



January 11, 2017

Subject: HIV Planning Group New Member Application

Dear colleague:

Enclosed is an application package for membership on the statewide HIV Planning Group (HPG). New members are being recruited to fill vacancies created by attrition and to fill representational gaps. All applications will be considered, but in order to fill the gaps that currently exist in the composition of the membership, we are particularly interested in 1.) applicants who are persons living with or at high risk for acquiring HIV; 2.) racial and ethnic minorities, especially African-American/black and Hispanic/Latino individuals who identify with or represent the risk categories as listed on the enclosed nomination form; 3.) youth between the ages of 13 and 29; 4.) transgender women; and 5.) representatives from HIV prevention programs, Ryan White providers and Medicaid/Medicare.

The package contains an application form, the HPG vision, mission, and values, and the HPG member job description. It is important that applicants receive the entire package in order to understand the HPG process. Applicants should also be sure they provide a written statement describing why they wish to become a member, as well as sign the application form and job description. Please feel free to reproduce and disseminate copies of this package to all individuals, key stakeholders and organizations interested in HIV planning who may wish to be considered for membership. Self-nominations are also encouraged.

**APPLICATIONS ARE DUE IN THE DIVISION OF HIV DISEASE BY Friday February 10, 2017.**

Applications may be submitted in any of the following ways:

- 1) Email to [c-sluby@pa.gov](mailto:c-sluby@pa.gov);
- 2) Fax to 717-772-4309; or
- 3) Mail (hardcopy) to the attention of Sara Luby at the address shown below.

Please notify Sara by email or at the phone number below if the application is needed in another format or language.

An independent committee will review all applications and make recommendations for new members. It is expected that the selection process will be completed by April, 2017. An orientation for the new members of the HPG will be conducted during the May 2017

meeting in the Harrisburg area. Each new member will receive orientation materials and be assigned an experienced HPG member as a mentor.

The scheduled meeting dates for 2017 are May 10 and 11, July 12 and 13, Sept. 13 and 14 and Nov. 15 and 16. Meetings typically take place in the Harrisburg area. The first day of the two-day meeting runs from 9 a.m. – 4:30 p.m. The second day of the two-day meeting runs from 9 a.m. – 3 p.m.

The continuum of HIV services is at the core of integrating care and prevention in Pennsylvania. An essential component of these services is broad stakeholder engagement and feedback for comprehensive HIV planning and needs assessment. All members are expected to attend and actively participate in all meetings unless circumstances beyond their control prevent this from happening. Please take advantage of this important opportunity to affect the direction of HIV planning in Pennsylvania. Thank you.

Sincerely,

A handwritten signature in blue ink that reads "Jill A. Garland". The signature is fluid and cursive, with a long horizontal stroke at the end.

Jill A. Garland  
Department Co-Chair, Pennsylvania HIV Planning Group  
Director, Division of HIV Disease

Enclosures

## HIV Planning Group (HPG) Membership Application

### Application Instructions/Information

- Applications are accepted on a rolling basis throughout the year.
- The HPG will appoint new members annually for a three year term, beginning on January 1 (or as needed).
- The HPG represents a diverse community of individuals throughout the Commonwealth of Pennsylvania who have been affected by HIV disease. Applicants are asked to provide personal and demographic information, as well as information on past experience in order to achieve the HPG's vision, mission and values.

### Applicant Information

Full Name:

Home Address:

City:

State:

Zip Code:

Primary Phone:

Secondary Phone:

E-mail:

Employer:

Work Address:

City:

State:

Zip Code:

### Emergency Contact Information

Name of Person to Contact:

Relationship to Applicant:

Primary Phone:

Secondary Phone:

E-mail:

### Area Representation

Region: \_\_\_\_\_  
(if unsure, leave blank)

Based on your knowledge and experience what population do you best represent?

- Urban  
 Suburban  
 Rural

County: \_\_\_\_\_

### Group Participation

Have you participated in any other community advisory groups?  Yes  No

If yes, what group(s)? \_\_\_\_\_

<b>Demographic Information</b>		
<b>Age:</b> <input type="checkbox"/> 13-17 <input type="checkbox"/> 18-19 <input type="checkbox"/> 20-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> Over 59 <input type="checkbox"/> Prefer not to disclose	<b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Transgender (female to male) <input type="checkbox"/> Transgender (male to female) <input type="checkbox"/> Other _____ <input type="checkbox"/> Prefer not to disclose	<b>Education:</b> <input type="checkbox"/> Less than high school <input type="checkbox"/> Some high school <input type="checkbox"/> High school graduate/GED <input type="checkbox"/> Some college <input type="checkbox"/> Other post-secondary <input type="checkbox"/> Undergraduate degree <input type="checkbox"/> Graduate degree <input type="checkbox"/> Prefer not to disclose
<b>Race (check all that apply):</b> <input type="checkbox"/> African American or Black <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian or White <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> More than one race <input type="checkbox"/> Other _____ <input type="checkbox"/> Prefer not to disclose	<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Prefer not to disclose	<b>Risk Category (check all that apply):</b> <input type="checkbox"/> Heterosexual <input type="checkbox"/> IDU (injection drug user/s)/needle sharing <input type="checkbox"/> MSM (men who has sex with men) <input type="checkbox"/> More than one risk <input type="checkbox"/> Prefer not to disclose <input type="checkbox"/> Not applicable
<b>Affiliations, Expertise, and Representation (check all that apply)</b>		
<b>Your Affiliations:</b> <input type="checkbox"/> Part A recipient <input type="checkbox"/> Part B recipient <input type="checkbox"/> Part C recipient <input type="checkbox"/> Part D recipient <input type="checkbox"/> Part E recipient <input type="checkbox"/> Part F recipient <input type="checkbox"/> MAI (Minority AIDS Initiative) <input type="checkbox"/> EIS (Early Intervention Services) <input type="checkbox"/> Community based organization <u>not</u> providing HIV services <input type="checkbox"/> Public health department <input type="checkbox"/> Academic institution <input type="checkbox"/> Faith-based organization <input type="checkbox"/> Research organization <input type="checkbox"/> Other (please specify; i.e. corrections, mental health, substance abuse, etc.) _____ <input type="checkbox"/> None	<b>Your Expertise:</b> <input type="checkbox"/> Mental health services <input type="checkbox"/> Education or training <input type="checkbox"/> Epidemiology <input type="checkbox"/> PLWHA (Person/s living with HIV/AIDS) <input type="checkbox"/> HIV/health services delivery <input type="checkbox"/> Social work/case management <input type="checkbox"/> Program evaluation <input type="checkbox"/> Advocacy <input type="checkbox"/> Housing/Homelessness <input type="checkbox"/> Corrections <input type="checkbox"/> Drug & Alcohol services <input type="checkbox"/> Other (please identify): _____ <input type="checkbox"/> None	<b>Your Community Representation:</b> <input type="checkbox"/> PLWHA (Person/s living with HIV/AIDS) <input type="checkbox"/> IDU (Injection drug user/s) <input type="checkbox"/> MSM (Men who have sex with men) <input type="checkbox"/> WSW (Women who have sex with women) <input type="checkbox"/> Bisexual <input type="checkbox"/> Transgender <input type="checkbox"/> Heterosexual <input type="checkbox"/> Adolescents and youth <input type="checkbox"/> General population <input type="checkbox"/> Community member <input type="checkbox"/> Other (please identify): _____ <input type="checkbox"/> None
<b>From the above choices, indicate your primary affiliation:</b> _____  <b>Indicate a secondary affiliation:</b>	<b>From the above choices, indicate your primary expertise:</b> _____  <b>Indicate a secondary expertise:</b>	<b>From the above choices, indicate your primary representation :</b> _____  <b>Indicate a secondary representation:</b>



## HPG Vision-Mission-Values

APPROVED

*May 16, 2013*

### VISION

The vision of the Pennsylvania HIV Planning Group is to ensure that all persons living with HIV and those at risk have access to current prevention, treatment and care, interventions, and services through a continuum of engagement that includes testing, linkage and maintenance in the supportive services and health care system.

### MISSION

The purpose of the Pennsylvania HIV Planning Group is to provide a forum for key stakeholders across the Commonwealth to formally provide input to the PA Department of Health on issues related to HIV/AIDS care, prevention, and testing in order to address goals of the National HIV/AIDS Strategy.

### VALUES

The Pennsylvania HIV Planning Group embraces these values in achieving our vision and mission:

**Parity** – equal participation in completing tasks or duties in the planning process with an equal voice.

**Inclusion** – involvement in decision making to insure that the needs of the affected community and care providers are addressed.

**Representation** – members reflect the perspective of a specific community including values, norms, and behaviors and knowledge of the needs of the populations they represent.

**Reflectiveness** – membership reflects Pennsylvania's epidemic in such factors as race, ethnicity, age and geographic diversity.

## HIV Planning Group (HPG) Member Job Description

### **Job Summary**

Community planning for HIV/AIDS prevention and care is an essential component of a comprehensive statewide program. Member stakeholders will participate in statewide planning as a partner with the Pennsylvania Department of Health (DOH) to improve the impact of HIV prevention and care efforts within their local jurisdiction, while abstaining from serving as an advocate for an agency or any specific population.

### **Qualifications**

- Have a working knowledge of relevant planning and funding guidelines from the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA), as well as the National HIV/AIDS Strategy (NHAS).
- The HPG Member stakeholder will fall into at least one of the following categories:
  - Consumers/community members (consumers will include affiliated and non-affiliated consumers, RW and/or SPBP recipients, youth and others of high risk but not positive status, etc.)
  - Ryan White funded-Programs (Parts A-F)
  - HIV/AIDS Testing/Prevention Providers
  - Regional sub-recipients
  - Pennsylvania Department of Health appointee
  - Human Service Providers
    - Mental Health
    - Drug & Alcohol
    - Housing/HOPWA (Housing Opportunities for People with AIDS)
    - SPBP Advisory Committee Member
  - Other individuals interested in committing to HIV planning in the state of Pennsylvania regardless of their HIV status or role within the community at large

### **Duties and Responsibilities**

- Make a commitment to the HIV planning process and its results by attending at least 75% of the scheduled meetings each year, during a three year term.
- Member stakeholders are expected to actively participate in decision-making and problem-solving activities during HPG meetings.
- Serve on work groups and/or ad-hoc committees when appropriate, and complete assigned tasks. Member stakeholders will also be asked to volunteer for chair or co-chair positions to lead work groups, when appropriate. Workgroups or ad-hoc committees may schedule meetings outside of the normal HPG schedule and could include teleconference, face to face, and/or webinars.

- Make a commitment to work with DOH to ensure that the HPG’s engagement process and the jurisdictional plan align with the NHAS goals.
- Understand and follow the HPG bylaws and/or written protocols.
- Use information provided by the DOH to collaboratively develop an engagement process.
- Utilize the data/information presented to the HPG in the epidemiological profile and request additional information if the data presented does not clearly reflect the impact of the epidemic in the jurisdiction.
- Advise DOH on ways to solicit appropriate stakeholder feedback, and, when appropriate, participate in obtaining feedback from stakeholders.
- Recognize the diverse interests and concerns of other stakeholders and agree to work cooperatively with one another to achieve the best possible planning results.
- Exhibit cultural competence, including the ability to interact effectively with people of different cultures, races, ethnicities, sexual preferences, genders, and socio-economic backgrounds.
- Keep client level data, personal information obtained during the course of your work, and opinions expressed during HPG, workgroup, and ad-hoc meetings confidential.

By signing this job description I understand that I am committing to be a part of the Pennsylvania HIV Planning Group for a period of a minimum of three years. I will abide by the HPG protocols and make every effort to follow the duties and responsibilities included in this job description.

Member Name: \_\_\_\_\_ Date: \_\_\_\_\_

Member Signature: \_\_\_\_\_

**Members with Disabilities**

The Americans with Disabilities Act of 1990 (ADA) prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, state and local government services, public accommodations, commercial facilities, and transportation. It also mandates the establishment of TDD/telephone relay services. With this in mind the HPG will make every effort to accommodate individuals with disabilities during all meetings including workgroups and ad-hoc meetings. If you are in need of a reasonable accommodation please make the chairperson aware.