



TERRA LAWSON-REMER

SUPERVISOR THIRD DISTRICT
COUNTY OF SAN DIEGO BOARD OF SUPERVISORS

AGENDA ITEM

DATE: June 24th, 2025

TO: BOARD OF SUPERVISORS

SUBJECT: Appointments

Recommendation:

Supervisor Terra Lawson-Remer

Waive Board Policy A-135, "Process for Board of Supervisors Appointments to the Retirement Board," and appoint Ashley Rodriguez Thompson to the BOARD OF RETIREMENT, Seat 5, for a term to start on 07/01/2025 and to expire 07/01/2028.

Respectfully submitted,

A handwritten signature in blue ink, appearing to read "Terra Lawson-Remer", is written over a faint, larger signature.

Vice Chair Terra Lawson-Remer, Supervisor Third District

Cipriano Vargas, Director of Organizing



COUNTY OF SAN DIEGO

APPLICATION FOR COUNTY OF SAN DIEGO BOARD, COMMISSION, OR COMMITTEE

INSTRUCTIONS: Please complete this form in its entirety. Be sure to include the full title of the Board, Commission or Committee for which you desire consideration. Note the additional requirements listed at the bottom of the second page.

(For Official Use Only)

Please note that this application is a public record subject to disclosure. This application will be active for a period of one year. After one year, it is necessary to file a new application for another year of eligibility.

Submit the completed application to the Clerk of the Board of Supervisors, BCC Desk, 1600 Pacific Highway, Room 402, San Diego, CA 92101-2471 or via e-mail at bcc@sdcounty.ca.gov

Rodriguez Thompson

Ashley

Last Name

First Name

Retirement, Board Of

District 1

Name of Board, Committee, or Commission to Which You are Applying for Membership

Supervisorial
District You Live In

County boards, commissions, and committees meet at times mutually satisfactory to the members. Day meetings are more common than evening meetings. Will you be able to schedule your time accordingly? ☒ Yes ☐ No

Please list any time restrictions

What are your principal areas of interest in County Government?

My principle area of interest is the County's long-term ability to meet the needs of residents which requires both operational and reserve funds, as well as a staff that is considered and cared for during and after their tenure as an employee. The county has a large staff that bears the responsibility of meeting constituent needs for health, environment, infrastructure, and more and serve as educators to the community at large. Especially in light of funding challenges, we must be critical and creative in order to continue meeting growing demands in the region and I am interested in supporting our ability to do that via the Retirement Board.

List all County Boards, Commissions or Committees of which you are a current member.

Not a current member ☐

Committee Name

Date Appointed

Committee Name	Date Appointed

List past County appointments with dates served, and other past or present community or public service appointments.

Not a current member ☐

Committee/Organization Name

Dates Served

STATEMENT OF OCCUPATIONAL EXPERIENCE

San Diego Community Power

Current Employer

Local Government Affairs Manager

1.5 years

Job Title

Length of Employment

Previous Employers

Position Title

Length of Employment

Voice of San Diego

Development Director

3.5 years

inewssource

Development Manager

2.5 years

Center on Policy Initiatives

Development Coordinator

3 years

KPBS

Diversity, Grants & Community
Engagement Manager

6 years

What experience or special knowledge can you bring to your area(s) of interest?

I spent the bulk of my career in resource development/fundraising and community engagement. Thus, I bring 15 years experience in budget and resource acquisition for nonprofit and public entities, as well as strategic planning, board management, and civic education. I am versed on both municipal and nonprofit budget processes and balancing short term needs with long term goals, while considering external factors. In addition, I previously worked in a research think tank that focused on worker organizing and rights, and therefore understand labor union. Last, the organizations I currently and previously worked for align with my values to center transparency and public participation, which would be at the center of my service on this board.

Please list community organizations to which you belong:

Sherman Heights Community Center, Board member League of Women Voters, Board member YouthWill, Board member Victory Fund Campaign Board, member San Diego Leadership Alliance, committee member

Please describe your ethnic origin:

HISPANIC/LATINO: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

Select the gender you identify as:

Female

What is your age?

35-44 years old

What is your total income?

\$150,000 or greater

NOTE: Candidates for the Assessment Appeals Board, County Hearing Officer, Eye Gnat Abatement

Appeals Board, Fly Abatement and Appeals Board and/or Planning Commission, are required to submit evidence of their qualifications and a Statement of Incompatible Activities Related to County Duties (Form 519) that can be found on the Clerk of the Board's website at: www.sandiegocounty.gov/content/sdc/cob/forms.html. Candidates may be asked to provide additional information.

Membership qualifications for all County Boards, Commissions and Committees may be accessed through the Clerk of the Board's website at www.sandiegocounty.gov/cob/bcac/ or by calling (619) 531-5600. This Application will be considered complete when such requirements are provided by the applicant.

By signing below, I declare that the information provided above is accurate and complete to the best of my knowledge.

Ashley Rodriguez Thompson

4/15/2025

Applicant's Signature

Date

CONTACT INFORMATION

Note: Personal information may be withheld from public view as allowed by law.

Rodriguez Thompson	Ashley	
<i>Last Name</i>	<i>First Name</i>	
Retirement, Board Of		<i>District 1</i>
<i>Name of Board, Committee, or Commission to Which You are Applying for Membership</i>		<i>Supervisory District You Live In</i>

[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
<i>Home Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Mailing Address (if different than home address)</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Business Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Home Phone #</i>	<i>Business Phone #</i>		
[REDACTED]			
<i>Mobile Phone #</i>	<i>Business Phone #</i>		
[REDACTED]			
<i>E-Mail Address</i>			



JOEL ANDERSON

SUPERVISOR, SECOND DISTRICT
SAN DIEGO COUNTY BOARD OF SUPERVISORS

AGENDA ITEM

DATE: June 24, 2025

TO: Board of Supervisors

RE: SUBJECT: VARIOUS APPOINTMENTS (DISTRICT: 2)

RECOMMENDATION(S): SUPERVISOR JOEL ANDERSON

Appoint John Sullivan to SAN DIEGO MILITARY AND VETERANS ADVISORY COUNCIL, Seat no. 6, for a term to expire June 24, 2029.

BACKGROUND

John Sullivan
Alpine 91901

Respectfully submitted,

A handwritten signature in blue ink, appearing to read "Joel Anderson", is written over a faint, light blue circular stamp. The signature is fluid and cursive.

Joel Anderson, Supervisor, Second District



COUNTY OF SAN DIEGO

APPLICATION FOR COUNTY OF SAN DIEGO
BOARD, COMMISSION, OR COMMITTEE

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(For Official Use Only)

Please note that this application is a public record subject to disclosure. This application will be active for a period of one year. After one year, it is necessary to file a new application for another year of eligibility.

Submit the completed application to the Clerk of the Board of Supervisors, BCC Desk, 1600 Pacific Highway, Room 402, San Diego, CA 92101-2471 or via e-mail at bcc@sdcounty.ca.gov

Sullivan	John
_____ Last Name	_____ First Name
San Diego Military And Veterans Advisory Council	District 2
_____ Name of Board, Committee, or Commission to Which You are Applying for Membership	_____ Supervisorial District You Live In

County boards, commissions, and committees meet at times mutually satisfactory to the members. Day meetings are more common than evening meetings. Will you be able to schedule your time accordingly? ☒ Yes ☐ No

I work Monday through Friday until 2:30 but will be able to use personal time if a meeting fall during my work day

Please list any time restrictions

What are your principal areas of interest in County Government?

I am a veteran and just want to continue to serve the veteran and military community

List all County Boards, Commissions or Committees of which you are a current member.

Not a current member ☒ ☐

Committee Name	Date Appointed
_____	_____
_____	_____
_____	_____

List past County appointments with dates served, and other past or present community or public service appointments.

Not a current member ☐ ☒

Committee/Organization Name	Dates Served
Alpine community planning Group	2022-2025
source selection committee sd county	3/2023
_____	_____
_____	_____

STATEMENT OF OCCUPATIONAL EXPERIENCE

la mesa spring valley schools

Current Employer

sr custodian

10 + years

Job Title

Length of Employment

Previous Employers

Position Title

Length of Employment

us navy

quartermaster (E-6)

14 YEARS

VFW

national legislative committee

3 plus years

vfw

california state legislative
chairperson

2 years

vfw

post commander

5 years

What experience or special knowledge can you bring to your area(s) of interest?

I have both lived life as a service member and veteran and have seen the impacts on the national level with my work as a legislative activist on veterans issues

Please list community organizations to which you belong:

VFW, American Legion, Kiwanis, Honor Flight San Diego

Please describe your ethnic origin:

WHITE (not of Hispanic Origin): All persons having origins in any of the original peoples of Europe

Select the gender you identify as:

Male

What is your age?

45-54 years old

What is your total income?

\$50,000 to \$74,999

NOTE: Candidates for the Assessment Appeals Board, County Hearing Officer, Eye Gnat Abatement

Appeals Board, Fly Abatement and Appeals Board and/or Planning Commission, are required to submit evidence of their qualifications and a Statement of Incompatible Activities Related to County Duties (Form 519) that can be found on the Clerk of the Board’s website at: www.sandiegocounty.gov/content/sdc/cob/forms.html. Candidates may be asked to provide additional information.

Membership qualifications for all County Boards, Commissions and Committees may be accessed through the Clerk of the Board’s website at www.sandiegocounty.gov/cob/bcac/ or by calling (619) 531-5600. This Application will be considered complete when such requirements are provided by the applicant.

By signing below, I declare that the information provided above is accurate and complete to the best of my knowledge.

John Sullivan

5/12/2025

Applicant’s Signature

Date

CONTACT INFORMATION

Note: Personal information may be withheld from public view as allowed by law.

Sullivan		John	
<u>Last Name</u>		<u>First Name</u>	
San Diego Military And Veterans Advisory Council		District 2	
<u>Name of Board, Committee, or Commission to Which You are Applying for Membership</u>		<u>Supervisory District You Live In</u>	
[REDACTED]		[REDACTED]	[REDACTED]
<u>Home Street Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
<u>Mailing Address (if different than home address)</u>		<u>City</u>	<u>State</u>
[REDACTED]		[REDACTED]	[REDACTED]
<u>Business Street Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
[REDACTED]			
<u>Home Phone #</u>	<u>Business Phone #</u>		
<u>Mobile Phone #</u>	<u>Business Phone #</u>		
<u>E-Mail Address</u>			
[REDACTED]			



County of San Diego

KIMBERLY GIARDINA, DSW, MSW
DEPUTY CHIEF ADMINISTRATIVE OFFICER

HEALTH AND HUMAN SERVICES AGENCY
1600 PACIFIC HIGHWAY, ROOM 206, MAIL STOP P-501
SAN DIEGO, CA 92101-2417
(619) 515-6555 • FAX (619) 515-6556

PATTY KAY DANON
CHIEF OPERATIONS OFFICER

May 23, 2025

TO: Andrew Potter
Clerk of the Board of Supervisors

FROM: Kimberly Giardina, DSW, MSW, Deputy Chief Administrative Officer
Health and Human Services Agency

APPOINTMENT TO HIV PLANNING GROUP

1. **Action Required:** Recommend the following individuals for appointment to the HIV Planning Group (HPG) by the San Diego County Board of Supervisors (Board):
 - a. Nicole Aguilar as Recipient of other Federal HIV Programs – Housing Opportunities for Persons with AIDS (HOPWA)/Housing and Urban Development (HUD) (Seat #40), for a first four-year term.
 - b. Ivy Rooney as Prevention Intervention Representative (Seat #43), for a second four-year term.
2. **Background:** The Ryan White HIV/AIDS Treatment Extension Act of 2009 requires the County of San Diego (County) to establish and maintain the HPG to oversee prioritization of services and allocation of funding to service categories. Nicole Aguilar and Ivy Rooney have been recommended for appointment by the HPG.
3. **Reason for Requested Action and Impact:**
 - a. The recommended candidates must be appointed by the Board in accordance with the HPG Bylaws.
 - b. These appointments will ensure that the County meets federal legislative requirements.
 - c. This effort aligns with the *Engagement* goal of the Strategic Initiative to inspire civic engagement that increases access for individuals and communities to use their voice, their vote, and their experience to impact change. This effort also supports our ongoing commitment to the regional *Live Well San Diego* vision, by building a better service delivery system.

Thank you for your assistance. Please contact Dasha Dahdouh, Community Health Program Specialist, on behalf of the HPG at Dasha.Dahdouh@sdcounty.ca.gov if you have any questions regarding this action.

Sincerely,

KIMBERLY GIARDINA, DSW, MSW
Deputy Chief Administrative Officer
Health and Human Services Agency



County of San Diego

KIMBERLY GIARDINA, DSW, MSW
DEPUTY CHIEF ADMINISTRATIVE OFFICER

HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH SERVICES
5469 KEARNY VILLA ROAD, SUITE 2000, MAIL STOP P-578
SAN DIEGO, CA 92123
(619) 531-5800 • FAX (619) 542-4186

ANKITA S. KADAKIA, M.D.
INTERIM PUBLIC HEALTH OFFICER
ELIZABETH A. HERNANDEZ, Ph.D.
PUBLIC HEALTH SERVICES DIRECTOR

SAN DIEGO HIV PLANNING GROUP (HPG) ACTION ITEM INFORMATION SHEET

RECOMMENDATION FOR APPOINTMENT TO THE HIV PLANNING GROUP

DATE: January 22, 2025

ITEM: Consider and vote to recommend an appointment to the HIV Planning Group (HPG).

BACKGROUND: On January 8, 2025, the Membership Committee recommended Nicole Aguilar for HPG membership.

RECOMMENDATION:

Action Item (Membership Committee): Approve Nicole Aguilar to the HPG Seat #40: Recipient of other Federal HIV Programs – Housing Opportunities for Persons with AIDS (HOPWA)/Housing and Urban Development (HUD)

Biographical information: Nicole Aguilar

Nicole Aguilar has expressed a strong interest in joining the HPG due to her professional role at Housing and Community Development Services, where she supports the HOPWA program. With nearly five years of service with the County, Nicole recognizes the value her involvement can bring to integrating housing and HIV support services. Nicole serves on the Joint City/County HIV Housing Committee in a non-voting support role. Her familiarity with Ryan White funding, committee structures, and regular council meetings further supports her understanding of critical HIV-related service frameworks.

Nicole brings valuable insights from her collaboration with HOPWA service providers and experience referring clients to services via 211-San Diego. While acknowledging her developing expertise in HIV/AIDS-specific issues, she has expressed a strong commitment to learning and supporting the community. Her professional background includes work with homeless populations, survivors of domestic violence, and underserved communities, positioning her as a well-rounded advocate for marginalized groups. Nicole's demonstration of time management skills and ability to balance professional duties with community engagement further reinforce her readiness for HPG involvement.

This comes to the HPG as a seconded motion and is open for discussion.



County of San Diego

KIMBERLY GIARDINA, DSW, MSW
DEPUTY CHIEF ADMINISTRATIVE OFFICER

HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH SERVICES
5469 KEARNY VILLA ROAD, SUITE 2000, MAIL STOP P-578
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ANKITA S. KADAKIA, M.D.
INTERIM PUBLIC HEALTH OFFICER
ELIZABETH A. HERNANDEZ, Ph.D.
PUBLIC HEALTH SERVICES DIRECTOR

SAN DIEGO HIV PLANNING GROUP MEMBERSHIP COMMITTEE ACTION ITEM INFORMATION SHEET

RECOMMENDATION FOR REAPPOINTMENT TO THE HIV PLANNING GROUP (HPG)

DATE: January 22, 2025

ITEM: Consider and vote to recommend a reappointment to the HIV Planning Group (HPG).

BACKGROUND: On January 8, 2025, the Membership Committee reviewed Ivy Rooney's reappointment application and voted to recommend her for reappointment to the HPG.

RECOMMENDATION:

Action Item (Membership Committee): Approve the recommendation to approve the reappointment of Ivy Rooney to the HPG as the Prevention Intervention Representative, Seat 43. If approved by the HPG, the recommendation will be forwarded to the County Board of Supervisors for reappointment.

Biographical information: Ivy Rooney

Ivy Rooney began her career in HIV/AIDS pharmacy in 1991, a time when accessing life-saving treatments often required extensive advocacy due to the complexities of insurance coverage. Ivy recognizes that assisting patients in navigating insurance barriers and understanding their benefits remains as critical as ever. Over her 30-year career, Ivy's impact has extended beyond direct patient care. She has been instrumental in transforming the operations and efficiencies of specialty pharmacies, driving innovations that enhance provider and patient experiences. Since joining the HPG on April 9, 2024, she has demonstrated strong leadership in advocating for the HIV/AIDS community. Ivy is eager to continue her membership and contributions over the next four years to advance the planning body's mission and initiatives.

This comes to the HPG as a seconded motion and is open for discussion.

SAN DIEGO HIV PLANNING GROUP (HPG)



Wednesday, January 22, 2025, 3:00 PM – 5:00 PM
Southeastern Live Well Center
5101 Market Street, San Diego, CA 92114
(Tubman Chavez Room A)

To participate remotely via Zoom:



Meeting ID (access code): [REDACTED]

Password: [REDACTED]

Language translation services are available upon request at least 96 hours prior to the meeting.
Please contact HPG Support Staff via e-mail at hpg.hhsa@sdcounty.ca.gov.

A quorum for this meeting is thirteen (13)

HPG Members: Marco Aguirre Mendoza | Juan Conant | Beth Davenport | Michael Donovan | Tyra Fleming | Hector Garcia | Rosemary Garcia | Felipe Garcia-Bigley | David Grelotti | Ben Ignalino | Lori Jones | Cinnamen Kubricky (Vice-Chair) | Michael Lochner (Chair) | Skyler Miles | Veronica Nava | Shannon Paugh | Venice Price | Ivy Rooney | Stephen Spector | Rhea Van Brocklin | Jeffery Weber | Abigail West* | Michael Wimpie | Adrienne Yancey

*Participating virtually from [REDACTED]

ORDER OF BUSINESS

1. Call to order
2. Welcome, introductions, moment of silence, matters from the Chair
3. Public comment (for members of the public) – concerns/questions/suggestions for future topics
4. HPG Member Open Forum – concerns/questions/suggestions for future topics
5. **ACTION:** Approve the HPG agenda for January 22, 2025
6. Old Business:
 - a. None
7. New Business:
 - a. **Presentation:** Dental Health Services and Practices – Dr. Fadra Whyte, County of San Diego
 - b. **ACTION** (*Priority Setting and Resource Allocation Committee*): Re-allocations for FY 24 (March 1, 2024 – February 28, 2025)
 - c. **ACTION** (*Membership Committee*): Approve HPG appointments/reappointments
 - d. **ACTION** (*Membership Committee*): Approve HPG Member Expectations
 - e. **ACTION** (*Strategies and Standards Committee*): Approve Mental Health Services Standards

SAN DIEGO HIV PLANNING GROUP (HPG)

8. Routine Business:

a. **ACTION:** Approval of consent agenda for January 22, 2025 which includes:

- i. Approval of HPG minutes from November 21, 2024
- ii. Acceptance of the following committee minutes:

Steering Committee	November 19, 2024
Membership Committee	November 13, 2024; December 11, 2024
Priority Setting and Resource Allocation Committee	November 14, 2024
Medical Standards and Evaluation Committee	None
Community Engagement Group	October 16, 2024
Strategies and Standards Committee	October 1, 2024

(The following is for HPG information, not for acceptance):

CARE Partnership November 18, 2024; December 9, 2024

- iii. Committee Reports
 - 1. HPG committees
 - 2. State Office of AIDS (OA) and AIDS Drug Assistance Program (ADAP) – Abigail West
 - 3. Housing Committee Report
- iv. California HIV Planning Group (CHPG) – Mikie Lochner
- v. Administrative budget report

9. HIV, STD, and Hepatitis Branch (HSHB) Report

10. HPG Support Staff Updates

11. Announcements

12. Adjournment

Next Meeting Date: **Wednesday, February 26, 2025, at 3:00 PM – 5:00 PM**

Location: Southeastern Live Well Center, 5101 Market Street, San Diego, CA 92114 (Tubman Chavez Room A) and via Zoom.

SAN DIEGO HIV PLANNING GROUP (HPG)



Wednesday, January 22, 2025, 3:00 PM – 5:00 PM
Southeastern Live Well Center
5101 Market Street, San Diego, CA 92114
(Tubman Chavez Room A)

A quorum for this meeting is thirteen (13).

HPG Members (16): Juan Conant | Beth Davenport | Michael Donovan | Tyra Fleming | Hector Garcia | Felipe Garcia-Bigley | Ben Ignalino | Lori Jones | Mikie Lochner (Chair) | Skyler Miles | Veronica Nava | Shannon Paugh | Ivy Rooney | Rhea Van Brocklin | Jeffery Weber | Michael Wimpie

HPG Members Joining Virtually (4): Marco Aguirre Mendoza | Cinnamen Kubricky (Vice- Chair) | Stephen Spector | Abigail West

HPG Members Absent (3): Rosemary Garcia | David Grelotti | Adrienne Yancey

ORDER OF BUSINESS

Agenda Item	Discussion/Action	Follow-Up
1. Call to order	Mikie Lochner called the meeting to order at 3:03 PM and noted the presence of an in-person quorum.	
2. Welcome, roll call, moment of silence, matters from the Chair	Introductions were made by HPG members, participants attending in person, and participants online/via Zoom. A moment of silence was observed.	
3. Public comment	A member of the public expressed concern about underspending in the Partial Assistance Rental Subsidy (PARS) service category with only one month of the award year left. Additionally, they expressed concern about lack of consideration for the consumers' time when it comes to meeting attendance.	
4. HPG Member Open Forum	HPG members shared the following: <ul style="list-style-type: none">- A reminder to be mindful of the need for social support services.- A reminder about the requirement to complete the annual forms.	
5. ACTION: Approve the HPG agenda for January 22, 2025	Motion: Approve the HPG agenda for January 22, 2025 as presented with the noted changes: Agenda item 7d, "HPG Member Expectations" is not ready to be voted on and will just be discussed. Motion/Second/Count (M/S/C): Fleming/Wimpie/19-0 Abstentions: Lochner Motion carries	

SAN DIEGO HIV PLANNING GROUP (HPG)

Agenda Item	Discussion/Action	Follow-Up
6. Old Business	None	
7. New Business		
a. Presentation: Dental Health Services and Practices – Dr. Fadra Whyte, County of San Diego	<p>Dr. Whyte presented on dental health services and practices. The following discussion was held:</p> <ul style="list-style-type: none"> - Important to sustain relationships with clients and help them connect with dentists, including our own families. - There are no dental services provided by the County at this time, but there are some contracted providers that do offer these services, such as Federally Qualified Health Centers (FQHC) which are able to help with coordination via an electronic medical record. - There should be no reason that dental providers would be denying services to those living with HIV. 	Dr. Whyte to provide additional materials on the risks of skipping dental services to HPG Support Staff (HPG SS) for sharing.
b. ACTION (<i>Priority Setting and Resource Allocation Committee</i>): Reallocations for FY 24 (March 1, 2024 – February 28, 2025, the current fiscal year)	<p>Motion: Approve a decrease of funding to Emergency Housing by \$332,483 from \$1,515,998 to \$1,183,515. M/S/C: Priority Setting and Resource Allocation Committee (PSRAC)/13-0 Discussion: A member of the public expressed concern about the general housing in San Diego. Abstentions: Aguirre Mendoza, Conant, Garcia, H., Kubricky, Lochner, Nava, Van Brocklin Motion carries</p> <p>Motion: Approve an increase of funding to Psychiatric Medication Management by \$5,600 from \$11,793 to \$17,393. M/S/C: PSRAC/14-0 Abstentions: Conant, Garcia-Bigley, Ignalino, Lochner, Paugh, Spector, Van Brocklin Motion carries</p> <p>Motion: Approve an increase of funding to Oral Health by \$30,631 from \$210,940 to \$241,571. M/S/C: PSRAC/13-0 Abstentions: Aguirre Mendoza, Conant, Garcia-Bigley, Kubricky, Lochner, Paugh, Van Brocklin Motion carries</p> <p>Motion: Approve an increase of funding Outpatient Ambulatory Health Services: Primary</p>	

SAN DIEGO HIV PLANNING GROUP (HPG)

Agenda Item	Discussion/Action	Follow-Up
	<p>Care by \$296,252 from \$1,631,490 to \$1,928,742. M/S/C: PSRAC/13-0 Abstentions: Conant, Garcia-Bigley, Ignalino, Lochner, Paugh, Spector, Van Brocklin Motion carries</p>	
<p>c. ACTION (<i>Membership Committee</i>): Approve HPG appointments/reappointments</p>	<p>Motion: Approve Nicole Aguilar to the HPG as the Recipient of other Federal HIV Programs – Housing Opportunities for Persons with AIDS (HOPWA)/Housing and Urban Development (HUD), Seat #40. M/S/C: Membership Committee/17-0 Abstentions: Garcia-Bigley, Lochner Motion carries</p> <p>Motion: Approve the recommendation for reappointment of Ivy Rooney to the HPG as the Prevention Intervention Representative, Seat #43. M/S/C: Membership Committee/17-0 Abstentions: Garcia-Bigley, Lochner, Rooney Motion carries</p>	
<p>d. ACTION (<i>Membership Committee</i>): Approve HPG Member Expectations</p>	<p>Motion tabled until edits are finalized. Felipe Garcia-Bigley reviewed the member expectations.</p>	<p>Membership Committee to make final edits and have it reviewed by the Community Engagement Group (CEG) before bringing it to the next HPG meeting.</p>
<p>e. ACTION (<i>Strategies and Standards Committee</i>): Approve Mental Health Services Standards</p>	<p>Motion: Approve the revised Mental Health Services Standards. M/S/C: Strategies and Standards Committee/13-0 Abstentions: Davenport, Garcia-Bigley, Lochner, Paugh, Spector Motion carries</p>	
<p>8. Routine Business</p>		

SAN DIEGO HIV PLANNING GROUP (HPG)

Agenda Item	Discussion/Action	Follow-Up
<p>a. ACTION: Approval of consent agenda for January 22, 2025.</p>	<p>Motion: Approve consent agenda for January 22, 2025 as presented, which includes:</p> <ul style="list-style-type: none"> i. Approval of HPG minutes from November 21, 2024 ii. Acceptance of the following committee minutes: <ul style="list-style-type: none"> Steering Committee (November 19, 2024) Membership Committee (November 13, 2024; December 11, 2024) Priority Setting and Resource Allocation Committee (November 14, 2024) Community Engagement Group (October 16, 2024) Strategies and Standards Committee (October 1, 2024) The CARE Partnership (November 18, 2024; December 9, 2024) are for HPG information, not for acceptance: <p>M/S/C: Fleming/Jones/19-0 Abstentions: Lochner Motion carries</p>	
<ul style="list-style-type: none"> iii. Committee Reports <ul style="list-style-type: none"> 1. HPG committees 2. State Office of AIDS (OA) and AIDS Drug Assistance Program (ADAP) – Abigail West 3. Housing Committee Report iv. California HIV Planning Group (CHPG) – Mikie Lochner v. Administrative budget report 	<p>Tabled</p>	
<p>9. HIV, STD, and Hepatitis Branch (HSHB) Report</p>	<p>Patrick Loose provided the following updates:</p> <ul style="list-style-type: none"> • A Ryan White Part A partial award is expected early in the new fiscal year (FY 25) as the government is operating under a Continuing Resolution (without a budget) at present. • The FY 24 Ryan White expenditure reports through December 2024 and the 	

SAN DIEGO HIV PLANNING GROUP (HPG)

Agenda Item	Discussion/Action	Follow-Up
	link to the service utilization report were included in the meeting materials.	
10. HPG Support Staff Updates	Tabled	
11. Announcements	Tabled	
12. Adjournment	The meeting was adjourned at 5:02 PM.	
Next meeting date	Date: Wednesday, February 26, 2025 Time: 3:00 PM – 5:00 PM Location: Southeastern Live Well Center, 5101 Market Street, San Diego, CA 92114 (Tubman Chavez Room A) and via Zoom	



San Diego County HIV Planning Group (HPG)

MEMBERSHIP APPLICATION – Optional information

The mission of the HIV Planning Group is to plan for the delivery of HIV services to reduce the impact of HIV. To help us process your membership application to the HIV Planning Group, please provide all the information requested. You may enter N/A (not applicable) where appropriate. ***Please type or print clearly.*** If there is any part of the application you do not understand, please contact the HIV Planning Group Support Staff of the HIV, STD, and Hepatitis Branch (HSHB) of Public Health Services at HPG.HHSA@sdcounty.ca.gov.

Optional Personal Information (will not be filed or forwarded with the remainder of the application.)

Name:

Nicole Aguilar

I am a person living with HIV/AIDS: ☐ Yes ☒ No ☐ Decline to Answer

(NOTE: This information will only be available to the HIV Planning Group Membership Chair and Support Staff.)

If "yes," as a member of the HIV Planning Group, I am willing to self-identify as a person living with HIV/AIDS.

☐ Yes ☐ No



San Diego County HIV Planning Group (HPG)

MEMBERSHIP APPLICATION

The mission of the HIV Planning Group is to plan for the delivery of HIV services to reduce the impact of HIV. To help us process your membership application to the HIV Planning Group, please provide all the information requested. You may enter N/A (not applicable) where appropriate. **Please type or print clearly.** If there is any part of the application you do not understand, please contact the HIV Planning Group Support Staff of the HIV, STD, and Hepatitis Branch (HSHB) of Public Health Services at HPG.HHSA@sdcounty.ca.gov.

Section 1: Contact Information

Name: **Nicole Aguilar**

Home Address: **N/A**

City: **N/A**

State: **N/A**

ZIP Code: **N/A**

Home Phone Number: **N/A**

Current Employer (if applicable):

Work Address:

City:

State:

ZIP Code:

Work Phone Number: **N/A**

Cell Phone Number:

Accept Text
Messages?

☒ Yes ☐ No

Personal Email: **N/A**

Fax Number (if available):

N/A

Work Email:

Please be aware that the HIV Planning Group is a public body. You will receive emails and phone calls from HSHB and members of the HIV Planning Group. How do you prefer to receive communication?

I prefer to receive phone calls and messages at:

☐ Personal Cell ☒ Work Cell

I prefer to receive emails at:

☐ Personal Email ☒ Work Email

Section 2: Personal Information

The composition of the HIV Planning Group is required to (1) reflect the demographics of the HIV/AIDS epidemic in San Diego County, (2) include representation from a range of federally mandated categories, and 3) include representation from impacted communities. The gender, race/ethnicity, and HIV status categories on this form are required by our federal funding sources to monitor and measure reflectiveness and representation on the HIV Planning Group. By providing information for the following sections A - H, you will help ensure the HIV Planning Group reflects parity, inclusion, and representation (PIR) of those impacted by HIV/AIDS in San Diego County.

A. I am: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div><input type="checkbox"/> Male</div> <div><input checked="" type="checkbox"/> Female</div> <div><input type="checkbox"/> Non-Binary</div> <div><input type="checkbox"/> Decline to answer</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div><input type="checkbox"/> Transman</div> <div><input type="checkbox"/> Transwoman</div> <div><input type="checkbox"/> Other</div> </div>			
B. Please describe your ethnic origin. (Please check ONLY ONE, the most prominent): <div style="margin-top: 5px;"> <input type="radio"/> AMERICAN INDIAN/ALASKA NATIVE: All persons having origins in any of the original peoples of North and South America (including Central America) and who maintain cultural affiliation or community recognition. </div> <div style="margin-top: 5px;"> <input type="radio"/> ASIAN: All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. </div> <div style="margin-top: 5px;"> <input type="radio"/> BLACK/AFRICAN AMERICAN: All persons having origins in any of the original Black racial groups of Africa. </div> <div style="margin-top: 5px;"> <input checked="" type="radio"/> HISPANIC/LATINO: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race. </div> <div style="margin-top: 5px;"> <input type="radio"/> NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER: All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. </div> <div style="margin-top: 5px;"> <input type="radio"/> WHITE (not of Hispanic Origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East. </div>			
C. What is your age: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div><input type="checkbox"/> 18-24 years old</div> <div><input type="checkbox"/> 25-34 years old</div> <div><input checked="" type="checkbox"/> 35-44 years old</div> <div><input type="checkbox"/> 45-54 years old</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div><input type="checkbox"/> 55-64 years old</div> <div><input type="checkbox"/> 65-74 years old</div> <div><input type="checkbox"/> 75 years or older</div> <div><input type="checkbox"/> Decline to state</div> </div>			
D. I understand the process and procedures of the HIV Planning Group: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No E. Number of HIV Planning Group meetings attended in the last 6 months: <u>0</u> F. Number of committee meetings attended in the last 6 months: <u>0</u> <i>(It is suggested that you attend at least two (2) meetings prior to becoming a member: one (1) committee meeting and one (1) HIV Planning Group meeting.)</i>			
G. I am currently a member of the following community liaison and/or affiliated groups and/or have the following relevant experience: <div style="margin-top: 5px;"> I am lead Housing Program Analyst for HOPWA at HCDS and the POC for Joint City County HIV Housing Committee. </div>			
H. I understand that it's a requirement to participate in at least one of the committees listed below. <div style="margin-top: 5px;"> <input checked="" type="checkbox"/> Strategies and Standards Committee – 1st Tuesday of every other month <input type="checkbox"/> Steering Committee – Every 3rd Tuesday of the month <input type="checkbox"/> Membership Committee – Every 2nd Wednesday of the month <input type="checkbox"/> Priority Setting & Resources Allocation Committee – 2nd Thursday of every other month <input type="checkbox"/> Community Engagement Group – Every 3rd Wednesday of the month <input type="checkbox"/> Medical Standards & Evaluation Committee – 2nd Tuesday (4 times a year) </div>			

I. I qualify to serve as an HIV Planning Group member in one of the following seats (Please check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> General member | <input type="checkbox"/> Board of Supervisors designee: Districts 1 - 5 |
| <input type="checkbox"/> Health care providers, including Federally Qualified Health Centers (FQHC) | <input type="checkbox"/> Community-based organization serving affected populations and AIDS service organization |
| <input type="checkbox"/> Recipient of other federal HIV programs – prevention provider | <input type="checkbox"/> Recipient of other federal HIV programs – Part F, AIDS Education and Training Center and/or Ryan White dental provider |
| <input type="checkbox"/> Social service provider, including providers of housing and homeless services | <input type="checkbox"/> Local public health agency: HHSA director or designee |
| | <input type="checkbox"/> Local public health agency – PH officer or designee |
| <input type="checkbox"/> Recipient of other federal HIV programs – Veterans Administration | <input checked="" type="checkbox"/> Recipient of other federal HIV programs – HOPWA/HUD* |
| <input type="checkbox"/> Substance use treatment provider | <input type="checkbox"/> Non-elected community leader |
| <input type="checkbox"/> Mental health provider | <input type="checkbox"/> HIV testing representative |
| <input type="checkbox"/> Prevention services consumer/advocate | <input type="checkbox"/> Prevention services consumer |
| <input type="checkbox"/> Representative of individuals who formerly were federal, state, or local prisoners, were released from custody of the penal system during the preceding 3 years, and had HIV/AIDS as of the date of release | <input type="checkbox"/> Affected communities include people with HIV/AIDS, members of a federally recognized Indian tribe as represented in the population, individuals co-infected with Hepatitis B or C, and historically underserved groups and/or subpopulations |
| <input type="checkbox"/> Prevention intervention representative | <input type="checkbox"/> Hospital planning agency or health care planning agency |
| <input type="checkbox"/> Recipient of Ryan White Part C | <input type="checkbox"/> Recipient of Ryan White Part D |
| <input type="checkbox"/> State government – State Medicaid | <input type="checkbox"/> State Government – CDPH Office of AIDS (OA) Part B |

**Housing Opportunities for Persons with AIDS (HOPWA) / Housing and Urban Development (HUD)*

Please list any agency affiliations (work and or board membership):

- ☐
- ☐
- ☐

Please respond briefly to the questions below. If you need more space than provided, please attach a separate sheet of paper.

1. Why are you interested in becoming an HIV Planning Group member?

I have been professionally working on the HOPWA program for the last few years. Roles have changed within the department therefore it is more appropriate for me to attend the HPG meetings. I am also the POC for the HIV Housing Committee. It would benefit being involved in both committee's as I would be able to cross share information, advocate for the community, and support the purpose of funding/services to people living with HIV.

2. Is there anything else you would like to share with us?

N/A

3. Were you referred by someone? If so, list the name of the individual (optional):

Referred by HCDS - Staff previously on HPG was Freddy Villafan. Roles have changed within the department.

4. Do you require support or accommodations? (Transportation, childcare, etc.)

N/A

Section 4: Signature and Date

I agree that the information provided in this application (including attachments) is true and correct to the best of my knowledge.

Signature: **Nicole Aguilar** Digitally signed by Nicole Aguilar
Date: 2024.11.26 18:35:27 -08'00'

Date: _____

If any information on your application changes or you wish to withdraw your application from consideration by the HIV Planning Group Membership Committee, please contact the HIV, STD & Hepatitis Branch as soon as possible. Please note that membership interviews will be conducted as needed. If you have any other questions or comments, contact HPG Support Staff at HPG.HHSA@sdcounty.ca.gov.

SUBMIT FORM

**COUNTY OF SAN DIEGO HEALTH AND HUMAN SERVICES AGENCY
HIV, STD, and Hepatitis Branch
ATTN: HIV PLANNING GROUP SUPPORT
690 Oxford Street, Suite #301, Mail Stop: P-505
Chula Vista, CA 91911**



County of San Diego

KIMBERLY GIARDINA, DSW, MSW
DEPUTY CHIEF ADMINISTRATIVE OFFICER

HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH SERVICES
5469 KEARNY VILLA ROAD, SUITE 2000, MAIL STOP P-578
SAN DIEGO, CA 92123
(619) 531-5800 • FAX (619) 542-4186

ANKITA S. KADAKIA, M.D.
INTERIM PUBLIC HEALTH OFFICER
ELIZABETH A. HERNANDEZ, Ph.D.
PUBLIC HEALTH SERVICES DIRECTOR

SAN DIEGO HIV PLANNING GROUP MEMBERSHIP COMMITTEE ACTION ITEM INFORMATION SHEET

RECOMMENDATION FOR REAPPOINTMENT TO THE HIV PLANNING GROUP (HPG)

DATE: January 22, 2025

ITEM: Consider and vote to recommend a reappointment to the HIV Planning Group (HPG).

BACKGROUND: On January 8, 2025, the Membership Committee reviewed Ivy Rooney's reappointment application and voted to recommend her for reappointment to the HPG.

RECOMMENDATION:

Action Item (Membership Committee): Approve the recommendation to approve the reappointment of Ivy Rooney to the HPG as the Prevention Intervention Representative, Seat 43. If approved by the HPG, the recommendation will be forwarded to the County Board of Supervisors for reappointment.

Biographical information: Ivy Rooney

Ivy Rooney began her career in HIV/AIDS pharmacy in 1991, a time when accessing life-saving treatments often required extensive advocacy due to the complexities of insurance coverage. Ivy recognizes that assisting patients in navigating insurance barriers and understanding their benefits remains as critical as ever. Over her 30-year career, Ivy's impact has extended beyond direct patient care. She has been instrumental in transforming the operations and efficiencies of specialty pharmacies, driving innovations that enhance provider and patient experiences. Since joining the HPG on April 9, 2024, she has demonstrated strong leadership in advocating for the HIV/AIDS community. Ivy is eager to continue her membership and contributions over the next four years to advance the planning body's mission and initiatives.

This comes to the HPG as a seconded motion and is open for discussion.



San Diego County HIV Planning Group (HPG)

REAPPOINTMENT MEMBERSHIP APPLICATION – Optional information

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Optional Personal Information (will not be filed or forwarded with the remainder of the application.)

Name:

Ivy Rooney

I am a person living with HIV/AIDS: ☐ Yes ☒ No ☐ Decline to Answer

(NOTE: This information will only be available to the HIV Planning Group Membership Chair and Support Staff.)

If "yes," as a member of the HIV Planning Group, I am willing to self-identify as a person living with HIV/AIDS.

☒ Yes ☐ No



San Diego County HIV Planning Group (HPG)

REAPPOINTMENT MEMBERSHIP APPLICATION

The mission of the HIV Planning Group is to plan for the delivery of HIV services to reduce the impact of HIV. To help us process your membership application to the HIV Planning Group, please provide all the information requested. You may enter N/A (not applicable) where appropriate. ***Please type or print clearly.*** If there is any part of the application you do not understand, please contact the HIV Planning Group Support Staff of the HIV, STD, and Hepatitis Branch (HSHB) of Public Health Services at HPG.HHSA@sdcounty.ca.gov.

Section 1: Contact Information

Name: Ivy Rooney

Home Address:

City:

State:

ZIP Code:

Home Phone Number:

Current Employer (if applicable):

Work Address:

City:

State:

ZIP Code:

Work Phone Number:

Cell Phone Number:

Accept Text
Messages?

☒ Yes ☐ No

Personal Email:

Fax Number (if available):

Work Email:

Please be aware that the HIV Planning Group is a public body. You will receive emails and phone calls from HSHB and members of the HIV Planning Group. How do you prefer to receive communication?

I prefer to receive phone calls and messages at:

☒ Personal Cell ☒ Work Cell

I prefer to receive emails at:

☐ Personal Email ☒ Work Email

Section 2: Personal Information

The composition of the HIV Planning Group is required to (1) reflect the demographics of the HIV/AIDS epidemic in San Diego County, (2) include representation from a range of federally mandated categories, and 3) include representation from impacted communities. The gender, race/ethnicity, and HIV status categories on this form are required by our federal funding sources to monitor and measure reflectiveness and representation on the HIV Planning Group. By providing information for the following sections A - H, you will help ensure the HIV Planning Group reflects parity, inclusion, and representation (PIR) of those impacted by HIV/AIDS in San Diego County.

A. I am: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female <input type="checkbox"/> Non-Binary <input type="checkbox"/> Decline to answer <input type="checkbox"/> Transman <input type="checkbox"/> Transwoman <input type="checkbox"/> Other			
B. Please describe your ethnic origin. (Please check ONLY ONE, the most prominent): <input type="radio"/> AMERICAN INDIAN/ALASKA NATIVE: All persons having origins in any of the original peoples of North and South America (including Central America) and who maintain cultural affiliation or community recognition. <input type="radio"/> ASIAN: All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. <input type="radio"/> BLACK/AFRICAN AMERICAN: All persons having origins in any of the original Black racial groups of Africa. <input checked="" type="radio"/> HISPANIC/LATINO: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race. <input type="radio"/> NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER: All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. <input type="radio"/> WHITE (not of Hispanic Origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.			
C. What is your age: <input type="checkbox"/> 18-24 years old <input type="checkbox"/> 25-34 years old <input type="checkbox"/> 35-44 years old <input checked="" type="checkbox"/> 45-54 years old <input type="checkbox"/> 55-64 years old <input type="checkbox"/> 65-74 years old <input type="checkbox"/> 75 years or older <input type="checkbox"/> Decline to state			
D. I understand the process and procedures of the HIV Planning Group: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
E. Number of HIV Planning Group meetings attended in the last 6 months: <u>5</u>			
F. Number of committee meetings attended in the last 6 months: <u>3</u>			
<i>(It is suggested that you attend at least two (2) meetings prior to becoming a member: one (1) committee meeting and one (1) HIV Planning Group meeting.)</i>			
G. I am currently a member of the following community liaison and/or affiliated groups and/or have the following relevant experience: <div style="font-size: 1.2em; font-weight: bold;">HIV treatment and prevention</div>			
H. I understand that it's a requirement to participate in at least one of the committees listed below. <input checked="" type="checkbox"/> Strategies and Standards Committee – 1 st Tuesday of every other month <input type="checkbox"/> Steering Committee – Every 3 rd Tuesday of the month <input type="checkbox"/> Membership Committee – Every 2 nd Wednesday of the month <input type="checkbox"/> Priority Setting & Resources Allocation Committee – 2 nd Thursday of every other month <input type="checkbox"/> Community Engagement Group – Every 3 rd Wednesday of the month <input type="checkbox"/> Medical Standards & Evaluation Committee – 2 nd Tuesday (4 times a year)			

Section 3: Short Answer

Please respond briefly to the questions below. If you need more space than provided, please attach a separate sheet of paper.

1. Why are you interested in re-applying for HIV Planning Group membership?

It is important to me to bring important information relative to treatment, care and barriers that affect consumer access

Section 4: Signature and Date

I agree that the information provided in this application (including attachments) is true and correct to the best of my knowledge.

Signature: _____



Date: 1/5/2025

If any information on your application changes or you wish to withdraw your application from consideration by the HIV Planning Group Membership Committee, please contact the HIV, STD & Hepatitis Branch as soon as possible. Please note that membership interviews will be conducted as needed. If you have any other questions or comments, contact HPG Support Staff at HPG.HHSA@sdcounty.ca.gov.

SUBMIT FORM

COUNTY OF SAN DIEGO HEALTH AND HUMAN SERVICES AGENCY
HIV, STD, and Hepatitis Branch
ATTN: HIV PLANNING GROUP SUPPORT
690 Oxford Street, Suite #301, Mail Stop: P-505
Chula Vista, CA 91911