



MEETING AGENDA

COMMITTEE: Community Empowerment Committee

Date/Time: Tuesday, March 3, 2015, 1:00 p.m.

Location: Governmental Center Annex, Room A-337

Chair: Arianna Lint

1. **CALL TO ORDER:** *Welcome, Review meeting ground rules, Statement of Sunshine, Introductions, Moment of Silence, Public Comment*
2. **APPROVALS:** 3/3/15 Agenda, 2/3/15 Minutes
3. **STANDARD COMMITTEE ITEMS**
 - a. Testimonials
4. **UNFINISHED BUSINESS**
 - a. Review the revised event survey to be used at CEC events & community meetings (WP Item 1.4) (HANDOUT A)
5. **MEETING ACTIVITIES/NEW BUSINESS**

Goal/Work Plan Objective #:	Accomplishments
Hot Topic-Community Meeting (WP Item 1.3)	ACTION ITEM: Finalize Hot Topic discussion item and community meeting location. (HANDOUT B)
Welcome Brunch	ACTION ITEM: Discuss and determine CEC participation in MCDC Welcome Brunch in May 2015.
CEC Educational Series: Got Data, Now What? (WP Item 2.2)	ACTION ITEM: Receive presentation on how to interpret data. (HANDOUT C)
Barriers to HIVPC & Committee Participation Survey	ACTION ITEM: Take Barriers to HIVPC & Committee Participation Survey to gather information for the MCDC committee on the barriers to being active on committees and the HIVPC.

6. **GRANTEE REPORTS**
7. **PUBLIC COMMENT**
8. **AGENDA ITEMS/TASKS FOR NEXT MEETING:** **Date:** April 7, 2015, 1:00 p.m. **Venue:** TBD

Agenda Items/Tasks for next Meeting (Work Plan Item/Goal#)	Information requested (i.e. data, research, etc.) action to be taken, presentation, discussion, brainstorm etc.
Hot Topic Presentation (WP Item 1.3)	ACTION ITEM: Hold community meetings in the community at least quarterly that include educational "Hot Topics" to enhance understanding about the 3 Guiding Ideas.

9. **ANNOUNCEMENTS**
10. **ADJOURNMENT**

PLEASE COMPLETE YOUR MEETING EVALUATIONS

THREE GUIDING PRINCIPLES OF THE BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL

• Linkage to Care • Retention in Care • Viral Load Suppression •

VISION: To ensure the delivery of high quality comprehensive HIV/AIDS services to low income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care

MISSION: We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, we: Foster the substantive involvement of the HIV affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care
Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments
Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment



MEETING MINUTES

COMMITTEE: Community Empowerment Committee (CEC)

Date/Time: Tuesday, February 3, 2015, 1:00 p.m.

Location: Governmental Center Annex Room A-337

Chair: Arianna Lint **Vice Chair:** Vacant

	Members	Present	Absent	Guests
1	Burgess, D.	X		
2	Bhrangger, R.	X		Grantee Staff
3	Creary, K.	X		Vargas, J.
4	Clayton, L.	X		Jones, L.
5	Culpepper, K.	X		
6	Franks, H.	X		HIVPC Staff
7	Katz, H.B.		E	Johnson, B.
8	King, J.		A	Sandler, C.
9	Lint, A., <i>Chair</i>	X		Beckford, R.
10	Marcoviche, W.	X		
11	Myers, L.	X		
12	Parker, P.	X		
13	Reed, Y.	X		
14	Robertson, P.	X		
15	Runkle, D.	X		
16	Wilkins, D.	X		
	Quorum = 9	14		

1. CALL TO ORDER:

The Chair called the meeting to order at 1:02 p.m.

The Chair welcomed all present. Attendees were notified of information regarding the Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. Attendees were advised that the meeting ground rules are present, for reference. In addition, attendees were advised that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed. The Chair, committee members, guests, grantee staff and support staff self-introductions were made. A moment of silence was observed.

2. APPROVALS:

Motion #1: To approve today's meeting agenda with one amendment.

Amendment: The chair is now Arianna Lint and the Vice-chair is open.

Proposed by: Creary, K. **Seconded by:** Runkle, D.

Action: Passed Unanimously

Motion #2: To approve 9/2/14 meeting minutes

Proposed by: Creary, K. **Seconded by:** Franks, H.

Action: Passed Unanimously

3. STANDARD COMMITTEE ITEMS

- a. Testimonials – One member shared that she was recently appointed to the Board of Directors for the Sex Workers Outreach Project USA (SWOP USA). Sex Workers Outreach Project-USA is a national social justice network dedicated to the fundamental human rights of sex workers and their communities, focusing on ending violence and stigma through education and advocacy. Another member shared that she was recently a speaker at the National Newspaper Publishers Association



(NNPA) Mid-Winter Conference, where she spoke on HIV and AIDS awareness. Based on her presentation, she may be giving another presentation in Senegal in June.

4. UNFINISHED BUSINESS

a. Review and approve CEC 18 Month Work Plan (WP Item 4.3) (Handout A)

The committee reviewed the 18 month work plan and the changes made by staff following discussion at the previous meeting. The committee changed the work plan item about developing a “social media strategy” to developing a “marketing strategy” so it can encompass far more than social media. Several dates for work plan items were also modified, and progress on work plan items was noted in the last column. Next month, the committee will be participating in the Membership/Council Development Committee (MCDC) Welcome Brunch as one of its community meetings. A member asked if the Welcome Brunch is mandatory and if it takes the place of the meeting. She was notified that the brunch is not mandatory and will not take the place of the meeting. Policies and procedures were also reviewed. The grievance procedures were removed and references to social media were changed to marketing resources.

A committee member had a question about advertising dollars to promote and market activities and events. Support staff noted that there are funds available for marketing materials. One member shared her experience about cities putting up boards while people are running for office, she had a question about the Planning Council putting up these signs to advertise events. Support staff explained that as a Broward County Advisory Board specific approvals from the county would be needed before implementing major marketing strategies. The Chair discussed how important it is to have face-to-face marketing, and not only social media marketing; she suggested setting up tables at clinics to speak to clients about becoming involved with the Planning Council. A member of the Grantee staff reminded the committee how essential the CEC committee is, she stressed the importance of connecting and sharing. A member asked for a print out of resources that can be handed out to people in the community. A member let the committee know that the resource directory needs to first be updated. A member reminded the CEC committee that they need people that have heart and passion to be on the committee.

Motion #3: To approve the changes to the 18 month work plan.

Proposed by: Creary, K.

Seconded by: Runkle, D.

Action: Passed Unanimously

5. MEETING ACTIVITIES/NEW BUSINESS

- a. Event Survey – The committee reviewed the event survey with changes based on the previous meeting’s discussion. A member noted that clients are not always aware that they are receiving Ryan White services. Another member brought up a different way to ask the question, and discussed leaving the question open. Grantee staff asked the committee what the purpose of the survey was and what the committee plans to do with the information they receive. Support staff responded to let the group know that they felt the survey was important to find out about the success of the event and the demographics of attendees. A member suggested making sure the survey is simple and easy to read. A member noted that surveys should be developed at a lower reading level, to ensure that everyone will be able to read and understand it. The words affiliated and convenient may be too advanced for the people the committee is trying to reach. Later, a member said that the questions need to be questions that are not too confidential. A member said that the committee should have committee members work with Staff to make the surveys easier to understand.



- b. Calendar of Meetings & Events – Staff asked the committee to come up with ideas for the various hot topics and community events. Hot topic and community event ideas included PrEP and PEP, stigma and shame, Latinos and HIV, Women and HIV, re-infected PLWHA and the role of sexuality and sex negotiation, empowerment, and HIV 101. Members also requested training on the committee level on topics such as understanding data, Viral Loads, and the implementation of the ACA and Medicaid.
- c. MSM Study Overview – The MSM study overview was request by committee members at a previous meeting. Members were provided a handout of the feedback and analysis that came from the study. Staff explained that this feedback was from focus groups and informant interviews. Information was presented both in summary form and through individual quotes and by race/ethnic groups, which identified types of norms and stigmas throughout these MSM subpopulations.
- d. Request from PSRA - One of the findings from the MSM study was a feeling from interviewees of a lack of community and support groups. Many support groups are available in the community, so the PSRA committee felt it may have been an issue of lack of awareness, rather than the support groups not existing. The PSRA committee asked the CEC to review the list of groups developed by Staff, and add any additional groups that were missing. The list will be available on the HIV Planning Council website, and can be updated as needed. The committee members were encouraged to notify staff of any other support groups in the area.

6. GRANTEE REPORT

A Grantee staff member noted that work towards an integrated Comprehensive Plan continues. An integrated committee is being developed to represent both the prevention and care and treatment funding streams as the Plan is written. A directory of services is necessary and is being created. Of course, the process is difficult, because some of these places do change their names and contact information. Everyone needs to work together to inform the community that Affordable Care Act (ACA) enrollment ends on February 15, 2015. It is very important to get as many people as possible to see if they are eligible to receive ACA marketplace plans. The staff member advised everyone to make an appointment with a case manager who will, if client's eligible, refer to a navigator. The MCDC committee asked for feedback on the Welcome Brunch and noted the committee is looking for different venues to hold the brunches at. CEC committee will likely be asked to participate in focus groups as part of the upcoming needs assessment. The NAE committee needs more consumers. A member noted that ACA is a total nightmare and that navigators need more training. The grantee staff mentioned that the ACA is a work in progress. One of the problems is identifying plans. Ryan White and the AIDS Drug Assistance Program (ADAP) chose ACA programs specific to HIV client needs. ADAP and Ryan White now flag clients that may be eligible for plans. Grantee staff did agree that it can be a difficult system, since it is still in its early stages.

7. PUBLIC COMMENT

The Chair encouraged CEC members to let the HIV Planning Council Chair know if they are interested in becoming the CEC Vice Chair, or know of anyone who is interested in.

8. AGENDA ITEMS/TASKS FOR NEXT MEETING: Date: TBD Venue: Gov't Center Annex Room A-337

Tasks for next Meeting	Action to be taken, presentation, discussion, brainstorm etc.
Event Survey (WP Item 1.4)	ACTION ITEM: Review the revised survey to be used at CEC events and community meetings in order to gain feedback for future events. Make any necessary changes.
Quarterly Community Meeting (WP Item 1.3)	ACTION ITEM: Hold community meetings in the community at least quarterly that include educational "Hot

CEC – Minutes – 2/3/15

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	Topics" to enhance understanding about the 3 Guiding Ideas.
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9. ANNOUNCEMENTS

A member asked for Staff to alert members about any events happening for National Black HIV Awareness Day.

10. ADJOURNMENT

Without objection the meeting was adjourned at 2:59 p.m.

CEC ATTENDANCE 2015		
Member	1/6/15	2/3/15
Bhrangger, R.	X	X
Burgess, D.	X	X
Clayton, L.	A	X
Creary, K.	X	X
Culpepper, K.	X	X
Franks, H.	X	X
Katz, H.B.	X	E
King, J.	A	A
Lint, A., <i>Chair</i>	X	X
Marcoviche, W.	E	X
Myers, L.	X	X
Parker, P.	A	X
Reed, Y.	X	X
Robertson, P.	X	X
Runkle, D.	X	X
Wilkins, D.	X	X
Quorum = 9	12	14

Got Data Now What?

Looking at Data from a Consumer Perspective

Got Data: Now What?

- ▶ **Analyze** (understand the data)
- ▶ **Prioritize** (rank areas for action)
- ▶ **Communicate** (talk with stakeholders)
- ▶ **Take Action**



Why Is It Important?

- ▶ Why is it important for consumers to review and understand data?
 - ▶ For yourself?
 - ▶ For HIVPC/Committee involvement?



How Is It Used?

- ▶ Data sources can provide information about the hardest hit populations. It gives an understanding of:
 - ▶ *who* to target
 - ▶ *where* they live (*where* to target services)
 - ▶ *how* to provide services (based on barriers they face).

Basic Tips for Reviewing Data

- ▶ Understand the numerator and denominator
- ▶ **For example: HIV Positivity**
 - ▶ **Numerator:** # of positive HIV tests *(in the 12 month measurement period)*
 - ▶ **Denominator:** # of HIV tests *(in the 12 month measurement period)*

*HHS Measure: HIV
Positivity*

Numerator: 366

Denominator: 732

Basic Tips for Reviewing Data

- ▶ When you look at a percentage, ask for the “n,”
- ▶ n = the number of cases being measured (the denominator)
- ▶ 50% of HIV tests came back positive

HHS Measure: HIV Positivity

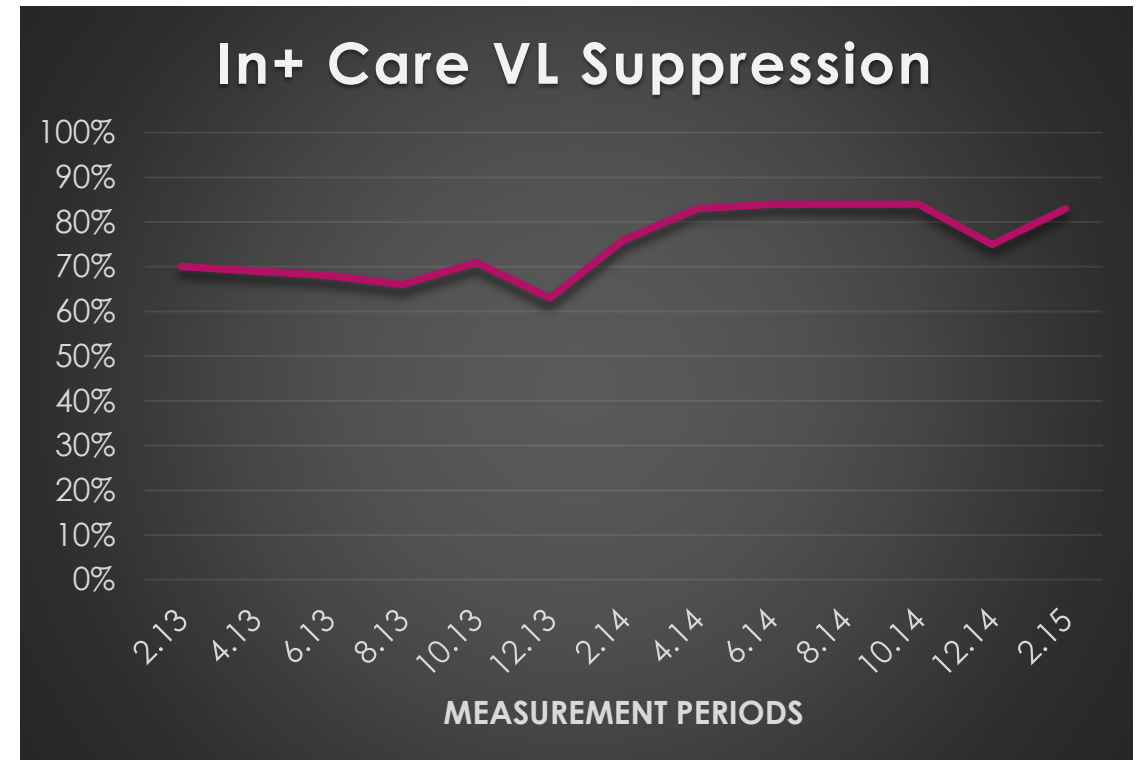
Numerator: 366

Denominator: 732

▶ **Percentage=50%**

Basic Tips for Reviewing Data

- ▶ Not all data is significant
- ▶ A significant data trend is defined as 8 data points in one direction
 - ▶ Can you spot a trend in this data?

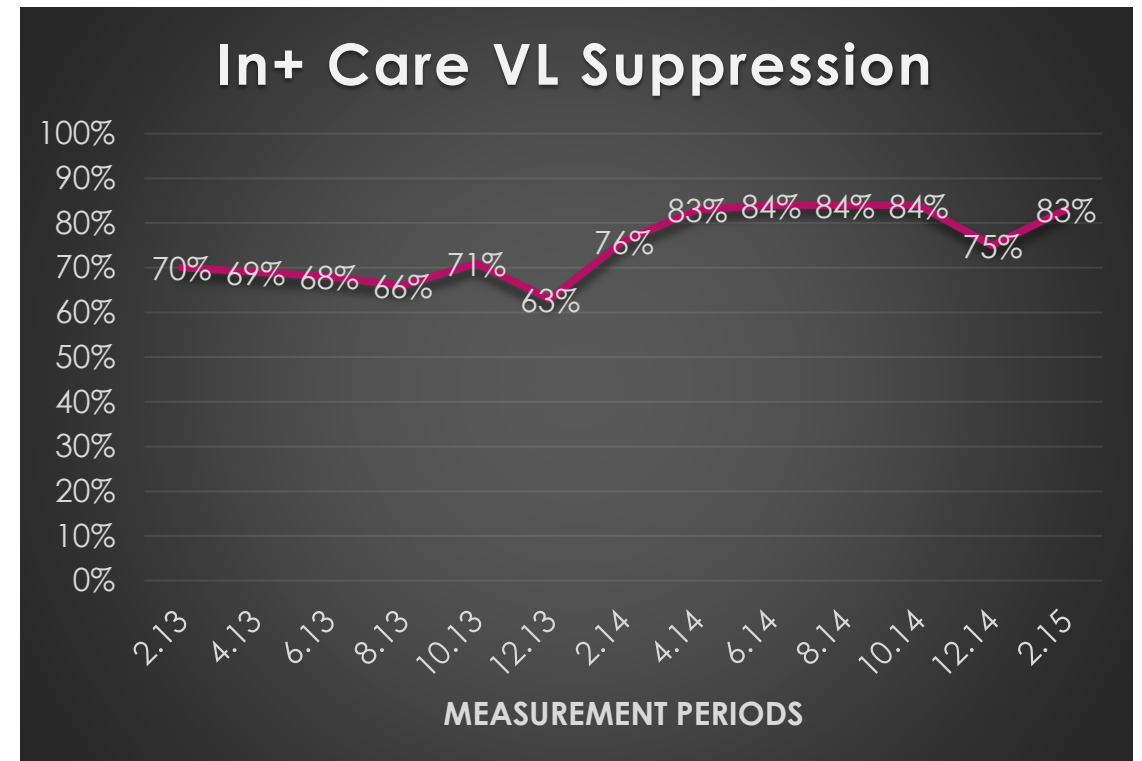


Tools to Analyze Data

- ▶ Run Chart
- ▶ Histogram
- ▶ Pie Chart
- ▶ Pareto Diagram

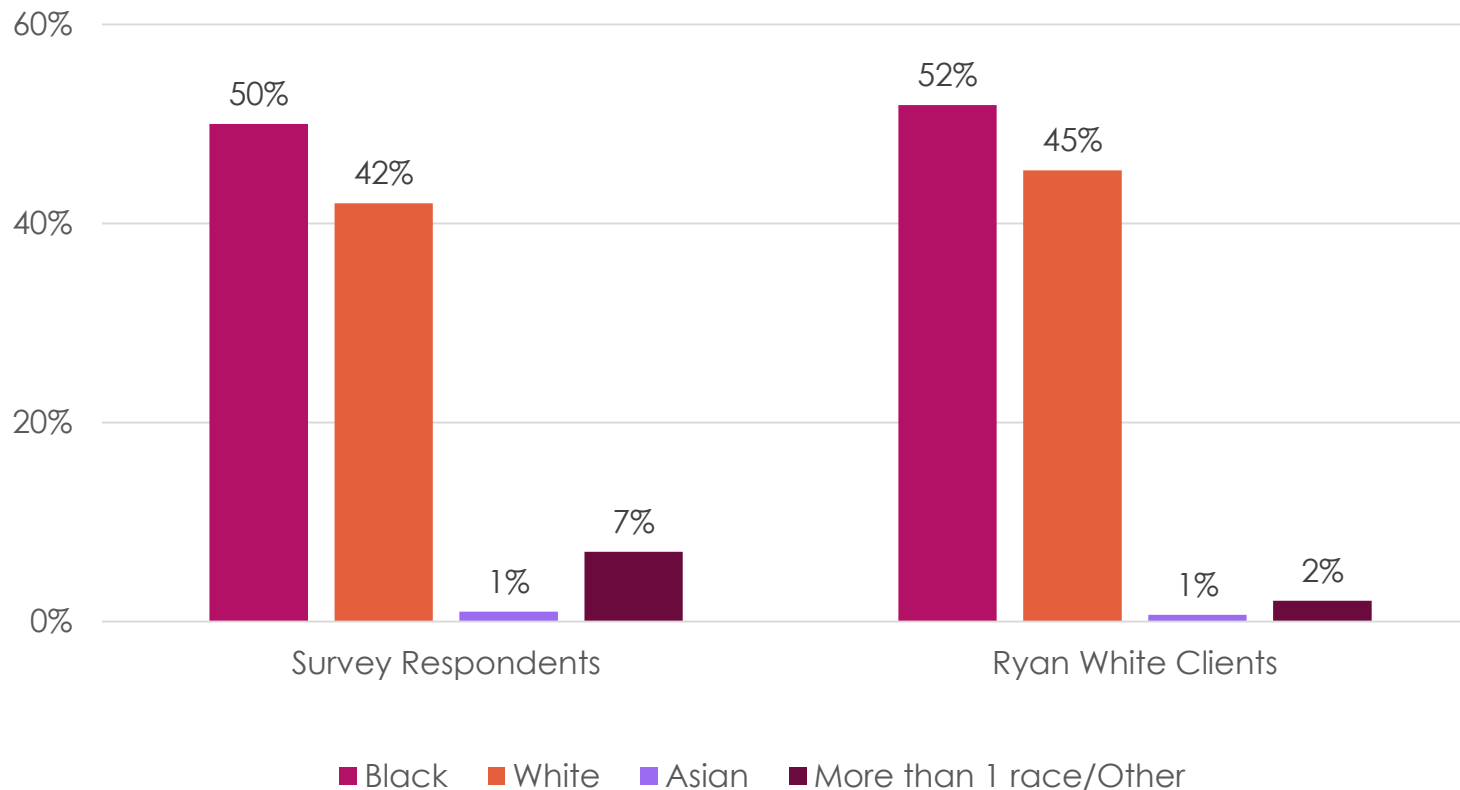
Run Chart

- ▶ A Run Chart is a line graph that plots data points over time
- ▶ The example shown is Viral Load Suppression rates tracked every 2 months from February 2013 to February 2015.
 - ▶ What do you notice about VL Suppression between February 2014 and October 2014?



Histogram

Race of Survey Respondents and Ryan White Clients

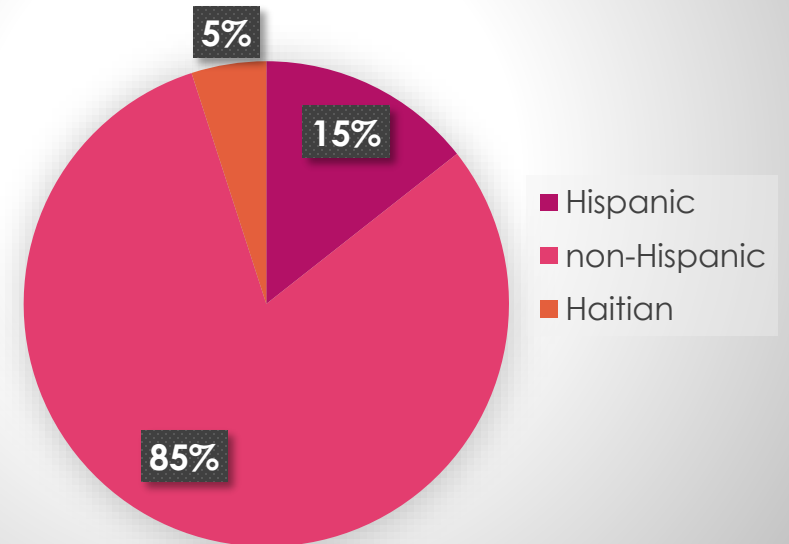


- ▶ Think of a histogram as a bar graph
- ▶ Each bar is a separate data point
- ▶ The example shows the race of the 730 PLWHAs who took the 2014 Needs Assessment Survey in comparison to the race of all Ryan White Part A Clients

Pie Chart

- ▶ A pie chart is usually used to show percentages
- ▶ In this case the percentage of clients accessing food services is broken down by ethnicity (Hispanic, Non-Hispanic, and Haitian).

Food Bank Utilization by Ethnicity



First, Look at the Data - What Does It Tell Us?

► How bad is the problem?

- How many?
- How often?
- How severe?

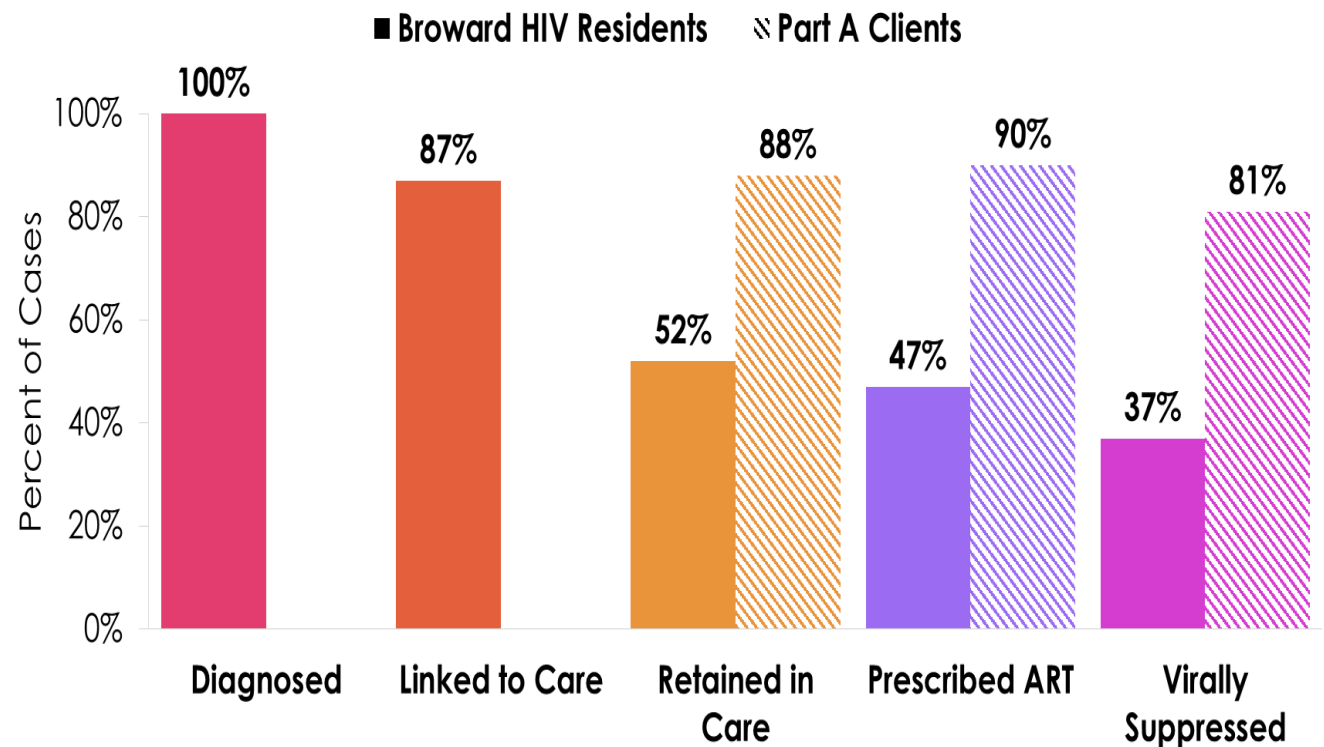
► Is the performance stable, or is there a trend?

- Getting better?
- Getting worse?

► How does our performance compare to others'?

► What are the data limitations?

Broward HIV Care Continuum, 2013



Source: Florida Department of Health & Provide Enterprise

Got Data, Now What?

Data is best used when...

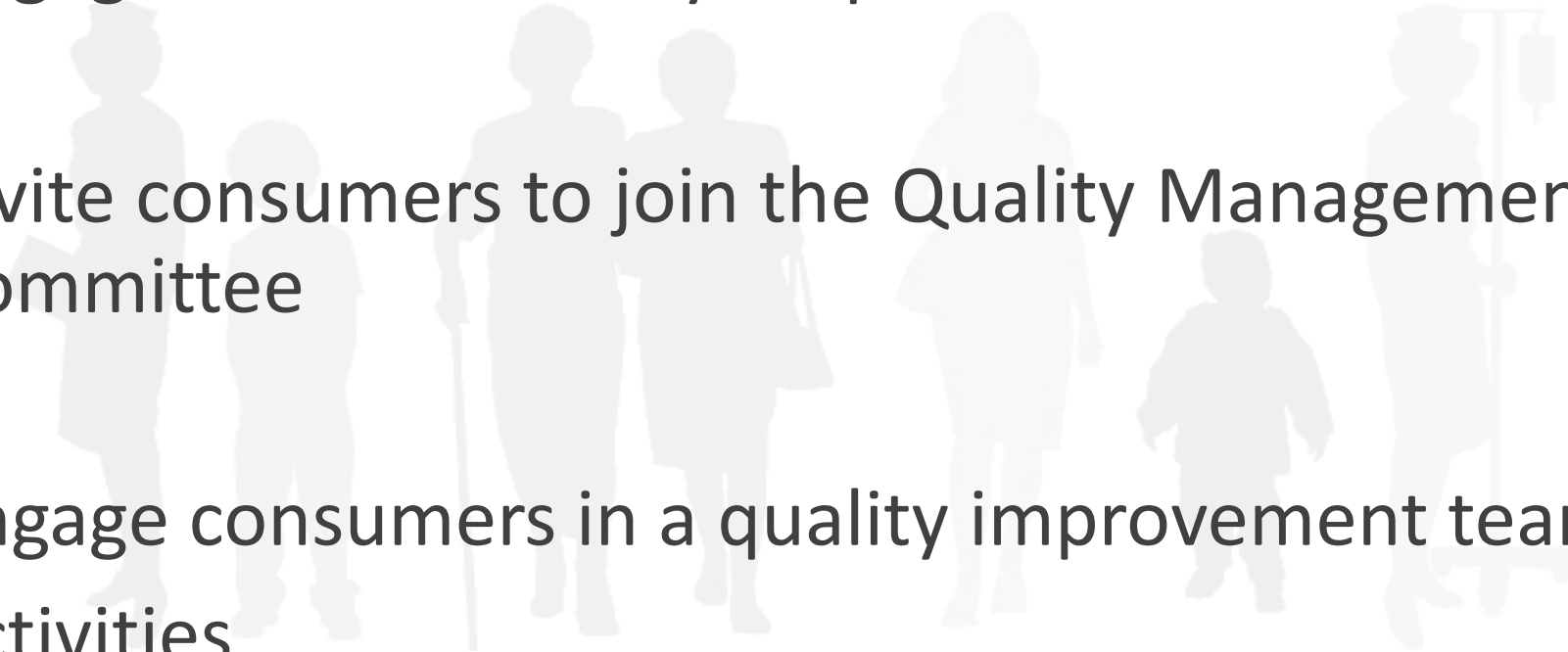
- ▶ You have clearly stated objectives about what you want to do with the data
- ▶ You know what you will do with the results
- ▶ Everyone is informed about the process

Barriers To Putting Data Into Action

- ▶ Don't even know where to get data/info
- ▶ Paralysis by analysis
- ▶ No one is interested in it
- ▶ Defensiveness
- ▶ Too difficult to understand
- ▶ Incorrect understanding of data
- ▶ Feeling lost, out of place due to lack of orientation and training
- ▶ Acronym fear
- ▶ Fear of disclosure
- ▶ Not getting informed of opportunities to participate
- ▶ Feeling that their input isn't being used or doesn't matter

Data Follow-up with Consumers

- ▶ Engage the Community Empowerment Committee
- ▶ Invite consumers to join the Quality Management Committee
- ▶ Engage consumers in a quality improvement team activities



Questions/Comments?



CEC HOT TOPIC LOCATIONS & PRESENTATIONS (April/May 2015)

Top 5 Meeting Locations:

- 1. Care Resource**
- 2. Broward House**
- 3. AHF**
- 4. Shadowood**
- 5. Wellness Center**

**A representative from the recommended location will provide Hot Topic Presentation on the services offered at the facility and other information benefiting the community. Staff will schedule the meeting during an available date/time and create a flier to distribute and display at the location to advertise the upcoming CEC meeting.*

COMMUNITY EMPOWERMENT COMMITTEE

EVENT NAME _____

LOCATION _____

DATE _____

1. Are you currently receiving any HIV services? ☐ Yes ☐ No
 2. Are you a provider of HIV services? ☐ Yes ☐ No
 3. Do you or anyone you know have HIV/AIDS and need help getting into care?
☐ Yes ☐ No
 4. Which agencies do you use/visit? (Please check all that apply)

☐ AHF	☐ Legal Aid
☐ Broward Regional Health Planning Council	☐ Memorial Healthcare Center
☐ Broward Community and Family Health Center	☐ MODCO
☐ Broward Health	☐ Nova Southeastern University
☐ Broward House	☐ Poverello
☐ Care Resource	☐ Pride Center
☐ Children's Diagnostic & Treatment Center (CDTC)	☐ SunServe
☐ Broward County Health Department	☐ Other: _____
☐ Fusion	
☐ Latinos Salud	
 5. How do you self-identify? ☐ Male ☐ Female ☐ Transgender Male ☐ Transgender Female
 6. Please select your age group below:
☐ 0-12 ☐ 13-19 ☐ 20-24 ☐ 25-29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ 60+
 7. Select ONE response that best describes your race:

☐ White/Caucasian	☐ Native Hawaiian/Pacific Islander
☐ Black/African Descent	☐ Asian
☐ American Indian/Alaska Native	☐ Other: _____
 8. How did you hear about this event? ☐ Flyer ☐ Word of mouth ☐ Online ☐ Newspaper
☐ Other _____
 9. Please rate the Event on a scale of 1 to 5: (1=NOT GOOD; 5= VERY GOOD)
(circle one) 1 2 3 4 5
- What did you like most about the event? ☐ Food ☐ Speaker/Topic ☐ Location ☐ People
☐ Other _____ ☐ I did not like the event
10. May we contact you for future events/for more information? ☐ Yes ☐ No
 If yes, please provide contact information:
Name _____
Email _____
Phone _____

THANK YOU FOR PARTICIPATING AND ATTENDING!