



SAN DIEGO HIV PLANNING GROUP (HPG)  
 COMMUNITY ENGAGEMENT GROUP  
 MEETING PACKET  
**WEDNESDAY, June 21, 2023 3:00 PM – 5:00 PM**  
 COUNTY OPERATIONS CENTER (COC)  
 5560 OVERLAND AVE. SAN DIEGO, CA 92123 (TRAINING ROOM 171)

**NOTE:** This meeting is audio and video recorded.

Language translation services are available upon request at least 96 hours prior to the meeting. Please contact HPG Support Staff at **619-403-8809** or via e-mail at [hpq.hhsa@sdcounty.ca.gov](mailto:hpq.hhsa@sdcounty.ca.gov).

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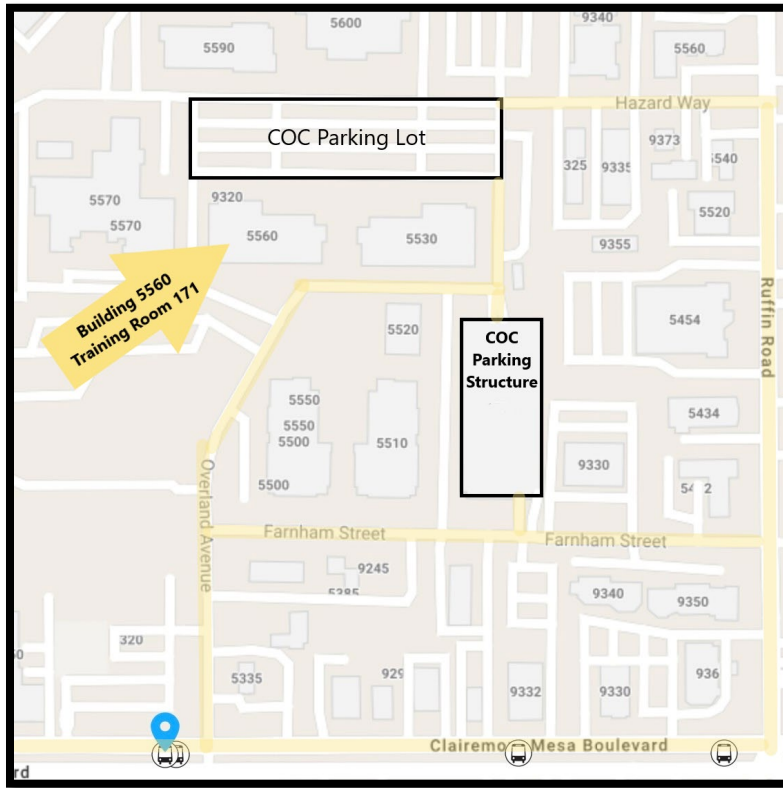
## **Community Engagement Group**

**When:** Wednesday, June 21 from 3:00 PM – 5:00 PM

**Where:** San Diego County Operations Center (COC)

5560 Overland Avenue San Diego, CA 92123

**Training Room 171 (5560 Building)**



**Parking is free. All visitors parking more than the allotted time must park in an unmarked space. There is very limited street parking along Farnham St.**

## Driving Directions:

### From 163 Freeway:

1. From 163, exit onto Clairemont Mesa Blvd – *Eastbound*
2. Turn left onto Overland Ave.

### From I-15 Freeway:

1. From 15, exit onto Clairemont Mesa Blvd – *Westbound*
2. Turn right onto Ruffin Rd
3. Turn left onto Hazard Way

**Or**

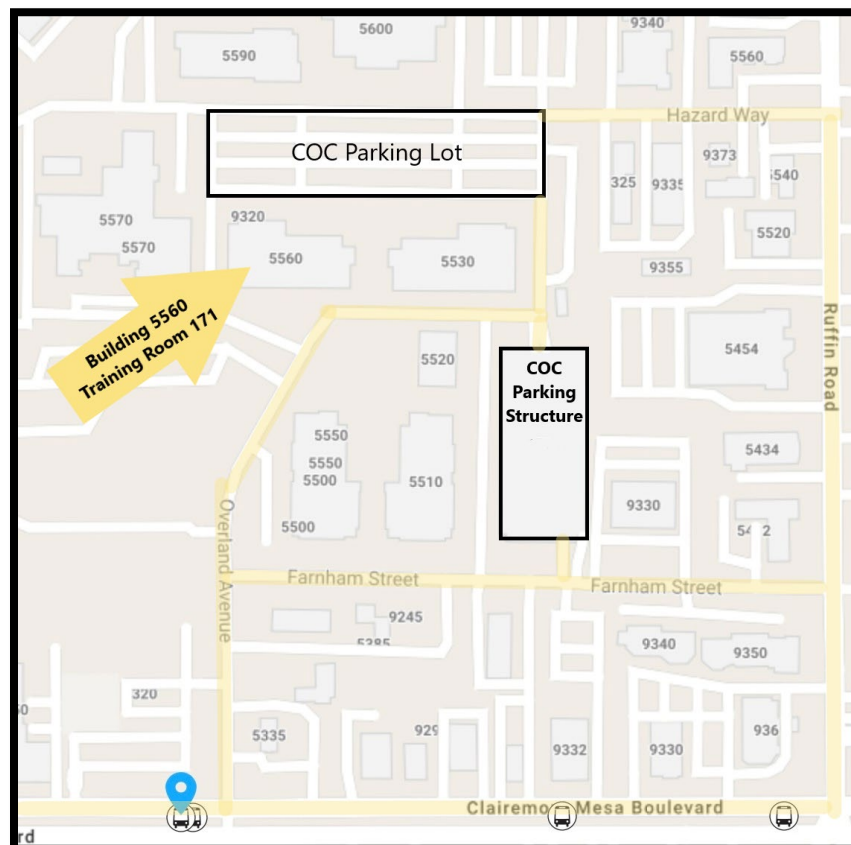
1. From 15, exit onto Clairemont Mesa Blvd – *Westbound*
2. Turn right onto Overland Ave

### **\*\*ATTN:**

Please note that directions depicted on given directions to location may not reflect info on the MTS phone application.

Refer to HPG directions and County Operations Center map provided for detailed instructions on how to get to meeting location. Additional resource map available from County Operations Center on **PAGE 4**.

## Via MTS/Public Transportation:



### **From Ruffin Road:**

1. Head north towards Ruffin Road.
2. Turn left on Farnham Street.  
Access to County Operations Center buildings will be on your right.

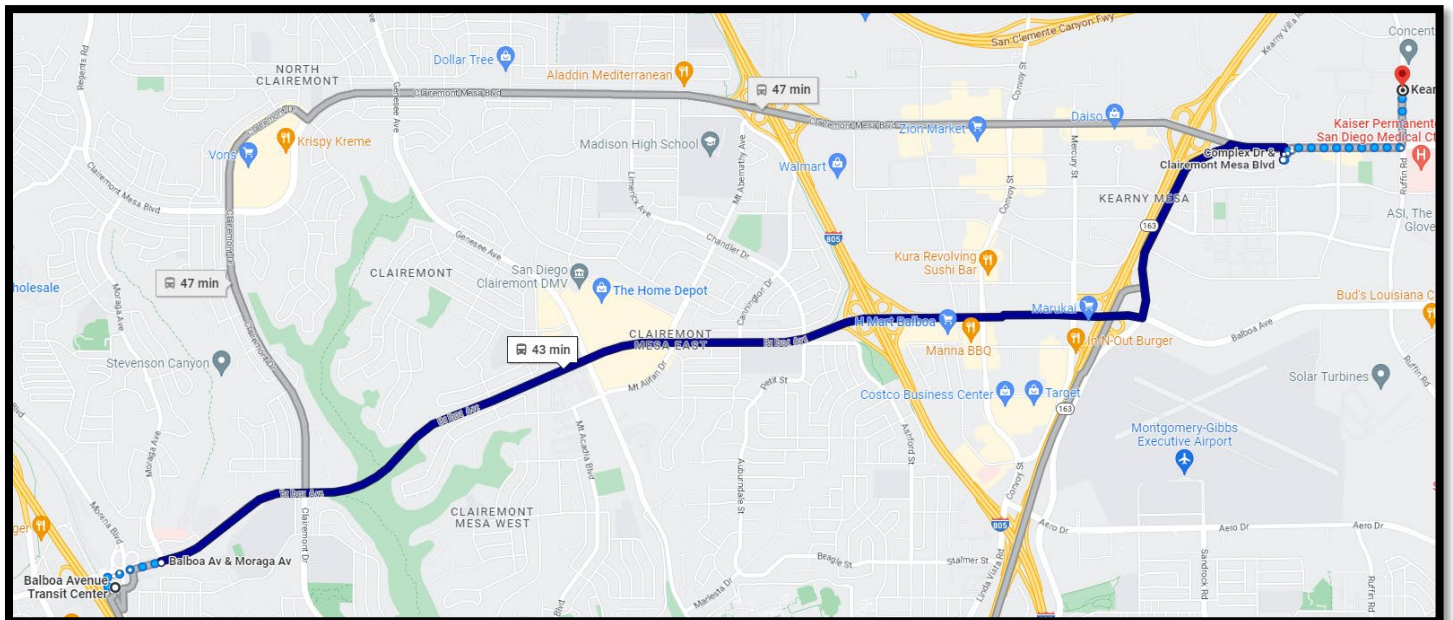
**OR**

2. Turn left on Hazard Way.
3. Enter through County Operations Center entrance/black gate and head further west.  
Access to County Operations Center buildings will be on your left.

### **From Overland Avenue:**

1. Head north on Overland Ave.
2. Enter east through County Operations Center entrance/black gate.
3. Turn left on pedestrian walkway. Building 5560 will be on your left.

## **Full Route from Balboa Ave Transit Center to Overland Ave (if coming off Blue Line trolley):**



### **If Using Trolley & Bus:**

1. Take the **Blue Trolley Line** to the **Balboa Avenue Transit Center**.
2. Walk to **Balboa Ave & Moraga Ave** bus stop (about 7-minute walk, 0.3 miles).
3. Take **Route 27** bus from **Balboa Ave & Moraga Ave** to **Complex Dr & Clairemont Mesa Blvd**.
4. Head north on Complex Dr.
5. Cross the street and turn right on Clairemont Mesa Blvd (after U.S. Bank Branch on the right).
6. Cross the street and turn left onto Overland Ave. and head north.
7. Enter east through County Operations Center entrance/black gate.
8. Building 5560 will be on your left.

# ADDITIONAL RESOURCES:

## County Operations Center (COC) CAMPUS MAP



County of San Diego  
County Operations Center

5500-5595 Overland Avenue, 9325-9355 Hazard Way  
San Diego, CA 92123

(858) 694-3610

November 2014

Directions to the  
County Operations Center  
5500-5600 Overland Avenue  
9325-9355 Hazard Way  
San Diego, 92123

**From the North or South (Airport)**

From **163**, exit onto Clairemont Mesa Blvd. Eastbound  
Turn Left (North) onto Overland Avenue  
From **I-15**, exit onto Clairemont Mesa Blvd. Westbound

\*All: To access Parking Structure from Overland turn right  
onto Farnham Street. Parking Structure is on the left.

**From the East or West**

From **52**, exit onto Ruffin Road Southbound  
Turn Right (West) onto Farnham Street

Room 171

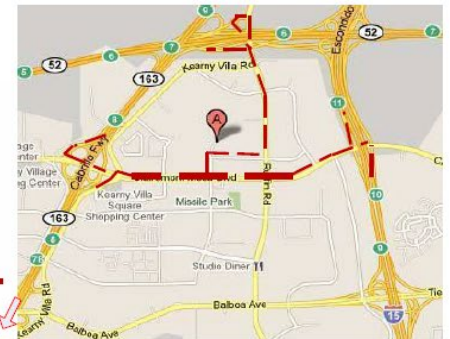
*All visitors parking  
more than the  
permitted time posted  
must park in an  
unmarked space.*

**LEGEND**

- Walkway from Parking Structure to Office Buildings
- Campus Center Chambers and Commons Cafe
- Driving route to Parking Structure and Campus Parking
- 2 & 3-hour Visitor Parking

Room 124

Airport



## County Operations Center (COC) CAMPUS DIRECTORY



### 5500 Permit Center

Environmental Health and Quality  
San Diego County Credit Union  
Public Works Engineering  
Parks & Recreation  
Aging & Independence Services  
24/7 Library To Go

### 5510 Permit Center

Planning and Development Services  
Public Works  
SanGIS

### 5520 Campus Center

Campus Center - Chambers  
Campus Center - Commons

### 5530

Primary Public Defender  
Alternate Public Defender  
County Counsel/Juvenile Dependency  
Human Resources  
Sheriff Detention Medical Services  
Auditor & Controller  
Revenue & Recovery

### 5560

County Library  
Public Administrator  
Public Guardian  
Public Conservator  
Purchasing & Contracting  
Sheriff Data & Computer Training  
Security Services

### 5560 cont.

Property Manager  
Aging & Independence Services  
General Services  
County Fire/EMS

### 5570

Medical Examiner  
Environmental Health & Quality  
- Vector/HIRT  
Public Health Services  
- Laboratory

### 5590

Crime Lab

### 5595

Sheriff Wireless Services  
General Services Maintenance

### 5600

Registrar of Voters  
County Mail Center  
Probation

### 5610

General Services Fleet

### 9325

Agriculture, Weights, & Measures

### 9335

University of California Cooperative Extension  
Vital Records  
Public Health Services



SAN DIEGO HIV PLANNING GROUP (HPG)  
COMMUNITY ENGAGEMENT GROUP  
MEETING AGENDA  
**WEDNESDAY, JUNE 21, 2023, 3:00 PM – 5:00 PM**  
COUNTY OPERATIONS CENTER  
5560 OVERLAND AVE, SAN DIEGO, CA 92123 (TRAINING ROOM 171)

**To participate remotely via Zoom:**

<https://us06web.zoom.us/j/83782242388?pwd=MTFqZitVcC9hNnFPRkhkcV3dGpKdz09>

**Call in:** US Toll +1 669 444 9171

**Meeting ID:** 837 8224 2388

**Passcode:** 106514

Language translation services are available upon request at least 96 hours prior to the meeting. Please contact HPG Support Staff at 619-403-8809 or via e-mail at [hpg.hhsa@sdcounty.ca.gov](mailto:hpg.hhsa@sdcounty.ca.gov).

A quorum for this meeting is four (4).

**Committee Members:** Allan Acevedo (Chair), Alfredo De Jesus, Michael Donovan, Esteban Duarte, Tyra Fleming, Michael Lochner (HPG Chair), Jen Lothridge (Co-Chair)

**ORDER OF BUSINESS**

1. Call to order, roll call, comments from the chair, and a moment of silence.
2. Review:
  - a. Background, Mission Statement, Goals, and Agreement of Meeting Decorum
3. Introductions (Name, Role with HPG/Consumer, Pronouns), Icebreaker
4. Public comment (for members of the public)
5. Sharing our concerns (for committee members)
6. **ACTION:** Approve the Community Engagement Group agenda for June 21, 2023
7. **ACTION:** Approve the Community Engagement Group minutes for May 17, 2023
  - a. Follow-up Items:
    - i. Doxycycline post-exposure prophylaxis training.
    - ii. Resource links for Robert's Rules of Order, service standards, and understanding member roles.
8. Old Business
  - a. None
9. New Business
  - a. Analyzing Epidemiology data – Dr. Ken Riley
  - b. **Discussion:** Change the Community Engagement Group meeting schedule
10. Committee Updates
  - a. CARE Partnership

- b. Membership Committee
- c. Strategies and Standards Committee
- d. Medical Standards and Evaluation Committee (MSEC)
- e. Priority Settings and Resource Allocation (PSRAC)
- f. Steering Committee
- g. HIV Planning Group (HPG)
- h. Mpox Taskforce
- i. HIV Housing Committee/Housing Opportunities for Persons with AIDS (HOPWA)

11. Announcements

12. **Next meeting date:** July 19, 2023, from 3:00 PM – 5:00 PM.

**Location:** 5560 Overland Ave. San Diego, CA 92123 (Training Room 172) AND via Zoom.

13. Adjournment

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## **Community Engagement Group Charge:**

### **1) Educate Community Members**

- Educate/train community members about the HIV Planning Group's local HIV services planning process and prepare them for and support them in increased involvement throughout the HIV Planning Group Process: committees, task forces, working groups, and other opportunities, as well as HIV Planning Group membership.

### **2) Increase Community Members' Participation**

- Increase the level and diversity of community involvement, including from under-served and under-represented populations.
- Represent the needs of all community members, including those unable to participate in meetings.
- Provide linkages to regional and population-specific community groups and ensure communication between those groups and the Community Engagement Group.
- Identify and seek to overcome barriers to community participation.

### **3) Represent Community Member Needs Throughout the HIV Planning Group Process**

- Provide community representation on HIV Planning Group committees, task forces, etc., and ensure the flow of information from those groups to the Community Engagement Group.
- Encourage maximum community involvement in the Priority Setting Committee and other established venues for the annual priority setting and budget allocations process; the Community Engagement Group will not develop a separate set of budget recommendations.
- Serve as a venue for providing community feedback regarding HIV Planning Group issues (e.g., task forces).





SAN DIEGO HIV PLANNING GROUP (HPG)  
COMMUNITY ENGAGEMENT GROUP  
DRAFT MINUTES

**WEDNESDAY, May 17, 2023, 3:00 PM – 5:00 PM**

COUNTY OPERATIONS CENTER  
5560 OVERLAND AVE, SAN DIEGO, CA 92123 (TRAINING ROOM 171, BUILDING 5560)

**To participate remotely via Zoom:**

<https://us06web.zoom.us/j/83782242388?pwd=MTFqZitVcC9hNnFPRkhkcV3dGpKdz09>

**Call in:** US Toll +1 669 444 9171

**Meeting ID (access code):** 837 8224 2388

**Password:** 106514

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A quorum for this meeting is four (4).

**Committee Members:** Allan Acevedo (Chair), Alfredo De Jesus, Michael Donovan, Esteban Duarte, Jen Lothridge, Tyra Fleming (virtual – Just Cause)

**Committee Members Absent:** Michael Lochner (HPG Chair)

**ORDER OF BUSINESS**

Agenda Item	Discussion/Action	Follow-Up
1. Call to order, roll call, comments from the chair, and a moment of silence	Allan Acevedo called the meeting to order at 3:04 PM and noted the presence of a quorum via Zoom video teleconference.	
2. Background, mission statement, goals, and Agreement of Meeting Decorum	The Mission Statement and Community Engagement Group Charge were read by committee members. The meeting decorum was reviewed by the Chair.	
3. Introductions (Name, role with HIV Planning Group/Consumer, Pronouns), Icebreaker	Members and those in attendance introduced themselves.	
4. Public comment	No public comment.	
5. Sharing our concerns	A committee member asked how the Community Engagement Group can support the implementation of Doxy-prep post-exposure prophylaxis.	HPG Support Staff will follow up with identifying a speaker to

Agenda Item	Discussion/Action	Follow-Up
		provide a doxycycline post-exposure prophylaxis training to members and to provide additional information.
6. Review and approve the agenda for May 17, 2023	<p><b>Motion:</b> Approve the agenda for the May 17, 2023 meeting as presented.</p> <p><b>Motion/Second/Count (M/S/C):</b> Donovan/Lothridge 5/0</p> <p><b>Abstention(s):</b> Acevedo</p> <p><b>Motion carries</b></p>	
7. Review and approve the Minutes for April 4, 2023	<p><b>Motion:</b> Approve the minutes for the April 4, 2023 meeting as presented, with the correction in attendance for Michael Donovan and Jen Lothridge.</p> <p><b>M/S/C:</b> Lothridge/Duarte 5/0</p> <p><b>Abstention(s):</b> Acevedo</p> <p><b>Motion carries</b></p>	
8. Review follow up items from last meeting:		
a. HPG Support Staff search for a document that describes all service categories.	Policy Clarification Notice (PCN) #16-02 was presented at the meeting and included in the meeting packet. The #16-02 policy clarification notice provides information on eligible individuals and the description of allowable service categories for Ryan White HIV/AIDS Program and program guidance for implementation.	
9. Review: Community Engagement Group Working/Training Plan	The Chair reviewed the Working Plan and provided an overview of the Happyville Exercise which will take place at the June 2023 CEG meeting.	<p>HPG Support Staff will create an infographic for the Happyville exercise.</p> <p>HPG Support Staff will provide a resource link to Robert's Rule of Order, understanding member roles and responsibilities, and</p>

Agenda Item	Discussion/Action	Follow-Up
		<p>understanding service standards.</p> <p>HPG Support Staff will follow-up about potentially providing a virtual presentation on Epi data, prior to the Happyville exercise.</p>
10. Co-Chair Opening/Nominations	<p>Jen Lothridge nominated themselves as Community Engagement Group Co-Chair.</p> <p><b>Action:</b> Approve Jen Lothridge as Community Engagement Group Co-Chair.  <b>M/S/C:</b> Lockridge/Duarte/5-0  <b>Abstentions:</b> Acevedo  <b>Motion carries</b></p>	
<b>11. Old Business</b>		
a. None.		
<b>12. New Business</b>		
a. <b>Presentation:</b> HIV Planning Group Goals and Objectives – Raniyah Copeland	Several concerns and questions were shared with the group regarding the goals and objectives presented.	
b. <b>Presentation:</b> Epidemiology Data – Dr. Ken Riley	Tabled to next meeting.	Deferred to June meeting.
c. <b>Discussion:</b> Translation Services	Committee members were asked if there were a preference for how to offer translation services for the Community Engagement Group meeting. Several committee members recommended maintaining availability of translation services with a 96-hour notice.	
<b>13. Committee Updates:</b>		
a. CARE Partnership	Deferred to next meeting.	
b. Membership Committee	Deferred to next meeting.	
c. Strategies & Standards Committee	Deferred to next meeting.	
d. Medical Standards and Evaluation Committee	Deferred to next meeting.	

Agenda Item	Discussion/Action	Follow-Up
(MSEC)		
e. Priority Settings & Resource Allocation Committee (PSRAC)	Deferred to next meeting.	
f. Steering Committee	Deferred to next meeting.	
g. HIV Planning Group (HPG)	Deferred to next meeting.	
h. MPOX Task Force	Deferred to next meeting.	
i. HIV Housing Committee/Housing Opportunities for Persons with AIDS (HOPWA)	<p>Cinnamen Kubricky and Allan Acevedo to have a written update for the next meeting.</p> <p>There are 250,000 housing applications open. HOPWA recently finished a funding allocation and should be coming out in the next two weeks.</p>	
14. Announcements	<p>There was a recommendation to change the day of the week for the Community Engagement Group meeting.</p> <p>There was a recommendation to distribute a flyer for Project PEARL as the new cohort will be starting on June 1, 2023.</p>	<p>HPG Support Staff to include change to meeting day on the next meeting agenda for discussion. For any suggestions, please email HPG Support Staff.</p>
15. Next meeting date	<p>Date: <b>June 21, 2023</b>  Time: <b>3:00 PM – 5:00 PM</b>  Location: In-person  To be determined and remotely/virtually via <b>Zoom.</b></p>	
16. Adjournment	5:02 PM	

	Countywide				Region: Central			
	PLWHA <sup>1</sup>		Recent Cases (2017-2021) <sup>2</sup>		PLWHA <sup>1</sup>		Recent Cases (2017-2021) <sup>2</sup>	
	No.	%	No.	%	No.	%	No.	%
<b>Mode of Transmission – Adult</b>								
Men having Sex with Men (MSM)	10,011	71%	1,183	57%	4,923	76%	483	61%
People Who Inject Drugs (PWID)	769	5%	107	5%	293	5%	41	5%
MSM and Injection Drug Use (MSM/IDU)	960	7%	70	3%	489	8%	29	4%
Heterosexual	1,469	10%	154	7%	448	7%	51	6%
No Risk Specified/Other <sup>3</sup>	844	7%	550	24%	306	5%	187	23%
<b>Mode of Transmission – Pediatric (0-12)</b>								
All modes	100	<1%	9	<1%	33	<1%	4	<1%
<b>Race/Ethnicity</b>								
White, non-Hispanic	5,631	40%	548	26%	2,884	44%	210	26%
Black/African American, non-Hispanic	1,729	12%	255	12%	934	14%	121	15%
Hispanic/Latino	5,774	41%	1,028	50%	2,234	34%	359	45%
Asian/Pacific Islander, non-Hispanic	463	3%	93	4%	179	3%	37	5%
Native American, non-Hispanic	34	<1%	3	<1%	20	<1%	1	<1%
Multiple races, non-Hispanic	421	3%	61	3%	197	3%	27	3%
Unknown <sup>3</sup>	101	1%	86	4%	44	1%	40	5%
<b>Birth Sex</b>								
Male	12,662	90%	1,817	88%	6,002	92%	706	89%
Female	1,491	10%	257	12%	490	8%	89	9%
<b>Age Group</b>								
0-12	15	<1%	9	<1%	4	<1%	4	<1%
13-19	16	<1%	44	2%	5	<1%	15	2%
20-29	644	5%	690	33%	232	4%	246	31%
30-39	2,334	17%	618	30%	1,041	16%	260	33%
40-49	2,700	19%	343	17%	1,217	19%	141	18%
50+	8,444	60%	370	18%	3,993	61%	129	15%
<b>TOTAL</b>	<b>14,153</b>	<b>100%</b>	<b>2,074</b>	<b>100%</b>	<b>6,492</b>	<b>100%</b>	<b>795</b>	<b>100%</b>

<sup>1</sup>People living with HIV/AIDS and residing in San Diego County through 12/31/2021.

Epidemiology and Immunization Services, April 2023

<sup>2</sup>Newly diagnosed with HIV disease while residing in San Diego County, regardless of stage of disease.

<sup>3</sup>Number of NIR/NRR and unknown race is expected to go down with further post-COVID investigation.

Note: HHS region was defined as region at first diagnosis for recent cases and current residence for PLWHA. Age was calculated at first diagnosis for recent cases and as current age in 2021 for PLWHA. Percentages may not total 100 due to rounding.

# Analyzing San Diego County HIV/AIDS Epidemiology Data

## TOTAL

### Prevalent HIV/AIDS cases or PLWHA:

The total number of people *living with HIV/AIDS* who resided in San Diego County, through December 31, 2021. This does not include deceased cases.

## recent

### Recent cases:

The number of *newly* diagnosed cases of HIV, regardless of stage of disease, reported in the last five years (between January 1, 2017 and December 31, 2021). This may include both living cases and some who are now deceased.

### Why do we look at both?

Comparing prevalent cases to recent cases helps give us a sense of where the epidemic is heading. Prevalent cases provide a sense of history since some cases were diagnosed many years ago, while recent cases show us which populations are being infected more recently.

## Central San Diego

Individuals were *living in Central Region* at the time of HIV diagnosis for recent cases or for prevalent cases, the most current address was located within Central region.

## Gender

Data is reported by: sex at birth

## Race/Ethnicity

Data is reported by: NH White, NH Black/African American, Hispanic/Latino, NH Asian/Pacific Islander, NH Native American, and NH Multiple race (NH=Non-Hispanic)

## Mode of Transmission

### Adult modes of transmission are:

Men who have sex with men (MSM);  
 People Who Inject Drugs (PWID);  
 Men who have sex with men and inject drugs (MSM+PWID);  
 No risk specified (NRS)/Other.

### Pediatric transmission:

All modes

## Age at Diagnosis

Age groups are calculated by age at first diagnosis for recent cases and age in calendar year 2021 for prevalent cases.

<13	40-49
13-19	50+
20-29	
30-39	

Remember, the data table presents percentages of total cases, NOT rates so they don't reflect the burden of disease.

# Central San Diego

## Gender

What percentage/proportion of  
Central San Diego prevalent cases is:

**TOTAL** male? \_\_\_\_\_ %  
female? \_\_\_\_\_ %

What percentage/proportion of  
Central San Diego recent cases is:

male? \_\_\_\_\_ % **recent**  
female? \_\_\_\_\_ %

**Gender trend over time in Central San Diego  
(compare Central San Diego prevalent cases to Central San Diego recent cases):**

The largest percentage/proportion of cases is:

With an increasing percentage/proportion of:

**Gender in Central San Diego compared to San Diego County as a whole  
(compare Central San Diego recent cases to Countywide recent cases):**

Compared to Countywide recent cases, Central San Diego has a larger percentage/proportion of:

And a smaller percentage/proportion of:

## Race/Ethnicity

What percentage/proportion of  
Central San Diego prevalent cases is:

**TOTAL** White, NH? \_\_\_\_\_ %  
Black, NH? \_\_\_\_\_ %  
Hispanic? \_\_\_\_\_ %  
Asian/Pacific Islander, NH? \_\_\_\_\_ %  
Native American, NH? \_\_\_\_\_ %

What percentage/proportion of  
Central San Diego recent cases is:

White, NH? \_\_\_\_\_ % **recent**  
Black, NH? \_\_\_\_\_ %  
Hispanic? \_\_\_\_\_ %  
Asian/Pacific Islander, NH? \_\_\_\_\_ %  
Native American, NH? \_\_\_\_\_ %

**Race/ethnicity trend over time in Central San Diego  
(compare Central San Diego prevalent cases to Central San Diego recent cases):**

The largest percentage/proportion of prevalent cases is: \_\_\_\_\_ of recent cases is:

With an increasing percentage/proportion of (write all that apply):

**Race/ethnicity in Central San Diego compared to San Diego County as a whole  
(compare Central San Diego recent cases to Countywide recent cases):**

Compared to Countywide recent cases, Central San Diego has a larger percentage/proportion of  
(write all that apply)

And a smaller percentage/proportion of (write all that apply):

## Mode of Transmission

What percentage/proportion of  
**Central San Diego prevalent** cases is  
attributed to:

**TOTAL**

MSM? \_\_\_\_\_ %

PWID? \_\_\_\_\_ %

MSM/IDU? \_\_\_\_\_ %

Heterosexual contact? \_\_\_\_\_ %

What percentage/proportion of  
**Central San Diego recent** cases is  
attributed to:

**recent**

MSM? \_\_\_\_\_ %

PWID? \_\_\_\_\_ %

MSM/IDU? \_\_\_\_\_ %

Heterosexual contact? \_\_\_\_\_ %

### Mode of transmission trend over time in Central San Diego

(compare Central San Diego prevalent cases to Central San Diego recent cases):

The largest percentage/proportion of cases is:

With an increasing percentage/proportion of (write all that apply):

### Mode of transmission in Central San Diego compared to San Diego County as a whole

(compare Central San Diego recent cases to Countywide recent cases):

Compared to Countywide recent cases, Central San Diego has a larger percentage/proportion of (write all that apply):

And a smaller percentage/proportion of (write all that apply):

## Age

What percentage/proportion of  
**Central San Diego prevalent** cases were  
age \_\_\_\_ in 2021?:

**TOTAL**

20-29? \_\_\_\_\_ %

30-39? \_\_\_\_\_ %

40-49? \_\_\_\_\_ %

50+? \_\_\_\_\_ %

What percentage/proportion of  
**Central San Diego recent** cases were  
diagnosed at age:

**recent**

20-29? \_\_\_\_\_ %

30-39? \_\_\_\_\_ %

40-49? \_\_\_\_\_ %

50+? \_\_\_\_\_ %

### Age trend over time in Central San Diego

(compare Central San Diego prevalent cases to Central San Diego recent cases):

The largest percentage/proportion of prevalent cases is:

With an increasing percentage/proportion of (write all that apply):

### Age in Central San Diego compared to San Diego County as a whole

(compare Central San Diego recent cases to Countywide recent cases):

Compared to Countywide recent cases, Central San Diego has a larger percentage/proportion of (write all that apply):

And a smaller percentage/proportion of (write all that apply):



# APPENDIX

(Page 017)

**HIV PLANNING GROUP  
12-MONTH COMMITTEE TRACKING  
Apr 2022 - May 2023**

<b>Community Engagement Group</b>	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	#
<b>Total Meetings</b>	0	1	0	0	1	1	0	1	1	1	1	1	1	9
<b>Member</b>														
Acevedo, Allan <sup>UC</sup>	NM	*	NM	NM	*	*	NM	*	*	*	*	*	*	0
De Jesus, Alfredo <sup>U</sup>	NM	*	NM	NM	1	1	NM	*	*	*	*	1	*	3
Donovan, Michael	NM	*	NM	NM	*	*	NM	*	*	*	JC	*	*	0
Duarte, Esteban											JC	*	*	0
Fleming, Tyra											*	*	JC	0
Lochner, Mikie <sup>U</sup>	NM	*	NM	NM	*	*	NM	*	*	1	*	*	1	1
Lothridge, Jen											*	*	*	0

To vote, a member may not miss four (4) consecutive meetings or six (6) meetings within twelve (12) months.

\* = Present

1 = Absent for the month

1 = Absence when there are multiple meetings that month. Member needs to attend at least one (1) meeting for attendance to count for that month.

JC = Just Cause

EC = Emergency Cause

NM = No Meeting

If the physical attendance quorum requirement is met, AB 2449 permits a member who is not physically present to request virtual attendance at the local legislative body’s meeting under two circumstances: (1) for “just cause” and (2) due to “emergency circumstances”.

Qualifying Reason	Provisions to attend remotely	Requirements/Limitations
<p><b>“Just Cause”</b></p>	<ul style="list-style-type: none"> <li>▪ There is a childcare or caregiving need (<i>for a child, parent, grandparent, grandchild, sibling, spouse, or domestic partner</i>) that requires the member to participate remotely</li> <li>▪ A contagious illness prevents the member from attending the meeting in</li> <li>▪ There is a need related to a defined physical or mental disability that is not otherwise accommodated for</li> <li>▪ Traveling while on official business of the legislative body or another state or local agency</li> </ul>	<p>A member is limited to <b>two (2)</b> virtual attendances based on “just cause” per calendar year</p>
<p><b>“Emergency Circumstances”</b></p>	<p><b><i>“A physical or family medical emergency that prevents a member from attending the meeting in person.”</i></b></p> <p>A member is <b><i>not</i></b> required to disclose any medical diagnosis or disability, or any personal medical information that is already exempt from existing law.</p>	<p>A member of the legislative body <b>must make a request to the body</b> to allow the member to meet remotely due to an emergency circumstance, and further <b>must provide a general description of the circumstance</b> justifying such attendance.</p> <p>A request from a member to attend remotely due to an emergency circumstance requires that the legislative body take action and <b>approve</b> the remote attendance at the start of the meeting for the member to be allowed to participate remotely for that meeting<sup>1</sup>.</p>

<sup>1</sup>If the request does not allow sufficient time to be placed on the agenda as a proposed action item, then the legislative body may take action at the beginning of the meeting.

### **Additional Requirements for a Member Participating Remotely:**

In addition to making a request either for “just cause” or due to an “emergency circumstance” for remote appearance, AB 2449 imposes the following three (3) additional requirements on legislative body members seeking to appear remotely at public meetings:

1. Before any action is taken during the meeting, the member must publicly disclose whether any other individuals 18 years of age or older are present in the room at the remote location with the member, and the general nature of the member’s relationship with any such individuals.
2. A member of the legislative body participating from a remote location must participate through both audio and visual technology.
3. A member’s remote participation cannot be for more than three consecutive months or 20 percent of the regular meetings for the local agency within a calendar year. And if the legislative body regularly meets fewer than 10 times per calendar year, a member’s participation from a remote location cannot be for more than two meetings.

## **AB 2449 Checklist**

(Applicable January 1, 2023 to December 31, 2025)

### **Procedures for Public Participation**

- Public must be able to remotely hear, visually observe, and address the legislative body either remotely or in person in real time
- Public must have the opportunity to participate via: 1) two-way audio or 2) a telephonic service with a webcasting service
- Public cannot be required to submit comments prior to the meeting

### **Procedures for Member to Teleconference from a Remote Location**

- Member must participate through both audio and visual technology
- Member must disclose adults who are present in the room at the remote location with the member and the general nature of the relationship with those individuals
- Member must submit a general description of the need to teleconference to the legislative body at the earliest opportunity (do not disclose any medical diagnosis or disability)
- Member may teleconference for just cause. Just cause is limited to 2 meetings per calendar year (see "Limits per Member" below). Just cause is defined as:
  - Child care or caregiving need of a child, parent, grandparent, grandchild, sibling, spouse or domestic partner
  - Contagious illness that prevents member from attending in person
  - A need related to a physical or mental disability
  - Travel on official business of the legislative body or another state or local agency
- Member may teleconference due to emergency circumstances, which requires approval of the legislative body and which is defined as a physical or family medical emergency that prevents a member from participating in person
- Limits per Member: Just cause and emergency circumstances cannot be invoked collectively for more than: 1) two meetings if the legislative body has fewer than 10 meetings per calendar year, or 2) three consecutive months or 20 percent of regular meetings per calendar year if the legislative body has 10 or more meetings per year. Just cause cannot be invoked more than twice per calendar year.

### **Procedures for the Board/Commission/Committee/Group**

- Include instructions on the agenda how the public can participate remotely
- A quorum of the members of the legislative body must participate in person at the noticed location that is open to the public
- A majority of the membership must approve a request by a member to teleconference due to emergency circumstances; include the request on the agenda if received in time
- All votes must be taken by roll call
- Meeting must be stopped and no action taken if the broadcast of the meeting or ability of the public to comment is disrupted

## TELECONFERENCING RULES UNDER THE BROWN ACT

	Default Rule	Declared Emergency (AB 361)	Just Cause (AB 2449)	Emergency Circumstances (AB 2449)
<b>In person participation of quorum</b>	Required	Not Required	Required	Required
<b>Member participation via teleconferencing</b>	Audio or Audio-visual	Audio or Audio-visual	Audio-Visual	Audio-Visual
<b>Required (minimum) opportunities for public participation</b>	In-person	Call-in or internet-based	Call-in or internet-based <u>and</u> in person	Call-in or internet-based <u>and</u> in person
<b>Disruption of broadcast or public's ability to comment</b>	Meeting can proceed	No further action taken	No further action taken	No further action taken
<b>Reason must be approved by legislative body</b>	No	Yes (initial findings and renewed findings every 30 days)	No, but general description to be provided to legislative body	Yes and general description to be provided to legislative body
<b>Votes must be taken by roll call</b>	Yes	Yes	Yes	Yes
<b>Member's remote location included on agenda</b>	Yes	No	No	No
<b>Declared emergency and health official's recommendation for social distancing</b>	No	Yes	No	No
<b>Annual limits</b>	None	None	Twice per calendar year (limits for emergency circumstances also apply for collective number of times AB 2449 can be used per year)	3 consecutive months/ 20% of regular meetings per calendar year; or 2 meetings per calendar year if body meets less than 10 times per year (collectively with just cause)
<b>Effective Dates</b>	Ongoing	Expires 12/31/2023	Expires 12/31/2025	Expires 12/31/2025