
**LOS ANGELES COUNTY
HIV PREVENTION PLANNING COMMITTEE (PPC)
A Select Committee of the Commission on HIV Health Services
600 South Commonwealth Avenue, 6th Floor· Los Angeles CA 90005-4001**

MEETING SUMMARY
Thursday, February 7, 2002
1:00 p.m.-5:00 p.m.
St. Anne's Foundation Conference Room
155 North Occidental Boulevard-Los Angeles, CA

MEMBERS PRESENT

Mario Perez	Jeff Bailey
Chi-Wai Au	Diane Brown
Sergio Avina	Gordon Bunch
Tony Bustamante	Mark Etzel
Danielle Glenn-Rivera	James Miller
Veronica Morales	Vicky Ortega
Keisha Paxton	Emma Robinson
Ricki Rosales	Gail Sanabria
Vanessa Talamantes	Nancy Wongvipat
David Zucker	

ABSENT

Ricky Bluthenthal
Sandra Cargill
Robert Douglas
Ramon Flores
Cleo Manago
Edric Mendia
Kellii Trombacco
Richard Zaldivar

STAFF PRESENT

Elizabeth Escobedo	Dean Goishi	Delia Sandoval
Gabriel Rodriguez	Darren Roberts	

ROLL CALL - Roll call was conducted. A quorum was present.

CHIPTS COLLOQUIA SERIES – Dr. Donna Futterman from Montfiore Medical Center in the Bronx presented on Working with Youth in the United States. Next month Dr. Steve Shoptaw will present on Experiences Using Post Exposure Prophylaxis as a Biobehavioral HIV Prevention Strategy.

New PPC Member Introductions:

The new PPC members were welcomed and new members introduced themselves. **Diane Brown** works as Youth Health Education Program Supervisor with the City of Long Beach Health Department. **Emma Robinson** works as Health Educator with the Antelope Valley Health Foundation. **David Zucker** works as Prevention Program Assistant for LASHANTI.

APPROVAL OF AGENDA - The Committee approved the agenda.

PUBLIC COMMENT

Gloria Medina from Los Angeles County STD Program invited everyone to a forum on March 19, 2002. The purpose of this forum is to provide an opportunity for coalitions of different organizations to get to know each other and articulate any problems they may have about HIV prevention. She provided information about that event.

Cassandra Ramirez, (cramirez@transgendercenter.org) commented that she is the Executive Director of the new Transgender Resource Center of Southern California. It is a first of its kind and it is Located on, 8350 Santa Monica Blvd., West Hollywood (www.transgendercenter.org). They facilitate linkages between the transgender community, service providers, and the public.

Antonio Bustamante commented that last night the STD Deputy Director for field services Michael Lawrence passed away. Plans for funeral services were announced. The PPC acknowledged Michael Lawrence's work and that this is a significant loss to HIV/AIDS services in CDC.

CO-CHAIRS REPORT

Jeff Bailey commented that it has been one year since he and Richard Zaldivar committed their services as PPC co-chairs. He plans to continue to serve as co-chair this coming year. He commended the PPC Retreat Adhoc committee co-chairs, Vanessa Talamantes and Veronica Morales for their work. The Committee has met about 11 times to plan for the Retreat. The purpose of the Pre-Retreat presentation today is to have a clear understanding about the goals of the Retreat.

The PPC meeting for March was rescheduled to Tuesday March 5, 2002, because the Community Planning Leadership Summit (CPLS) takes place during that week. Those attending and representing the PPC at the CPLS will be Kellii Trombacco, Sergio Avina, Vanessa Talamantes, Mark Etzel, and Nancy Wongvipat, Luis Sierra from Reach LA and member of the Youth Leadership Sub-committee will also attend. Richard Zaldivar and Jeff Bailey will be attending on behalf of UCHAPS. It was agreed, as an exception for this date only, to allow an excused notation for those PPC members who cannot attend the PPC March 5, 2002 meeting.

Letters were sent to the City of Pasadena, City of Los Angeles, City of West Hollywood, Alcohol Drug Programs Administration and TB Control requesting names of individuals for PPC membership.

Jeff Bailey commented that the California Planning Group has Youth membership seats available and asked if anyone was interested to contact him to obtain applications.

Gordon Bunch was congratulated. He has just been named Director of HIV Epidemiology Program

PRE RETREAT PROCESS

History of the PPC

Mario Perez provided a brief history of the PPC over the last eight years. Mario Perez agreed to provide copies of this presentation for the next PPC meeting.

OAPP Overview

Gunther Freehill Director of Public Affairs for OAPP, provided an OAPP Overview presentation. A handout of his presentation was included in the packet. His presentation is on the Internet and the web page was included in the packet.

Policies and Procedures

Sandra Cargill went over the Policies and Procedures, which were included in the packet. She explained that applications for membership to the PPC are accepted ongoing year round. She also explained the nomination process for selection of new PPC members.

Statement of Commitment and Attendance

Vanessa Talamantes stated that throughout the year the PPC sometimes encounters barriers to conduct business because of attendance issues. For example, not having a quorum to vote on motions that are brought to the table. All PPC members are required to sign a Statement of Commitment. She read the Statement of Commitment and all PPC members were asked to sign the forms acknowledging their commitment for 2002 planning year.

Role of the Community

David Zucker explained that we have a diverse community in Los Angeles County and it is very important that each voice is heard. He mentioned that it is important to remember that the planning of the group is only as good and representative of the community that contributes to its workplan through serving on this voting body, participating in the subcommittees or providing public comment. Also, to keep in mind that many individuals participate through the support of a government agency or CBO and that we are still community members. We live, work, socialize, and raise our families in Los Angeles County and serve on the body as planners and not as advocates. The bulk of the work is accomplished at sub-committee level and everyone is welcome to participate. David prepared a document that was included in the PPC packet called "Some Ideas About...The Role of the Community In the PPC Process." It was agreed to continue to include this document in the PPC packet.

BREAK

The Next Planning Cycle

Gabriel Rodriguez provided a presentation on the Community Planning Cycle, Comprehensive HIV Prevention Plan, and the competitive Application. He provided a detailed presentation of the work that needs to be developed by the PPC. The PPC needs to begin work this year that will generate a 2004- 2008 HIV Prevention Plan.

The following work needs to be addressed by the PPC:

1. **Needs Assessment**
2. **Assembling Resource Inventory and look** at other resources that are needed by people who are at risk for HIV to avoid infection.
3. **Conduct a Gap Analysis that identifies** met and unmet needs. This is needed for the next planning cycle, and is also needed more comprehensively for the last planning cycle. There was an ad hoc gap analysis group who did a lot of work but there is still more work that needs to be done. This needs to be completed using the EPI profile by looking at who is at risk for HIV infection and then compare it to the resource inventory. After those two steps are completed then we need to do the gap analysis. You cannot do a gap analysis without a resource inventory, a needs assessment or an Epi profile. These are sequential in order.
4. **Identify potential Strategies and interventions:**
5. **Prioritize those interventions** and identify linkages between HIV, STD, and other morbidities that are related to HIV. We need more linkages and coordination between prevention programs and HIV related programs, TB, Hepatitis, and substance use. Prioritize populations and interventions for this last planning cycle and for the next 5 years.
6. **Evaluate the HIV prevention community planning process.**

Prevention RFP: Will probably be issued in 2004 that is based on this new 2004-2008 HIV Prevention Plan.

Issues to keep in mind:

1. The continuing CDC application is due on September 2002.
2. The development of an HIV Prevention Plan and the submission of a competitive Application are due to the CDC in 2003.
3. Gaps Analysis and priority interventions must be completed for the continuing application due in September 2002. These components could also be updated for use in the 2004-2008 HIV Prevention Plan.
4. As a result of the adoption of the Continuum of Care Services Model, prevention and care services need to be integrated.
5. Work within the HIV Strategic Planning Process and the CDC Strategic Planning Process.
6. The new HIV Prevention Plan does not have to cover 5 years. If a five years plan is adopted, updates that are critical to address the changing needs of behavior risk groups and high-risk populations need to be provided.
7. If PPC focuses on the work that needs to be accomplished this year, we will be able to respond to the competitive application that is due on September 2003, with the attachment of a Comprehensive Plan. This is a joint responsibility of the PPC and well as the Health Department.
8. The PPC members and the community have a great opportunity to impact, influence and become involved on how prevention programs are molded; how they are developed for the upcoming five year planning cycle to impact and influence the prevention needs in our communities. The community can participate in the forums and sub committee level.

Sub-committee Assignments and Commitments

Jeff Bailey reiterated that one of the primary goals established by the CDC is to have a planning body and to develop a prevention plan. He asked PPC members to list their first and second choice of sub-committee preference. At the Retreat, after the breakout session, each sub-committee will be asked to give a report about the success of their work plans for this year. In preparation for the Retreat he asked PPC members to analyze their work plan, the objectives, what was accomplished, and what needs to be carried over to this coming year.

For almost two years the membership of the Operations Sub-committee has been one to two people. He stated that although PPC members were making their selection of their sub-committee preference, they might not get that choice. He discussed the sub-committee duties.

Epidemiology Overview

Virginia Hu and Mi SukYu Harlan passed out a handout and provided a presentation on AIDS Surveillance Data and its use in HIV prevention planning in Los Angeles County. They described how AIDS surveillance data is collected in Los Angeles County. It is collected either through passive reporting or active reporting mechanisms. Passive reporting is when combinations of Health Care providers, hospital clinics and laboratories report cases of AIDS to state and local health departments. Active reporting is when state and local health department's surveillance personnel collect information by contacting health care providers and reviewing medical records in hospitals and clinics. On the AIDS Case Report Form they collect information on demographic characteristics such as sex, race/ethnicity, age and locality, mode of exposure to HIV, opportunistic illnesses and virologic and immunologic status. Supplement information like prescription, use of medical and substance abuse treatment services and health insurance coverage is also collected. A presentation was also provided about the trends of HIV/AIDS in Los Angeles County. It was announced that HIV EPI Program provides regular orientation workshops on epidemiological terms and trends. The next workshop is scheduled on April 10, 2002. For more information please contact Monica Torres at 213-351-8765 (mtorres@dhs.co.la.ca.us).

RFP Process and Funding

Gabriel Rodriguez provided an overview of the RFP process and funding. He referred to a document that was included in the packet. The RFP process for Los Angeles County is an effort for Los Angeles County to operationalize the HIV Prevention Plan.

Once all the community planning, and comprehensive HIV Prevention Plan are completed an application to the CDC for funding based on that HIV Prevention Plan is submitted. An award is received from CDC to address the needs of Los Angeles County. Presently our current award is \$14.7 million. The PPC does not make funding recommendations, they make recommendations on best practices, priority populations, and interventions. Through an RFP process that describe the programs and interventions that are recommended, OAPP awards funding in these SPAs as prioritized by the PPC. After the PPC members look at the application that OAPP is submitting, a letter of concurrence needs to be provided by the PPC members to OAPP. The letter of concurrence needs to be submitted along with any continuing and any competitive application. An application needs to be submitted every year and a competitive application every 5 years. The letter of concurrence articulates that the PPC concurs that the application is consistent with the recommendations, priority interventions and populations as outlined and identified by the PPC.

Los Angeles County Strategic Planning Process

Mark Etzel provided an overview of the Los Angeles County Strategic Planning Process. This process is not a replacement for either the CHHS or PPCs work. It acknowledges that we are going to need more effective planning relationships and that there is a need to think about HIV in a broader context. It highlights the need for more effective planning relationships with a lot of different stakeholders. The primary goal is to identify new and to redefine our existing commitments to HIV prevention and care and treatment in order to achieve three things; 1.) That we decrease the incidence of HIV infection in Los Angeles County; 2.) that we decrease health and social disparities; and 3.) That we increase our capacity for sustained planning. The process is being lead by, the Core Planning Partners that includes; Chief Elected Officials, (The Los Angeles County Board of Supervisors) OAPP, and the two planning bodies, (CHHS and PPC).

UCHAPS

Mario Perez reported that UCHAPS is the Urban Coalition for HIV/AIDS Prevention Services. The CDC funds a number of jurisdictions. There are only 6 cities in the country that are funded directly by the CDC. They are Los Angeles, San Francisco, Chicago, Houston, Philadelphia and New York. It is a body made up of both Health Department and community planning members to synthesize an urban response to how we do prevention across the country. Those six cities account for about one third of all new HIV cases in the country, and about a third of all the AIDS cases diagnosed nationally over the course of the epidemic. Jeff Bailey, Dean Goishi, Richard Zaldivar, Charles Henry and Mario Perez are involved in that national planning body to inform elected officials, mostly congress about the emerging HIV prevention needs in the country and some of their challenges in urban settings.

Skills Building

Jeff Bailey reported that we have a skills building plan that we want to incorporate for the PPC and non-PPC members. This includes BRG meetings that will soon begin for organizations that are implementing programs for women at sexual risk and for injection drug users. Those meetings will provide an opportunity to bring them all

together, to ask what happened in the first year of their contract? What were the challenges? How can we get the community engaged to assist one another? We want to ensure that we consistently have updates and leadership skills building opportunities for the PPC and Non-PPC members.

ANNOUNCEMENTS

Vanessa Talamantes reminded all members to bring their last year's sub-committee work plans from last year to the Retreat, and their "HIV Prevention Plan."

Jeff Bailey stated that the Executive sub-committee for the February 19, 2002 has been canceled because that is the week of the Retreat. It has been rescheduled for the week following the Retreat on Tuesday February 26, 2002.

Danielle Glenn-Rivera reported that the Commission would be having open nominations meeting on February 22, 2002. She reminded the PPC of the need to provide a representative to fill the HIV positive seat. Vickie Ortega and Edric Mendia will probably get approved to the Commission. Those three individuals will represent the PPC at the Commission. She reminded the co-chairs to attend the Joint Executive meetings of the Commission.

Ernesto Hinojos, reported about resources and training that OAPP will have for the entire year. Information about new trainings that are being developed is being sent to all the Prevention Directors and various prevention contractors that are funded by OAPP and also to the directors of care service organizations.

ADJOURNMENT

The second roll call was conducted. The meeting was adjourned.

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