

Minutes

Date: Wednesday, July 22, 2026, **Time:** 1:00 PM - 3:00 PM

Physical Location(s)	Remote Access	Landline Access
- ACPHD 1100 San Leandro Blvd, Redwood RM, 1st Floor. 2500 Bates Ave., Ste B. Concord, 94520	Click Here Zoom Meeting ID: 885 3437 8444 Passcode: 2026	Call into meeting: 1(408)-961-3929 1(408)-961-3927 Zoom Meeting ID: 885 3437 8444# Passcode: 2026#

IP: In-Person | R: Remote | NP: Not Present

Present: Aliaa B. (IP), Angel D. (IP), April L. (IP), Bryan H. (IP), Barbara G-A. (IP), Carlos A. (IP), Damon P. (IP), Diana D. (IP), Duran R. (IP), Ebony G. (IP), Ilana N. (IP), Ji-Sook O. (IP), Joghi K. (IP), LeRoy B. (R) Megan C. (IP), Moises C. (IP), Martin E. (R), Sharon D. (IP), Rob N-N. (IP), Zeus H. (NP),

Staff: Camisha N. (IP), Dot T. (IP), Luis L. (IP), Ben C. (IP), Nancy C. (R), Edgard E. (IP), Courtney K. (IP) Gabby C. (R), Danny A. (R), Stephanie C. (R), George A. (R), Michele N-H. (IP),

Guests: Will C. (IP), Michele F. (R), Mindy D. (IP),

Mission: The Oakland Transitional Grant Area Planning Council will provide comprehensive planning, prioritization, and resource allocation regarding HIV/AIDS services in Alameda and Contra Costa Counties that are inclusive, equitable, compassionate, and respectful of human rights.

I. **Call to Order - 1:06 PM**

1:00 PM

- Moment of Silence
- Introductions
- Mission Statement
- Group Norms

II. **Review and Approve Agenda - 1:18 PM**

Rob recommended adding the Ad Hoc Committee to the Subcommittee Reports/Announcements section moving forward to remain as a standing report until the Johns Hopkins modeling project is completed.

Motion: Ebony

Second: Aliaa



Action: The agenda was approved with the addition of the Ad Hoc Committee to the Subcommittee Reports.

III. **Review and approve June Minutes – 1:20 PM**

In section VII, item PLWHA Priorities Report, Rob acknowledged the language should be revised to “The report was approved by the PLWHA Committee and presented to PPAC.” In section VI, Megan pointed out that under the Bay Area Community Health presentation, the program title was corrected to “HIV Care, Prevention, and TransVision.” Bryan and Ebony corrected the spelling of Will Cooke’s and Aliaa’s names.

Motion: Carlos

Second: Shelley

Action: The June 2026 minutes were approved with the suggested edits.

IV. **Public Comment for Agendized – 1:18 PM**

No public comment was received for agendized items.

V. **Subcommittee Reports/Announcements: Workplan benchmarks & deadlines**

- **Executive Committee - 1:25 PM**

Damon reported that the Executive Committee continued making revisions to the Planning Council Bylaws to ensure consistency across the standing committees. The Planning Council portion of the Memorandum of Understanding (MOU) has been completed, and the committee is awaiting the County's and the Recipient staff's review and/or edits before the document can be finalized. Members confirmed that the Executive Committee remains on track with its Workplan.

Bryan also provided a budget update. Ben reviewed the Planning Council budget, including funding designated for swag, food, incentives, and related expenses. Staff clarified that funding requested for current-year activities has been allocated. Members also clarified that swag funding is part of the overall Planning Council budget and is separate from funds designated specifically for the PLWHA Town Hall.

- **Membership**

Shelley reported that an interview had been scheduled with an individual interested in joining the Planning Council; however, the applicant later withdrew the application and indicated an interest in participating as a community member instead. Staff reminded members that the Membership Committee now meets once every three months, with the next meeting scheduled for September. At that meeting, the committee plans to begin updating the New Member Orientation packet and revising the Membership Handbook.

- **Planning, Priorities, and Allocation Committee**



Aliaa reported that PPAC discussed conflict-of-interest requirements and clarified what members may vote on during the Priority Setting and Resource Allocation process. It was determined that Planning Council members may participate in votes involving service priorities and allocations but should not participate in decisions selecting specific agencies to receive funding. PPAC also reviewed the Priority Setting ranking process and confirmed that the committee remains on track with its Workplan.

- **People Living with HIV and AIDS**

Bryan reported that the PLWHA Committee continued preparing for the Town Hall and reviewing its Standard Operating Procedures (SOPs) for a final update. Members discussed the status of outreach materials and swag for upcoming community events. English- and Spanish-language posters and digital outreach materials were expected to be completed in early August for distribution around Oakland Pride. The committee also planned to use remaining swag from the prior year for Pride outreach activities.

Members clarified that funding for the Town Hall remains separated from the broader Planning Council swag budget and that funding requested for current-year activities is available.

- **Quality Services Committee**

Megan reported that QSC focused primarily on revising the Assessment of the Administrative Mechanism (AAM) subrecipient survey. The committee completed a substantial portion of the revisions to the prior year's survey and plans to finish the remaining work during the August meeting. QSC will also revise the Recipient survey.

The committee plans to finalize both surveys in August so staff can distribute them in mid-to-late August. QSC expects to review survey responses during the September meeting and prepare the AAM responses for presentation to the Planning Council in October or November, depending on agenda availability.

- **Ad Hoc Committee**

Rob reported that the Ad Hoc Committee is waiting for the Johns Hopkins research team to schedule its next follow-up meeting, which is expected later in the summer. The project remains on schedule, and the committee expects to receive the first round of modeling results next spring. The results are expected to be available in time to support next year's Priority Setting.



VI. **Priority Setting Presentation – 1:32 PM** (see [presentation](#))
1:30 PM

Rob presented the Planning, Priorities, and Allocation Committee's (PPAC) recommendation for the 2026 Ryan White Part A Priority Setting process. He explained that the purpose of the presentation was to review the recommended service rankings and explain the process used to develop them. PPAC focused this year on making the Priority Setting process more transparent, understandable, and reflective of both data and lived experience.

Rob explained that Priority Setting is one of the Planning Council's core legislative responsibilities under the Ryan White HIV/AIDS Program and determines which Ryan White service categories are most important for meeting local needs. He clarified that Priority Setting does not determine providers, contracts, or funding levels; those decisions occur later during Resource Allocation. Members were reminded that the process was grounded in the Denver Principles, the concept of "Nothing About Us Without Us," and the Meaningful Involvement of People with HIV/AIDS (MIPA).

Members reviewed multiple sources of information before completing their rankings, including epidemiologic data, care continuum outcomes, service utilization, fiscal reports, and community input from the PLWHA Priorities Report. PPAC and the PLWHA Committee independently ranked the service categories, and the rankings from the two committees were then combined. Rob explained that PPAC brings planning expertise, epidemiology, utilization, and systems-level perspectives, while the PLWHA Committee brings lived experience, consumer priorities, and firsthand knowledge of barriers to care.

Rob explained the methodology used to combine the rankings. Each committee developed its ranking independently, the committee rankings were averaged, and when the averages resulted in a tie, the PLWHA Committee's ranking determined the final order. The final list was then renumbered sequentially. He stated that the methodology was intended to be transparent, reproducible, and capable of being improved in future years.

Rob highlighted that Medical Case Management was ranked first by both committees. He also reviewed changes from the prior year's rankings, noting that Mental Health Services and Home Health Care moved higher, while Housing, Substance Abuse Services, and Outpatient Ambulatory Health Services moved lower. He clarified that movement in the rankings does not necessarily indicate that a service has become unimportant and that all Ryan White service categories contribute to the continuum of care.

Rob stated that Resource Allocation will occur the following month, when members will review projected funding, utilization, expenditures, and other relevant data. He emphasized that the Priority Setting rankings will guide the Resource Allocation discussion but will not independently determine funding levels.



Members asked whether PPAC and the PLWHA Committee communicated with one another during the ranking process. Rob clarified that the committees developed their rankings independently; however, the PLWHA Priorities Report was presented to PLWHA before PPAC completed its rankings so that consumer input could inform its process. Shelley stated that the presentation clearly reflected the process the Planning Council is legislatively required to complete and thanked Rob, PPAC members, LeRoy, and staff for their work. Members described the process as clear and transparent.

VII. Priority Setting Vote –1:45 PM

2:00 PM

Before voting, members requested clarification regarding the final recommended ranking document and how the PLWHA and PPAC rankings were combined. Staff and committee members reviewed the document and explained that the final column reflected the combined rankings from the two committees, including the averaging methodology and the use of the PLWHA ranking to resolve ties.

Members confirmed that the vote was to approve the final recommended 2026 Priority Setting rankings.

Motion: Ebony

Second: Damon

Action: The final recommended 2026 Priority Setting rankings were approved.

VIII. Dot Theodore | Recipient Report – 1:53 PM (see [presentation](#))

2:10 PM

Dot presented the Recipient Report and provided an update on unobligated Ryan White Part A and Ending the HIV Epidemic (EHE) funds. She explained that the Office of HIV Care requested approval to use prior-year unobligated Ryan White Part A funds for Food Bank/Home-Delivered Meals in Alameda and Contra Costa Counties and for Medical Transportation. Because the request did not require approval from the full Planning Council, Damon and Bryan, as Co-Chairs, signed the request for submission.

For Ending the HIV Epidemic funding, the Office of HIV Care requested that unobligated funds be used for Food Bank/Home-Delivered Meals, Emergency Financial Assistance, and services with La Clínica designed to engage people who are currently out of care.

Dot reported that the Office of HIV Care recently held its second-quarter subrecipient meeting with Ryan White and EHE-funded agencies. Rob presented information from the PLWHA Priorities Report during that meeting. Dot also announced an upcoming EHE Network Meeting in August. She explained that the Office of HIV Care is working with EHE-funded agencies as a provider network to



ensure that EHE projects remain distinct from Ryan White-funded services while supporting the broader Ryan White system of care.

Dot provided an update on upcoming federal reporting requirements. The Office of HIV Care submitted its EHE Workplan and Budget, and the Ryan White Program Terms Report is due at the end of August.

Dot also announced that the section containing the Office of HIV Care has been renamed the Sexual Health and Harm Reduction Section. She clarified that the Office of HIV Care retains its name but is housed within the newly renamed section. The section is also developing a field services team intended to bring services outside of traditional brick-and-mortar clinical settings and directly to clients.

Dot reviewed utilization data and highlighted service categories that had already exceeded their projected goals for the contract year. She noted that the data supported the Planning Council's June decision to allocate additional funding to highly utilized service categories. Members asked whether the utilization figures reflected actual Unduplicated Client (UDC) counts, and Dot confirmed that they did.

Members also asked about service categories reporting utilization below 10 percent. Dot explained that delays in contract execution may have resulted in agencies falling behind in data entry. She stated that Office of HIV Care program managers meet regularly with funded agencies to review utilization, expenditures, and contract deliverables and would follow up with agencies showing unusually low utilization.

Members also asked about higher-than-projected utilization in EHE Non-Medical Case Management. Dot explained that a new agency had entered that service category, which contributed to the increased utilization.

IX. LeRoy | State Integrated Plan Update - 2:06 PM

2:20 PM

LeRoy provided an update on the California Integrated HIV Surveillance, Prevention, and Care Plan. He reminded members that the Planning Council previously received a presentation on the Integrated Plan and had an opportunity to review and provide feedback. He reported that the final plan was submitted to HRSA and CDC by the June 30 deadline and thanked the Oakland TGA, Office of HIV Care, and other collaborating jurisdictions for their participation in the statewide planning process.



LeRoy explained that the Integrated Plan addresses HIV prevention, care, and surveillance and that California approaches the work through a syndemic framework that also considers hepatitis C, sexually transmitted infections, and social drivers of health. He noted that community engagement, quality improvement activities, and other work completed by Planning Councils throughout California are incorporated into the statewide plan.

LeRoy reported that the submitted federal version of the document was revised to comply with current federal requirements regarding terminology and the presentation of certain demographic data. He clarified that California may continue using broader terminology and data categories internally; however, the version submitted to federal agencies must comply with current federal requirements to ensure continued acceptance of the plan and funding for HIV programs.

LeRoy also discussed the optional Implementation Blueprint associated with the Integrated Plan. He explained that the Integrated Plan contains 30 strategies organized across six social drivers of health, while the Implementation Blueprint allows jurisdictions to identify more specific local activities to support those strategies. The blueprint is not required by HRSA or CDC but can be customized for Alameda and Contra Costa Counties with technical assistance and available resources.

Members asked whether the Oakland TGA should pursue the optional Implementation Blueprint. LeRoy explained that many elements of the Integrated Plan are already being implemented locally through surveillance updates, linkage-to-care activities, viral suppression measures, and other Planning Council and recipient activities. He stated that there was no reason the TGA could not develop a customized blueprint if there was sufficient capacity to complete the additional work.

Dot added that the Sexual Health and Harm Reduction Section is already working with Vicente Consulting, the technical assistance provider supporting the Integrated Plan, to conduct strategic planning using the Integrated Plan as a guide. Members expressed interest in potentially discussing the Implementation Blueprint further at Executive Committee. LeRoy thanked the Planning Council for its continued collaboration and noted that completion and submission of the Integrated Plan fulfills an important Planning Council Workplan requirement.

X. **Review WorkPlan – 2:14 PM**

2:45 PM

Members reviewed the Planning Council Workplan and identified the July activity requiring members to review topics related to Ryan White service providers, epidemiology data, and Integrated Plan strategies. Members agreed that the epidemiology and Integrated Plan components had been addressed through presentations and discussions held during recent Planning Council meetings.



Members discussed the meaning of the Workplan reference to Reviewing Topics Related to Ryan White Service Providers. It was noted that the Recipient Report and previous provider presentations may satisfy this activity, although members acknowledged that the wording of the Workplan item was not entirely clear.

Members then reviewed upcoming activities and confirmed that Resource Allocation is scheduled for the August Planning Council meeting. The Assessment of the Administrative Mechanism (AAM) was also discussed in relation to Priority Setting and Resource Allocation. Members noted that the AAM is not relevant to the allocation process. The Council concluded that the July Workplan activities had been addressed.

XI. General Public Comment/Announcements - 2:17 PM

2:55 PM

Bryan encouraged Planning Council members to take advantage of free training opportunities available through Alameda County Public Health. He highlighted an upcoming training on demographic data collection policies beginning in August and explained that similar trainings can help members better understand how public health data, reports, percentages, and demographic information are collected and interpreted. Bryan shared that he had previously received a certificate for completing one of the training series and encouraged new and continuing members to participate. Staff agreed to redistribute information about available trainings.

Members were reminded that Oakland Pride will take place Sunday, August 16, and that a volunteer sign-up sheet had been distributed. Planning Council members were encouraged to volunteer at the outreach table. Rob reported that the Council plans to pilot brief "flash surveys" during Oakland Pride as preparation for the larger triennial needs assessment planned for the following year.

Rob also announced the Bay Area HIV and Infant Feeding Implementation Conference, scheduled for Thursday, September 17 at the UCSF Mission Bay Conference Center. The regional conference will focus on supporting people living with HIV who choose to breastfeed and improving consistency in information provided by healthcare and service providers throughout the Bay Area.

Members discussed challenges some consumers experience when using electronic healthcare systems such as MyChart. Members suggested exploring opportunities for digital literacy support or training to help people living with HIV, particularly older adults, navigate online healthcare portals and other increasingly digital systems.

Bryan discussed the upcoming United States Conference on HIV/AIDS (USCHA) and encouraged newer Planning Council members to consider attending conferences and training opportunities that provide broader exposure to HIV care, prevention, advocacy, and best practices. Staff clarified



that conference participation is generally limited to a small number of representatives because of available funding. Stephanie reminded members that online registration for the Ryan White Conference remained open through July 31.

Duran shared information about additional free training opportunities available through the California Prevention Training Center and other technical assistance organizations. He highlighted trainings related to social determinants of health, linkage to care, and social network strategies and noted that these resources can help strengthen the skills of frontline staff working at funded agencies. Duran offered to share future training announcements with Planning Council members and providers.

Members were also reminded that the Contra Costa County meeting location at 2500 Bates Avenue remains available for members who prefer to participate from that site.

XII. **Evaluation** (Click [here](#)) and **Adjourn** - 2:32 PM

3:00 PM

NOTE: Brown Act – [Hybrid meetings](#)



GROUP NORMS:

1. Be a welcoming body to all
2. Respect each other as leaders.
3. Exhibit patience with each other.
4. Be anchored in our mission.
5. Agree to disagree.
6. Step up Step back.
7. Active, intentional, attentive, listening/eyes, ears, head, & heart
8. No retribution for what gets said here.
9. Be present, prepared and engaged
10. No judgement/Take a breath & set it aside.
11. Everyone's effort & time is valued.



12. Encourage clarifying questions
13. Be creative & efficient in deliberations.
14. Be on time.
15. Be mindful of your actions and assume good intentions.
16. Avoid using acronyms and abbreviations or explaining what they stand for.

The **Vibe Monitor** (Chairs and/or Planning Council Staff) can enforce the above ground rules in situations of disruptive behavior. Pursuant to the OTGA Bylaws members can be removed from the meeting and/or council for disruptive conduct or conduct affecting the council's integrity of the community's confidence.