



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, June 26, 2025 – 5:30PM

Meeting at Broward County Government Center Annex 337 and Microsoft Teams

[Join the meeting now](#)

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Meeting ID: 273 316 500 415

Passcode: 8AH6AW2B

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[+1 469-998-5921, 978420177#](tel:+14699985921978420177) United States, Dallas

[Find a local number](#)

Phone conference ID: 978 420 177#

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

This meeting is audio and video recorded.

Quorum for this meeting is 15

DRAFT AGENDA

ORDER OF BUSINESS

CALL TO ORDER/ESTABLISHMENT OF QUORUM

WELCOME FROM THE CHAIR

- a) Meeting Ground Rules
- b) Statement of Sunshine
- c) Introductions & Abstentions
- d) Moment of Silence

PUBLIC COMMENT

ACTION: Approval of Agenda for June 26, 2025

ACTION: Approval of Minutes for April 24, 2025 (**[Handout A](#)**)

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

STANDARD COMMITTEE ITEMS

CONSENT ITEMS

- a. Action Item: Motion to approve Olivia Davy to the Quality Management Committee and Membership/Council Development Committee

Justification: Olivia Davy is passionate about reducing health disparities and is interested in joining the Planning Council Committees to gain experience and support health equity efforts. As a recent intern with the Task Force for Ending Homelessness, she connected individuals experiencing homelessness with vital services, including healthcare, shelter, mental health support, and HIV/AIDS resources.

PROPOSED BY: Quality Management Committee Chair and Membership/Council Development Committee Chair

- b. Action Item: Motion to approve the following HIVPC General Body Policy and Procedures: Executive Committee Policy and Procedures; Incentives Policy for Client Engagement and Participation; Attendance Policy and Committee Only Members; Unaffiliated Member Reimbursements Policy; and Public Comment Process (HIVPC Meetings and Broward County Board of Commissioners Meetings) ([Handouts B1-B5](#))

Justification: The HIVPC General Body Policies and Procedures were last approved in 2017. Outdated policies are being revised and new policies added to ensure they align with the Broward County Ordinance, federal requirements, and the Council's current operations and practices.

PROPOSED BY: Executive Committee

- c. Action Item: Motion to approve new Member of the Quarter Eligibility which states individuals who were selected as Member of the Quarter in the previous fiscal year be ineligible for selection in the following fiscal year. Past recipients will become eligible again after one full fiscal year has passed

Justification: The Member Recognition Program, developed by the Membership/Council Development Committee (MCDC), is designed to acknowledge the contributions of Council members. Both the MCDC and the Executive Committee supported this motion to ensure more members have the opportunity to be recognized for their dedication and hard work.

PROPOSED BY: Executive Committee

DISCUSSION ITEMS

- a. Proposed Change in Priority Setting and Resource Allocation for 2025-2026

Motion from Executive Committee as recommended by the PSRA Committee: To authorize the Ryan White Part A Office to maintain the FY2025-2026 service priorities and allocated funds for the FY2026-2027 grant period. This decision is made due to the slow contractual process, which has impacted the timely execution of services and payment to subrecipients.

OLD BUSINESS

- a. **Update:** Nomination/Bylaws Committee ad-hoc committee; *PCS Support Staff* (**Handout C1, C2**)

NEW BUSINESS

- a. **Presentation:** AIDS Watch Recap 2025, *Shawn Tinsley and Franchesca D'Amore* (**Handout D**)

COMMITTEE REPORTS

a) **Community Empowerment Committee (CEC)**

Chair: Shawn Jackson • Vice Chair: Edna Chery-Davis

June 3, 2025

- i. **Work Plan Item Update/Status Summary:** The committee received updates on upcoming activities and initiated planning for the "Aging Gracefully" event scheduled for September. Additionally, members voted to update the current promotional materials.
- ii. **Data Requests:** None.
- iii. **Rationale for Recommendations:** None.
- iv. **Data Reports/Data Review Updates:** None.
- v. **Other Business Items:** None.
- vi. **Agenda Items for Next Meeting:** To Be Determined.
- vii. **Next Meeting date:** July 1, 2025, at 3:00 PM at **Broward Regional Health Planning Council** and via Microsoft Teams Videoconference

b) **System of Care Committee (SOC)**

Chair: Jose Castillo • Vice Chair: Kendra Hayes

June 5, 2025

- i. **Work Plan Item Update/Status Summary:** The committee reviewed and finalized the recommended language for the "How Best to Meet the Need" document, which will be forwarded to the PSRA Committee. They also continued discussions on the upcoming Listening Session #2, scheduled for August 12, 2025, from 6:00 PM to 8:00 PM. Additionally, the committee received a presentation on the current HIV Care Continuum data.
- ii. **Data Requests:** None
- iii. **Rationale for Recommendations:** None
- iv. **Data Reports/ Data Review Updates:** None
- v. **Other Business Items:** None
- vi. **Agenda Items for Next Meeting:** To be Determined.
- vii. **Next Meeting date:** July 3, 2025, at 9:30 AM at **Broward Regional Health Planning Council** and via Microsoft Teams Videoconference

c) **Membership/Council Development Committee (MCDC)**

Chair: Vacant • Vice Chair: Dr. Timothy Moragne

Meets Quarterly – Next Meeting July 10, 2025

- i. **Work Plan Item Update/Status Summary:** None.

- ii. **Data Requests:** None.
- iii. **Rationale for Recommendations:** None.
- iv. **Data Reports/Data Review Updates:** None.
- v. **Other Business Items:** None.
- vi. **Agenda Items for Next Meeting:** Provide an update on the Post-Appointment Orientation, review the Member of the Quarter results for Quarter One, and evaluate feedback from the PSRA/CEC Listening Tour.
- vii. **Next Meeting date:** October 9, 2025, at 9:30 AM at BRHPC and via Microsoft Teams Videoconference

d) **Quality Management Committee (QMC)**

Chair: Bisiola Fortune-Evans • Vice Chair: Franchesca D'Amore

Next Meeting Scheduled August 18, 2025

- i. **Work Plan Item Update/Status Summary:** During its May meeting, the committee reviewed its work plan and received a brief presentation on recent updates to the Quality Improvement Project (QIP) Toolkit. Additionally, Clinical Quality Management Support Staff presented data related to the HIV Care Continuum.
- ii. **Data Requests:** None.
- iii. **Rationale for Recommendations:** None.
- iv. **Data Reports/Data Review Updates:** None.
- v. **Other Business Items:** None.
- vi. **Agenda Items for Next Meeting:** To be determined.
- vii. **Next Meeting date:** August 18, 2025, at 12:30 PM at **Broward Regional Health Planning Council** and via Microsoft Teams Videoconference

di) **Executive Committee**

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

June 18, 2025

- i. **Work Plan Item Update/Status Summary:** The committee reviewed and approved the HIVPC agenda for June 26, 2025, along with the July calendar. The committee continued discussions regarding the Nominating/By-Laws committee and discussed the MCDC Chair vacancy among other topics. The committee reviewed and approved the following policies: Executive Committee Policy and Procedures; Incentives Policy for Client Engagement and Participation; Attendance Policy and Committee; Unaffiliated Member Reimbursements Policy; and Public Comment Process (HIVPC Meetings and Broward County Board of Commissioners Meetings).
- ii. **Data Requests:** None
- iii. **Rationale for Recommendations:** None
- iv. **Data Reports/ Data Review Updates:** None
- v. **Other Business Items:** None
- vi. **Agenda Items for Next Meeting:**
 - a. Review and approve the July 24, 2025, HIVPC Agenda, Meeting Materials, and Motions
 - b. Review the August 2025 HIVPC Calendar

- c. **Next Meeting date:** July 17, 2025 at 11:15AM at **Broward Regional Health Planning Council** and via Microsoft Teams Videoconference
- f) **Priority Setting & Resource Allocation Committee (PSRA)**
 Chair: Brad Barnes • Vice Chair: Mark Schweizer
 June 18, 2025
 - i. **Work Plan Item Update/Status Summary:** During its May meeting, the committee reviewed the evaluation and event summary for Listening Tour Session #1 and received an update from the Part A Office on Eligibility Determination. During its June meeting, the committee discussed proposed changes to the Priority Setting process for FY2025–2026, reviewed eligibility determination recommendations from the Recipient’s Office, and considered potential updates to the PSRA Policies and Procedures in the event of a significant funding reduction.
 - ii. **Data Requests:** None.
 - iii. **Rationale for Recommendations:** None.
 - iv. **Data Reports/Data Review Updates:** None.
 - v. **Other Business Items:** None.
 - vi. **Agenda Items for Next Meeting:** To Be Determined
 - vii. **Next Meeting date:** (*Coordination Meeting*) July 17, 2025, at 9:30AM **Broward Regional Health Planning Council** and via Microsoft Teams Videoconference
- g) **Ad-Hoc Minority AIDS Initiative Sub-Committee (MAI)**
 Chair: Mark Schweizer • Vice Chair: Shawn Tinsley
 - viii. **Work Plan Item Update/Status Summary:** During its May meeting, the committee received a presentation on the 2024–2025 Needs Assessment Findings related to Ryan White services for MAI (Minority AIDS Initiative) populations. The committee also reviewed a presentation on care continuum data and discussed effective strategies for utilizing MAI funding. The previously scheduled June meeting had to be rescheduled for July.
 - ix. **Data Requests:** None.
 - x. **Rationale for Recommendations:** None.
 - xi. **Data Reports/Data Review Updates:** None.
 - xii. **Other Business Items:** None.
 - xiii. **Agenda Items for Next Meeting:** MAI best practices; The utilization of MAI funds in other EMAs.
 - xiv. **Next Meeting date:** July 9, 2025, at 2:00PM at **Broward Regional Health Planning Council** and via Microsoft Teams Videoconference

RECIPIENT REPORTS

- a) Part A ([Handout E](#))
- b) Part B ([Handout F1, F2](#))
- c) Part C ([Handout G](#))
- d) Part D ([Handout G](#))
- e) Part F ([Handout H](#))
- f) HOPWA

g) Prevention – Quarterly Update (April, July, October, January)

DATA REQUEST(S)

PUBLIC COMMENT

AGENDA ITEMS FOR THE NEXT MEETING

- a) Next Meeting Date: July 24, 2025, at 9:30 AM at Broward Regional Health Planning Council (BRHPC) and via Microsoft Teams
- b) Agenda Items for next meeting: To Be Determined

ANNOUNCEMENTS

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 • Nan H. Rich •
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[Broward County Website](#)



July 2025



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 HIV Health Service Planning Council for updates.						
		1 Community Empowerment Committee Meeting (CEC) 3:00PM- 5:00PM Location: BRHPC/MS Teams	2	3	4 HAPPY 4th of July	5
6	7	8 Behavioral Health Network Meeting (CQM) 2:00PM-3:15PM	9 Minority AIDS Initiative Subcommittee Meeting 2:00PM – 4:00PM Locations: BRHPC/MS Teams	10 Membership/Council Development Committee Meeting (MCDC) 9:30AM – 11:30AM Location: BRHPC/MS Teams	11	12
13	14	15	16	17 Priority Setting and Resource Allocation Committee Coordination Meeting 9:30AM – 11:00AM Location: BRHPC/MS Teams Executive Committee Meeting 11:15PM – 1:15PM Location: BRHPC/MS Teams	18	19
20	21 ZERO HIV STIGMA DAY #ZEROHIVSTIGMADAY	22 Integrated Planning Work Group Meeting 1:00PM – 4:00PM Location: BRHPC/MS Teams	23	24 HIV Planning Council Meeting 9:30AM – 11:30AM Locations: BRHPC/MS Teams	25	26 GET CARE BROWARD TREAT HIV BEAT HIV RYAN WHITE PART A
27	28	29	30	31		

Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020
Links are active and lead to meetings or Awareness Day Information. **Information is subject to change.**

Meetings in **RED** are canceled. Meetings in **BLUE** are for the HIV Planning Council Committees. Meetings in **GREEN** are for the Provider Network.
Holidays and meetings outside of the HIV Planning Council are in **BLACK**.



July 2025



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 [HIV Health Service Planning Council](https://www.browardhivpc.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 resewva 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.

Broward County HIV Health Services Planning Council Outreach Attendance: March 1, 2025 - February 28, 2026
HIVPC ByLaws: Article IV, Section 13, Subsection H

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Broward County HIV Health Services Planning Council Meeting

Thursday, April 24, 2025 - 9:30 AM

Meeting at Broward Regional Health Planning Council and via Microsoft

DRAFT MINUTES

HIVPC Members Present: L. Robertson (HIVPC Chair), V. Biggs (HIVPC Vice-Chair), B. Barnes, R. Bhrangger, J. Castillo, B. Fortune-Evans, B. Mester, F. D'Amore, W. Marcoviche, S. Tinsley, A. Cutright, J. Rodriguez, A. Machado, T. Moragne, M. Schweizer, A. Cutright, K. Hayes, R. Jimenez, Y. Barrientos, R. Hadley, E. Dudelzak, J. de La Nuez, T. Morange,

Members Absent: P. Madadi, K. Creary, E. Davis

Ryan White Part A Recipient Staff Present: G. James, B. Miller, C. Evans, J. Roy, T. Thompson, M. Cassini, R. Honick

Ryan White Pat B Recipient Staff Present: S. Cook

Florida Department of Health: Q. Cowen, A. Abdool

Planning Council Support Staff Present: M. Rosiere, G. Berkley-Martinez, M. Lacroix, D. Liao, S. Isidore, D. Cestaro-Seifer, J. Beal

Guests Present: J. Rogers, S. Hafley, A. Roby, A. Ocelien, V. Foster, T. Adeagbo, C. Williams

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

The HIVPC Chair called the meeting to order at 9:33 a.m. and welcomed all attendees. The Chair noted that the meeting operates under Florida's "Government-in-the-Sunshine Law," which includes meeting reporting requirements and the recording of minutes. Additionally, attendees were informed that while acknowledgment of HIV status is not required, any disclosure would be subject to public record. PCS conducted a roll call of Council members, Ryan White Part A recipient staff, PCS/CQM staff, and guests, followed by a moment of silence.

2. Public Comment:

The Public Comment portion of the meeting is intended to allow the public to express opinions about items on the meeting agenda or to discuss other matters about HIV/AIDS services in Broward County.

No public comments were made.

3. Meeting Approvals:

The approval for the agenda of the April 24, 2025, HIVPC meeting was proposed by T. Morange, seconded by S. Tinsley, and passed unanimously. The approval for the minutes of the March 27, 2025, meeting was proposed by J. Castillo, seconded by F. D'Amore, and passed unanimously.

Motion #1: T. Morange, on behalf of HIVPC, made a motion to approve the April 24, 2025, HIV Health Services Planning Council Agenda. The motion was seconded by S. Tinsley and adopted unanimously.

Motion #2: J. Castillo, on behalf of HIVPC, made a motion to approve the March 24, 2025, HIV Health Services Planning Council Minutes. The motion was seconded by F. D'Amore and was passed unanimously.

4. Federal Legislative Report:

M. Cassini noted that the House has been in recess since the week of April 7th. They have been working on their subcommittee budgets according to instructions by House leaders. The budget markups are expected to be completed by next Monday. They may be required to cut funding (35 billion to education and healthcare, 80 billion to energy and commerce, only increases in armed services, homeland security and judiciary). There are rumors that the HHS budget will be cut by a third, though this is not necessarily what the final documents will reflect.

There are concerns that a number of programs will be cut with the intent to pass one funding mechanism to fund the government through FY 2027. The Florida legislature is ending its penultimate week of session and may not get out on time based on the rate of their budget negotiations. There have been conversations between the two chambers to close the gaps in their budgets. The session may extend past May 2nd to resolve budget matters.

B. Barnes asked M. Cassini what progress is being made in the upcoming budget. He answered that Congress has not yet been able to pass a 2025-2026 budget. There have been a number of lawsuits related to the distribution of funds to various programs. B. Barnes asked how a reduction in funding would affect HIV-related services.

V. Biggs asked at what point do they start worrying about how to operate, as opposed to going about things business as usual. M. Cassini answered that it will be once the budget markups are finished, and they have a better understanding of how both chambers feel.

L. Robertson asked if Medicaid expansion would be put on the ballot. M. Cassini answered that there is a political entity working to do so for the 2026 election.

5. Standard Committee Items: None

6. Consent Items:

7. Action Item: Motion to approve Yahaira Barrientos to the Priority Setting and Resource Allocation Committee
Proposed by the Priority Setting and Resource Allocation Chair
8. Action Item: Motion to approve Edna Chery to the Community Empowerment Committee

(Pending Application).

Proposed by the Community Empowerment Committee.

9. Action Item: Motion to approve Kara Schickowski to the Priority Setting and Resource Allocation Committee.

Proposed by the Priority Setting and Resource Allocation Chair.

The Consent Items were seconded by B. Mester and passed unanimously.

10. Discussion Items:

11. None

12. Old Business:

13. None

14. New Business:

- a) Award: Member of the Year for FY 2024-2025
The award was presented to S. Tinsley by the HIVPC Vice Chair.
- b) Award: Distinguished Service Award
The award was presented to V. Foster by the HIVPC Vice Chair.
- c) MCDC Chair Vacancy
S. Isidore explained that the MCDC still requires a chair. T. Morange offered to step into the role of MCDC Chair and mentor the new MCDC Vice Chair.
- d) Nominations/ByLaws Committee Vacancy
S. Isidore explained that PCS staff have identified 16 members who are only serving on one committee. The Vice Chair emphasized that the committee needs to convene because it is an election year. T. Morange noted that the committee needs to review the procedures of the previous election year. B. Barnes noted that one does not need to be a member of the Planning Council to join the NBL Committee.

9. Committee Reports:

a. Community Empowerment Committee – April 8, 2025

Chair: Shawn Tinsley, Vice Chair: Vacant

The report stands. S. Tinsley added that the last event, the Listening Tour Session #1, has a lot of effort put into it, but she is disappointed by the lack of clients. Two more Listening Tour Sessions will take place later this year. She emphasized the importance of hearing the voices of clients and stated that they need to incentive clients to attend.

G. Martinez, G. James, and J. Roy noted that there were four clients in the room, however none of them were unaffiliated consumers.

F. D'Amore suggested changing the name of the event to "Voice of the Community" to appear to clients. T. Morange stated that the events should take place outside of business hours and on a Saturday. S. Isidore that the other two sessions are scheduled for July 17 and October 17.

B. Barnes agreed with both suggestions. B. Barnes noted that providers were engaged and willing to listen to the community. He asked, "What will it take to wake up the community?" He expressed hope that the recommended changes will increase the number of clients present. He thanked the Part A Office and the Palm Beach EMA Recipient Office for their involvement in the event.

J. Roy suggested hosting the event at a neutral location. She noted that clients may be uncomfortable speaking openly at a location where they

receive services.

E. Dudelzak suggested creating an email list, newsletter, or text message to remind clients about these events. The Vice Chair thanked her for the suggestion but noted that many clients do not give permission to text them.

A. Roby suggested getting case managers, peer navigators, etc. to speak to clients. F. D'Amore suggested creating incentives to attend, such as asking major franchises and retailers to donate gift cards. B. Mester suggested more marketing by the Part A Office, providers, case managers, etc. The marketing needs to be much broader.

W. Cius asked if these suggestions would be embedded into their event planning going forward. He highlighted the fact that incentives are important to bring in clients. He also believes that they need to empower the case managers to explain the importance of these events to the clients.

C. Williams suggested reaching clients through small group sessions and videoconferencing. The Vice Chair expressed frustration that clients were not present even though it was hosted at a provider agency that has a lot of case management responsibilities. G. James agreed with C. William that they should go to the clients, rather than expecting clients to come to them.

b. System of Care Committee – April 3, 2025

Chair: J. Castillo, Vice Chair: K. Hayes

The report stands. J. Castillo apologized for not attending the Executive Committee due to a break-in at his place of employment.

c. Membership/Council Development Committee (meets Quarterly) – April 10, 2025

Chair: Vacant, Vice Chair: T. Moragne

The report stands.

d. Priority Setting & Resource Allocation Committee – No Meeting Scheduled

Chair: B. Barnes, Vice Chair: Mark Schweizer

The report stands. B. Barnes added that one of the changes to this event is there is little money to find a venue. J. Roy noted that the county has many locations they can use at no cost.

e. Executive Committee – October 17, 2024 – April 17, 2025

Chair: Lorenzo Robertson Vice Chair: V. Biggs

The report stands.

f. Quality Management Committee – April 21, 2025.

Chair: B. Fortune-Evans, Vice Chair: F. D'Amore

The report stands.

g. MAI Subcommittee – No Meeting Scheduled

The report stands. M. Schweizer encouraged others to attend the meeting.

10. Recipient's Report:

- a. **Part A:** J. Roy provided an overview of the activities of the Part A Office.

V. Biggs asked J. Roy to explain the monitoring process for the new members. T. Thompson answered that the monitoring process is the process which the county does every year to monitor a subrecipient to make sure they are complying with the service delivery models and contractual obligations. It usually takes place sometime in May or June, and it runs through the course of the summer and usually ends in early fall as a requirement of HRSA for us to complete this monitoring process as well as the county does monitor all of its contracts. J. James added that the Recipient Office notifies providers 30 days in advance of the monitoring.

- b. **Part B:** S. Cook provided an overview of preliminary expenditures of the Part B for February 2025. She also provided an overview of the client enrollment, viral suppression, and missed original appointments for March 2025.

V. Biggs asked how many of the 44 new clients entered to PE were also entered into insurance and if clients had access to insurance. S. Cook answered that she did not currently have this information but could provide it later. V.

Biggs asked S. Cook to explain what NOE meant for the new members and guests. She explained that it stands for Notice of Eligibility, the core statement that clients were eligibility to access RW resources. G. James asked if Part B received NOEs from other jurisdictions. S. Cook confirmed that they had received only one.

S. Tinsley noted that CIED for Part A and Part B is at the Health Department on Thursday and Friday. S. Cook also asked them to inform clients that the Part B office is opening rooms downstairs to be more accessible to clients with mobility issues.

- c. **Part C:** B. Fortune-Evans corrected the report: there 8 Test and Treat patients, rather than 5. She added that they lost a provider unexpectedly, who had been a nurse practitioner for 44 years. A week later, they also lost a nurse. S. Tinsley, who was her client, stated that her name was Hilda Ortiz, and she was survived by her son.

- d. **Part D:** The report stands.

- e. **Part F:** The report stands.

- f. **HOPWA:** J. Rogers conducted an overview of HOPWA activities from the previous fiscal year: October 1 – September 30.

B. Mester asked why there was money left over. J. Rogers stated that he doesn't know why it wasn't spent last year, but that the most will be used this fiscal year.

V. Biggs asked how many 50+ clients are using social security. J. Rogers

could not answer this question.

S. Tinsley asked, considering all the new construction happening, there isn't much room for low-income housing. She spoke to new high-rises; she found two that were willing to include low-income housing. She suggested forming a small task force to address this issue. J. Rogers stated that he was open to this plan. J. Roy added that she would also be open to this.

J. Beal asked if there was any data on individuals who could not be served and/or did not qualify, yet they needed housing? J. Rogers answered that he has not received much feedback from clients.

B. Barnes asked if he heard anything about cuts to HOPWA. J. Rogers stated that he had not heard anything about it. He noted that other offices have had budget cuts and lost staff due to this.

J. Beal noted that medical practitioners and medical case managers stated that they struggle to achieve housing. He asked if that information was being disseminated. S. Tinsley stated, "Housing is Healthcare". She noted that homelessness is rising due to the rising cost of living. She noted that EHE has a program to help clients with security deposits. J. Beal stated that he can't find data on this, and this issue is not being reported on.

J. Roy stated that there needs to be more collaboration with HOSS (Housing Options, Solutions, and Support). RW and HOSS share clients but don't share data on those clients.

G. James asked about the waitlist. J. Rogers explained that the HOPWA does not have the funds to serve everyone who needs housing services.

g. Prevention: B. Barnes: any information regarding HIV testing and contracts, he heard rumors about letters going out. J. Rodriguez stated that the prevention report should be prepared by the next HIVPC meeting.

11. Data Request(s): None.

12. Public Comment:

The Public Comment portion of the meeting is intended to allow the public to express opinions about items on the meeting agenda or to discuss other matters about HIV/AIDS services in Broward County.

The was no public comment.

13. Agenda Items for Next Meeting:

- a. The next HIVPC meeting will be held on May 22, 2025, at 9:30 a.m. **Location:** Broward Regional Health Planning Council and Virtual through Microsoft Teams
- b. Agenda Items for next meeting: To be determined.
- c. V. Biggs made a formal request to have the Broward County Commissioner attend meetings.

14. Announcements:

15. Three new people have been appointed to the Planning Council: J. Rogers, S. Hafley, and C. Williams.
16. Ujima Men's Collective Man Up Festival: Saturday, May 3, 2025, from

- 12:00 PM to 5:00 PM at Reverend Samuel Delevoe Memorial Park (2520 NW 6th St, Fort Lauderdale, FL 33311). This exciting event will feature entertainment, health screenings, and fun competitions! Don't miss out on the three-legged race, water balloon toss, food trucks, and more. We hope to see you there!
17. HIVPOSSIBLE: A Salute to Percussions: Music to Soothe the Soul & Heal the Community, featuring expert discussions on diabetes, kidney disease, HIV, and stigma, along with a Gospel Drum Shed, school drum line, and cultural arts expressions. Saturday, May 10, 2025, from 2:00 PM to 6:00 PM at Smitty's Wings (1134 NW 6TH ST, Fort Lauderdale, FL 33311). Don't miss this inspiring blend of music and health education!
 18. June 1st Ryan White-eligible participants in the Health Insurance Continuation Program (HICP) will be required to undergo an orientation that covers all aspects of the HICP program, including their responsibilities. Clients must sign to acknowledge they have received this orientation before they can begin receiving HICP services
 19. J. Roy: The Recipient Office has created a draft of the provider directory, which includes all the providers in the system of care. The Recipient Office will be developing a client-centered version. This information will be posted online as well.
 20. K. Hayes: Poverello will be holding two new support groups from 2:00 PM to 4:00 PM. The women's group will meet every third Monday and the men's group will meet every third Wednesday.
 21. A. Occelien: Today, April 24, 2025, Broward House is holding a "Dining Out for Life" event. Local restaurants will be donating a portion of the proceeds to Broward House.
 22. V. Foster: Representing Heart-to-Heart Boarding for Men. He explained the program and benefits offered by the program. Drug and alcohol-free living facility.
 23. G. James: Cassandra Evans has replaced Efram Crenshaw as Director of Community Partnerships Division at the Broward County Government.
 24. V. Biggs: Holy Cross Mix, Mingle, Learn on May 1st from 5:30 PM to 7:00 PM at Dorothy Mangurian Comprehensive Women's Center. 1000 NE 56th Street Oakland Park, FL 33334
 25. V. Biggs: Holy Cross will hold 'Opa', its 25th Anniversary celebration at Hunters Nightclub on May 31, 2025. 2232-2238 Wilton Dr, Wilton Manors, FL 33305
 26. W. Cius: EHE partnered with Wake Forest University to enroll members of the community in a Faith Ambassador program, where they would receive training on how to educate the community about the intersection of faith and health. Two sessions, maximum of 10 participants per session. Health and Health Ambassador Program.

15. Adjournment:

There being no further business, the meeting was adjourned at 11:22 a.m.

HIVPC Attendance for CY 2025

Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
Count	Meeting Date	23	C	27	24	C								
1	Barnes, B.	X	C	X	X	C								
2	Bhrangger, R.	X	C	X	X	C								
3	Biggs, V., V.Chair	X	C	X	X	C								
4	Castillo, J.	X	C	X	X	C								
5	Cutright, A.	A	C	X	X	C								
6	D'Amore, F.	X	C	X	X	C								
7	Davis, E.	X	C	E	A	C								
8	Dudelzak, E.	E	C	X	X	C								
9	Fortune-Evans, B.	X	C	X	X	C								
10	Hayes, K.	X	C	X	X	C								
11	Jackson-Tinsley, S.	X	C	X	X	C								
12	Jimenez, R.	X	C	X	X	C								
13	Machado, A.	X	C	X	X	C								
14	Marcoviche, W.	X	C	X	X	C								
15	Mester, B.	X	C	X	X	C								
16	Moragne, T.	E	C	A	X	C								
17	Robertson, L., Chair	X	C	X	X	C								
18	Rodriguez, J.	X	C	X	X	C								
19	Schweizer, M.	X	C	X	X	C								
20	Creary, K.	X	C	A	A	C								
21	De La Nuez, J.	X	C	A	X	C								
22	Hadley, R.	N	C	X	X	C								
23	Barrientos, Y.	N	C	X	X	C								
24	Madadi, P.	N	C	A	A	C								
25	Williams, Colby				N	C								
26	Hafley, Shalisa				N	C								
27	Rogers, Jonathan				N	C								
28	Tyler, Natalie					C								
	Commissioner McKinzie	A	A	A	A	C								
	Wilson, I.													R
	Lewis, L.													R
	V. Foster													Z
	Shamer, D.													Z
	Quorum = 15	17	C	20	21	C								

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

HIV Health Services Planning Council Meeting Minutes – April 24, 2025
Minutes prepared by PCS Staff

EXECUTIVE COMMITTEE

Policies and Procedures

Approved 3/12/18

Revised and Updated: 06/18/202 by Executive Committee

I. Purpose and Responsibilities

The **Executive Committee** conducts the business of the Council (excluding priority setting and allocation decisions). It serves as the central governing body, overseeing the strategic direction and operational efficiency of the Council. It ensures that all committees align with the overarching goals and policies, facilitating seamless coordination and decision-making. The Executive Committee is composed of:

- The HIV Health Services Planning Council (HIVPC) Chair
- The HIVPC Vice-Chair
- The Chairs and Vice-Chairs of Standing Committees
- The Immediate Past Council Chair (if currently serving on the Council), serving as an ex-officio member

II. Committee Functions

The Executive Committee may convene between regular Council meetings as needed, including for emergencies, to conduct Council business, excluding priority-setting and allocation decisions. Key functions include:

- Setting agendas for Council meetings
- Addressing conflict of interest matters
- Developing and monitoring committee work plans
- Approving the annual council budget
- Reviewing attendance reports to identify non-compliance with participation requirements
- Evaluating committee recommendations and referring items as appropriate
- Ratifying recommendations for member removal for cause
- Recommending resolutions for unresolved grievances, as outlined in the Grievance Policy
- Formulating Council policies

III. Conflict of Interest

The Committee oversees conflict of interest concerns and may make policy recommendations to the full Council as needed.

IV. Integrated Planning

The Committee leads the development and maintenance of the Integrated HIV Prevention and Treatment Plan (formerly Comprehensive Planning) for HIV services delivery, ensuring the plan:

- Incorporates needs assessment data, quality improvement activities, and evaluation results
- Coordinates with HIV prevention and substance abuse programs
- Aligns with the Statewide Coordinated Statement of Need (SCSN)
- Coordinates with other federal HIV service grantees
- Includes clear goals and implementation timelines

The Committee engages stakeholders and planning bodies to ensure inclusive and coordinated planning, fosters collaboration among providers, and develops committee work plans to implement the Integrated Plan.

V. Council Meeting Agenda Preparation

In the absence of the Executive Committee, the Planning Council Support (PCS) staff will prepare agendas for full Council meetings.

Agenda development guidelines include:

- Inclusion of recommendations from committee chairs, the grantee, and PCS staff
- Motions passed by committees are sponsored by the committee chair and noted as such

- Council members may submit action items in writing to PCS staff
- Public submissions require sponsorship by a Council member and relevant documentation
- The Committee may refer items to other committees before full Council consideration
- All voting items must be listed in the pre-distributed agenda
- Backup documentation is distributed at the Committee's discretion
- Action items introduced at the Council meeting may be deferred or reassigned at the Chair's discretion

*The standard **Council agenda** includes:*

1. Call to Order
2. Welcome and Introductions
3. Moment of Silence
4. Excused Absences & Alternate Appointments
5. Adoption of Agenda
6. Approval of Minutes
7. Public Comment
8. Consent Items
9. Discussion Items
10. Old Business
11. New Business
12. Committee Reports
13. Grantee and Other Reports (e.g., Part A-D, HOPWA, Prevention)
14. Public Comment
15. Announcements
16. Next Meeting and Agenda Setting
17. Adjournment

The Committee establishes the order and timing of agenda items to ensure efficient meeting facilitation.

VI. Grievance Resolution

The Executive Committee serves as the clearinghouse for grievances, ensuring open, impartial, and inclusive processes. Pre-dispute measures include:

- a) Public access to all Council and Committee meetings
- b) Community engagement and feedback opportunities
- c) Policies for attendance-related reimbursement
- d) Dissemination of outreach materials (e.g., grievance flyers)
- e) Public education on decision-making processes

Eligible grievance claims must involve deviations from established processes related to:

- Needs assessment
- Comprehensive planning
- Priority setting
- Clinical outcome and cost-effective decisions
- Allocation/reallocation of funds

All appeals must be filed within two weeks of the incident. Remedies are prospective only, as the solutions or actions taken are intended to prevent future issues rather than to address or compensate for past problems. Grievances involving provider selection processes will be addressed in accordance with the Broward County Administrative Code to prevent conflicts of interest. For further details, refer to the ***Grievance Policy and Procedures***.

INCENTIVES POLICY FOR CLIENT ENGAGEMENT AND PARTICIPATION

Approved 3/23/17

Revised and Updated: 06/18/2025 by Executive Committee

Purpose

The purpose of this policy is to define the criteria and procedures for the use of incentives to support and encourage the meaningful participation of people with HIV in Planning Council activities, including but not limited to surveys, focus groups, community engagement sessions, and committee participation. This policy ensures compliance with [HRSA HAB Policy Clarification Notice \(PCN\) 16-02](#) and applicable [federal](#), state, and local regulations.

Policy Statement

In accordance with the Ryan White HIV/AIDS Program (RWHAP) statute, the Broward County HIV Planning Council shall not provide direct cash payments to individuals with HIV. However, to support client engagement, the Planning Council may offer **non-cash incentives**, such as store gift cards or vouchers, provided they:

- Are used solely for allowable services or goods.
- Are not redeemable for cash or used to purchase prohibited items.
- Are distributed based on established criteria and in support of Council-related activities.

The Executive Committee of the HIVPC authorizes the Broward County HIV Health Services Planning Council (HIVPC) to allocate up to \$1,000 annually from the HIVPC budget for gift card incentives for unaffiliated consumers.

Allowable Incentives

Examples of allowable incentives include:

- Store gift cards for groceries or pharmacies
- Transportation passes or vouchers
- Meal vouchers for participation in scheduled Planning Council engagement events
- Store gift cards for survey completion or feedback participation

Incentives must be specifically tied to participation in approved HIVPC engagement efforts and must be pre-approved by the Executive Committee.

Eligibility and Distribution Criteria

The HIVPC shall distribute incentives fairly and equitably according to the following criteria:

- **Eligible Participants:** People with HIV who are actively engaged in a designated Council-led engagement activity (e.g., consumer listening session, needs assessment survey, or participation as a consumer on a standing committee).
- **Incentive Value:** Incentives shall range between \$25- \$50 per event or engagement, and individuals may not receive more than \$100 in incentives from the HIVPC within a calendar year.
- **Frequency:** Incentives may be distributed per activity but not as compensation for ongoing participation or attendance.

All eligibility requirements shall be included in event materials and reviewed with participants.

Any incentive that falls outside of standard practice requires approval and signature from the HIVPC Chair or Vice-Chair.

Tracking and Documentation

Planning Council support staff shall maintain a secure system for tracking the purchase and distribution of all incentives. This system shall include:

- A unique tracking number or serial code for each incentive.
- Participant sign-in sheets and verification logs.
- Documentation of the activity, date, and purpose of distribution.
- Authorized staff and recipient signatures for each transaction.
- Inventory records and reconciliation logs for periodic audit review.

All records shall be securely stored and retained for a minimum of five years in accordance with County and HRSA requirements.

Safeguards and Restrictions

The following safeguards shall be in place to ensure appropriate use of incentives:

- Incentives may only be used at designated vendors for allowable items (e.g., food, hygiene products, transportation).
- Gift cards must not be used for alcohol, tobacco, firearms, or other prohibited items.
- Cards must be vendor-specific and not general prepaid debit cards.
- Any misuse of incentives will be reported to the Executive Committee for review and potential corrective action.

Oversight and Review

This policy shall be reviewed as required by the HIVPC Executive Committee and updated as necessary to reflect changes in federal guidance, local procedures, or Planning Council Bylaws. The Planning Council staff will conduct periodic reviews of documentation to ensure compliance.

ATTENDANCE POLICY

Approved 3/12/18

Revised and Updated: 06/18/2025 by Executive Committee

I. Purpose

To ensure consistent participation and accountability, this policy outlines attendance expectations for members of the Broward County Ryan White Part A HIV Health Services Planning Council (HIVPC) and its committees. This policy is based on the [Broward County Code of Ordinances, Section 1-233](#), and applies to all Council and committee members.

II. Automatic Removal for Unexcused Absences

A. For Committees or the HIVPC Meeting More Frequently Than Quarterly:

A member shall be automatically removed if they:

- Accumulate **three (3) consecutive unexcused absences**, regardless of calendar year, **OR**
- Accumulate **four (4) unexcused absences** in a **single calendar year (January–December)**.

B. For Committees Meeting Quarterly or Less Frequently:

A member shall be automatically removed if they:

- Accumulate **two (2) consecutive unexcused absences**, regardless of calendar year, **OR**
- Miss **two (2) meetings** in a **single calendar year (January–December)** due to unexcused absences.

Note: Attendance is verified through official sign-in sheets and virtual attendance records.

III. Notification of Attendance

- Members must notify HIVPC Support Staff **at least two (2) business days in advance** if they **can or cannot attend** a scheduled meeting.
 - If notification is **not provided** and the absence is not excused, it will be recorded as **unexcused**.
-

IV. Remote Participation

- Members may participate by telephone, mobile, or online platforms.
 - Members attending virtually will be included in the **quorum** count.
 - Members wishing to participate remotely must inform Support Staff **at least two (2) business days prior** to the meeting.
-

V. Excused Absences

Requests for excused absences are reviewed and approved by the HIVPC or the Committee Chair. The absence of an advisory board or other board member shall be deemed excused under the following circumstances as described in Article XII, Section 1-233 of the Broward County Ordinance:

- 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, 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 for jury duty.
- 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; or
- g. During the 12 weeks after the birth of a member's or their domestic partner's child or after placement of a child with a member or their domestic partner for adoption or foster care.

UNAFFILIATED MEMBER REIMBURSEMENTS POLICY

Approved 3/23/17

Revised and Updated: 06/18/2025 by Executive Committee

Purpose

The active participation of Persons Living with HIV (PWH) is essential to the Ryan White Part A planning process. To support this involvement, the Ryan White Part A Program has established a reimbursement process, subject to available funding and demonstrated need, to cover reasonable expenses incurred by eligible Planning Council members and alternates living with HIV/AIDS. This policy ensures that unaffiliated PWH members can participate fully in Council and committee meetings.

Eligibility and Scope

- Reimbursements are available only to **unaffiliated** PWH Council members and alternates.
- Reimbursements apply only to **approved meetings** of the Council or committees on which the member actively serves.
- Expenses must not be reimbursable through any other funding source.

Covered Expenses

Reimbursement may be provided for the following:

- **Transportation:** Includes mileage, bus fare, Tri-Rail, and taxicabs (pre-authorized or emergency use only).
- **Parking and Tolls:** Reimbursable with valid receipts.
- **Meals and Lost Wages:** As applicable and within budgetary limits.
- **Child Care/Day Care:** Eligible for reimbursement for children under the age of 18, subject to budgetary limitations.

Mileage Reimbursement

- Mileage is reimbursed at the **Broward County-approved rate**.
- Whenever possible, **pre-arranged agency transportation** should be used.

Reimbursement Limits

- Monthly maximum: \$50.00
- Annual maximum: \$600.00 per calendar year
- Exceptions may be granted by the Grantee's Office on a case-by-case basis.

Submission Requirements

To receive reimbursement:

1. Submit a completed "Reimbursement of Traveling Expenses" form.
2. Include all supporting documentation, such as:
 - a. Receipts
 - b. Proof of insurance (if applicable)
3. Submit the request by within 30 days of the following month in which the expenses were incurred.
4. Late submissions will not be accepted or reimbursed.
5. Sign an affidavit affirming the validity of the reimbursement request.

PUBLIC COMMENT PROCESS

Revised and Updated: 06/18/2025 by Executive Committee

HIV Health Services Planning Meetings

Public Comment provides an opportunity for audience members to speak on issues not included on the meeting agenda, such as personal healthcare issues, funding levels for services, or the need for additional services.

Instructions for Public Comment:

1. Request to Speak:

Attendees wishing to speak need to sign in before public comment time in person or in the chat section if they are online.

2. Time Allocation:

Ten minutes in total are reserved for Public Comments at the beginning and end of the meeting. The Chair is responsible for ensuring everyone who wants to speak has the opportunity within each 10-minute time allotment.

3. Language and Translation:

Attendees requiring translation services should contact the Planning Council Support Staff three days (72 hours) before the applicable HIVPC/Committee meeting at hivpc@brhpc.org, or (954) 561-9681 Ext. 1244 or 1343.

4. Recording and Public Record:

All Council and Committee meetings are recorded, and the meeting summary is a public record.

5. Client Grievances:

Privacy laws and provider contract requirements limit the Planning Council's ability to discuss client grievances. If an individual asks the Planning Council to intervene in a grievance, they will be immediately referred to the Grantee's representative for assistance. They may also call the Office of the Grantee at: (954) 357-7811.

6. Referral of Issues:

The Chair will make every attempt to refer individuals or the issues/comments they speak about to the appropriate staff or Committee for further review and action.

Public Participation during Broward County Board of Commissioners Meetings

Excerpt Taken directly from Broward County – [Florida Administrative Code Chapter 18](#), Section 18.6.

Opportunity for Public Comment. "Members of the public shall be provided a reasonable opportunity to be heard on agenda items before the County Commission, unless otherwise stated in this section or provided by law. Unless otherwise required by law or determined appropriate by the Mayor, a member of the public shall be permitted to comment on any item at only one meeting unless the item substantially and materially changes prior to the County Commission's final consideration of the item or more than thirty (30) days pass between the date public comment occurs and the date the item is subsequently considered by the County Commission."

- 1. Registration.** To speak on an agenda item, a member of the public must complete and submit a registration form that identifies the item on which he or she wishes to speak. The registration form must be submitted prior to the time the item is called for County

Commission consideration or, for public hearing items, prior to the opening of the public hearing on the applicable item. Failure to comply with these provisions shall prohibit a person from speaking on any item for which they are not properly registered.

2. **Supplemental Materials.** Any person intending to speak regarding an agenda item may, *no later than three (3) business days prior to the applicable County Commission meeting*, submit to the County Administrator any written materials to which the speaker intends to refer, which materials shall identify the agenda item to which they relate. Provided such written materials address the referenced agenda item, the County Administrator shall promptly distribute such materials to the County Commission. A speaker may reference the supplemental materials when addressing the County Commission. Nothing stated herein prohibits an individual from distributing written materials in connection with the individual speaking during a County Commission meeting, provided the individual brings sufficient copies for distribution to each County Commissioner, the County Administrator, the County Attorney, and the County Auditor.

Sources: For the most current and comprehensive provisions regarding public comments information, please refer to the [Broward County Code of Ordinances](#)



NOMINATING PROCEDURE

FOR REGULAR ELECTIONS

A. Formation of Nominating Committee

- By July, the HIVPC Chair shall appoint a Nominating Committee consisting of no fewer than five (5) Planning Council members.
- The Committee must include at least one unaffiliated consumer living with HIV/AIDS.

B. Call for Nominations

- A verbal call for nominations from the floor will take place during the October HIVPC meeting preceding the January election.
- Members interested in **running for Chair or Vice Chair** must complete a **Candidate Questionnaire**, which includes questions regarding their leadership experience and motivation for seeking office.
- A deadline for submission will be established and publicly announced.

C. Review and Candidate Slate

- Once nominations close, the Nominating Committee will meet to review submissions and prepare a candidate slate.
- Candidate responses will be included in the January HIVPC meeting packet for member review.

ELECTION PROCEDURE

A. Candidate Presentations

- During the **December HIVPC meeting**, each candidate will be allowed up to **10 minutes for a presentation** with an additional **2 minutes for clarification**.

B. Voting

- **Voting is conducted by ballot** during the January meeting.
- Ballots will include candidate names for Chair and Vice Chair.
- If only one candidate is running for a position, the ballot will include **approval or rejection** options.
- Ballots will be **pre-printed with member names** for record-keeping.

Remote Participation: Members attending virtually may vote and will cast their vote **first** to avoid influencing the outcome or serving as a tiebreaker.

C. Voting Method

- A **double election system** will be used (Article V, Section 2):
 1. **Primary vote** to select top candidates.
 2. **Runoff vote** if no candidate receives a majority in the primary.

D. Announcement of Results

- Before the close of the January meeting, the **Nominating Committee Chair** will announce the new officers and **read each vote into the public record**.
- **New terms begin March 1.**

FOR SPECIAL ELECTIONS

In the event of a resignation or vacancy in the Chair or Vice Chair position:

- A **special election** will be held using the same procedures outlined above.
- **Timelines may be adjusted** to accommodate the vacancy but all required steps (nominations, review, presentations, and voting) will be followed.

2025 AD-HOC NOMINATING COMMITTEE ELECTION TIMELINE

Activity	Proposed Date
Request for members to join the Ad-Hoc Nominations/ByLaws Committee (NBL) at HIVPC meeting.	July 31, 2025
First Ad-Hoc NBL Committee meeting. Discuss the Letter of Intent; Review & approve the nominating procedures, election timeline, and candidate questionnaire.	September 15, 2025
<i>HIVPC Meeting:</i> Procedure, election timeline, & candidate questionnaire approved by HIVPC. Explain that a Letter of Intent will be required once nominations are open.	September 25, 2025
Second Ad-Hoc NBL Committee Meeting: Discuss online voting procedures, methods of campaigning, and NBL member roles. Assignment of NBL member roles and responsibilities. Select an NBL member to explain the roles and responsibilities of chairs and vice chairs to the general body.	October 15, 2025
<i>HIVPC Meeting.</i> Presentation on the roles and responsibilities of the chairs and vice chairs. Nominations are open for the 2026-2028 election of officers. Candidate questionnaire given to all eligible parties interested in running. Explain that a Letter of Intent will be required once nominations are open.	October 23, 2025
Nominations for the 2026-2028 election of officers - CLOSED.	October 30, 2025
Deadline for nominees to submit Letters of Intent.	November 7, 2025
Third Ad-Hoc NBL Committee meeting. Review & approve slate of candidates.	November 15, 2025
Deadline for candidates to submit the candidate questionnaire.	November 27, 2025
<i>HIVPC Meeting.</i> Q&A nominees up to 10 minutes each (a recording of the Q&A session will be made available upon request). Voting instructions will be sent to council members.	December 4, 2025
Early voting opens: email ballot via Alchemer.	December 8, 2025
Voting Closed	January 9, 2026
Fourth Ad-Hoc Nominating Committee meeting. Review election results.	Week of January 12
<i>HIVPC Meeting.</i> Elections results read to the Council.	January 22, 2026
Start of new HIVPC Chair & Vice Chair terms	March 1, 2026

AIDSWatchSM

RECAP 2025

March 31, 2025 to April 2, 2025



Shawn Tinsley & Franchesca D'Amore

Members, Ryan White HIV Health Services Planning Council
Broward County Health Care Services Ryan White Part A Program
Broward County Board of County Commissioners
Presented: Thursday, June 26, 2025



WHAT IS “AIDS WATCH”?

Mission: AIDS United’s mission is to end the HIV epidemic in the United States.

Vision: AIDS United envisions a time when all people, governments, and organizations commit to ending the epidemic and strengthening the health, well-being, and human rights of everyone impacted by HIV.

2025 AIDS UNITED ADVOCACY HIGHLIGHTS

- Welcomed over **630** participants from **38** states
- Held **271** meetings with Congressional offices
- Spent three (3) impactful days on Capitol Hill
- Unified efforts focused on:
 - Protecting HIV prevention and care funding
 - Advancing health equity
 - Demanding justice for all people living with and vulnerable to HIV

A&D SWatch[®]

2025 Policy Brief

March 31 - April 2, 2025
Washington, D.C.



LEGISLATIVE ASKS FOR RYAN WHITE

- Full funding for the health and social initiatives that serve our communities, including the Ryan White HIV/AIDS Program, which houses programs like the AIDS Drug Assistance Program (ADAP) that ensure people living with HIV have access to lifesaving medication, and other safety net programs.
- Full funding for workforce development programs such as the AIDS Education and Training Center (AETC) Program and the Dental Programs.

(AIDS United et al., 2025)

AIDS WATCH RECAP: SHAWN

- The National Minority AIDS Council (NMAC) provided a two-day training before the conference discussing policy education, coaching on crafting and delivering the ask, and how to effectively engage with legislators
- Participants shared personal stories — emphasizing they are more than a statistic
- Discussed national policy priorities and initiatives
- **ASK:** Do not cut HIV funding
 - A more serious and urgent tone this year due to the new administration
 - Highlighted impact across diverse communities



AIDS WATCH RECAP: FRANCHESCA

Day 1: Introductions, Panels & Workshop Sessions

- **Advocacy in Action:** Amplifying the Voices of People Aging with HIV: Focus on healthcare access, unique age-related conditions, stigma, and social support.
- **Protecting Health Insurance Coverage for People with HIV:** Focus on Medicaid and ACA coverage and proposed federal budget cuts, changes to Medicaid eligibility, work requirements, and potential rollbacks of ACA.
- **Funding the Fight:** Mastering the Federal Budget for HIV Advocacy — Focus on Budgeting, Appropriations, and Reconciliation.



AIDS WATCH RECAP: FRANCESCA (CONT.)

Day 2: Rally on the Capitol lawn, followed by legislator meetings.

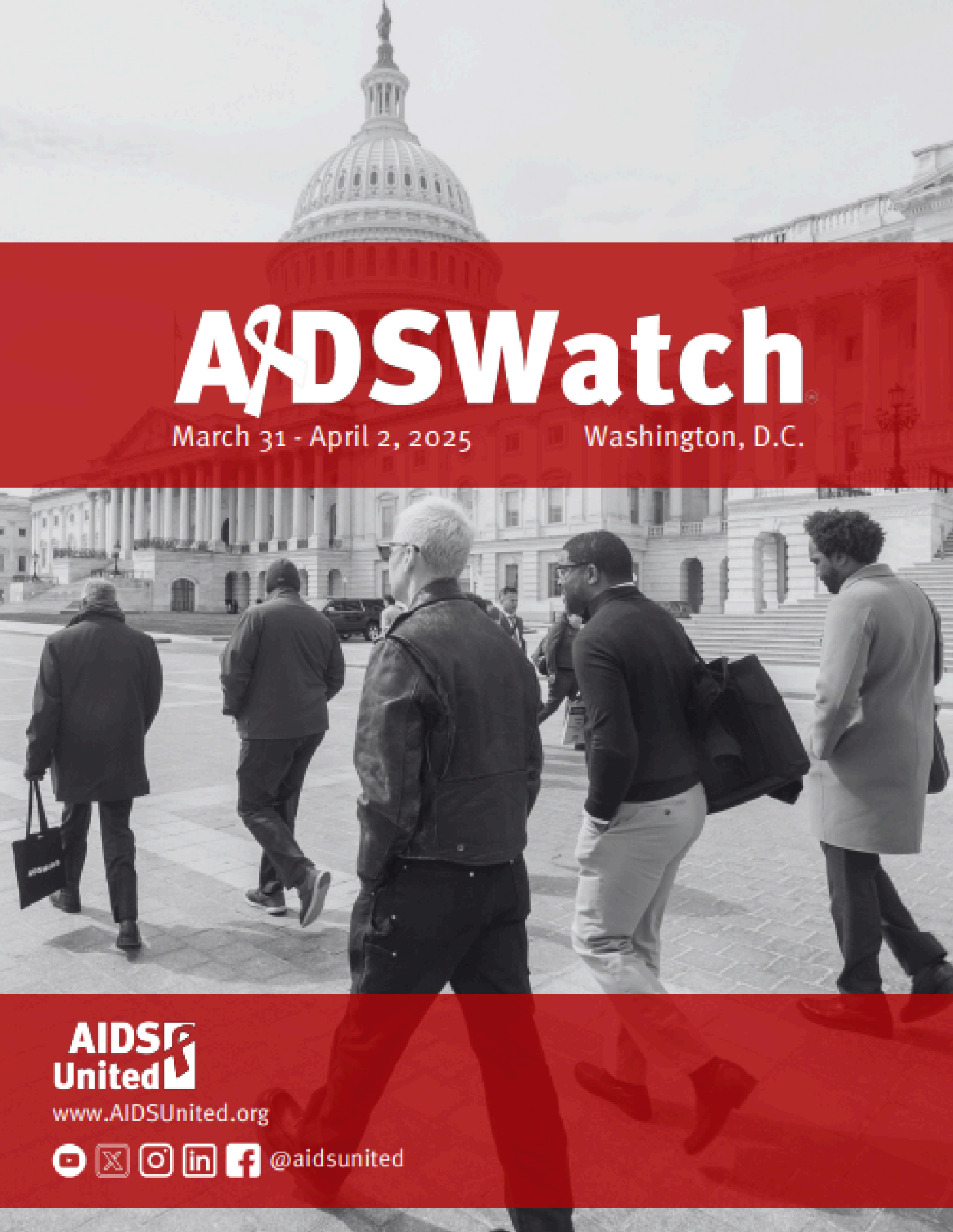
- **Offices Visited:** Senator Ashley Moody (R), Representative Deborah Wasserman Schultz (D), Representative Sheila Cherfilus-McCormick (D)
- Discussed national policies and the effect on international policies, the President's Emergency Plan for AIDS Relief (PEPFAR), and proposed Medicaid budget cuts.
- **Asks:** Zero budget cuts for national and international HIV funding. More focus on the needs of diverse communities and the aging population.



SHAWN & FRANCESCA RECAP

- **Met with key policymakers:** Rep. McCormick, Sen. Moody, Deputy Chief of Staff Kwemo, Legislative Correspondents Herrera, and Legislative Assistants Sedore & Joffee.
- **Shared personal stories** — reminded policymakers they are alive today because of Ryan White.
- **Delivered facts on Florida's challenges & services:**
 - Skyrocketing housing costs
 - Food bank services
 - Lifesaving care received through Ryan White
- **Explained the role and impact of the HIV Health Services Planning Council (HIVPC).**
- **The Ask: Do not cut Ryan White funding. Lives depend on it.**





AIDSWatch

March 31 - April 2, 2025

Washington, D.C.

FOR MORE INFORMATION & RESOURCES

Visit Website or Scan QR
code: aidsunited.org



AIDS United

1634 Eye Street NW, Suite 1100

Washington, D.C. 20006-4003

Phone: (202) 408-4848

**AIDS
United**

www.AIDSUnited.org

     @aidsunited

REFERENCES

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DISCUSSION

Questions?



Ryan White Part A

Administrative Update 6/26/2025

Ryan White Part A

Admin Update

Provider Feedback

- The Recipient Office engaged in a provider feedback survey regarding the execution of current contracts. We have received a response from all but four agencies at this time.

HRSA Updates

- No further updates regarding Executive Orders at this time.

Ryan White Part A Contracts Update

Agreement Update

- 34 AGREEMENTS IN TOTAL
 - 12 Agreements Fully Executed
 - 6 Awaiting Countersignature by County
- 12 Pending Initial Signature by Provider
- TOTAL ACTIVELY IN PROGRESS: 30
- 4 Agreements Still Due to Providers

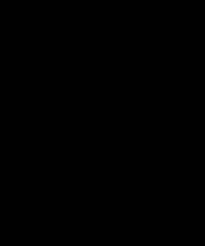
CQM Update

Subrecipient Monitoring

- Is currently expected to begin sometime in the Fall.
- Monitoring process is still expected to be the same.

SDMs & Scopes

- Minor adjustments currently occurring due to review with the CAO. This was expected and was mentioned in a previous update.



Community Engagement Updates

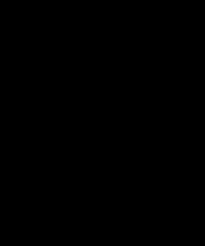
Continuous Engagement through Outreach Activities, including:

- Tabling at major community events such Stonewall Pride, Housing Symposium by NSU, Community Health Fairs by partner CBOs.
- Capacity Building activities for RW providers such participative engagement to improve providers' efficacy in recruiting Clients for feedback sessions and other client-centered events.
- Presentation at national meeting hosted by HRSA highlighting innovative partnerships efforts during the Phase I of the EHE Initiative.

Community Engagement Updates Cont.

Strategic Approach for Effective Engagement with Non-Traditional Ryan White Stakeholders:

- Completion by Ryan White Part A staff of the Public Health Detailing Skills-Building Workshop organized by San Francisco DPH and facilitated by NaRCAD
- Ongoing capacity building with NaRCAD through a series of Community of Practice organized by San Francisco DPH with the goal of developing a Public Health Detailing Plan specific to our local needs.
- Promising partnerships with key public and private organizations, businesses and academic institutions including, United Way, Florida Blue, Wake Forest University and NSU to increase awareness about the HIV epidemic, dismantle stigma, and maximize local resources to expand access to care and increase health outcomes for PWH in Broward Count.

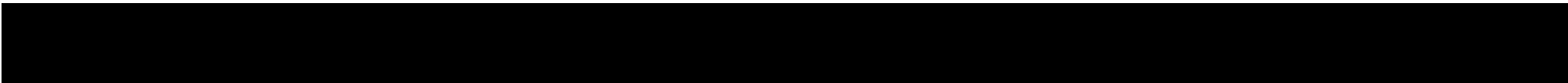


Upcoming Engagement Activities

- Second Annual National Faith HIV/AIDS Awareness Day (NFHAAD) Celebration though two distinctive events:
 - Saturday, August 23, 2025 open to the public
 - Wednesday, August 27, 2025 for Faith Leaders only.
- World AIDS Day Commemoration
 - Proclamation by Broward County Board of Commissioners
 - Partnership with CAN Community Health
 - Tabling at Main County Building at GCE
- Providers Client Engagement Forum



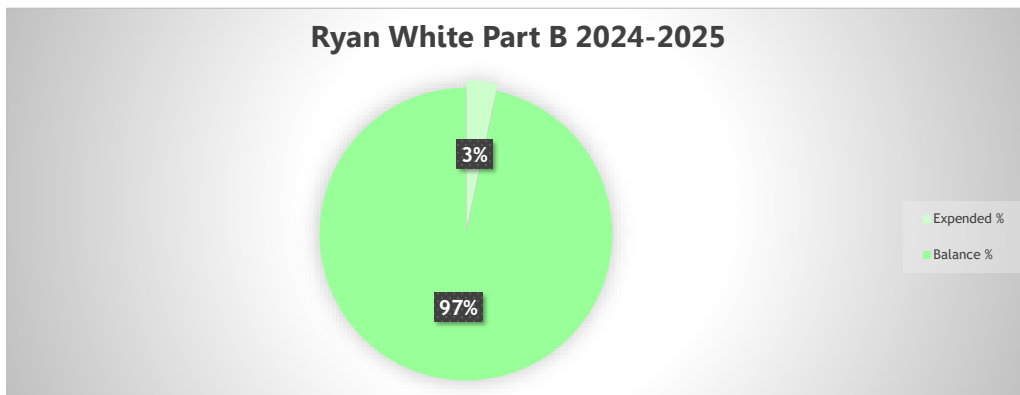
Questions?



Ryan White Part B
PTC25: April 1, 2025 to March 31, 2026
Expenditures for April 2025

Handout F1

<i>Service Category</i>	<i>Allocated</i>	<i>Expended April 2025</i>	<i>Expended YTD</i>	<i>Expended %</i>	<i>Balance %</i>	<i>Balance</i>
Administrative Services	\$ 63,233	\$ 3,515	\$ 3,515	6%	94%	\$ 59,718.24
Health Insurance Premium/Cost Sharing	\$ 187,750	\$ 2,744	\$ 2,744	1%	99%	\$ 185,005.61
Home & Community Based Health	\$ 30,000	\$ 391	\$ 391	1%	99%	\$ 29,609.05
Medical Nutritional Therapy	\$ 30,000	\$ -	\$ -	0%	100%	\$ 30,000.00
Emergency Financial Assistance	\$ 345,000	\$ -	\$ -	0%	100%	\$ 345,000.00
Home Delivered Meals	\$ 10,000	\$ -	\$ -	0%	100%	\$ 10,000.00
Medical Transportation	\$ 75,423	\$ 27,000	\$ 27,000	36%	64%	\$ 48,423.00
Non-Medical Case Management	\$ 227,628	\$ 5,701	\$ 5,701	3%	97%	\$ 221,927.29
Referral For Health Care/Support Services	\$ 95,000	\$ -	\$ -	0%	100%	\$ 95,000.00
Residential Substance Abuse	\$ 40,000	\$ -	\$ -	0%	100%	\$ 40,000.00
Clinical Quality Management	\$ 57,895	\$ -	\$ -	0%	100%	\$ 57,895.00
Planning and Evaluation	\$ 1	\$ -	\$ -	0%	100%	\$ 1.00
TOTALS	\$ 1,161,930	\$ 39,351	\$ 39,351	3%	97%	\$ 1,122,579.19



ADAP REPORT May 2025	
Enrollment May 2025	
Total Enrolled April 2025	5897
ADAP Enrollments and Re-enrollments processed	391
New Clients (new to PE)	60*
Assessments completed using RWPA NOE	73
Viral Suppression May 2025	
Total Virally Suppressed at 6 months	4893
Percentage of Virally Suppressed	93.22%
% Uninsured Virally Suppressed at 6 months	88.40%
% Insured Virally Suppressed at 6 months	96.93%
Missed Original Appointment Report May 2025	
Missed Original Appointment Report	39%
Missed Original Appointment Report Last Month	41%

*The 60 new clients include both those who have recently been diagnosed and those who were already in care but faced hardships such as: losing Medicaid, losing employment, relocating, or becoming unable to afford premiums or copays.

Ryan White Part C Monthly Report-May 2025

Broward HealthPoint

- i. Total clients enrolled in the Part C program 1050
- ii. HIV positive individuals who **attended medical care** as of **5/1/2025- 5/31/2025**- **382**
- iii. Test and Treat- Month- Month-May 2025- 12 clients (8 returning to care, 4 newly DX)

Ryan White Part D Monthly Report-May 2025

Broward HealthPoint

- ❖ Total clients enrolled in the Part D program - **1565**
- ❖ Approximate Total Number of HIV Positive Individuals - **630**
 - Total number of HIV Positive Individuals enrolled in Program break down-**Women-596 Children-4 Youth-30**
 - Total Number of HIV Exposed – Indeterminate Individuals between the ages of 0 - 24 months old -**15**
- ❖ HIV positive individuals who **attended medical care** as of **5/1/2025- 5/31/2025**- **428**
- ❖ Test and Treat- Month-May 2025- 10 clients (4 returning to care, 2 newly DX, 2 youth, 2 pregnant)

Handout H

Part F Recipient Update – June 2025

- Received a partial award notice for fiscal year 2025-2026.
- The Part F program will continue its partnership with Care Resource, operating two days per week.



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

ADAP: AIDS Drugs Assistance Program

Administration HUD: U.S Department of Housing and Urban Development

IW: Integrated Workgroup

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

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

CQI: Continuous Quality Improvement

CQM: Clinical Quality Management

CTS: Counseling and Testing Site

eHARS: Electronic HIV/AIDS Reporting System

EIHA: 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

HIV HSSS: HIV Human Services Software System

HIVPC: Broward County HIV Health Services Planning Council

HOPWA: Housing Opportunities for People with AIDS

HRSA: Health Resources Services Administration

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

NBHD: North Broward Hospital District (Broward Health)

NGA: Notice of Grant Award

NHAS: National HIV/AIDS Strategy

NMCM: Non-Medical Case Management

NOFO: Notice of Funding Opportunity

nPEP: Non-Occupational Post Exposure Prophylaxis

NSU: Nova Southeastern University

nPEP: Non-occupational Post-Exposure Prophylaxis

OAHS: Outpatient Ambulatory Health Services

OHC: Oral Health Care

PCN: Policy Clarification Notice

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

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

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.