



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, May 26, 2022 - 9:30 AM
LOCATION: Broward Regional Health Planning Council
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 11

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 May 26, 2022
5. **ACTION:** Approval of Minutes from April 28, 2022
6. Federal Legislative Report – Kareem Murphy (Handout A)
7. Consent Items
 - a. Motion to approve the 2022 Ad-Hoc By Laws and MOU Committee Prioritized Timeline (Handout B)
Proposed by: Executive Committee
 - b. Motion to approve Von Biggs to join the Quality Management Committee. Justification: Mr. Biggs works as a CEID Peer Specialist with Broward Regional Health Planning Council. He has experience serving on boards and a strong desire to help the community
Proposed by: QMC Chair
8. Discussion Items
 - a. Integrated HIV Prevention and Care Plan Progress Update- Receive progress update of implementing the Integrated Plan. (Handout C)
9. New Business

None

10. Committee Reports

a. Community Empowerment Committee (CEC)

Chair: Vacant • Vice Chair: Andrew Ruffner

May 3, 2022

i. **Work Plan Item Update/Status Summary:**

The Committee received a debrief of the first two Community Conversations held in April. The first event, held on April 12th, focused on National Youth HIV Awareness Day. A few of the key points mentioned from the panelist is that stigma is a continuous barrier within this community, and it is important to educate parents, guardians, and older family members to create healthier conversations. The second event, held on April 18th at the Arianna Center, focused on Nation Transgender HIV Testing Day. The panelist discussed the social determinants of health within the transgender community. The panelist also expressed their concern of having more representation on the Planning Council to voice their concerns and issues within their community. Additionally, the members reviewed the timeline for the next Community Conversation session scheduled for May 17th. Viiv Healthcare will provide a presentation Cabenuva. The June 14th session will collaborate with the World AIDS Museum and Educational Center (WAM) to discuss topics that bring awareness to HIV Long-Term Survivors.

Committee members reviewed the progress made toward the FY2022 Committee Workplan. The Committee has completed over 75% of the workplan activities through the end of quarter one. PCS will continue to monitor Committee progress towards their FY22-23 goals.

The Committee also received a presentation with data from the 2020-2021 Needs Assessment. The information presented highlighted the strengths and opportunities for improvement of the RW Part A Program as well as possible gaps in provision of care. Members discussed the possibility of comparing other EMAs and their provision of care to Broward EMA.

Additionally, CQM Support staff presented on the Ryan White Health Outcomes. This presentation discussed the notable trends in the HIV care continuum in Broward EMA. Data presented ranged in the years from 2019, 2020, and 2021. CQM Staff also discussed the recommendations for continuum of care for subgroup populations.

Lastly, PCS Staff presented the Consumer Involvement Prioritizing Ryan White Services presentation. CEC is the first to rank support and core services. The reason for ranking services is to direct the recipients on how best to meet the service priorities and ensure that funds are allocated to priority service categories. Reallocations are made during the year to ensure all funds are spent. At the end of the presentation members priority ranked Part A Core and Support services.

ii. **Data Requests:**

iii. **Rationale for Recommendations:**

iv. **Data Reports/ Data Review Updates:**

v. **Other Business Items:**

vi. **Agenda Items for Next Meeting:**

- CEC Listening Session
- FY2023-2024 CEC Rankings Results

vii. **Next Meeting date:** June 7, 2022, at 3:00 PM Location: Broward Regional Health Planning Council

b. System of Care Committee (SOC)

Chair: Andrew Ruffner • Vice Chair: Jose Castillo

May 4, 2022

Work Plan Item Update/Status Summary:

i. Work Plan Item Update/Status Summary:

The CQM Support Staff presented their plans to conduct an individual Quality Improvement Project for the upcoming fiscal year. The aim is to increase the systemwide retention in care (RIC) category in the HIV Care Continuum by 2% by the end of the 2022-2023 fiscal year.

A HIVPC Health Planner provided an overview of the most recently completed needs assessment (Handout B on file). This presentation assessed data from the FY2020-2021 Ryan White Program State-wide Consumer COVID-19 Survey, 2020- 2021 Key Informant Interviews, 2020-2022 Consumer Focus Group Interviews, and the 2022 Ryan White Part A Provider Survey 2022. This information highlighted the strengths and opportunities for improvement of the RW Part A Program and possible gaps in the provision of care.

A CQM Health Planner reviewed health outcomes and the Ryan White Part A continuum of care (Handout C on file).

Lastly, the committee reviewed the progress made toward FY2022-23 work plan activities. PCS Staff has been able to identify workplans activities that have already been completed through the first quarter of the fiscal year. PCS staff will continue to update the work plan to reflect these accomplishments. There was also discussion around planned meetings/events that will assist in accomplishing work plan goals in the upcoming months.

ii. Data Requests:

iii. Rationale for Recommendations:

iv. Data Reports/ Data Review Updates:

v. Other Business Items:

vi. Agenda Items for Next Meeting:

- How Best To Meet The Need

vii. Next Meeting date: June 2, 2022, at 9:30 AM Location: Broward Regional Health Planning Council

c. Membership/Council Development Committee (MCDC)
Chair: Vincent Foster • Vice Chair: Dr. Timothy Moragne
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: July 14, 2022, at 9:30 AM Location: Broward Regional Health Planning Council

d. Quality Management Committee (QMC)
Chair: Bisiola Fortune-Evans • Vice Chair: Vacant
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: June 20, 2022, at 12:30 PM Location: Broward Regional Health Planning Council

e. Executive Committee

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

May 19, 2022

Work Plan Item Update/Status Summary:

i. **Work Plan Item Update/Status Summary:**

The Executive Committee reviewed and approved the HIV Planning Council agenda for the 5/26/2022 meeting. The Committee also reviewed and approved the June 2022 HIV Planning Council calendar of activities.

The Committee also reviewed and approved the 2022 Ad-Hoc By-Laws and MOU Committee's prioritized timeline of activities. PCS Staff provided the Committee with a line-by-line overview of the planned activities.

The PCS Staff Health Planner provided an overview of the progress made toward FY2022-2023 Committee Work Plans. All the Committees are on track to completing all their workplan activities by the end of the fiscal year.

The Committee also received an updated on the Integrated Planning Workgroup progress. IP Workgroup Meetings were held Friday, April 22, May 6th, and May 13th with representatives from HIVPC, SFAN, BCHPPC, Part A, Part B, and HIV Prevention Offices in attendance. IP Members assigned the deadline for the first draft of the Integrated Plan for July 15th. Submission to the Tallahassee FLDOH Office is scheduled for mid-August. A Planning/Work Retreat: is scheduled for Friday, May 27th at the Anne Kolb Nature Center from 10:00-4:00 to discuss the Goals and Objectives for FY2022-2026. The final deadline for submission of the Integrated Plan is December 9, 2022.

Lastly, the Committee received a presentation on the Broward EMA Ending the HIV Epidemic (EHE) program. The presentation provided an overview of the program, historical background, population of focus and funded EHE activities, year 2 service delivery and impact as well as the next steps for year three of the program

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:** June 16, 2022, at 1:30 PM Location: Broward Regional Health Planning Council

f. Priority Setting & Resource Allocation Committee (PSRA)

Chair: Brad Barnes • Vice Chair: Valery Moreno

May 19, 2022

i. **Work Plan Item Update/Status Summary:**

The PSRA committee briefly discussed the Eligibility process for the Ryan White Part A Program as a whole and eligibility for individual service categories. The Committee sought clarification on the role of the Planning Council in that process. The Recipient Office advised the Committee that in accordance with PCN21-2, the RWHAP Part A has moved to an annual eligibility cycle. There have been technological challenges with updating this in Provide Enterprise (PE), as well as issues on how to address recertification. However, they are working to rectify these issues in PE and they have begun the annual SDM review process with CIED and the CQM team. Once, the annual review of the CIED SDM is complete, it will be submitted to the HIVPC for further review and approval. The Recipient Office further stressed that this will be a collaborative effort between themselves, the Planning Council and CQM Staff. The Committee

agreed to move this discussion item to standard Committee Item.

A representative of the Florida Department of Health in Broward County (FDOH-BC) presented the epidemiology of HIV in Broward County in 2020. The epidemiologic profile presented described the burden of HIV on the Broward population in terms of social demographic, geographic, behavioral, and clinical characteristics of people living with an HIV diagnosis. The representative noted the number of HIV diagnoses which highlighted a significant decrease from 628 individuals in 2019 to 467 individuals in 2020 owing to the COVID-19 Pandemic.

The Committee also received a presentation on the Broward EMA Ending the HIV Epidemic (EHE) program. The presentation provided an overview of the program, historical background, population of focus and funded EHE activities, year 2 service delivery and impact as well as the next steps for year three of the program. Through year two, the program as engaged 600 individuals in DIS. 146 individuals are enrolled in DCM, 125 of which were retained in care and 91 of which have achieved viral load suppressions. Additionally, 451 individuals have utilized Medical Transportation services and 736 individuals have received Food services. Next steps for the EHE program through year three included continued service implementation, additional community engagement activities and collaboration with other local funders. Additionally, there will be ongoing monthly and quarterly EHE.

Lastly, the Committee received a presentation from a HIVPC Health Planner regarding the most recent Needs Assessment findings. The information presented highlighted the strengths and weaknesses of the RW Part A Program as well as possible gaps in the provision of care. The presentation also provided recommendations to address those needs and barriers and recommendations from the continuum of care

ii. **Data Requests:**

iii. **Rationale for Recommendations:**

iv. **Data Reports/ Data Review Updates:**

Full recordings and documents relating to the FY23-24 PSRA Process can be found here [FY23-24 PSRA Process](#).

v. **Other Business Items:**

vi. **Agenda Items for Next Meeting:**

- Part A Client Health Outcomes Presentation
- How Best to Meet The Need
- PSRA FY21 Scorecards
- Community Empowerment Committee Rankings
- PSRA Presentation
- Priority Setting

vii. **Next Meeting date:** June 16, 2022, at 9:30 AM Location: Broward Regional Health Planning Council

g. **Ad-Hoc By-Laws and Memorandum of Understanding Committee**

Chair: Brad Barnes • Vice Chair: Vacant

May 11, 2022

viii. **Work Plan Item Update/Status Summary:**

Committee members reviewed the purpose and the goals of the Ad-Hoc By-laws and MOU Committee. The last MOU, drafted in 2004, was not properly implemented. The MOU plays a role in understanding the relationship and roles between HIVPC and the grantees office. The HIVPC By-Laws were last revised in 2018 and are reviewed as need.

Additionally, members discussed the timeline for revision of the Bylaws and MOU. The purpose of this timeline is to prioritize and complete the recommendations for each By-Laws parking lot items and MOU development.

The Committee reviewed and approved 2022 Ad-Hoc By-Laws and MOU Committee's prioritized timeline

Lastly, members reviewed the current By-Laws and Bylaws parking lot items. PCS Staff created a list of recommendations for the committee to review for revision. Committee members briefly discussed the parking lot items. In depth reviews and recommendations are scheduled for subsequent meetings.

The committee agreed to table assigning responsibilities for MOU Development until the next scheduled meeting and move reviewing data requirements to standard committee items.

- ix. **Data Requests:**
- x. **Rationale for Recommendations:**
- xi. **Data Reports/ Data Review Updates:**
- xii. **Other Business Items:**
- xiii. **Agenda Items for Next Meeting:**
- xiv. **Next Meeting date:** June 9, 2022, at 3:00 PM Location: Poverello

11. Recipient Reports

- a. Part A
- b. Part B
- c. Part C
- d. Part D
- e. Part F
- f. HOPWA (Handout D)
- g. Prevention – Quarterly Update (April, **July**, October, January)

12. Public Comment

13. Agenda Items for Next Meeting

- a. Next Meeting Date: June 23, 2022, at 9:30 a.m. Location: Broward Regional Health Planning Council

14. Announcements

15. Adjournment

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

Please complete you [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 • Jared Moskowitz • Nan
H. Rich • Tim Ryan • Torey Alston • Michael Udine

[Broward County Website](http://www.broward.org)

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 esklizif pou fè moun tande-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 implementation of activities designed to improve patient’s 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.



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

HIV Health Services Planning Council

Thursday, April 28, 2022 - 9:30 AM
Meeting via [WebEx](#)

DRAFT MINUTES

HIVPC Members Present: L. Robertson (HIVPC Chair), V. Biggs R. Lopes B. Barnes, R. Bhrangger, W. Marcoviche, A. Cutright, V. Foster, T. Moragne, , R. Jimenez, J. Castillo, C. Dumas, J. Rodriguez, V. Moreno, A. Ruffner, B. Fortune-Evans, E. Dsouza

Members Excused:, M. Schweizer, Y. Arencibia

Members Absent:, I Wilson

Ryan White Part A Recipient Staff Present: K. Bostick, G. James, T. Thompson, W. Cius, J. Roy, S. Beebe, T. Currie, V. Hornsey

Planning Council Support Staff Present: G. Berkley-Martinez, W. Rolle, B. Miller.

Guests Present: G. Beltran, S. Jackson, B. Mester, L. Jones, K. Drummond.

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

The PSRA Chair called the meeting to order at 9:31 a.m. The HIVPC Chair welcomed all meeting attendees that were present. Attendees were notified that the HIVPC meeting is based on Florida's "Government-in-the-Sunshine Law" and meeting reporting requirements, including the recording of minutes. In addition, it was stated that the acknowledgment of HIV status is not required but is subject to public record if it is disclosed. Introductions were made by 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 for the agenda of the April 28, 2022, HIVPC meeting with additions to the consent items was proposed by V. Biggs, seconded by V. Moreno, and passed unanimously. The approval for the minutes of the March 24, 2022, meeting as presented, meeting was proposed by V. Biggs, seconded by V. Foster, and passed unanimously.

Motion #1: Mr. Biggs, on behalf of HIVPC, made a motion to approve the April 28, 2022, HIV Health Services Planning Council agenda with additions to the consent items. The motion was adopted unanimously.

Motion #2: Mr. Biggs, on behalf of HIVPC, made a motion to approve the March 24, 2022, HIV Health Services Planning Council meeting minutes as presented. The motion was adopted unanimously.

4. Federal Legislative Report

There were no Federal Legislative Report for this meeting.

5. Standard Committee Items

There were no standard committee items for this meeting.

6. Consent Items

The consent items were approved with no discussion.

7. Discussion Items

The Planning Council Members discussed the transition of conducting Planning Council and Committee meetings back to in-person meetings. The Executive Order expires on May 10, 2022. Planning Council Support Staff scheduled meetings in the Governmental Center. A hybrid option will also be available for guest to attend via Zoom or conference call. The Planning Council and Committee members must be present in the room to establish quorum. A letter will be sent to the Board of Commissioners on behalf of the Planning Council Chair and Vice-Chair to discuss the concern of allowing quorum to be established through a hybrid platform. The community and other guests will be notified that meetings will now take place in person via social media and the email listserv. The Recipient's office will continue to monitor the COVID-19 infection trends and share this information at the next Planning Council meeting. The COVID-19 infection rates do not have directly correlate to members being present in person and establishing quorum. The approval for the Chair or Vice-Chair to appear before the Broward County Commissioners advisory board to voice the concerns of the Planning Council was proposed by B.Barnes, seconded by T. Moragne, and passed unanimously.

Motion #3: Mr. Barnes on behalf of the HIVPC, made a motion to approve the Chair and Vice-Chair of to appear before the Broward County Commissioners advisory board to voice the concerns of the Planning Council. The motion was adopted unanimously.

The idea of board members rotating turns to meet in person to establish quorum was also suggested and considered by the Planning Council members. The meeting will be cancelled if quorum is not established. The quorum requirements are already established in the Bylaws. PCS Staff will confirm whether members will attend in person or through a virtual platform through quorum calls. Planning Council members voiced their concerns that individuals living with compromised immune systems and other comorbidities are considered when establishing an in-person quorum. Meetings will be held at the Governmental Center- 115 South Andrew Avenue FT. Lauderdale, FL 33301 Room A337.

8. New Business

There were no new business items for this meeting.

9. Committee Reports

a. Community Empowerment Committee – April 5, 2022

Chair: Vacant, Vice Chair: A. Ruffner

V. Biggs would like to add to the CEC's minutes pertaining to the discussion of the mental health services procedures required by Ryan White Providers that a RWPA client with no supplemental private insurance will have to complete an intensive psychological analysis by their 3rd visit.

b. System of Care Committee – April 7, 2022

Chair: A. Ruffner, Vice Chair: Vacant

The report stands.

c. Membership/Council Development Committee – April 14, 2022

Chair: V. Foster, Vice Chair: T. Moragne

The report stands.

d. Quality Management Committee – April 18, 2022

Chair: B. Fortune-Evans, Vice Chair: Vacant

The report stands.

e. Priority Setting & Resource Allocation Committee – April 21, 2022

Chair: B. Barnes, Vice Chair: V. Moreno

The report stands. PCS Staff created a summary for all the HIV Funder presentations. Included in this summary are the services offered, eligibility criteria FY2021 service utilization, and the trends that are occurring within the different parts.

f. Executive Committee – April 21, 2022

Chair: L. Robertson, Vice Chair: V. Biggs

The report stands.

10. Recipient's Report

- a. **Part A:** The Part A staff participated in two Planning Council events-the town hall meeting on April 14th and the Transgender Testing Day Community Conversation event on April 18th. The Part A office will coordinate a meeting with Ariana Lint and Tatiana Williams to continue the discussion on the issues presented within the transgender community.
- b. **Part B:** The Part B report stands as presented.
- c. **Part C:** The Part C Representative reported that their Clinic had seen 301 clients in April, including ten new patients, three newly diagnosed/new to care, and seven who are being re-engaged into care. The Part C Representative also noted the purpose of Test and Treat is to re-engage persons back into care. Newly diagnosed clients are defined as newly positive individuals. In March, Memorial Healthcare initiated a new test and treat program and has seen four newly diagnosed HIV persons. Two of them are in progressed stages of HIV.
- d. **Part D:** The Part D representative reported an influx of pregnant women immigrating from Haiti and Brazil being newly diagnosed. There is an increase in their test and treat numbers. Clients once lost in care are now returning and reconnecting back in HIV treatment services. There has been a new hire for the Dentist position in that location willing to see children and adults. Their office location was able to open a pharmacy for clients to receive their medications. There is a shortage of nursing staff, and they are looking to fill those positions. They are still waiting for the approval status for their Part D application that was filed in January.

- e. **Part F:** There was no Part F representative to provide a report.
- f. **HOPWA:** There was no HOWPA report for this meeting.
- g. **Prevention:** The Prevention report stands as presented.

11. 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.

12. Agenda Items for Next Meeting

The next HIVPC meeting will be held on May 26, 2022, at 9:30 a.m. Location: TBA

A motion to cancel May 26, 2022, HIVPC to give members the opportunity to plan their schedules accordingly to prepare for in person meetings, and for the Executive Committee to meet before the May 10th deadline to plan future meetings was proposed by B. Barnes, seconded by V. Foster. The motion was rejected with seven approvals and nine rejections.

Motion #4: Mr. Barnes on behalf of the HIVPC, made a motion to cancel May 26, 2022 HIVPC to give members the opportunity to plan their schedules accordingly to prepare for in person meetings, and for the Executive Committee to meet before the May 10th deadline to plan moving forward. The motion was rejected with seven approvals and nine rejections.

Planning Council members discussed the possibility of changing locations for in-person meetings. B. Barnes stated that the room currently reserved for meetings is too small for the number of persons needed for quorum to attend in person and that the building is riddled with mold. The room reserved may breach COVID-19 guidelines for the number of persons allowed in each space. HIVPC members also raised concerns that this will delay scheduled presentations if the meeting is canceled. PCS Staff will look for locations that will comfortably and safely accommodate the Planning Council members for their next meeting.

13. Announcements

There were no announcements during this meeting.

14. Adjournment

There being no further business, the meeting was adjourned at 10:49 a.m.

HIVPC Attendance for CY 2022

Consumer	PL W/H/A	Absences	Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
				Meeting Date	27	24	24	28									
0	0	0	1	Arencibia, Y.	X	X	X	E									
0	1	0	2	Barnes, B.	X	X	X	X									
1	1	0	3	Bhrangger, R.	X	X	X	X									
0	1	0	4	Biggs, V., V.Chair	X	X	X	X									
0	0	0	5	Cutright, A.	X	X	X	X									
0	1	0	6	Dumas, C.	X	X	X	X									
0	0	0	7	Fortune-Evans, B.	E	X	E	X									
0	0	0	8	Foster, V.	X	X	X	X									
0	0	0		Alston, Torey													
0	0	0	9	Lopes, R.	E	X	X	X									
1	1	0	10	Marcoviche, W.	X	X	X	X									
0	0	0	11	Moragne, T.	X	X	X	X									
0	0	0	12	Moreno, V.	X	E	X	X									
0	1	0	13	Robertson, L., Chair	X	X	X	X									
0	0	0	14	Rodriguez, J.	E	X	X	X									
0	0	0	15	Ruffner, A.	X	X	E	X									
0	0	0	16	Schweizer, M.	X	X	E	E									
1	1	0		Shamer, D.	X	X											
0	0	1	17	Wilson, I.	X	X	X	A									
1	1	0	18	Jackson, S.	X	X	X	Z-4/7									
0	1	0	19	Castillo, J.	X	X	X	X									
0	0	0	20	Dsouza, E.	E	X	E	X									
0	0	0	21	Jimenez, R.	X	X	X	X									
3	9			Quorum = 12	18	21	17	17	0	0	0	0	0	0	0	0	
14%	43%																

Legend:

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

HIV Health Services Planning Council Meeting Minutes – April 28, 2022
 Minutes prepared by PCS Staff

HANDOUT A

Update for Broward County HIV Health Services Planning Council

From: Kareem Murphy

Date: May 23, 2022

Federal Funding Update

President's Budget for Fiscal 2023

President Biden released his Fiscal Year 2023 budget in March. Hearings on the request are expected to begin in early June with markup of the appropriations bills beginning in the House in mid-June. Below are funding totals for part of the prevention, services, and treatment continuum.

Prevention:

The domestic HIV prevention budget (mostly through the CDC) includes \$1.1 billion (\$113 million over the previous year's total). That amount includes \$310 million for the Ending the HIV Epidemic (EHE), which also is a \$115 million increase.

Ryan White

The total across all Ryan White programs is \$2.7 billion (\$160 million more than the previous year). That includes increases for EHE totaling \$165 million.

- Part A for states - \$665.8 million
- Part B for urbanized areas- \$1.345 billion (and an additional \$900.3 million for ADAP)
- Part C for early intervention - \$207 million
- Minority AIDS Initiative - \$58 million

Health Center Funding

The budget request includes HIV funding for FQHCs at \$172 million (almost a \$50 million increase)

HOPWA

This Housing and Urban Development program would be funded at \$455 million (a small \$5 million increase)

New PrEP Program

The 2023 budget would create a new mandatory program to supply PrEP to persons who lack insurance or whose insurance fails to fully cover the medical protocol. The program seeks to provide wrap-around services though it would be administered by state governments and/or local collaboratives. The budget includes \$237 million for this program (and authorizes over \$9.8 billion over 10 years). The budget proposes that Congress expand Medicaid program to cover access to PrEP and supportive services

Table 1: FY 2023 Key Discretionary Accounts in the Domestic HIV Budget Request (in Millions)

Agency/Program	FY22 Omnibus	FY23 Request	Difference: FY23 Request- FY22 Enacted
CDC – HIV Prevention	\$986.71	\$1,099.71	\$113.00 -11%
<i>Of which EHE</i>	<i>\$195.00</i>	<i>\$310.00</i>	<i>\$115.00</i> <i>-59%</i>
HRSA			
Ryan White	\$2,494.78	\$2,654.78	\$160.00 -6%
<i>Of which EHE</i>	<i>\$125.00</i>	<i>\$290.00</i>	<i>\$165.00</i> <i>-132%</i>
Community Health Centers (EHE Only)	\$122.25	\$172.00	\$49.75 -41%
Health Centers (EHE Rural Health TA)	NA	NA	NA
HUD – HOPWA	\$450.00	\$455.00	\$5.00 -1%
Minority HIV/AIDS Fund	\$56.90	\$58.00	\$1.10 -2%

Table 2: FY 2023 Ending the HIV Epidemic Budget Request (in Millions)

Agency/Program	FY22 Omnibus	FY23 Request	Difference: FY23 Request- FY22 Enacted
CDC	\$195.00	\$310.00	\$115.00 -59%
HRSA			
<i>Ryan White</i>	<i>\$125.00</i>	<i>\$290.00</i>	<i>\$165.00</i> <i>-132%</i>
<i>Community Health Centers</i>	<i>\$122.25</i>	<i>\$172.00</i>	<i>\$49.75</i> <i>-41%</i>
<i>Health Centers (Rural Health TA)</i>	<i>NA</i>	<i>NA</i>	<i>NA</i>
NIH	\$26.00	\$26.00	\$0 0%

HANDOUT B

2022 AD-HOC BY-LAWS AND MOU COMMITTEE TIMELINE

ACTIVITY	DUE DATE
Review Ad-Hoc By-laws/MOU Committee purpose, current By-laws, and By-Laws Parking Lot Items	May 11, 2022
Review and approve timeline	
Review proposals and make recommendations for parking lot items #1 and #2	June 8, 2022
Memorandum of Understanding Overview/Training – Emily Gantts McKay	
Assign responsibilities for MOU Development	
Review proposals and make recommendations for parking lot items #3 and #4	July 2022
Request Standing Committee recommendations for additional By-Laws changes.	
Review Initial MOU draft and make recommendations for changes.	
Review proposals and make recommendations for parking lot items #5, as well as additional recommendations from Standing Committees (if proposed).	September 2022
Review MOU second draft including recommendations and revisions.	
Recommendations for By-Laws changes forwarded to HIV Planning Council	September 15, 2022
Recommendations for MOU revisions forwarded to the Executive Committee	
HIV Planning Council votes on recommended By-Laws changes and MOU.	September 22, 2022
Obtain Signatures once the MOU is approved	September 23, 2022

Note: Based on revised By-Laws/MOU, Staff will update the HIVPC Local Procedures Manual which has to be approved by the HIVPC.



HANDOUT C

UPDATE: Integrated HIV Prevention and Care Activities

HIV Health Services Planning Council

1. Integrated Planning Workgroup:

1. IP Workgroup Meetings were held Friday, April 22, May 6th, and May 13th: Three representatives from each planning body: HIVPC, SFAN, BCHPPC, and representatives from the Part A, Part B, and HIV Prevention Offices were present.
2. Members assigned the deadline for the first draft of the Integrated Plan for July 15th.
3. Submission to the Tallahassee FLDOH Office is scheduled for mid-August.
4. Planning/Work Retreat: Friday, May 27th – Anne Kolb Nature Center from 10:00-4:00:
 - a) Goals and Objectives for FY2022-2026

2. The Final Deadline for Submission of the Integrated Plan: December 9, 2022

HANDOUT D



City of Fort Lauderdale

HOWPA FY21-22 Summary - End of 2nd Quarter

From: 10/01/2021 thru 03/31/2022

Program FY 21-22	Annual Budget	Expensed as of Mar 2022	Expensed %	Balance Amt	Balance %
Permanent Housing Placement (PHP)	\$269,352.00	\$65,741.00	24%	\$203,611.00	76%
Short Term Rent Mortgage Utility Assistance (STRMU)	\$485,500.00	\$132,532.05	27%	\$352,967.95	73%
Tenant Base Rental Voucher (TBRV)	\$2,607,064.00	\$980,476.74	38%	\$1,626,587.26	62%
Project / Facility Based (PBR / FAC)	\$2,514,580.00	\$1,380,759.96	55%	\$1,133,820.04	45%
Temporary Emergency Hotel Voucher (TEHV)	\$61,895.00	\$23,243.00	38%	\$38,652.00	62%
Housing Case Management (HCM)	\$590,000.00	\$361,129.65	61%	\$228,870.35	39%
Legal Aid	\$180,000.00	\$129,394.78	72%	\$50,605.22	28%
FY 21-22 TOTAL	\$6,708,391.00	\$3,073,277.18	46%	\$3,635,113.82	54%

From: 03/17/2020 thru 03/31/2022

Program CARES Act	Budget	Expensed as of Mar 2022	Expensed %	Balance Amt	Balance %
Short Term Rent Mortgage Utility Assistance (STRMU)	\$618,068.00	\$386,921.00	63%	\$231,147.00	37%
Temporary Emergency Hotel Voucher (TEHV)	\$180,286.00	\$170,646.38	95%	\$9,639.62	5%
Facility Based (FAC)	\$174,826.00	\$51,167.91	29%	\$123,658.09	71%
CARES ACT TOTAL	\$973,180.00	\$608,735.29	63%	\$364,444.71	37%

HOPWA FY21-22 Budget/Expenditure Summary - End of 2QTR





City of Fort Lauderdale

HOWPA FY21-22 Summary - End of 2nd Quarter

HOPWA Eligibility:

1. Client must be diagnosed with HIV
2. Income Eligible (Total Household Income is below 80% of area median income)
3. Lawfully reside in U.S.
4. Broward County resident for 6 consecutive months.
5. Not receiving housing assistance from other programs
5. HOPWA CARES Act - All the above + COVID 19 related

How to apply for HOPWA Housing Assistance:

Contact SunServe or Care Resource (Housing Case Managers)

- o SunServe: *954-764-5150* - 2312 Wilton Drive, Wilton Manors, FL
- o Care Resource: *954-567-7141* - 601 W Oakland Park Blvd, Fort Lauderdale, FL

HOPWA Non-Housing Legal Aid

- o Contact Careresource or Sunserve for Legal Aid referral

HOPWA decisions are made by the Community Service Board (CSB).

These meetings are open to the public and providers.

Meeting are held 2nd Monday of each month; 4:00pm at City of Fort Lauderdale; City Hall, Commission Chambers – 100 N Andrews Avenue, Fort Lauderdale, FL.

<https://www.fortlauderdale.gov/government/CSB>