



BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL
MEETING AGENDA

Thursday, October 27, 2016, 9:30 a.m.
 GC-430

Chair: Brad Gammell **Vice Chair:** Requel Lopes

HIVPC agenda template was approved by the Executive Committee on 10/20/16

Reminder: Meeting Attendance Confirmation Required at least 48 Hours Prior to Meeting Date

1. CALL TO ORDER (10 minutes)

2. WELCOME AND PUBLIC RECORD REQUIREMENTS

- a. Review Meeting Ground Rules, Public Comment and Public Record Requirements
- b. Council Member and Guest Introductions
- c. Moment of Silence
- d. Excused Absences and Appointment of Alternates
- e. Approval of 10/27/16 Meeting Agenda
- f. Approval of 8/16/16 Meeting Minutes

3. PHONE INTRODUCTIONS

4. FEDERAL LEGISLATIVE REPORT (Kareem Murphy) (Handout A) (5-10 minutes)

5. CONSENT ITEMS

None.

6. DISCUSSION ITEMS

#	SERVICE CATEGORY	Recommended TO	Recommended FROM	PROPOSED BY
1	Ambulatory (5)	\$39,000	(\$470,000)	Priority Setting & Resource Allocation Committee
2	MAI Ambulatory (1)	\$0	\$0	
3	Pharmaceuticals (3)	\$0	\$0	
4	Dental (2)	\$0	\$0	
5	Case Management (7)	\$45,728	(\$75,000)	
6	MAI Case Management (1)	\$0	\$0	
7	Medical Case (Disease) Management (4)	\$16,200	(\$41,584)	
8	Mental Health (3)	\$0	(\$7,000)	
9	MAI Mental Health (2)	\$0	\$0	
10	Substance Abuse (2)	\$0	(\$4,500)	
11	MAI Substance Abuse (1)	\$0	\$0	
12	Food Bank (1)	\$0	\$0	
13	Food Voucher (1)	\$0	\$0	
14	Centralized Intake and Eligibility Determination	\$60,000	\$0	
15	MAI Centralized Intake and Eligibility Determination	\$0	\$0	
16	HICP (1)	\$260,000	\$0	
17	Emergency Financial Assistance	\$177,156	\$0	
18	Legal Assistance (1)	\$0	\$0	
	Total Part A Funds	\$598,084	(\$598,084)	
	Total MAI Funds	\$0	\$0	
	Total Funds	\$598,084	(\$598,084)	

7. NEW BUSINESS

- a. HIVPC Social Media: Follow-up with action taken

8. OCTOBER COMMITTEE REPORTS (15 minutes)

A. COMMUNITY EMPOWERMENT COMMITTEE (CEC)

No October Meeting

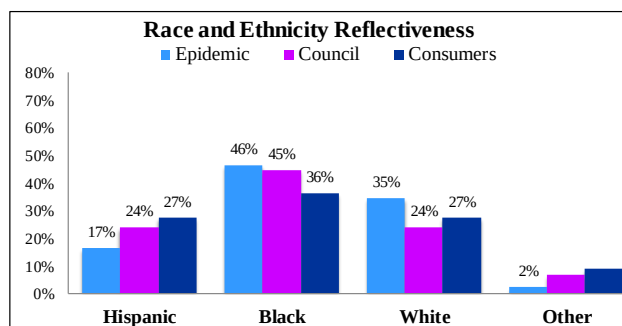
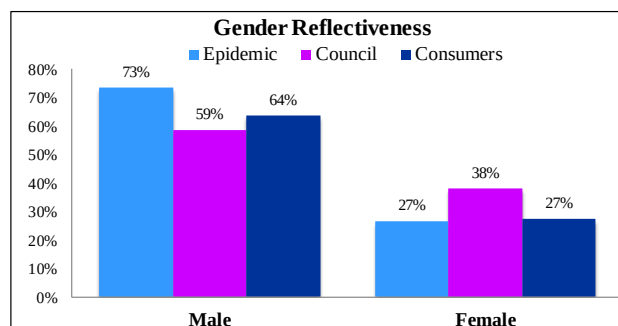
Chair: L. Robertson V. Chair: P. Fleurinord

B. MEMBERSHIP/COUNCIL DEVELOPMENT COMMITTEE (MCDC)

No October Meeting

Chair: Vacant V. Chair: V. Foster

HIV Planning Council Membership Report Current Through October 2016



Gender	Epidemic	Council	% Difference	Consumers	% Difference
Male	14,372 73%	17 59%	-15%	7 64%	-10%
Female	5,213 27%	11 38%	11%	3 27%	1%
Transgender	- -	1 3%	-	1 9%	-
Race	Epidemic	Council	% Difference	Consumers	% Difference
Hispanic	3,253 17%	7 24%	8%	3 27%	11%
Black	9,100 46%	13 45%	-2%	4 36%	-10%
White	6,777 35%	7 24%	-10%	3 27%	-7%
Other	455 2%	2 7%	5%	1 9%	5%
Total	19,585 100%	29		11	

Current Members	29
Minimum (Per County Ordinance)	20
Maximum (Per County Ordinance)	35
% Unaffiliated Consumers	38%

Vacant Seats
1. Grantees of Other Federal HIV Programs - VA
2. Federally Recognized Indian Tribe Members
3. State Medicaid
4. Individual co-infected with Hep B or Hep C
5. Local Public Health Agency
6. Substance Abuse Provider

No more than 3 members employed by one governmental agency or provider shall serve on the HIVPC at one time, and no more than 40% of HIVPC members shall be Part A-funded

% Part A-Funded Providers 28%

C. QUALITY MANAGEMENT COMMITTEE (QMC)

October 17, 2016

Chair: C. Grant, V. Chair: A. Earp

A. Work Plan Item Update / Status Summary:

Review QMC Retreat Pre/Post-Test Answers and Results: Staff reviewed the QMC Retreat pre/post-test answers and results with the Committee. There was a total of six participants. There was a 31.67% improvement from the pre-test to the post-test.

Review FY 2014 Drilling Down Data Overview for Black MSM, Females, and Males: Staff reviewed FY 2014 drilling down data for black MSM, females, and males. These three key populations were chosen based off of FY 2014 viral load data. Staff reviewed the measures that were analyzed for each population and what measures were statistically significant using Chi-Square. HIV therapy, retention in care, retention in OAMC, and oral health service utilization were statistically significant for all three key populations.

Review and analyze annual measures and data. Send recommended areas for exploration to NAE, SOC, PSRA, and QI Networks (WP 1.2): Staff presented the Committee with a review of QMC data measures for FY 2015. This presentation included data on viral suppression and retention in care. Staff reviewed viral load suppression data first. Viral load suppression is measured two ways in the presentation, according to the Part A definition and then the HHS definition. Part A measures viral load suppression based on the client's last viral load submitted to any service provider. This results in a larger amount of clients but we do not know if they are retained in OAMC. The HHS measure uses the client's viral load from the last medical visit. This results in less clients and accounts for retention in OAMC. A limitation to using the Part A definition is we may not have documented OAMC visits for every client because they may use providers outside of Ryan White.

Staff then reviewed the FY 2015 viral load analysis by demographics. Part A males are more likely to be suppressed (84.5%), followed by female (79.1%), and transgender (70.4%). These populations were broken down by race as well. Hispanic female and male are most likely to be suppressed but these measures have not been checked for significance. Age category was also reviewed and the 18-28 year old population is less likely to be suppressed and the 59+ year old population are most likely to be suppressed (90.6%). Risk factor was then reviewed. The last measure reviewed for viral load suppression was by service category. Oral Health Care is second most likely to be virally suppressed (89.2%). Staff stated the viral load analysis show us disparities and where our focus needs to be in the future.

B. Rationale for Recommendations:

None

C. Data Reports / Data Review Updates:

The Committee reviewed and analyzed annual measures and data.

D. Data Requests:

None.

E. Other Business Items:

None.

F. Agenda Items for Next Meeting:

Agenda Items for Next Meeting: Conduct quarterly Network update (WP 3.1): ACTION ITEM: Identify at least two areas for improvement and at least two potential QIPs, Review and update Service Delivery Models submitted by QI Networks (WP 2.1): ACTION ITEM: Review and approve revisions to Service Delivery Models and Broward Outcomes as submitted by the QI Networks. Submit recommendations to HIVPC. *Next Meeting Date:* 11/21/2016
Location: Government Center Room A-335

D. PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRA)**October 19, 2016***Chair: W. Spencer, Vice Chair: R. Siclari***A. Work Plan Item Update / Status Summary:**

PSRA Leadership Changes- The Committee discussed changes to the PSRA Leadership: Will Spencer has replaced Carla Taylor-Bennett as the PSRA Chair.

Reallocations ("Sweeps") – The Grantee's representative explained requests for additional funds and returned funds. The PSRA members voted to grant provider requests for additional funds and returns.

MAI Strategies- The members discussed MAI programs, and reviewed a proposal of program components and outcomes.

HICP- The members received an update on the HICP program from the Grantee. ADAP has agreed to increase their AICP coverage to clients making up to 400% FPL. The state has agreed to support the local ADAP program in adding additional FTEs in their contracts to offset Part A HICP costs and reduce transaction fees. Part A will pay client' premiums until April, then transition clients to the ADAP program while HICP continues to cover wraparounds.

Food Bank- The Grantee presented a timeline of Food Voucher eligibility changes and their impact on utilization.

B. Rationale for Recommendations:

The committee made recommendations for the reallocation of funds ("sweeps") based on the expenditure, utilization information and recommendations presented by the Grantee to ensure that priority needs are met.

C. Data Reports / Data Review Updates:

The committee reviewed all the necessary data needed to reallocate funds during the "Sweeps" process, as well as FY2015 viral load data for PSRA priority populations.

D. Data Requests:

Number of unsuppressed priority population clients by service category; FY2017 MAI OAMC and MCM funds without MAI SA or MH allocations.

E. Other Business Items:

Agenda Items for Next Meeting: MAI Strategies *Next Meeting Date:* November 16, 2016, Governmental Center Annex Room A-337

E. INTEGRATED COMMITTEE**No October Meeting***Chair: W. Spencer Vice Chair: C. Taylor-Bennett***F. EXECUTIVE COMMITTEE****October 20, 2016***Chair: B. Gammell Vice Chair: R. Lopes***A. Work Plan Item Update / Status Summary:**

Standard Committee Items–The committee members reviewed, edited and approved the November calendar, and October HIVPC agenda and meeting materials.

Leadership Changes – The HIVPC Chair discussed changes in HIVPC leadership, with his appointment of Will Spencer as the new PSRA Chair. Some members expressed their concern about changes, and the group discussed the recent leadership changes in numerous HIVPC committees, including CEC and MCDC.

HIVPC Grievances– The members discussed the grievance filed against Arianna Lint at the August HIVPC meeting for recording the meeting and posting it on Facebook. Staff explained that the By-Laws and Policies and Procedures state that a grievance can only be made by a person against an action taken by the HIVPC, not by the HIVPC against a person. Alternative actions may include a Removal for Cause or a discussion about the grievance and member's actions at the next full HIVPC meeting. A member pointed out that there is no language stating that HIVPC members cannot record the meeting themselves, and that the Chair does state that the meetings are a part of the public record, including posting on social media. The group agreed that the recording may not have violated any written protocols, but that the intent of the action was distasteful. They also agreed that it was inappropriate for the member to place themselves above the process and consensus of the Planning Council. The HIVPC Chair will address the member at the October HIVPC meeting, and Executive will discuss how to establish future rules of member conduct at their November Executive meeting.

Executive Leadership Training– The Executive Committee members received a training from facilitator George Gadson on Robert's Rules, leadership style, and skills to effectively facilitate a meeting. At their next meeting they will receive a training on "Who Moved My Cheese?" and how to deal with organizational change.

B. Rationale for Recommendations:

The August HIVPC grievance against Arianna Lint cannot proceed as the HIVPC By-Law and Policies and Procedures state that a grievance can only be made by an individual against an action taken by the HIVPC, not by the HIVPC against an individual.

C. Data Reports / Data Review Updates:

None.

D. Data Requests:

None.

E. Other Business Items:

Agenda Items for Next Meeting: Executive Training *Next Meeting Date:* November 17, 2016

****For detailed discussion on any of the above items, please refer to the meeting minutes. ****

9. GRANTEE REPORTS (20 minutes)

- a. Part A
- b. Part B
- c. Part C
- d. Part D
- e. Part F
- f. HOPWA
- g. Prevention

10. UNFINISHED BUSINESS

11. PUBLIC COMMENT (Up to 10 minutes)

12. ANNOUNCEMENTS

13. REQUEST FOR DATA

14. AGENDA ITEMS FOR NEXT MEETING: December 8, 2016 8:30 a.m.- 5:00 p.m. LOCATION: TBD

<i>Tasks for next Meeting</i>	<i>Responsible Party</i>	<i>Action to be taken, presentation, discussion, brainstorm etc.</i>
ALL DAY HIVPC and Committee Retreat	HIVPC	ACTION ITEM: Participate in full day retreat for all HIVPC and committee members

15. 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 •



BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL

August 16, 2016 Meeting Minutes

ATTENDANCE				
#	Members	Present	Absent	Guests
1	Bell, J.	X		Sabatino, D.
2	Bhrangger, R.	X		King, J.
3	Burgess, D.	X		Rodriguez, J.
4	DeHoyos, F.	X		Little, S.
5	DeSantis, M.	X		Hyde, A.
6	Creary, K.		A	Schickowski, K.
7	Gammell, B. <i>Chair</i>	X		Caballero, O.
8	Grant, C.		A	
9	Hayes, M.		A	Grantee Staff
	Holness, Comm. D.V.C.		A	Degraffenreidt, S.
10	Huggins, L.		A	Jones, L.
11	Katz, H. B.	X		Anderson, T.
12	Lint, A.		A	
13	Lopes, R. <i>Vice Chair</i>	X		HIVPC Staff
14	Marcoviche, W.	X		Ewart, L.
15	Moragne, T.	X		Holloman, K.
16	Parker, P.	X		Johnson, B.
17	Reed, Y.,		A	Newton, A.
18	Robertson, L.	X		Oratien, V.
19	Runkle, D.	X		
20	Schweizer, Dr. M.	X		
21	Siclari, R.		A	
22	Spencer, W.,	X		
23	Taylor-Bennett, C.	X		
24	Thomas-Purcell, K.	X		
A1	Robertson, P. (Alt)		E	
A2	Shamer, D. (Alt)	X		
	Quorum=13	18		

1. CALL TO ORDER

The Chair called the meeting to order at 9:40 a.m.

2. WELCOME AND PUBLIC RECORD REQUIREMENTS

The HIVPC Chair welcomed everyone and self-introductions were made. Attendees were notified of Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. In addition, it was stated that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed. A moment of silence was observed. The following motions were made:

Motion #1: To approve today's agenda

Proposed by: Moragne, T. **Seconded by:** Katz, H.B.

Action: Passed Unanimously

Motion #2: To approve the 7/28/16 meeting minutes.

Proposed by: Taylor-Bennett, C. **Seconded by:** Parker, P.

Action: Passed Unanimously

3. PHONE INTRODUCTIONS

None

4. FEDERAL LEGISLATIVE REPORT

The committee members reviewed Handout A (on file), which contained a report from Kareem Murphy on the prospects of renewed Ryan White funding from the federal government, The HIVPC Chair asked members with questions regarding the report forward their inquiries to Staff, and that they will be addressed at the next HIVPC meeting.

5. CONSENT ITEMS

None

6. EDUCATION AND TRAINING

- a. Integrated Plan- Will Spencer, IC Part A Co-Chair, gave a presentation on the integration process to the HIVPC members. He spoke about the intersection of HIV Care and Treatment along with Prevention to achieve better results throughout Broward County. The Integrated Workgroup was charged with monitoring and approving the development of the Plan, and had representation from the HIVPC, FLDOH-BC, special populations, and community stake holders. He reviewed some of the successes and challenges faced by the committee during the process, including hosting community feedback sessions and trying to get all parties to agree with writing and wording of the Plan.

The purpose of the day's meeting was to present the Goals, Objectives, Strategies and Activities of the Plan, which are the "meat and potatoes" of the document. The IC will review and approve the final document once completed, and the Plan will be posted online for review by the public (not feedback). He stated that once the HIVPC votes on the Plan, they are making a pledge to continue working in an integrated manner and implementing the outlined activities that relate to the HIVPC. Each of the 4 Goals are based on the NHAS 2020 Goals. The IC hosted Community Feedback and Workforce sessions to gain public input of the Goals and Activities of the Plan; those activities highlighted in blue were developed by the IC based on the feedback gathered at each event. The Co-Chair gave specific examples of feedback from the community, including the perception that PrEP is not equally advertised to and accessed minority communities, how youth access information online and need condoms distribution sites to be accessible and non-judgmental, the need for increased use of certified peer navigators, and the need to increase collaboration amongst funders and share outcomes. Stigma was also discussed as a major barrier at all sessions, although each population experienced different kinds of stigma. A member asked if the Health Department would lead the peer management certification process, the IC Co-Chair stated the present Plan will be implemented over a 5 year period and that many details have not yet been decided upon. The current Goals are an outline to guide the next operationalization steps. A member from the AETC stated that they could assist in trainings and educational programs. The Grantee's representative explained that each activity will be assigned to a community partner for implementation. Throughout the presentation, the IC Co-Chair highlighted how each HIVPC Committee would be responsible for strategies that align with their scope, especially the PSRA, QMC, CEC and HIVPC.

The HIVPC Chair stressed the importance of the presented information, and the affect it has on all members and committees. Each committee will have the appropriate activities included on their work plans for the next 5 years. Throughout the process the IC realized the need to continue to hold ongoing Community Feedback sessions, and the IC Co-Chair stressed the need for HIVPC members to participate in these forums as well. He stressed that the Plan is fluid, and while the HIVPC must vote to approve it today, the plan will continue to evolve throughout its implementation with more time for HIVPC feedback and input.

The HIVPC Chair thanked the IC members and stated how proud he was of the work being done in Broward, and the ownership that the HIVPC takes of the documents and commitments that they've made. He also thanked Staff and the Grantee's Office for their work, stating that the work done in Broward will shine during the national Ryan White Conference next week in Washington D.C.

7. DISCUSSION ITEMS

Motion #3: To approve the 5-Year HIV Prevention, Care and Treatment Integrated Plan Goals, Objectives, Strategies and Activities

Proposed by: Spencer, W. **Seconded by:** Taylor-Bennett, C.

Action: Passed Unanimously

Motion #4: To approve the HIVPC Chair to sign the Letter of Endorsement supporting the submission of the final Integrated HIV Prevention, Care and Treatment 5-Year Plan

Proposed by: Moragne, T. **Seconded by:** DeSantis, M.

Action: Passed Unanimously

8. NEW BUSINESS

- a. Discuss the Florida Sunshine Law as it pertains to social media- The HIVPC Chair spoke to the members about social media, and how there have been instances of members and guests recording conversations and meetings then posting them on YouTube and Facebook. All HIVPC and committee meetings are governed under Sunshine Law, including audio recording and taking of minutes that can be requested from Staff by any interested party. However, the Chair is concerned about privacy as a member has recently streamed the last HIVPC meeting to Facebook. While meetings are open to the public he would hate for open and free conversations to cease because of concerning of videotaping. A member stated that while you can record things in Florida with disclosure, and the members agree to audio recording of the meeting, they have not consented to video recordings and online posting. She has concerns for both HIV positive members as well as those who are not, she stated that she believes the incident was very inappropriate. Another member stated that he believed the incident was offensive and violated the trust and spirit of the HIV Planning Council.

Motion #5: To file a grievance against Arianna Lint for live streaming the July HIVPC meeting and have the issue brought before the HIVPC for review.

Proposed by: Spencer, W. **Seconded by:** DeSantis, M.

Action: Passed 14 to 2 oppositions

A member advised the HIVPC members to wait for a legal interpretation of Sunshine and live streaming before taking action. He reminded the members that as a member of a county advisory board they speak in an official government capacity and therefore must be careful not to restrict the free speech of others. The HIVPC Chair stated that the grievance process will include the legal opinion on the matter. Another member stressed that the proposed motion was not about the legality of the incident but about the spirit and intent of the action. A few members agree with the sentiment of the other members, thought that the member may not have understood the consequences of their actions or should not be removed.

9. JULY COMMITTEE REPORTS

A. COMMUNITY EMPOWERMENT COMMITTEE (CEC)

August 2, 2016

Chair: L. Robertson, V. Chair: P. Fleurinord

Report Stands,

B. MEMBERSHIP/COUNCIL DEVELOPMENT COMMITTEE (MCDC)

No Meeting

Chair: K. Creary Vice Chair: V. Foster

C. QUALITY MANAGEMENT COMMITTEE (QMC)

Meeting Cancelled for Lack of Quorum

Chair: C. Grant Vice Chair: A. Earp

D. PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRA)

August 17, 2016

Chair: C. Taylor-Bennett, Vice Chair: R. Siclari

PSRA will meet the day after HIVPC.

E. SYSTEM OF CARE COMMITTEE (SOC)

No Meeting

Chair: M. Hayes Vice Chair: C. Edwards

F. EXECUTIVE COMMITTEE

No Meeting

Chair: B. Gammell Vice Chair: R. Lopes

10. GRANTEE REPORTS

- a. Part A: The Part A Grantee informed the HIVPC members that the Part A grant was released that day, and would be due on October 18th. Next week most of the Grantee's Office and Staff will be attending the Ryan White Conference in D.C., and will give 5 presentations and 2 posters highlighted the work of the Broward EMA. He attended the Orlando ADAP meeting to discuss changes in Premium Plus eligibility to cover up to 400% FPL. The proposed changes will have a significant impact on Part A HICP expenditures,

and the service may not be cost effective once the changes are enacted. He will present data on ADAP Premium Plus expansion to the PSRA committee.

- b. Part B: The Part B representative told the members that 20% of the Part B funds were expended in 1st quarter. Some clients are being transferred to a new bus pass system from Broward County Transit, and so far most clients seem pleased with the service. He stated that everything is going well in Part B. An ADAP representative explained to the members that the expansion of ADAP PP to 400% FPL is yet not final. ADAP is expanding their pharmacy network to more than CVS, and clients can now pick up meds out of state as well. The medication pick-up rate was 88% last month (the highest rate yet), and 90% of those clients were virally suppressed. He reminded the members that ADAP is an adherence program, and clients must call the ADAP office every month to confirm that have received their pharmaceuticals or their benefits may be cancelled.
- c. Part C: No representative present.
- d. Part D: No representative present.
- e. Part F: The Part F representative informed the members that the new dental clinic in Pompano is now open. He will send their flier out to Staff and the Grantee's office for distribution. The clinic provides all types of service for both HIV+ and negative clients on a sliding fee scale.
- f. HOPWA: The HOPWA representative stated that there is an upcoming webinar to discuss the new modernization formula for HOPWA. The new form8ula is intended to match HOWPA with the CDC and HRSA standards, as well as add poverty and MMR calculations. He will have more information about the rollout soon.
- g. Prevention: No report.

11. UNFINISHED BUSINESS

None.

12. ANNOUNCEMENTS

None.

13. PUBLIC COMMENT

- a. Sean Little commented on the Facebook streaming discussion. As a member of press, he views Sunshine meeting as a something that he can report on, and thinks that Facebook is now a source of news as it has a news agency. He would like to council to determine whether Facebook should be considered a news source going forward.

14. REQUEST FOR DATA

None.

15. AGENDA ITEMS FOR NEXT MEETING: October 27, 9:30 a.m. LOCATION:GC- 430

<i>Tasks for next Meeting</i>	<i>Responsible Party</i>	<i>Action to be taken, presentation, discussion, brainstorm etc.</i>

16. ADJOURNMENT

The meeting was adjourned at 11:30 a.m.

HIVPC ATTENDANCE CY 2016

Consumer	PLWHA	Absences	Count	Meeting Month:	Ja n	Fe b	Ma r	Ap r	Ma y	Ju n	Ju l	Au g	Se p	Oc t	No v	De c	Attenda nce Letters
				Meeting Date:	28	25	C	28	26	23	28	16	C				
			1	Bell, J.	X	X		X	X	X	A	X					
1	1	1	2	Bhrangger, R.	X	X		X	A	X	X	X					
1	1	0	3	Burgess, D.	X	X		X	X	X	X	X					
	1	2	4	Creary, K.	X	X		E	E	E	A	A					W- 8/16

1	5	DeHoyos, F.	N-4/28			X	X	X	X	X					
	2	6	DeSantis, M.	X	X		X	A	A	X	X				W- 7/1
1	0	7	Gammell, B., <i>Chair</i>	X	X		X	X	X	X	X				
	3	8	Grant C.	X	X		X	A	X	A	A				W- 8/16
	3	R	Gutierrez, H.	A	A		A	W-3/10, R-5/10							
	1	9	Hayes, M.	X	X		X	X	X	X	A				
	6	A	Holness, D. V.C. (Comm)	A	X		A	A	A	A	A				
1	1	0	1	Huggins, L.M.	X	X		X	X	X	X	A			
			0												
1	1	0	1	Katz, H.B.	X	X		X	X	X	X	X			
			1												
	0	Z	Lewis, L.	X	Z-2/1/16										
1	1	1	1	Lint, A.	X	X		X	X	X	X	A			
			1												
	0	3	Lopes, R., <i>V. Chair</i>	X	X		X	X	X	A	X				
1	1	1	1	Marcoviche, W.	X	X		X	A	X	X	X			
			1												
	0	5	Moragne, T.	X	X		X	X	X	X	X				
	3	R	Myers-Culpepper, K.	A	A		A	W-3/10, R-5/10							
1	1	2	1	Parker, P.	A	E		X	A	E	X	X			
			1												
	1	Z	Proulx, D.	X	A		X	Z- 5/1							
1	1	2	1	Reed, Y.	X	X		X	X	X	A	A			W- 8/16
			1												
	1	0	1	Robertson, L.	X	X		X	X	X	X	X			
1	1	0	Alt 1	Robertson, P. (Alt 1)	X	X		E	X	X	X	E			
1	1	0	1	Runkle, D.	X	X		E	X	X	X	X			
			1												
	2	2	0	Schweizer, M.	X	X		E	A	X	A	X			
1	1		Alt 1	Shamer, D. (Alt 2)	N-4/28			X	A	A	X	X			
			2												
	2	1	2	Siclari, R.	X	X		X	X	A	X	A			
1	1	2	2	Spencer, W.	X	X		X	A	X	X	X			
			2												
	2	3	2	Taylor-Bennett, C.	X	A		X	X	A	X	X			
			2												
	4		2	Thomas-Purcell, K.	N-4/28			X	A	X	A	X			
2	R		2	Tomlinson, K.	X	A		A	W-5/10, Z- 5/20						
				Quorum = 13	24	20		20	14	20	1	9	18		
				Legend: X - present											

A - absent
E - excused
NQA - no quorum
absent
NQX - no quorum
present
N - newly
appointed
Z - resigned
C - cancelled
W - warning letter
R - removal letter

Update for Broward County HIV Health Services Planning Council

From: Kareem Murphy
Date: October 25, 2016

Federal Funding Update

Both chambers of Congress are on recess while members campaign for re-election. Progress on the Fiscal Year (FY) 2017 Labor-Health and Human Services-Education appropriations bills halted back in August when a stalemate over the top line funding emerged as a barrier to negotiations. Congress is currently funded under a Continuing Resolution (CR) that keeps the government operating until December 9.

The election's outcome (the Presidential race and the races for congressional seats) will determine what type of comprehensive deal for the remainder of the fiscal year congress and the White House will strike. The scenarios are numerous and leaders have not yet announced what options they might consider.

The biggest harm is that the lack of a year-long funding agreement may lead HRSA to implement a partial awards approach as it did previously. The Council, providers, and other stakeholders should be aware that this scenario is possible.

Reauthorization Prospects

There are no prospects for consideration of the reauthorization of the Ryan White Program.

Ryan White Part D Report
Children's Diagnostic & Treatment Center (CDTC)
Comprehensive Family AIDS Program (CFAP)
October 25, 2016

- ❖ Total Number of HIV Positive Individuals enrolled in Program - **1121**
 - Total Number of HIV Exposed – Indeterminate Individuals between the ages of 0 - 24 months old -**148**

- ❖ Total Number of HIV positive individuals enrolled in medical care at CDTC – **943**

- ❖ New Referrals as of 1/1/2016 - Current Date
 - Infants (HIV exposed) - **53**
 - Children (2 – 11) - **2**
 - Adolescent (12 -24) - **15**
 - Adult (25 +) -**39**
 - **Total - 109**

- ❖ Total Pregnancies (previously known and new) - **81**