



FORT LAUDERDALE/BROWARD EMA
BROWARD HIV HEALTH SERVICES PLANNING COUNCIL
AN ADVISORY BOARD OF THE BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS
200 OAKWOOD LANE, SUITE 100, HOLLYWOOD, FL 33020
(954) 561-9681 • FAX (954) 561-9685

Executive Committee Meeting

Thursday, April 18, 2024 – 12:45 PM

Meeting location: Broward Regional Health Planning Council and Microsoft Teams

https://teams.microsoft.com/join/19%3ameeting_NDNhNzJkZGEtOWQ3OC00ZmY0LThiMTgtMDA1NjM3Mjc5MTJl%40thread.v2/0?context=%7b%22Tid%22%3a%220dd42165-bf27-4e00-9f50-1f4dff8a73f8%22%2c%22Oid%22%3a%221bcbe6d6-8962-41e8-b7e5-3cd660df997c%22%7d

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

This meeting is audio recorded.

The Executive Committee meets to conduct the business of the Council and shall: Set the agenda for Council meetings; Address Conflict of Interest issues; Review Membership/Council Development Committee Attendance report; Oversee the planning activities established in the integrated HIV prevention and care plan; Develop and oversee committee work plans that address comprehensive planning goals and objectives; and Ratify recommendations for removal for cause from the Membership/Council Development Committee.

Quorum for this meeting is 7

DRAFT AGENDA

ORDER OF BUSINESS

1. Call to Order/Establishment of Quorum
2. Welcome from the Chair
 - a. Meeting Ground Rules
 - b. Statement of Sunshine
 - c. Introductions & Abstentions
 - d. Moment of Silence
3. Public Comment
4. **ACTION:** Approval of Agenda for April 18, 2024
5. **ACTION:** Approval of Minutes from March 21, 2024 (**Handout A**)
6. Standard Committee Items
 - a. Review and Approve April 18, 2024, HIVPC Agenda, Meeting Materials and Motions (**Handout B**)
 - b. Review May 2024 HIVPC Calendar (**Handout C**)
7. Unfinished Business
 - a. None.
8. New Business
 - a. **Discussion:** MCDC Membership Strategy – Review the HIVPC membership

strategy and determine the best action to address vacancies. **(Handout D)**
Work Plan Activity 1.2: Review seat status to ensure mandated seats are filled.

- b. **Discussion:** Reflectiveness: HIVPC Demographics- Review demographics and identify populations that are over or underrepresented. **(Handout E)**
Work Plan Objective 1: Ensure HIVPC is representative and reflective.
- c. **Discussion:** MCDC policy for members of the quarter and member of the year. **(Handout F)**
- d. **Discussion:** MCDC policy for “Mentorship/Buddy Program”- a mentor for each new member. **(Handout G)**
- e. **Discussion:** MCDC policy for member attendance at mandatory training. **(Handout H)**

9. Recipient Report

10. Data Request

11. Public Comment

12. Agenda Items for Next Meeting

- a. Next Meeting Date: May 16, 2024, at 12:45 p.m. LOCATION: Broward Regional Health Planning Council
- b. Agenda Items for next meeting
 - i. Review and Approve May 23, 2024, HIVPC Agenda, Meeting Materials and Motions
 - ii. Review the June 2024 HIVPC Calendar

13. Announcements

- Listening Session hosted by PSRA/CEC, Wednesday, April 24th
- Outreach Opportunity Ujima Men’s, Saturday, May 4th

14. Adjournment

For a detailed discussion on any of the above items, please refer to the minutes available at: [HIV Planning Council Website](#)

Please complete your [meeting evaluation](#).

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: (1) Foster the substantive involvement of the HIV-affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.



FORT LAUDERDALE/BROWARD EMA
BROWARD HIV HEALTH SERVICES PLANNING COUNCIL
AN ADVISORY BOARD OF THE BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS
200 OAKWOOD LANE, SUITE 100, HOLLYWOOD, FL 33020
(954) 561-9681 • FAX (954) 561-9685

Executive Committee
Thursday, March 21, 2024 - 12:45 PM
Meeting at Broward Regional Health Planning Council and via
Microsoft Teams

DRAFT MINUTES

Executive Members Present: B. Fortune-Evans (QMC Chair), B. Barnes (PSRA & Ad-Hoc Chair), F. D'Amore (QMC Vice-Chair), V. Foster (MCDC Vice-Chair), L. Robertson (HIVPC Chair), S. Tinsley (CEC Chair), K. Hayes (SOC Vice-Chair), V. Biggs (HIVPC Vice-Chair), T. Moragne (MCDC Vice-Chair), J. Castillo (SOC Vice-Chair),

Members Absent: I. Wilson (CEC Vice-Chair)

Ryan White Part A Recipient Staff Present: G. James

Planning Council Support Staff Present: D. Liao, M. Patel, G. Martinez, M. Lacroix

Guests Present: None.

1. Call to Order, Welcome from the Chair & Public Record Requirements

The Executive Committee Chair called the meeting to order at 12:46 P.M. and welcomed all meeting attendees. The Chair notified attendees that the Executive Committee meeting is based on Florida's "Government-in-the-Sunshine Law and meeting reporting requirements, including the recording of minutes. In addition, he stated that the acknowledgment of HIV status is not required but is subject to public record if it is disclosed. Introductions were made by the Executive Committee Vice-Chair, Committee members, Recipient staff, PCS/CQM staff, and guests by roll call, and a moment of silence was observed.

2. Public Comment

The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters pertaining to HIV/AIDS and services in Broward County. There were no public comments.

3. Meeting Approvals

The approval of the January 18, 2024, Executive Committee agenda with the addition to discuss 'Ad-Hoc Information under New Business' was proposed by B. Barnes, seconded by V. Foster, and passed unanimously. The approval for the minutes of the November 30, 2023, meeting was proposed by V. Foster, seconded by S. Tinsley, and passed unanimously.

Motion #1: V. Biggs, made a motion to approve March 21, 2024, Executive Committee agenda with the addition to discuss, Ad-Hoc Information under New Business, and seconded by V. Foster. The motion passed unanimously.

Motion #2: V. Foster, on behalf of the Executive Committee, made a motion to approve the January 18, 2023, Executive Committee meeting minutes as presented. The motion was seconded by S. Tinsley and adopted unanimously.

4. Standard Committee Items

Review and Approve March 28, 2024, HIVPC Agenda, Meeting Materials and Motions

Motion #3: A motion was made to approve the agenda and meeting materials with the changes made by B. Barnes. The motion was seconded and adopted unanimously.

5. Unfinished Business:

None.

6. New Business

Discussion: Evaluation HIVPC Retreat, February 2024

M. Lacroix conducted a presenting regarding the HIVPC Annual Retreat Evaluation. The committee discussed the necessity of attending mandatory meetings, conducting surveys, recruiting consumers to the committees, and sharing information from the Retreat with other committees.

Discussion: Review and Approve FY2024-2025 HIVPC Budget

G. Martinez explained the 2024-2025 PCS Staff Budget and address all the committee's concerns. While reviewing the budget, members gave suggestions as to where money could be taken from one expense to another expense.

Motion #4: B. Barnes made a motion to send the budget report to Broward Region Health Planning Council for a reduction on non-personnel expenses and to re-allocate them to another category. The motion was seconded by M. Schwiezer and passed unanimously.

Discussion: Committee Quarterly Updates (December, January, February activities)

The committee quarterly updates were given by each committee chair/vice-chair in the following manner:

- CEC (S. Tinsley): The committee has met all four objectives from the previous fiscal year.
- SOC (J. Castillo): The committee is still reviewing SDMs to be sent to QMC. Report stands.
- MCDC (V. Foster): Report stands. The committee is on track regarding training and recruitment methods. New training materials were made. There was a great turn out for AIDS Walk, but it was noted that a lot of people were not from Broward County, which made it difficult to recruit people during this event.
- QMC (B. Fortune-Evans): The committee will review the last four SDMs. The committee has experienced consistent in-person attendance by members to the meetings.
- PRSA (B. Barnes): The committee completed the FY2024-2025 Work Plan. Currently, the committee is working on ACA enrollment. The committee's goal is to enroll as many clients into ACA as soon as possible. With regards to MAI, the committee will examine the funding, the service categories, and the outcomes in which a subcommittee will produce a report in the next six weeks. Overall, in terms of membership, the committee has four new members join in the past fiscal year.

7. Discussion: Data Request

None.

8. Recipient's Report

There was no Recipient's report for this meeting.

9. Public Comment

The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters pertaining to HIV/AIDS and services in Broward County. There were no public comments.

10. Agenda Items for Next Meeting

- The next Executive Committee meeting will be held on April 18, 2024, at 12:45pm.
LOCATION: BRHPC and via Microsoft Teams Videoconference.

11. Announcements

- S. Tinsley: Listening Tour.
- S. Tinsley: HIV Possible and SOS Broward in partnership with community partners, first annual second quarter events. Step N Mingle.
- B. Barnes: Pink Nail Society Partnership, April 5. University of Miami going prostate cancer screenings from 9 to 5. Fundraising.
- L. Robertson. Ujima Men's Collective + Broward Library. Speaker Daniel Black (AARL): Black and African-America authors into the community. March 23.
- L. Robertson. Ujima Men's Healthcare in the Park.

There being no further business, the meeting was adjourned at 2:23pm.

Executive Committee for CY 2024

Absences Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
		18	C											
0	1 Barnes, B.	X	C	X										
1	2 Biggs, V., V. Chair	A	C	X										
0	3 Castillo, J.	X	C	X										
0	4 D'Amore, F.	X	C	X										
0	5 Fortune-Evans, B.	X	C	X										
0	6 Foster, V.	X	C	X										
1	7 Hayes, K.	A	C	X										
1	8 Moragne, T.	A	C	X										
0	9 Robertson, L., Chair	X	C	X										
0	10 Tinsley, S.	X	C	X										
1	11 Wilson, I.	X	C	A										
	Quorum = 6	8		10										

Legend:

X - present	N - newly appointed
A - absent	Z - resigned
E - excused	C - canceled
NQA - no quorum absent	W - warning letter
NQX - no quorum present	Z - resigned
CX - canceled due to quorum	R - removal letter



FORT LAUDERDALE/BROWARD EMA
BROWARD HIV HEALTH SERVICES PLANNING COUNCIL
AN ADVISORY BOARD OF THE BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS
200 OAKWOOD LANE, SUITE 100, HOLLYWOOD, FL 33020
(954) 561-9681 • FAX (954) 561-9685

Broward County HIV Health Services Planning Council Meeting

Thursday, April 25, 2024 - 9:30 AM

Meeting at Broward Regional Health Planning Council and via Microsoft Teams

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

Join the meeting via phone: 1-408-418-9388 US Toll (access code: 132 007 3138)

This meeting is audio and video recorded.

Quorum for this meeting is 14

DRAFT AGENDA

ORDER OF BUSINESS

1. CALL TO ORDER/ESTABLISHMENT OF QUORUM

2. WELCOME FROM THE CHAIR

1. Meeting Ground Rules
2. Statement of Sunshine
3. Introductions & Abstentions
4. Moment of Silence

3. PUBLIC COMMENT

4. ACTION: Approval of Agenda for April 25, 2024

5. ACTION: Approval of Minutes from March 28, 2023 (**HANDOUT A**)

6. FEDERAL LEGISLATIVE REPORT– Attorney Marty Cassini, Broward County Intergovernmental Affairs Office

7. STANDARD COMMITTEE ITEMS

8. None

9. CONSENT ITEMS

Action Item: Review and approve the HIVPC membership application for Lamont Lewis.

Justification: Rev. Lewis represents the faith-based community. He would like to extend his activism with the HIV community ensuring optimal services to PWH.

Seat: Non-elected Community Leader/Unaffiliated seat. (**HANDOUT B**)

PROPOSED BY: MCDC Committee Chair

Action Item: Review and approve the HIVPC membership application for Karen Creary.

Justification: Ms. Creary has previously served as a member of the Planning Council and is a

PWH who is committed to advocating for and serving the HIV/AIDS community by improving the quality of life of those affected and diagnosed.

Seat: Affected Communities/Unaffiliated seat. **(HANDOUT C)**

PROPOSED BY: MCDC Committee Chair

10. DISCUSSION ITEMS

- a) **Motion to approve the Minority AIDS Initiative Substance Abuse - Outpatient – Service Delivery Model**
SDM Request for Approval Form (HANDOUT D)
Justification:
PROPOSED BY: Quality Management Committee
- b) **Motion to approve the Minority AIDS Initiative Non-Medical Case Management – Service Delivery Model**
SDM Request for Approval Form (HANDOUT E)
Justification:
PROPOSED BY: Quality Management Committee
- c) **Motion to approve the Minority AIDS Initiative Medical Case Management – Service Delivery Model**
SDM Request for Approval Form (HANDOUT F)
Justification:
PROPOSED BY: Quality Management Committee

11. OLD BUSINESS

None.

12. NEW BUSINESS

None.

13. COMMITTEE REPORTS

- 1. Community Empowerment Committee (CEC)
Chair: Shawn Jackson • Vice Chair: Irvin Wilson
April 2, 2024 – No Meeting Held
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** May 7, 2024, at 3:00 PM at BRHPC and via Microsoft Teams Videoconference
- 2. System of Care Committee (SOC)
Chair: Jose Castillo • Vice Chair: Kendra Hayes
April 4, 2024
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** May 2, 2024, at 9:30 AM at BRHPC and via Microsoft Videoconference

3. Membership/Council Development Committee (MCDC)
Chair: Vincent Foster • Vice Chair: Dr. Timothy Moragne
April 11, 2024
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** May 9, 2024, at 9:30 AM at BRHPC and via Microsoft Teams Videoconference
4. Quality Management Committee (QMC)
Chair: Bisiola Fortune-Evans • Vice Chair: Franchesca D'Amore
April 15, 2024
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** May 13, 2024, at 12:30 PM at BRHPC and via Microsoft Teams Videoconference
5. Executive Committee
Chair: Lorenzo Robertson • Vice Chair: Von Biggs
April 18, 2024
Work Plan Item Update/Status Summary:
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** May 16, 2024, at 12:45 PM at BRHPC and via Microsoft Teams Videoconference
6. Priority Setting & Resource Allocation Committee (PSRA)
Chair: Brad Barnes • Vice Chair: Vacant
April 18m 2024 – Workshop Held
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** May 16, 2024, at 9:30 AM at BRHPC and via Microsoft Teams Videoconference

14. Recipient Reports

1. Part A ([HANDOUT G](#))
2. Part B ([HANDOUT H](#))
3. Part C

4. Part D (**HANDOUT I**)
5. Part F
6. HOPWA (**HANDOUT J**)
7. Prevention – Quarterly Update (**April**, July, October, January) (**HANDOUT K**)
15. Public Comment
16. Data Requests
17. Agenda Items for Next Meeting
 1. Next Meeting Date: May 23, 2024, at 9:30 a.m. at BRHPC and via Microsoft Teams
 2. Agenda Items for next meeting: To Be Determined
18. Announcements
19. Adjournment

*For a detailed discussion on any of the above items, please refer to the minutes available at:
[HIV Planning Council Website](#)*

*Please complete your [meeting evaluation](#).
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: (1) Foster the substantive involvement of the HIV-affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.



Broward County Board of County Commissioners

Mark D. Bogen • Lamar P. Fisher • Beam Furr • Steve Geller • Torey Alston • Nan H. Rich • Tim Ryan • Jared Moskowitz • Michael Udine • Robert McKinzie • Hazelle P. Rogers

[Broward County Website](#)



May 2024

Broward HIV Health Services Planning Council Calendar



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change. Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1244/1343. Visit http://www.brhpc.org for updates.						
			1	2 System of Committee Meeting 9:30AM – 11:30AM Location: BRHPC/MS Teams	3 South Florida AIDS Network Meeting (SFAN) 9:30AM Medical Case Management 2:30 PM – 3:45 PM	4
5	6	7 Community Empowerment Committee Meeting (CEC) 3:00PM– 5:00PM Location: BRHPC/MS Teams	8	9	10	11
12	13	14	15 Quality Meeting 9:00 PM-10:15PM	16 Priority Setting & Resource Allocation Committee Meeting 9:30AM -12:30PM Executive Committee Meeting 12:45PM – 2:45PM	17	18  HIV VACCINE AWARENESS DAY MAY 18 th HIV Vaccines Awareness Day
19	20 Quality Management Committee Meeting 11:30AM– 2:30PM Location: BRHPC/MS Teams	21	22	23 HIV Planning Council Meeting 9:30AM – 11:30AM Locations: BRHPC/MS Teams	24	25
26	27	28	29	30	31	 GET CARE BROWARD TREAT HIV/BEAT HIV RYAN WHITE PART A



May 2024



Broward HIV Health Services Planning Council Calendar

All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change. Unless otherwise noted, meetings will be held via WebEx. Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1292 or 1343. Visit <http://www.brhpc.org> for updates.

TODOS ESTAN BIENVENIDOS!

ALL ARE WELCOME!

BON VINI!

A menos que se anote de forma diferente en el calendario, todas las reuniones se realizarán en:

Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020

Para confirmar información acerca de la reunión de Consejo de Planeación HIV, o confirmar la reserva de servicios especiales tales como: Traducción Inglés a Español o a Criollo (Haitiano), servicios para discapacitados en visión o audición, por favor llame con 48 horas de antelación para que puedan hacerse los arreglos necesarios.

Unless otherwise noted on the calendar, all meetings are held at:

Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020

To confirm HIV Planning Council meeting information, or reserve special needs services such as Translation from English to Spanish or Creole, or are hearing or visually impaired, please call 48 hours in advance so that arrangements can be made for you.

Sòf si yo ta ekri yon lòt bagay nan almanak-la, tout rankont-yo ap fèt:

Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020

Pou konfime enfòmasyon ou resevwa sou rankont Konsèy Planifikasyon HIV-a, oswa pou rezève sèvis pou bezwen Espesyal tankou: Tradiksyon angle an panyòl oswa kreyòl; oswa, si ou gen pwoblèm wè oswa tande, rele 48 tè alavans pou yo ka fè aranjman pou ou.

HIVPC Committee Descriptions

HIV Health Services Planning Council (HIVPC) - Monitors, evaluates, and continuously improves systematically the quality and appropriateness of HIV care and services provided to all patients receiving Part A and MAI-funded services.

Executive Committee - Sets agenda for Council meetings, addresses conflict of interest issues, reviews attendance reports, oversees the planning activities established in the Comprehensive Plan, oversees committee work plans, reviews committee recommendations, ratifies recommendations for removal for cause, and addresses unresolved grievance issues.

Priority Setting Resource Allocation (PSRA) Committee - Recommends priorities and allocation of Ryan White Part A funds. Facilitates the Priority Setting and Resource Allocation Process to include the review of appropriate data (service utilization, epidemiological data). Develops, reviews, and monitors eligibility, service definitions, as well as language on 'how best to meet the need.

Quality Management Committee (QMC) - Ensures highest quality HIV medical care and support services for PLWHA by developing client and system-based outcomes and indicators. Provides oversight of standards of care, develops scopes of service for program evaluation studies, assesses client satisfaction, and provides QM staff/client training/education.

Membership/Council Development Committee (MCDC) - Recruits and screens applications based on objective criteria for appointment to the Council in order to ensure demographic requirements of the Council are maintained according to the Ryan White Treatment and Modernization Act. Presents recommendations to the Council. Institutes orientation and training programs for new and incumbent members.

Community Empowerment Committee (CEC) - Encourages the participation of individuals infected and affected with HIV/AIDS in the planning, priority-setting and resource-allocation processes. Function as a primary level of appeal for unresolved grievances relative to the Council's decisions regarding Ryan White Part A funding.

System of Care (SOC) Committee - Evaluates the system of care and analyzes the impact of local, state, and federal policy and legislative issues impacting PLWHA in the Broward County EMA. Plans and addresses coordinated care across diverse groups by engaging community resources to eliminate disparities in access to services.

MCDC Membership Strategy HIVPC Member Budget

Key Terms

Epidemic – refers to the information in the table above. This is how HIV is distributed throughout Broward County.

Consumers – Council and Committee members who access Ryan White Part A services.

Unaffiliated Consumers – Council and Committee members who access Ryan White Part A services and have no relationship to an agency that provides these services. This means the consumer does not work for a provider agency or otherwise benefits financially from the agency's success.

Mandated Seats – HIVPC positions (seats) required by the Health Resources & Services Administration (HRSA).

Member Distribution	Current	Goal
Job-Based Seats*	13	14
Consumer / Unaffiliated Seat	6	12
NECL Seat**	7	9
Total Membership	26	35
Unaffiliated Consumers (%)	23.08%	34%
Alternates	0	3

*Job-based seats are those seats filled based on employment

**NECL is the Non-Elected Community Leader seat and here only represents those members who are not unaffiliated consumers

Member Roster as of March 31, 2024

Required Planning Council Membership Categories

People Living with HIV and Community

- ✓ Members of Affected Communities
- ✓ Unaffiliated Consumers
- ✓ Non-Elected Community Leader (NECL)
- ✓ Representatives of/or formerly incarcerated PWH

Federal HIV Programs

- ✓ Part B
- ✓ Part C
- ✓ Part D
- ✓ Other Federal HIV Programs
 - Part F
 - HOPWA

- Prevention

Public Health & Health Planning

- ✓ Hospital or Health Care Planning Agency
- ✓ Local Public Health Agency

Health & Social Services Providers

- ✓ Health Care Providers/FQHCs
- ✓ CBO/ASO – Community-based organization or AIDS Service Organization
- ✓ Mental Health
- ✓ Substance Abuse Provider

Broward County Ordinance 12.108.b

- ✓ Board of County Commissioners member

Open Seats:

Job-Based

- State agencies (Medicaid agency)

Unaffiliated Consumers

- Affected Communities (6 additional Unaffiliated RWPA Consumers)
- Alternates (3)

Members Pending Removal:

Three (Two (2) HIVPC Members; One (1) System of Care Committee Member). These members had unexcused absences for three to four consecutive meetings.

- Jacques Wright
- Johanne Cassues
- Ebonni Chrispin

HIVPC Membership Reflectiveness

HIV Planning Council & Committee Demographics Report

Member Reflectiveness

The Membership/Council Development Committee ensures that the HIVPC represents the HIV epidemic in Broward County. One way that MCDC accomplishes this task is by reviewing the Council and Committees' demographics and identifying over and underrepresented populations.

HIV in Broward County and HIVPC Reflectiveness

The following table shows 1) HIV in Broward by Race/Ethnicity and by Gender; and 2) the current demographics of the HIVPC in comparison to the HIV epidemic data.

Race	Population*	Percentage*	HIVPC Membership**	HIVPC Percentage
White, not Hispanic	6,472	31.6%	9	34.6%
Black, not Hispanic	9,564	46.7%	10	38.5%
Hispanic	3,957	19.3%	5	19.2%
Multi-Race (Other)	499	2.4%	2	7.7%
Total	20,492	100%	26	100%
Gender	Population	Percentage		
Male	15,255	74.44%	18	69.2%
Female	5,178	25.26%	6	23.1%
Transgender: male to female	56	.29%	2	7.7%
Transgender: female to male	3	.01%	0	0%
Total	20,492	100%	26	100%

*Data: as reported in the RWPA FY2022 Application. These data are provided by the Florida Department of Health's HIV Surveillance Office.

**HIVPC membership as of February 2024

How This Information is Compared to the Epidemic

The Council and its committees are compared to the epidemic to determine where representation can be improved.

Key Points for Reflectiveness through February 2024

- **HIV Health Services Planning Council (HIVPC): [Twenty-six (26) members]** Of the 26 members, six (6)/23.08% are unaffiliated consumer members. This percentage remains below the HRSA-mandated 33%. Lower reflectiveness is found in Black, not Hispanic, Male, and Female, which are underrepresented by 8.2%, 5.24%, and 2.16%, respectively.
- **Community Empowerment Committee (CEC): [Eleven Members]** CEC's Black and Hispanic representation is 45.5% and 18.18% respectively. Male representation is at 63.6% and female at 36.4%. CEC's consumer representation is at 54.5%, above its 51% consumer membership requirement stated in the Committee's Policies & Procedures.

- **Membership/Council Development Committee (MCDC): [Five Members]** MCDC's consumer representation is at 40% and there are no females on the committee.
- **Priority Setting & Resource Allocation (PSRA): [Twelve Members]** The Committee's membership has remained consistent with 25% reflective of consumers; 33% Hispanic; 16.7% Black; and 33% females. The committee plans to increase consumer representation during FY 2024.
- **Executive Committee: [Twelve Members]** The Executive Committee membership has remained consistent. There are 50% PWH in leadership positions on the Committee.
- **Quality Management Committee (QMC): [Seven Members]** QMC is an under-representative of Black members. Black, Hispanic, and female consumers are not represented on the Committee. QMC's membership increased by two new members and has 40% consumer representation.
- **System of Care (SOC): [Six Members]** SOC's membership increased by one member this reporting period. Black, Hispanic, and female consumers are not represented on the Committee. There is one consumer on this committee (16.7%).

HIVPC Member Recognition Program

Purpose: The purpose of the HIVPC Member Recognition Program is to recognize members and increase retention among those who have exceptionally served the HIVPC by exemplifying outstanding service through his or her work and exhibiting a positive and supportive attitude.

Criteria: The nominee and nominator must be HIVPC members. Nominators should keep in mind the judging criteria and write the nomination accordingly.

Attitude and Commitment

- Professional demeanor
- Conscientious, honest, hard-working
- Growth (knowledge of HIVPC workings, mentorship Buddy system)
- Serves as a role model to others.
- Length of Service
- Leadership History
- Significant Impact (shining star)

Communication

- Displays a helpful, cooperative, and positive attitude toward co-members.
- Consistently friendly and available to others
- Uses effective listening skills.
- Has a team player attitude?

Dedication

- Dedicated to fulfilling member responsibilities.
- Committee activities (number of committees involved)
- Consistently dependable and punctual in reporting to meetings
- Active involvement in committees, fund-raisers, fairs, trainings, and other activities
- Goes above and beyond the requirements of being a member.

Nominations Process:

- At the last HIVPC meeting of the quarter, members will vote for which candidates best fit the criteria listed in this document. Members will have to rank the top three candidates they prefer.
- PCS staff will calculate the votes to determine the winner through the ranked choice voting system.
- The results will be sent to MCDC for initial approval.
- Afterward, the results will be the Executive Committee for final approval.

Recognition will include:

- Plaque
- Photo and biography on the HIVPC website and Quarterly Newsletter (if desired)
- Announcement at HIVPC meeting

Member Recognition Nominations Timeline

February	March	March
Vote takes place for the 4th Quarter at the HIV Planning Council Meeting.	- MCDC gives initial approval for the 4th Quarter. - MCDC sends recommendation for Member of the Quarter to Exec	- Executive gives final approval for the 4th Quarter. - Announcement of Recognized Member at HIVPC Meeting
May	June	June
Vote takes place for the 1st Quarter at the HIV Planning Council Meeting.	- MCDC gives initial approval for the 1st Quarter. - MCDC sends recommendation for Member of the Quarter to Exec	- Executive gives final approval for the 1st Quarter. - Announcement of Recognized Member at HIVPC Meeting
August	September	September
Vote takes place for the 2nd Quarter at the HIV Planning Council Meeting.	- MCDC gives initial approval for the 2nd Quarter. - MCDC sends recommendation for Member of the Quarter to Exec	- Executive gives final approval for the 2nd Quarter. - Announcement of Recognized Member at HIVPC Meeting
November	December	December
Vote takes place for the 3rd Quarter at the HIV Planning Council Meeting.	- MCDC gives initial approval for the 3rd Quarter. - MCDC sends recommendation for Member of the Quarter to Exec	- Executive gives final approval for the 3rd Quarter. - Announcement of Recognized Member at HIVPC Meeting

NOMINATION FORM

Dear HIVPC Members,

The HIVPC needs your help! We want to recognize and reward our outstanding members for the tremendous amount of hard work they give to HIVPC. This form allows you to nominate a member to be recognized. Please nominate any three members who have made a positive impact on HIVPC. Together, we can honor excellence in the HIVPC.

Process: This vote will use the ranked choice voting system. Each member of the HIVPC will rank their top three preferred members based on how well they fit the listed criteria. The current vote will be based on members' performance during the past quarter.

**To vote, first select your top choice.
Then select your second choice and third choice.**

Rules:

- You cannot vote for yourself.
- You may only vote for each candidate one time.
- You must write clearly and legibly.
- Each vote must be accompanied by your signature.

Criteria: The nominee and nominator must be HIVPC members. Nominators should keep in mind the judging criteria below and write the nomination accordingly.

Attitude and Commitment

- Professional demeanor
- Conscientious, honest, hard-working
- Growth (knowledge of HIVPC workings, mentorship Buddy system)
- Serves as a role model to others.
- Length of Service
- Leadership History
- Significant Impact (shining star)

Communication

- Displays a helpful, cooperative, and positive attitude toward co-members.
- Consistently friendly and available to others
- Uses effective listening skills.
- Has a team player attitude?

Dedication

- Dedicated to fulfilling member responsibilities.
- Committee activities (number of committees involved)
- Consistently dependable and punctual in reporting to meetings
- Active involvement in committees, fund-raisers, fairs, trainings, and other activities
- Goes above and beyond the requirements of being a member.

VOTING SHEET

Please Print Clearly

#1) Nominee's Name: _____

Date: _____

Submitted by: _____

Signature: _____

#2) Nominee's Name: _____

Date: _____

Submitted by: _____

Signature: _____

#3) Nominee's Name: _____

Date: _____

Submitted by: _____

Signature: _____

List of Planning Council Members

Arencibia, Yusimir
Barnes, Brad
Bhrangger, Ronald
Biggs, Von
Cassues, Johanne
Castillo, Jose
Cutright, Aaron
Dsouza, Eveline
Fortune-Evans, Bisiola
Foster, Vincent
Jackson-Tinsley, Shawn
Jimenez, Rafael
Marcoviche, William
Moragne, Timothy
Robertson, Lorenzo
Rodriguez, Joshua
Schweizer, Mark
Mester, Brad
Wright, Jacques
Dudelzak, Eliza (Elisa)
Hayes, Kendra
Wilson, Irving
Shamer, David
D'Amore, Franchesca
Wynn, Jason
Davis, Elizabeth
Machado, Alondra

MCDC
HIVPC Mentoring Program
(Approved 11/19/15 by HIVPC)

To increase new members' knowledge of the HIV Planning Council and retain membership participation in Council meetings, the MCDC Committee will institute mandatory orientation, training, and voluntary mentoring programs. An important segment of this training is the Mentoring Program, which will be offered to all new Council members and alternates. Mentoring helps new members feel welcome, learn individual member perspectives, and become comfortable with Council processes and interactions. Mentoring also ensures that the new member understands the background and context of discussions and actions and gets an explanation of the many acronyms used in meetings.

1. A letter introducing the Mentoring Program will be sent to new Council members, and prospective mentees will be allowed to sign up for a mentor at their Post Appointment Training.
2. Council members who have volunteered their time to be Mentors will be assigned by the MCDC Chair. Interested Parties who are interested in becoming involved in a particular committee will be assigned a mentor by the Chair of the Committee the party is interested in (Approved 11/19/15).
3. The new member and alternate should, when possible, sit near their Mentor during all meetings. (Non-voting alternates are reminded they may sit near their mentor, but not at the table.) This will allow the Mentor to easily answer any questions the new member might have.
4. Volunteer Mentors will receive training according to the schedule outlined in the Committee Work Plan. Mentors should strive to educate new members on the following points:
 - a) Review of the Orientation Manual
 - b) Reminders of Meetings
 - c) Availability of Transportation
 - d) Daycare reimbursement benefit
 - e) Reimbursement of lost wages
 - f) Explanation of complex language
 - g) Empowerment and respect for individual opinions and ideas.
 - h) A summary of Robert's Rules of Order
5. If needed and requested by the new member/alternate, the Mentor may also remind the new member of upcoming meetings that might be of interest to that person.

Note on the Florida Sunshine Law: Members and Mentors should be careful to follow the Sunshine Law, which forbids Members from discussing Council or Committee business outside of official meetings. The County definition is as follows:

"Except at a public meeting, there shall be no communication between any two members of the same collegial body on any matter which they may foreseeably be required to address jointly in an advisory or decision-making capacity."

Examples of situations prohibited by law for Members:

1. Discussing Council or Committee business on the phone.
2. Discussing Council or Committee business at a gathering that is not an official meeting.
3. Discussing Council or Committee business indirectly, such as by passing information through an intermediary.
4. Meeting at a restaurant or someone's home to discuss Council or committee business.

Mentoring Components of HIV Planning Council Members:

Provides support to new members (within the guidelines of the Florida Sunshine Law) on the following:

- a. Help new members, including PWH, feel welcome, learn individual member perspectives, and become comfortable with planning council processes and interactions.
- b. Provide strong and informed feedback about the effect of Planning Council actions and decisions on Ryan White clients and PWHs.
- c. Take special responsibility for making sure the new member understands the background and context of discussions and actions.
- d. Increase new members' knowledge of the HIV Planning Council and retain attendance and membership participation in Council meetings.
- e. Complete the Mentor/Mentee evaluation after the mentorship period.

Date

Planning Council Member

Subject: Introduction of the HIVPC Mentoring Program

Dear [HIVPC Member],

We hope this letter finds you well. As a member of the HIV Planning Council, you are undoubtedly aware of the importance of nurturing new members and fostering their engagement within our community. With this goal in mind, we are excited to introduce you to our Mentoring Program, an initiative designed to support and guide new Council members.

The Mentoring Program is a vital component of our efforts to enhance the knowledge and participation of new members while retaining their active engagement in Council meetings. Mentors can play a crucial role in helping new members feel welcome and confident within our Council by providing guidance, support, and insights into our processes and interactions.

The following outlines key components of our Mentoring Program:

1. **Introduction Letter and Sign-Up:** New Council members will receive a letter introducing the Mentoring Program and could sign up for a mentor during their Post Appointment Training.
2. **Assignment of Mentors:** The MCDC Chair will assign mentors for general mentoring needs. Additionally, the respective committee chair will assign a mentor to individuals interested in specific committees.
3. **Meeting Support:** New members and alternates are encouraged to sit near their mentors during meetings to facilitate easy access to guidance and support.
4. **Mentor Training:** Volunteer mentors will receive training according to the schedule outlined in the Committee Work Plan. They will educate new members on various aspects, including the HIVPC Membership Handbook, meeting reminders, transportation availability, benefits such as daycare reimbursement and lost wages reimbursement, clarification of complex language, fostering empowerment and respect for individual opinions, and a summary of Robert's Rules of Order.
5. **Additional Support:** Mentors are available to remind new members of upcoming meetings and events as needed and requested.

The success of our Mentoring Program relies on the commitment and dedication of potential mentors like yourself. Your willingness to share your knowledge and experiences will significantly contribute to the growth and development of our Council members.

We encourage you to embrace this opportunity to make a meaningful difference in the lives of our new members. We can achieve our goals by creating a supportive and inclusive environment where all members feel valued and empowered to contribute to our shared goals.

Thank you for your continued dedication to the HIV Health Services Planning Council. If you have any questions or want to volunteer as a mentor, please contact the Planning Council Support Staff.

Sincerely,

Lorenzo Robertson
Chair, HIV Health Services Planning Council

Vince Foster
Chair, Membership Council Development Committee

Membership Attendance for Mandatory Training/Meetings

By-Laws: Article VI, Section 1: Meeting Protocol

- a) The Council shall meet at least nine (9) times per fiscal year (March 1 – February 29).
- b) Special meetings may be held by the Chair or upon petition of one-third of the Council members.
- c) Written notice shall be given at least one week prior to each meeting.
- d) All HIV Council meetings are open to the public.
- e) Attendance at **mandatory Training Activities** is also part of Council attendance requirements.

Excused Absences

The Planning Council or Committee Chair reviews all requests for an excused absence. The absence of a member shall be deemed excused under the following circumstances, per Broward County Code of Ordinances section 1-233:

- a) When the member is performing an authorized alternative activity relating to board business that directly conflicts with the properly noticed meeting;
- b) The death of an immediate family member, defined as a spouse, father, mother, stepparent, one who has stood in the place of a parent (in loco parentis), child, or stepchild domiciled in the member's household, grandparent, grandchild, guardian, or custodian;
- c) The death of a member's domestic partner or the death of a child, stepchild, parent, grandparent, or grandchild of a member's domestic partner;
- d) The member's hospitalization or receipt of necessary emergency medical treatment at or around the time of a properly noticed meeting;
- e) When the member is summoned to jury duty or
- f) When the member is attending a deposition, hearing, trial, or other legal proceeding for which attendance is required by a subpoena or by order of a court of competent jurisdiction.

Unexcused Absences for Mandatory Training

- a) Absence from a mandatory training activity that does not adhere to the County Ordinance list of excused absences will count as an unexcused meeting.
- b) Members who will be absent must inform Planning Council Support staff in writing about their attendance at mandatory training sessions. Unexcused absences will count towards the automatic removal requirements outlined below.

Automatic Removal for Unexcused Absences

A member will automatically be removed from the Planning Council or committee that meets more frequently than quarterly if they:

- Have **three (3) consecutive** unexcused absences regardless of year, or
- Miss **four (4) meetings in one (1) calendar year** (January-December) because of unexcused absences.

A member will automatically be removed from the committee that meets on a quarterly or less frequent basis if they:

- Have **two (2) consecutive** unexcused absences regardless of year, or
- Miss **two (2) meetings in one (1) calendar year** (January-December) because of unexcused absences.

Attendance records are based on the sign-in sheet and virtual attendance records. **Members must sign in to be considered present at the meeting and announce themselves on virtual platforms.**



Priority Setting & Resource Allocation
Committee (PSRA) & Community Empowerment
Committee (CEC)

Present:



Moderator: Elizabeth
"Coach Kitty" Davis

**THE 2024
HIVPC RYAN
WHITE PART A
LISTENING
TOUR**

SAVE THE DATE

We want to **HEAR** from
YOU!

Your **ISSUES**
Your **RECOMMENDATIONS!**

Topic:

**The Challenges of Living
Healthy with HIV in
Broward County**

Wednesday
24 April

**AIDS HEALTHCARE FOUNDATION
COMMUNITY ROOM (AHF)**

700 SE 3rd Ave
1st Floor
Fort Lauderdale, FL 33316

3 PM- 5 PM

REFRESHMENTS WILL BE SERVED

**THIS IS AN AUDIO RECORDED
PUBLIC EVENT**

*Door Prizes
Available*



• LIVE

REGISTER HERE:
[HTTPS://US02WEB.ZOOM.US/J/84221674634](https://us02web.zoom.us/j/84221674634)



Broward HIV
Planning
Council



BrowardHIVPC



HIV HEALTH SERVICES PLANNING COUNCIL MEETING GROUND RULES

1. The Council, its members, and the public recognize and respect the committee process adopted by this Council. The Council, its members, and the public recognize that full discussion and analysis of issues occurs at the committee level rather than at Council meetings.
2. Before a member can make a motion or speak in debate, the member must be recognized by the Chair as having the exclusive right to be heard at that time.
3. All speakers are expected to address the Council in a respectful manner to respect time limits, to speak briefly and to the point, and to stay on agenda. All other persons in attendance should not interrupt the speaker who is recognized by the Chair as having the floor.
4. If the member who made the motion claims the floor and has not already spoken on the question, that member is entitled to be recognized in preference to other members.
5. No person is entitled to the floor a second time in debate on the same item as long as any other person who desires the floor has not spoken on the item.
6. Speakers should restrict comments and debate to the pending question or motion. Speakers must address their remarks to the Chair and maintain a courteous tone. The Chair may impose time limits on debate or discussion to ensure efficient conduct of Council business.
7. Members should not name service providers and/or persons during any discussion unless the service provider or person is identified in the subject of the motion or agenda item. Specific concerns regarding service providers should be directed towards the Grantee, outside of the meeting.
8. Members of the public may only address the Council upon recognition by the Chair. They are subject to the same rules of conduct expected of Council members.
9. No alcohol or drug use (unless prescribed by a licensed physician), is permitted at Council meetings, grantee or support staff offices.
10. No abusive language, threats of violence, or possession of weapons are permitted in Council meetings, grantee or staff offices.
11. Repeated violation of these meeting rules may result in no further recognition of the offending member or attendee by the Chair at that meeting. Any serious breach of conduct which disrupts the Council's meeting may subject the offender to removal from the meeting, administrative or legal process.



CONSEJO DE PLANEACIÓN DE SERVICIOS DE SALUD VIH REGLAS BÁSICAS DE LA REUNIÓN

1. Los miembros deberán aceptar y respetar el proceso de comité adoptado por este Consejo. Las discusiones y el análisis en pleno de los temas tendrán lugar a nivel de comité y no en las reuniones plenarias del Consejo.
2. Antes de que un miembro pueda iniciar una moción o de que una persona pueda hablar en un debate, el Presidente de la reunión deberá reconocer que él o ella tienen el derecho exclusivo de hablar en ese momento dado.
3. Se espera que todos los ponentes se dirijan al Consejo de una manera respetuosa, que no se interrumpa al ponente con derecho al habla en el momento, que cuando se hable se haga de forma clara y concisa, y que se mantenga la agenda.
4. Si el miembro que inicia una moción no ha hablado todavía y reclama su derecho a hablar sobre un asunto, él/ella tendrán el derecho a que con preferencia se les reconozca.
5. Nadie tendrá derecho a reclamar el habla por una segunda vez, en un debate sobre el mismo tema, cuando otra persona que no ha hablado todavía, desea hacerlo.
6. Los debates deben ceñirse a los asuntos o mociones que estén pendientes. Al hablar, los ponentes deben referirse al Presidente, y mantener un tono cortés.
7. Los miembros del público solo podrán dirigirse al Consejo cuando hayan sido reconocidos por el Presidente de la reunión. Estarán sujetos a las mismas reglas de conducta que se esperan de los miembros del Consejo. Se establecerán límites de tiempo según sea necesario para garantizar que los asuntos del Consejo cursen de manera eficiente.
8. Miembros del público sólo podrán dirigir el Consejo a partir del reconocimiento por el Presidente. Están sujetos a las mismas reglas de conducta que se espera de los miembros del Consejo.
9. No estará permitido el uso de bebidas alcohólicas o de drogas en las reuniones del Consejo y tampoco en las oficinas del personal de soporte y donatarios.
10. No está permitido el uso de lenguaje abusivo, amenazas de violencia y posesión de armas en las reuniones del Consejo ni en las oficinas del personal de soporte y donatarios.
11. La repetida violación de estas reglas básicas dará como resultado que el Presidente de la reunión deje de reconocer al derecho a participación del ofensor o miembro de la audiencia. Cualquier violación de conducta grave, que perturbe la reunión de Consejo, terminará en la remoción del ofensor, de la reunión.



KONSÈY PLANIFIKASYON SÈVIS SANTE POU HIV RÈGLEMAN RANKONT-YO

1. Manm-yo dwe rekonèt epi respekte pwosesis komite-a ke Konsèy-la adopte. Diskisyon ak analiz total pwoblèm-yo fèt nan nivo komite-a; li pa fèt pandan rankont tout Konsèy-la.
2. Anvan yon manm ka fè yon pwopozisyon oswa nenpòt ki moun gen dwa pale pandan yon deba, fòk Prezidan Komite-a bali dwa eskizif pou fè moun tandè-li nan moman sa-a.
3. Yo atann-yo aske tout moun k'ap pale ak Konsèy-la fè-li avèk respè, pou pèsonn pa koupe moun ke Konsèy-la bay dwa pale lapawòl, pou moun k'ap pale-a respekte kantite tan yo ba-li pou pale-a, pou li di sa l'ap di-a rapidman epi avèk presizyon, epi pou li respekte ajanda-a.
4. Si manm ki fè pwopozisyon-an mande pou li pale epi si li poko pale sou keksyon-an deja, li gen priyorite sou lòt manm-yo.
5. Pèsonn moun pa gen dwa pran lapawòl de fwa sou yon menm sijè si gen lòt moun ki poko pale epi ki vle esprime tèt-yo.
6. Deba-a dwe rete sou keksyon oswa pwopozisyon k'ap fèt-la. Moun k'ap pale-a dwe adrese sa l'ap di-a bay Prezidan Komite-a epi pale sou yon ton ki make ak respè.
7. Manm piblik-la dwe pale ak Konsèy-la sèlman si Prezidan Konsèy-la bay-yo lapawòl. Yo dwe respekte menm règleman kondwit avèk manm Konsèy-yo. Lè sa nesesè pou zafè Konsèy-la byen mache, yo gen dwa bay-yo yon limit tan pou yo pale.
8. Manm nan piblik la sèlman pou adrese a konsèy sou rekonèsans sou chèz la. Yo ka tonbe anba menm lòd de kondwit ki te espere nan manm konsèy yo.
9. Itilizasyon alkòl ak dwòg (sòf si se yon doktè lisansye ki preskri-li), entèdi nan rankont Konsèy-la oswa nan biwo estaf sipò-a oswa Resevè-a.
10. Vye langaj, menas vyolans, oswa posèsyon zam entèdi nan rankont Konsèy-la oswa nan biwo estaf-la oswa Resevè-a.
11. Vyolasyon repete règleman rankont-yo ap lakòz yon manm oswa lòt moun k'ap asiste rankont-lan pa kapab patisipe ankò. Nenpòt ki move kondwit serye ki twouble rankont-la ap lakòz yo mete moun-nan deyò.

Acronym List

ACA: The Patient Protection and Affordable Care Act 2010
ADAP: AIDS Drugs Assistance Program
AETC: AIDS Education and Training Center
AHF: AIDS Health Care Foundation
AIDS: Acquired Immuno-Deficiency Syndrome
ART: Antiretroviral Therapy
ARV: Antiretrovirals
BARC: Broward Addiction Recovery Center
BCFHC: Broward Community and Family Health Centers
BH: Behavioral Health
BISS: Benefit Insurance Support Service
BMSM: Black Men Who Have Sex with Men
BRHPC: Broward Regional Health Planning Council, Inc.
CBO: Community-Based Organization
CDC: Centers for Disease Control and Prevention
CDTC: Children's Diagnostic and Treatment Center
CEC: Community Empowerment Committee
CIED: Client Intake and Eligibility Determination
CLD: Client Level Data
CM: Case Management
CQI: Continuous Quality Improvement
CQM: Clinical Quality Management
CTS: Counseling and Testing Site
DCM: Disease Case Management
DOH-Broward: Florida Department of Health in Broward County
eHARS: Electronic HIV/AIDS Reporting System
EIIHA: Early Intervention of Individuals Living with HIV/AIDS
EFA: Emergency Financial Assistance
EMA: Eligible Metropolitan Area
FDOH: Florida Department of Health

FPL: Federal Poverty Level
FQHC: Federally Qualified Health Center
HAB: HIV/AIDS Bureau
HHS: U.S. Department of Health and Human Services
HICP: Health Insurance Continuation Program
HIV: Human Immunodeficiency Virus
HIVPC: Broward County HIV Planning Council
HMSM: Hispanic Men who have Sex with Men
HOPWA: Housing Opportunities for People with AIDS
HRSA: Health Resources and Service Administration
HUD: U.S Department of Housing and Urban Development
IW: Integrated Workgroup
IDU: Intravenous Drug User
JLP: Jail Linkage Program
LPAP: Local AIDS Pharmaceutical Assistance Program
MAI: Minority AIDS Initiative
MCDC: Membership/Council Development Committee
MCM: Medical Case Management
MH: Mental Health
MNT: Medical Nutrition Therapy
MOU: Memorandum of Understanding
MSM: Men Who Have Sex with Men
NBHD: North Broward Hospital District (Broward Health)
NGA: Notice of Grant Award
NHAS: National HIV/AIDS Strategy
NOFO: Notice of Funding Opportunity
nPEP: Non-Occupational Post Exposure Prophylaxis
NSU: Nova Southeastern University
OAHS: Outpatient Ambulatory Health Services
OHC: Oral Health Care
PE: Provide Enterprise

PLWH: People Living with HIV
PLWHA: People Living with HIV/AIDS
PrEP: Pre-Exposure Prophylaxis
PRISM: Patient Reporting Investigating Surveillance System
PROACT: *Participate, Retain, Observe, Adhere, Communicate and Teamwork is DOH-Broward's treatment adherence program.*
PSRA: Priority Setting & Resource Allocations
QI: Quality Improvement
QIP: Quality Improvement Project
QM: Quality Management
QMC: Quality Management Committee
RSR: Ryan White Services Report
RWHAP: Ryan White HIV/AIDS Program
RWPA: Ryan White Part A
SA: Substance Abuse
SBHD: South Broward Hospital District (Memorial Healthcare System)
SCHIP: State Children's Health Insurance Program
SDM: Service Delivery Model
SOC: System of Care
SPNS: Special Projects of National Significance
STD/STI: Sexually Transmitted Diseases or Infection
TA: Technical Assistance
TB: Tuberculosis
TGA: Transitional Grant Area
VA: United States Department of Veteran Affairs
VL: Viral Load
VLS: Viral Load Suppression
WMSM: White Men who have Sex with Men
WICY: Women, Infants, Children, and Youth

Frequently Used Terms

Recipient: Government department designated to administer Ryan White Part A funds and monitor contracts.

Planning Council Support (PCS) Staff/‘Staff’: Provides professional staff support, meeting coordination, and information to the HIVPC, its standing and ad-Hoc Committees, Chair, and Recipient.

Clinical Quality Management (CQM) Support Staff: Provides professional support, meeting coordination, and technical assistance to assist the Recipient through analysis of performance measures and other data with the implementation of activities designed to improve patient care, health outcomes, and patient satisfaction throughout the system of care.

Provider/Sub-Recipient: Agencies contracted to provide HIV Core and Support services to consumers.

Consumer/Client/Patient: A person who is an eligible recipient of services under the Ryan White Act.