A	Felipe Gonzalez	Unaffiliated Consumer	July 1, 2022	June 30, 2024	
35	Unaffiliated consumer, at-large #4	1	EXC	Bridget Gordon	Unaffiliated Consumer	July 1, 2021	June 30, 2023	
36	Representative, Board Office 1	1	EXC PP&A	Al Ballesteros, MBA	JWCH Institute, Inc.	July 1, 2022	June 30, 2024	
37	Representative, Board Office 2	1	EXC	Danielle Campbell, MPH	UCLA/MLKCH	July 1, 2021	June 30, 2023	
38	Representative, Board Office 3	1	EXC PP	Katja Nelson, MPP	APLA	July 1, 2022	June 30, 2024	
39	Representative, Board Office 4	1	EXC OPS	Justin Valero, MA	No affiliation	July 1, 2021	June 30, 2023	
40	Representative, Board Office 5			Vacant		July 1, 2022	June 30, 2024	
41	Representative, HOPWA	1	PP&A	Jesus Orozco	City of Los Angeles, HOPWA	July 1, 2021	June 30, 2023	
42	Behavioral/social scientist	1	EXC PP	Lee Kochems	Unaffiliated Consumer	July 1, 2022	June 30, 2024	
43	Local health/hospital planning agency representative			Vacant		July 1, 2021	June 30, 2023	
44	HIV stakeholder representative #1			Vacant		July 1, 2022	June 30, 2024	
45	HIV stakeholder representative #2	1	SBP	Paul Nash, CPsychol AFBPsS FHEA	University of Southern California	July 1, 2021	June 30, 2023	
46	HIV stakeholder representative #3	1	TBD	Pearl Doan	No affiliation	July 1, 2022	June 30, 2024	
47	HIV stakeholder representative #4	1	TBD	Redeem Robinson	No affiliation	July 1, 2021	June 30, 2023	
48	HIV stakeholder representative #5			Vacant		July 1, 2022	June 30, 2024	
49	HIV stakeholder representative #6	1	PP	Felipe Findley, PA-C, MPAS, AAHIVS	Watts Healthcare Corp	July 1, 2021	June 30, 2023	
50	HIV stakeholder representative #7	1	PP&A	William D. King, MD, JD, AAHIVS	W. King Health Care Group	July 1, 2022	June 30, 2024	
51	HIV stakeholder representative #8	1	OPS	Miguel Alvarez	No affiliation	July 1, 2022	June 30, 2024	
TOTAL:		35						

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

LOA: Leave of Absence

Overall total: 39



DRAFT - PROPOSED 2022 MEMBERSHIP ROSTER | UPDATED 10.12.22

SEAT NO.	MEMBERSHIP SEAT	Commissioners Seated	Committee Assignment	COMMISSIONER	AFFILIATION (IF ANY)	TERM BEGIN	TERM ENDS	ALTERNATE
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5	City of West Hollywood representative	1	PP&A	Derek Murray	City of West Hollywood	July 1, 2021	June 30, 2023	
6	Director, DHSP	1	EXC PP&A	Mario Pérez, MPH	DHSP, LA County Department of Public Health	July 1, 2022	June 30, 2024	
7	Part B representative	1	PP&A	Karl Halfman, MA	California Department of Public Health, Office of AIDS	July 1, 2022	June 30, 2024	
8	Part C representative			Vacant		July 1, 2022	June 30, 2024	
9	Part D representative	1	SBP	Mikhaela Cielo, MD	LAC + USC MCA Clinic, LA County Department of Health Services	July 1, 2021	June 30, 2023	
10	Part F representative	1	PP	Jerry D. Gates, PhD	Keck School of Medicine of USC	July 1, 2022	June 30, 2024	
11	Provider representative #1	1	OPS	Carlos Moreno	Children's Hospital Los Angeles	July 1, 2021	June 30, 2023	
12	Provider representative #2			Andre Molette	Men's Health Foundation	July 1, 2022	June 30, 2024	
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14	Provider representative #4	1	PP&A	LaShonda Spencer, MD	Charles Drew University	July 1, 2022	June 30, 2024	
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22	Unaffiliated consumer, SPA 4			Vacant		July 1, 2022	June 30, 2024	
23	Unaffiliated consumer, SPA 5	1	EXC SBP	Kevin Stalter (LOA)	Unaffiliated Consumer	July 1, 2021	June 30, 2023	
24	Unaffiliated consumer, SPA 6	1	OPS	Jayda Arrington	Unaffiliated Consumer	July 1, 2022	June 30, 2024	
25	Unaffiliated consumer, SPA 7			Vacant		July 1, 2021	June 30, 2023	Mallery Robinson (SBP)
26	Unaffiliated consumer, SPA 8	1	EXC PP&A	Kevin Donnelly	Unaffiliated Consumer	July 1, 2022	June 30, 2024	
27	Unaffiliated consumer, Supervisorial District 1			Vacant		July 1, 2021	June 30, 2023	
28	Unaffiliated consumer, Supervisorial District 2			Bridget Gordon		July 1, 2022	June 30, 2024	
29	Unaffiliated consumer, Supervisorial District 3			Arlene Frames	Unaffiliated Consumer	July 1, 2021	June 30, 2023	Eduardo Martinez (SBP/PP)
30	Unaffiliated consumer, Supervisorial District 4			Vacant		July 1, 2022	June 30, 2024	
31	Unaffiliated consumer, Supervisorial District 5			Felipe Gonzalez		July 1, 2021	June 30, 2023	Jose Magana (OPS)
32	Unaffiliated consumer, at-large #1			Vacant		July 1, 2022	June 30, 2024	
33	Unaffiliated consumer, at-large #2	1	OPS PP&A	Vacant	Unaffiliated Consumer	July 1, 2021	June 30, 2023	
34	Unaffiliated consumer, at-large #3	1	PP&A	Vacant	Unaffiliated Consumer	July 1, 2022	June 30, 2024	
35	Unaffiliated consumer, at-large #4	1	EXC	Vacant	Unaffiliated Consumer	July 1, 2021	June 30, 2023	
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37	Representative, Board Office 2	1	EXC	Danielle Campbell, MPH	UCLA/MLKCH	July 1, 2021	June 30, 2023	
38	Representative, Board Office 3	1	EXC PP	Katja Nelson, MPP	APLA	July 1, 2022	June 30, 2024	
39	Representative, Board Office 4	1	EXC OPS	Justin Valero, MA	No affiliation	July 1, 2021	June 30, 2023	
40	Representative, Board Office 5	1	SBP	Michael Cao, MD	Golden Heart Medical	July 1, 2022	June 30, 2024	
41	Representative, HOPWA	1	PP&A	Jesus Orozco	City of Los Angeles, HOPWA	July 1, 2021	June 30, 2023	
42	Behavioral/social scientist	1	EXC PP	Lee Kochems	Unaffiliated Consumer	July 1, 2022	June 30, 2024	
43	Local health/hospital planning agency representative			Vacant		July 1, 2021	June 30, 2023	
44	HIV stakeholder representative #1			Alasdair Burton	No affiliation	July 1, 2022	June 30, 2024	
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47	HIV stakeholder representative #4			Redeem Robinson	All Souls Movement	July 1, 2021	June 30, 2023	
48	HIV stakeholder representative #5			Mary Cummings	Bartz-Altadonna Community Center	July 1, 2022	June 30, 2024	
49	HIV stakeholder representative #6	1	PP	Felipe Findley, PA-C, MPAS, AAHIVS	Watts Healthcare Corp	July 1, 2021	June 30, 2023	
50	HIV stakeholder representative #7	1	PP&A	William D. King, MD, JD, AAHIVS	W. King Health Care Group	July 1, 2022	June 30, 2024	
51	HIV stakeholder representative #8	1	OPS	Miguel Alvarez	No affiliation	July 1, 2022	June 30, 2024	
TOTAL:		32						

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