

## **California Planning Group (CPG) Functions, Structure and Work Products**

### **CPG Functions**

The CPG has two primary functions: planning and advising

*Planning:* CPG members will inform the development, implementation, and revision of California’s Integrated HIV Surveillance, Prevention, and Care Plan (Integrated Plan), as outlined in the Centers for Disease Control and Prevention (CDC) and Health Resources and Services Administration (HRSA) “Integrated HIV Prevention and Care Plan Guidance, Including the Statewide Coordinated Statement of Need, CY 2017-2021”.

*Examples of planning activities:*

- Utilize data and program updates provided by Office of AIDS (OA) to give feedback regarding the OA response to trends in the HIV epidemic, shifts in priority, and emerging populations
- Provide feedback on whether the Integrated Plan continues to be the most effective way to help California meet the goals outlined in the National HIV/AIDS Strategy and address the statewide epidemic
- Assist in the needs assessment, unmet need, and gap analysis process
- Act as “roving ambassadors” to maintain the feedback loop between OA and consumers, stakeholders, and collaborative partners

*Advising:* CPG members will advise and consult OA on issues related to the OA mission. These issues may be identified by OA or by the CPG in the course of its work.

*Examples of advising activities:*

- Advise OA regarding any updates that may need to be incorporated within the Integrated Plan
- Provide review and input on the revised OA allocation formulas
- Provide review and input on the new OA Standards of Care for Ryan White Part B services
- Participate on the review panel for OA’s California AIDS Clearinghouse of HIV educational materials

- Work with OA to develop effective engagement and communication strategies with partners and stakeholders
- Offer recommendations for ensuring a coordinated approach in accessing HIV prevention, care, and treatment services for the highest-risk populations

### **CPG Structure**

- 20-25 voting members
  - Two Community Co-Chairs as elected by the CPG membership
  - Two State Co-Chairs as appointed by OA
  - The CPG membership will meet in person twice a year if allowed by state travel policies (as OA pays for CPG travel expenses). Teleconferences or webinars may be scheduled to address specific planning or advisory needs.
- Non-voting advisory members/collaborative partners/technical advisors as needed: members in this category may represent key populations and stakeholders as well as those affiliated with HIV service delivery networks who are not primarily HIV service providers. Members in this category may also include subject matter experts appointed by OA. Meeting participation will be on an ad hoc basis via briefing, teleconference, and/or email consultation

### **CPG Work Products**

- Annual letters of concurrence for the *Integrated Plan*
- Revisions/updates to CPG Governance document
- CPG Member Profiles
- Documentation of CPG member feedback/input provided during planning and advisory activities