

**NOMINATING AND SELECTING MEMBERSHIP ON THE PENNSYLVANIA  
HIV PREVENTION COMMUNITY PLANNING COMMITTEE**

**BACKGROUND**

Based on requirements issued by the Centers for Disease Control and Prevention (CDC) in 1994, the Pennsylvania Department of Health formed a statewide HIV Prevention Community Planning Committee, to help the Department develop its annual HIV Prevention Plan. The planning group is co-chaired by staff of the Division of HIV/AIDS, and a co-chair elected by the Committee. Details of the membership and criteria for selection are set forth below. These criteria should be used for nomination and will be used for selection of future replacement members to serve on the Committee.

**I. STRUCTURE AND FUNCTION**

This statewide HIV Prevention Community Planning Committee is representative of the populations at risk for HIV infection; relevant state and local governmental organizations; experts in fields related to prevention (such as Epidemiology, social research, market research, behavioral science, and public health planning and evaluation); organizations providing HIV prevention and related services, and people living with HIV/AIDS. Members do not attend as representatives of their organization and may not benefit financially as a direct result of being on the Committee. Applicants are screened to determine if there is any conflict of interest, either personally, or through an employer.

In cooperation with the Pennsylvania Department of Health, the Planning Committee develops a community prevention plan for the entire Commonwealth, with the exception of Philadelphia, which develops its own. The Health Department's use of CDC funds for the planning, implementation and evaluation of HIV prevention programs are guided by the plan. The HIV Prevention Community Planning Committee membership is restricted to a size that, while accomplishing the intent of the HIV Prevention Community Planning process, does not become so large that it cannot function effectively (approximately 35-45 members).

A considerable amount of the work of the committee will be conducted in four sub-committees (Epidemiology, Needs Assessment, Interventions, and Evaluation). New members are required to participate in a subcommittee.

**II. PROCEDURES FOR RECRUITING AND SELECTING MEMBERSHIP**

Following are lists of expertise and experience factors and criteria for nomination, as well as the nomination and selection process, which is used to select members for the statewide HIV Prevention Community Planning Committee.

**A. EXPERTISE**

- |                                     |                                    |
|-------------------------------------|------------------------------------|
| Community Representative            | Corrections                        |
| Community Organization              | Business and Labor                 |
| Person Living with HIV/AIDS         | Substance Abuse                    |
| Intervention Specialist             | HIV Care and Social Services       |
| Behavioral or Social Scientist      | State/Local Education Agency       |
| Evaluation                          | Local Health Department (HIV, STD) |
| Health Planner                      | Mental Health                      |
| Epidemiologist                      | Homeless Services                  |
| Faith Community                     | Academic Institution               |
| Research Center                     |                                    |
| Non-Agency/Community Representative |                                    |

**B. EXPERIENCE**

Individuals who represent the perspectives of populations at high risk for HIV (through personal life experiences, work responsibilities, or other affiliations):

- Person Living with HIV/AIDS
- Men who have sex with men and are at high risk through unsafe sex (MSM)
- Men who are at risk from both unsafe sex with other men and unsafe drug injection practices (MSM/IDU)
- Men and women who are at risk through unsafe injection drug practices (IDU)
- Men and women who are at risk through unsafe heterosexual sex with an infected partner (Heterosexual)
- Mother with/at risk for HIV transmission (Perinatal Transmission)
- Men and women in emerging risk groups: Minority Populations, Young People, Homeless, Incarcerated, Transgender

**C. CRITERIA FOR NOMINATION**

1. Ability and willingness to attend and actively participate in all meetings.
2. Interest and/or knowledge of HIV/AIDS issues.
3. Knowledge of, or willingness to learn the principles of community HIV prevention planning.
4. Expertise or experience as listed above.
5. Ability to represent a particular constituency.

**C. SELECTION PROCESS**

Nominating Committee member's review and rate each application for membership and select from a list of candidates. Since the Department is striving to make the nomination and selection process as open as possible, self-nominees are considered.

**D. EXPENSES**

The Health Department pays legitimate expenses associated with travel to the meeting in Harrisburg. Plane tickets can be provided in advance of the meeting and hotel vouchers are provided the day of the meeting. (Please be advised that the meeting site hotel requires a personal credit card to guarantee a room reservation. A list of local hotels that do not require a credit card to secure reservations is available.) Other transportation costs (bus, train, taxi, mileage) are reimbursed after the fact. Car rentals are not permitted. A continental breakfast and full lunch are provided the day of the meeting. In addition, a daily subsistence allowance is provided to cover meal expenses during a 24-hour travel period. The Department does not reimburse childcare expenses, lost wages, or entertainment expenses.

**SPECIAL NOTE: ALL MEETINGS OF THE HIV PREVENTION COMMUNITY PLANNING COMMITTEE ARE SUBJECT TO PENNSYLVANIA'S SUNSHINE LAW. THIS MEANS THAT THEY ARE OPEN TO THE PUBLIC, ALTHOUGH, ONLY COMMITTEE MEMBERS ARE PERMITTED TO PARTICPATE.**

## JOB DESCRIPTION

<i><b>Pennsylvania HIV Prevention Community Planning Committee</b></i>	<i><b>Pennsylvania Department of Health, Division of HIV/AIDS</b></i>	<i><b>University of Pittsburgh Graduate School of Public Health</b></i>
<ul style="list-style-type: none"> <li>• Attend 12 meetings per year.</li> <li>• Actively participate in Committee meetings and sub-committee meetings.</li> <li>• Participate in the development of an annual Comprehensive HIV Prevention Plan/Plan Update.</li> <li>• Participate in the development of the Plan key products:               <ul style="list-style-type: none"> <li>• Epidemiologic Profile;</li> <li>• Community Services Assessment (Needs Assessment, Resource Inventory, Gap Analysis);</li> <li>• Priority Target Populations;</li> <li>• Appropriate Science-based Prevention Interventions;</li> <li>• and review the CDC application to ensure concurrence with the Prevention Plan</li> </ul> </li> <li>• Monitor Prevention Plan implementation.</li> <li>• Provide input and recommendations in the development of evaluation of community planning, prevention interventions and counseling and testing programs.</li> <li>• Provide input and recommendations to the Division on other HIV prevention-related issues (e.g., HIV Reportability, rapid testing)</li> </ul>	<ul style="list-style-type: none"> <li>• Convene the Committee, including selecting meeting sites, providing meals and lodging, and assisting members with travel arrangements</li> <li>• Provide technical assistance and staff support to the Committee and Sub-committees regarding AIDS epidemiology, counseling and testing activities, updates on other federal and state HIV-related activities, and other input as requested by the Committee</li> <li>• Develop CDC funding applications consistent with Prevention Plan objectives, recommended activities and interventions, and priorities</li> <li>• Initiate and monitor sub-contracts as determined in the application</li> <li>• Coordinate with other state agencies as appropriate regarding priority of Prevention Plan objectives</li> <li>• Coordinate media requests and distribution of the Prevention Plan</li> <li>• Participate in the development of the Plan key products:               <ul style="list-style-type: none"> <li>• Epidemiologic Profile;</li> <li>• Community Services Assessment (Needs Assessment, Resource Inventory, Gap Analysis);</li> <li>• Priority Target Populations;</li> <li>• Appropriate Science-based Prevention Interventions</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Facilitate all Committee and Sub-committee meetings, including recommendations for agenda content and structure, meeting facilitation, production of minutes, and development of small group and prioritization processes and activities</li> <li>• Coordinate needs assessment activities</li> <li>• Provide technical assistance to the Committee and the Division regarding behavioral science, prevention planning, and program evaluation</li> <li>• Develop and implement sub-contracts for some community-based interventions as necessary to expedite distribution of funds</li> <li>• Provide technical assistance to sub-contractors regarding program development and evaluation</li> <li>• Participate in the development of the Plan key products:               <ul style="list-style-type: none"> <li>• Community Services Assessment (Needs Assessment, Resource Inventory, Gap Analysis);</li> <li>• Priority Target Populations;</li> <li>• Appropriate Science-based Prevention Interventions</li> </ul> </li> </ul>

**NOMINATION FORM**  
**Pennsylvania Department of Health**  
**PENNSYLVANIA HIV PREVENTION COMMUNITY PLANNING COMMITTEE**

Please use this form to submit a nomination for membership on the state HIV Prevention Community Planning Committee. This form must be completed and signed by the person nominated. If you reside in Philadelphia, you may wish to inquire about the committee hosted by the Philadelphia Department of Public Health.

All information on this form will be used only for selecting a balanced group membership and will be held strictly confidential.

**NOMINATIONS ARE DUE:      NOVEMBER 1, 2006**

PLEASE PRINT OR TYPE

NAME OF NOMINEE \_\_\_\_\_  
 YEAR OF BIRTH \_\_\_\_\_

ADDRESS (Home) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ADDRESS (Work, if applicable) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PHONE: \_\_\_\_\_  
 FAX: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_

The Committee wants to include individuals from many sectors of the community who represent a wide variety of expertise, interests and backgrounds. Please indicate which of the following applies to the nominee (check as many as apply). All information that is provided in this section is completely confidential.

<input type="checkbox"/> Male	<input type="checkbox"/> Mixed Race	<input type="checkbox"/> Gay
<input type="checkbox"/> Female	<input type="checkbox"/> African-American	<input type="checkbox"/> Lesbian
<input type="checkbox"/> Transgender	<input type="checkbox"/> Latino/Latina	<input type="checkbox"/> Bi-sexual
	<input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Heterosexual
	<input type="checkbox"/> White	

Employment/Experience (check all that apply)

<input type="checkbox"/> Evaluation	<input type="checkbox"/> Epidemiology
<input type="checkbox"/> Needs Assessment	<input type="checkbox"/> Prevention Interventions

**Priority Population Representation**

To ensure that Pennsylvania's community planning supports broad-based community participation in HIV prevention planning, community planning group members must represent the perspectives (through personal life experiences, work responsibilities, or other affiliations) of populations living with HIV/AIDS and populations at high risk for HIV. Pennsylvania's HIV Prevention Community Planning Committee has identified the following Priority Target Populations:

- Person Living with HIV/AIDS
- Men who have sex with men and are at high risk through unsafe sex (MSM)
- Men who are at risk from both unsafe sex with other men and unsafe drug injection practices (MSM/IDU)
- Men and women who are at risk through unsafe injection drug practices (IDU)
- Men and women who are at risk through unsafe heterosexual sex with an infected partner (Heterosexual)
- Mother with/at risk for HIV transmission (Perinatal Transmission)
- Men and women in Emerging Risk Groups: Minority Populations, Young People, Homeless, Incarcerated, and Transgender

**Check all the populations that apply to you.**

Community HIV Prevention Plan Target Populations	You identify as a member of this population or feel you can <i>represent</i> this population.	Explain why you can <i>represent</i> this population.
Person Living with HIV/AIDS		
MSM		
IDU		
MSM/IDU		
Heterosexual		
Perinatal Transmission		
Emerging Risk Groups		

**All information on this form will be held strictly confidential.**

Nominated by: Self \_\_\_\_\_

Other: (name) \_\_\_\_\_

Three community references that would know something of your community work and involvement:

Name: \_\_\_\_\_  
Relationship (friend, employer, etc.) \_\_\_\_\_

Telephone/email: \_\_\_\_\_

Name: \_\_\_\_\_  
Relationship (friend, employer, etc.) \_\_\_\_\_

Telephone/email \_\_\_\_\_

Name: \_\_\_\_\_  
Relationship (friend, employer, etc.) \_\_\_\_\_

Telephone/email \_\_\_\_\_

I understand that I am being nominated for membership on the PA HIV Prevention Community Planning Committee. **I am willing and able to commit approximately one or two days per month for a three year period to participate in the Committee and Sub-Committee meetings** (NOTE: travel costs for all meetings will be reimbursed).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE MAIL OR FAX (717-772-4309) APPLICATION TO:**

Kenneth McGarvey  
Pennsylvania Department of Health  
Division of HIV/AIDS  
P.O. Box 90  
Room 1010 Health and Welfare Building  
Harrisburg, Pennsylvania 17108  
Fax: (717) 772-4309

**Please provide a one or two paragraph statement written by the nominee, which describes why the nominee wishes to be a member of the PA HIV Prevention Community Planning Committee. Include relevant experience and strengths.**