



Committee Meeting Agenda: Executive Committee
Date/Time: Thursday, August 17, 2017, 10:30 a.m.
Location: Government Center Annex Room A-337
Chair: Barnes, B. Vice Chair: Lopes, R.

1. **CALL TO ORDER:** *Welcome, Ground Rules, Sunshine, Introductions, Moment of Silence, & Public Comment*
2. **APPROVALS:** 8/17/17 Executive Committee Agenda and 7/20/17 Meeting Minutes
3. **STANDARD COMMITTEE ITEMS**
 - a) Review and Approve 8/31/17 HIVPC Agenda, Meeting Materials and Motions (Handout A)
 - b) September 2017 HIVPC Calendar (Handout B)

4. **UNFINISHED BUSINESS**

5. **MEETING ACTIVITIES/NEW BUSINESS**

<i>Agenda Items</i>	<i>Action to be taken, presentation, discussion, brainstorm etc.</i>
Facilitated Planning Body Meeting	ACTION ITEM: Discussion and next steps regarding HIV planning body meeting, make recommendations for Integrated Workgroup members to HIVPC
By-Laws (Handout C)	ACTION ITEM: Make recommendations for By-Laws language regarding Integrated Plan Workgroup, make recommendations to convene committee
Nominating Committee	ACTION ITEM: Discuss Chair selection for Nominating Committee

6. **GRANTEE REPORTS**

7. **PUBLIC COMMENT**

8. **AGENDA ITEMS / TASKS FOR NEXT MEETING: TBD VENUE: TBD**

<i>Agenda Items for next Meeting</i>	<i>Action to be taken, presentation, discussion, etc.</i>

9. **ANNOUNCEMENTS**

10. **ADJOURNMENT**

PLEASE COMPLETE YOUR MEETING EVALUATIONS
THREE GUIDING PRINCIPLES OF THE HIV 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

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Meeting Minutes: Executive Committee

Date/Time: Wednesday, June 14, 2017, 1:00 p.m.

Location: ArtServe

Chair: Barnes, B. Vice-Chair: Lopes, R.

ATTENDANCE				
#	Members	Present	Absent	Grantee Staff
1	Edwards, C.		A	Jones, L.
2	Fleurinord, P.		A	Green, W.E.
3	Foster, V.	X		Anderson, T.
4	Barnes, B. <i>HIVPC Chair</i>	X		
5	Grant, C.	X		HIVPC Staff
6	Hayes, M.	X		Ewart, L.
7	Lopes, R. <i>HIVPC Vice Chair</i>	X		Johnson, B.
8	Robertson, L.		A	Oratien, V.
9	Siclari, R.		A	Guest
10	Spencer, W.	X		Katz, H.B.
	Chair Quorum = 5	6		Ewart, M.

1. CALL TO ORDER

The Chair called the meeting to order at 1:05 p.m. and welcomed all present. Attendees were notified of information regarding the Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. Attendees were advised that the meeting ground rules are present, for reference. In addition, attendees were advised that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed. Chairs, committee members, guests, Grantee staff and HIV Planning Council (HIVPC) staff self-introductions were made. A moment of silence was observed.

2. STANDARD COMMITTEE ITEMS

a)

Motion #1: To approve 6/14/17 Meeting Agenda
Proposed by: Grant, C. **Seconded by:** Lopes, R.
Action: Passed Unanimously

b)

Motion #2: To approve 3/16/17 Meeting Minutes
Proposed by: Lopes, R. **Seconded by:** Foster, V.
Action: Passed Unanimously

Approve 6/22/17 HIVPC Agenda: The Grantee discussed the Undoing Racism Trainings that are being offered in Broward County. The sessions will be opened to both the Executive and HIVPC members. The Human Services Administrator explained that the County is partnering with the Children Services Council to look at Broward’s service outcomes and systemic contributing factors. The County is looking to identify systems that contribute to core outcomes, including implicit bias and racial structures within service delivery. This new approach will impact the RFP process, and all county contracts will be shifted to include this model. Undoing Racism was also included in the Integrated Plan.

Motion #3: To approve the 6/22/17 HIVPC Agenda with addition of Undoing Racism Training under New Business
Proposed by: Hayes, M. **Seconded by:** Grant, C.
Action: Passed Unanimously

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 Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment



- c) Review July, 2017 Calendar (Handout B): The chairs reviewed the July calendar.

3. UNFINISHED BUSINESS

None.

4. MEETING ACTIVITIES/NEW BUSINESS

- a) Facilitation Wrap-Up: The HIVPC Chair asked for feedback from the Executive members on the facilitated meeting of the Broward HIV Planning Bodies (SFAN, BCHPPC, and HIVPC). The PSRA Chair thought the meeting was well executed with good facilitators, but thought there was not much movement in the outcomes, nor resolution to some of the core issues facing the bodies. He had concerns that there was not a resolution regarding the formation of the Integrated Committee. The Vice Chair and various members of the Executive Committee had similar views, acknowledging the progress that was made but with many unresolved issues remaining. Issues included equal representation without equal resources or work responsibilities, 5 year term limits, and the dynamics of the relationship between the Department of Health and SFAN.

The group discussed the need to have a follow-up meeting with the bodies to resolve outstanding issues before the formation of the IC. The Human Services Administrator urged the members to think about how the roles each member of the IC will play, who will staff the meetings, and how tasks in the Integrated Plan will be assigned to each body. He reminded them that they needed buy-in from the full HIVPC, and that final decisions must be brought to the Broward County Board of Commissioners.

The group decided to send the facilitated meeting summary to SFAN and BCHPPC, along with a list of their outstanding concerns and proposed dates for a follow-up meeting. The email will ask each body to also include items for a meeting agenda. Proposed HIVPC agenda items include: funding, committee structure and frequency, and work plans and deliverables. The email would include language stating that all members of the Executive teams were welcome to participate, but each body should have no more than 4 voting members.

5. GRANTEE REPORT

None.

6. PUBLIC COMMENT

None.

7. AGENDA ITEMS / TASKS FOR NEXT MEETING: July 20, 2017 VENUE: A-337

<i>Agenda Items for next Meeting</i>	<i>Action to be taken, presentation, discussion, etc.</i>
HIV Planning Body Meeting	ACTION: Next steps regarding Planning Body follow-up meeting.

8. ANNOUNCEMENTS

None.

9. ADJOURNMENT

The meeting adjourned at 2:30 p.m.



Executive Committee Attendance 2017

Consumer PLWHA Absences	Count	Meeting Month:	Ja	Fe	Ma	Ap	Ma	Ju	Ju	Au	Se	Oc	No	De	Attendanc e Letters
		Meeting Date:	n	b	r	r	y	n	l	g	p	t	v	c	
			19	16	16	C	C	14							
	0	1	Earp, A. Z- 1/12												
	0	2	X	X	X			X							
	4	3	A	A	A			A							
	0	4	X	X	X			X							
1	0	5	X	X	X			X							
	0	6	X	X	X			X							
	1	7	X	A	X			X							
	0	8	X	X	X			X							
1	2	9	A	X	X			A							
	1	10	X	X	A			X							
1	0	11	X	X	X			X							
			Quorum(Chairs) =7	8	8	8		8							

X - present
A - absent
E - excused
NQA - no quorum absent
NQX - no quorum present
N - newly appointed
Z - Resigned
C - cancelled
W - warning letter
R - removal letter
QNA - quorum not achieved for entire mtg

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

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 Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment



Meeting Minutes: Executive Committee
Date/Time: Thursday, July 20, 2017, 11:30 a.m.
Location: Government Center Annex Room A-337
Chair: Barnes, B. **Vice-Chair:** Lopes, R.

ATTENDANCE			
#	Members	Present	Absent
1	Edwards, C.		A
2	Fleurinord, P.		A
3	Foster, V.	X	
4	Barnes, B. <i>HIVPC Chair</i>	X	
5	Grant, C.		A
6	Hayes, M.	X	
7	Lopes, R. <i>HIVPC Vice Chair</i>	X	
8	Robertson, L.	X	
9	Siclari, R.	X	
10	Spencer, W.	X	
	Chair Quorum = 5	7	

Grantee Staff
Jones, L.
Green, W.E.
Anderson, T.
HIVPC Staff
Ewart, L.
Johnson, B.
Oratien, V.
Holloman, K.
Guest
Katz, H.B.
Shamer, D.

1. CALL TO ORDER

The Chair called the meeting to order at 12:17 p.m. and welcomed all present. Attendees were notified of information regarding the Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. Attendees were advised that the meeting ground rules are present, for reference. In addition, attendees were advised that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed. Chairs, committee members, guests, Grantee staff and HIV Planning Council (HIVPC) staff self-introductions were made. A moment of silence was observed.

2. STANDARD COMMITTEE ITEMS

a)

Motion #1: To approve 7/20/17 Meeting Agenda
Proposed by: Hayes, M. **Seconded by:** Robertson, L.
Action: Passed Unanimously

b) The Committee reviewed the 6/14/17 Executive Minutes, but discovered a typo in the date. The Committee will review and approve the June Minutes at the next Executive Meeting in August.

c) Approve 7/27/17 HIVPC Agenda (Handout A):

The Committee reviewed the July HIVPC Agenda, which included the FY2018 PSRA rankings and allocations process. The PSRA Chair will provide a training for the HIVPC members on the process, and facilitate the overall HIVPC approval of PSRA's recommended allocations for the upcoming FY.

Motion #3: To approve the 7/27/17 HIVPC Agenda
Proposed by: Siclari, R. **Seconded by:** Lopes, R.
Action: Passed Unanimously

d) Review August, 2017 Calendar (Handout B): The chairs reviewed the August calendar, adding PSRA and moving the time of Executive up to 10:30 a.m.

3. UNFINISHED BUSINESS

None.

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4. MEETING ACTIVITIES/NEW BUSINESS

- a) Facilitated Meeting Follow-Up: PC Staff reached out to BCHPPC and SFAN members about the proposed follow-up meeting to May's facilitation. HIVPC and BCHPPC members have stated that the afternoon of August 9th works best for them, but Staff is still waiting for responses from SFAN (including SFAN Chair and Vice Chair). The members discussed the purpose of the meeting, and items they would like to resolve, including identification and delegation of resources/staff support, membership and work plan responsibilities. The group acknowledged the difficulty in revising an agreement that was made during the full day facilitation, but recognized that additional conditions need to be discussed before moving forward and getting the buy-in from the HIVPC. HRSA mandates Part A participate in integration activities, and are the only body of the three to have such provisions. While it is also possible for Part A to complete the Action Plan through Committee work, in the spirit of collaboration, they are willing to work with the other planning bodies to achieve the goals and activities outlined in the Integrated Plan. As both SFAN and BCHPPC fall under the jurisdiction of the Department of Health, the Executive members agreed that it may be acceptable to share seats equally between Part A and DOH, with division of SFAN and BCHPPC seats to be decided by the DOH and their bodies.

ACTION ITEM: Send meeting notice for August 9th. Include draft agenda in the email, with number of members, associated costs for staff support, members' community vs. government association, and term limits in the meeting notice.

- b) Training Summary and Year-End HIVPC Calendar: PC Staff provided the Committee with a list of training topics for HIVPC members as recommended by the MCDC. The topics include emerging issues in HIV, suggestions from HIVPC members, HRSA mandated trainings, and items proposed by the CEC. The Human Services Administrator cautioned the Committee to be clear on the outcomes of trainings, and differentiate between trainings and presentations. The HIVPC Chair would like to make a Sunshine and Robert's Rules training a priority for members.

The group then discussed the August to December calendar, and whether to host an All Committee Retreat. Staff suggested that instead of having a full retreat, the December HIVPC meeting can invite all Committee members as well, and can include selecting a member to recognize, an education component, and maybe a town hall. The meeting could last for 3 hours, possibly from 10:00 a.m. - 2:00 p.m.

ACTION ITEM: The members selected December 7th as the date for the All Committee HIVPC Meeting. Include on August-December HIVPC Calendar.

- c) Member Responsibilities: During the HIVPC members, Staff and leadership have noticed members passing notes, holding side conversations and coming in late to meetings. While notes and conversations are on the borderline of a Sunshine violation, they are most importantly disrespectful to the process and to the membership. The members agreed that leadership needs address the issues as they occur. The members discussed an old rule stating that members must be present for 75% of the meeting in order to be considered present. Staff informed members the rule no longer exists, but will look into how and why those changes were made. Staff also note that there are issues also with members not confirming their attendance. This may have implications for quorum and meeting scheduling. It is important that members respond to Staff's correspondence and quorum calls. The Vice Chair also explained that members should be responsible for reading the meeting minutes ahead of the meeting, and that topics should not be hashed for members who are late, were absent, or did not take time to review minutes.

ACTION ITEM: Include member responsibilities in Executive Meeting Summary for the HIVPC Chair to review with members at July HIVPC meeting.

5. GRANTEE REPORT

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The Grantee informed the Executive members that Broward received a \$256,000 reduction in funding for FY2017 and provided recommendations for reallocation of funds to cover the reduction, which was reviewed and approved by the PSRA committee. The FY18 grant application will be released in late August, with a 60 day completion window. The Grantee was recently on a State conference call where they announced they will allow Part As to request rebate dollars for a one-time release; The Grantee thinks it may help with supplementing housing availability issues in Broward.

6. PUBLIC COMMENT

None.

7. AGENDA ITEMS / TASKS FOR NEXT MEETING: August 17, 2017 VENUE: A-337

<i>Agenda Items for next Meeting</i>	<i>Action to be taken, presentation, discussion, etc.</i>
ACTION ITEMS:	

8. ANNOUNCEMENTS

None.

9. ADJOURNMENT

The meeting adjourned at 2:30 p.m.

Executive Committee Attendance 2017

C+A1:R31onsumer	PLWHA	Absences	Count	Meeting Month:	Ja	Fe	Ma	Ap	Ma	Ju	Ju	Au	Se	Oc	No	De	Attendanc	
				Month:	n	b	r	r	y	n	l	g	p	t	v	c	e Letters	
				Meeting Date:	19	16	16	C	C	14	20							
			0	1	Earp, A. Z- 1/12													
			1	2	X	X	X			X	A							
			5	3	A	A	A			A	A							
			0	4	X	X	X			X	X							
1			0	5	X	X	X			X	X							
			1	6	X	X	X			X	A							
			1	7	X	A	X			X	X							
			0	8	X	X	X			X	X							
			1	2	A	X	X			A	X							
			1	10	X	X	A			X	X							
			1	0	X	X	X			X	X							

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Quorum(Chairs)																			
=7	8	8	8				8	7											

- X - present**
- A - absent**
- E - excused**
- NQA - no quorum absent**
- NQX - no quorum present**
- N - newly appointed**
- Z - Resigned**
- C - cancelled**
- W - warning letter**
- R - removal letter**
- QNA - quorum not achieved for entire mtg**

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**BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL
MEETING AGENDA**

Thursday, August 31, 2017, 9:30 a.m.
Government Center Room A-337

Chair: Brad Barnes **Vice Chair:** Requel Lopes

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

1. CALL TO ORDER
2. WELCOME AND PUBLIC RECORD REQUIREMENTS
 - a. Review Meeting Ground Rules, Public Comment and Public Record Requirements
 - b. Council Member and Guest Introductions
 - c. Moment of Silence
 - d. Excused Absences and Appointment of Alternates
 - e. Approval of 8/31/17 Meeting Agenda
 - f. Approval of 7/27/17 Meeting Minutes

3. PHONE INTRODUCTIONS
4. FEDERAL LEGISLATIVE REPORT (Handout A)
5. PUBLIC COMMENT
6. CONSENT ITEMS

#	Motion	Justification	Proposed By
1			

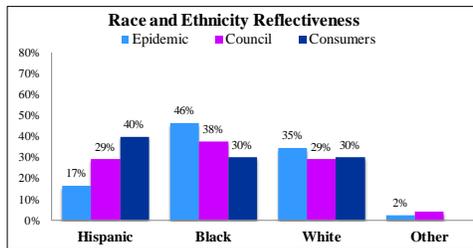
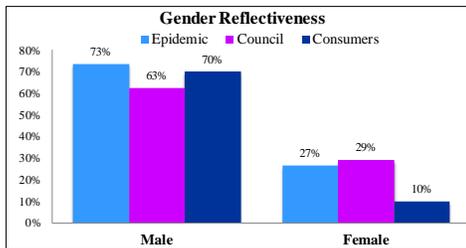
7. DISCUSSION ITEMS

#	Motion	Justification	Proposed By
1			

8. NEW BUSINESS
 - a. Regular HIVPC Elections- Begin preparing for regular HIVPC elections for HIVPC Chair and Vice Chair. Determine committee membership for ad-Hoc Nominating Committee.

9. MAY AND JUNE COMMITTEE REPORTS (15 minutes)
 - A. **MEMBERSHIP/COUNCIL DEVELOPMENT COMMITTEE (MCDC)**

**HIV Planning Council Membership Report
Current Through August 2017**



Gender	Epidemic	Council	% Difference	Consumers	% Difference
Male	14,372 73%	15 63%	-11%	7 70%	-3%
Female	5,213 27%	7 29%	3%	1 10%	-17%
Transgender	-	2 8%	-	2 20%	-

Race	Epidemic	Council	% Difference	Consumers	% Difference
Hispanic	3,253 17%	7 29%	13%	4 40%	23%
Black	9,100 46%	9 38%	-9%	3 30%	-16%
White	6,777 35%	7 29%	-5%	3 30%	-5%
Other	455 2%	1 4%	2%	0 0%	2%
Total	19,585 100%	24		10	

Current Members	24
Minimum (Per County Ordinance)	20
Maximum (Per County Ordinance)	35
% Unaffiliated Consumers	42%

- | Vacant Seats |
|------------------------------------------------|
| 1. Grantees of Other Federal HIV Programs - VA |
| 2. Federally Recognized Indian Tribe Members |
| 3. State Medicaid |
| 4. Individual co-infected with Hep B or Hep C |
| 5. Local Public Health Agency |
| 6. Substance Abuse Provider |
| 7. Alternates (3) |

No more than 3 members employed by one governmental agency or provider shall serve on the HIVPC at one time, and no more than 40% of HIVPC members shall be Part A-funded
% Part A-Funded Providers 29%

No August Meeting

Chair: Vacant, V. Chair: V. Foster

A. Work Plan Item Update / Status Summary:
<p><u>Recruitment:</u> The CEC Chair informed the Committee that a long standing member has resigned from CEC due to time constraints. The HIVPC and Committees aim for diversity, and are mandated to have a membership that is reflective of the local HIV epidemic. Currently there are no white males or females on the Committee. The PC Manager asked the members to reach out to people who are not currently a part of the Planning Council process, and encourage participation in the CEC and HIVPC.</p> <p><u>Calendar:</u> The members reviewed at an August-December 2017 calendar to identify National Days of HIV/AIDS Significance to participate in through tabling, educational forums or town hall events. The group discussed participating in September's National HIV/AIDS and Aging Awareness Day, and hosting an event regarding HIV, aging and the LGBT community.</p> <p><u>BTAN Collaboration:</u> The CEC members discussed collaborating with BTAN on upcoming events, potentially for September's HIV and Aging Day. The PC Manager suggested that upcoming events contain topics that address the stigma regarding living with HIV.</p> <p><u>December HIVPC All Committee Meeting:</u> The HIVPC leadership has discussed incorporating an educational component or town hall into the December All Committee HIVPC meeting. The PC Manager asked the members to come up with topics that community might have interest in. The group agreed that PrEP, nPEP, and treatment as prevention are important topics that are not widely discussed in many areas, particularly in minority communities.</p>
B. Rationale for Recommendations:
None.
C. Data Reports / Data Review Updates:
None.
D. Data Requests:
FY2018-2019 PSRA Process Overview
E. Other Business Items:
<i>Agenda Items for Next Meeting:</i> Plan for National HIV/AIDS and Aging Awareness Day event; Receive overview of 2018-2019 PSRA Process <i>Next Meeting Date:</i> September 5, 2017 <i>Location:</i> Governmental Center Room A-337

C. QUALITY MANAGEMENT COMMITTEE (QMC)

No August Meeting

Chair: C. Grant, V. Chair: Vacant

D. PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRA)

August 17, 2017

Chair: W. Spencer, Vice Chair: R. Siclari

E. SYSTEM OF CARE COMMITTEE

No August Meeting

Chair: M. Hayes, Chair: C. Edwards

F. EXECUTIVE COMMITTEE

August 17, 2017

Chair: B. Gammell Vice Chair: R. Lopes

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

10. GRANTEE REPORTS (20 minutes)

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

11. UNFINISHED BUSINESS

12. PUBLIC COMMENT

13. ANNOUNCEMENTS

14. REQUEST FOR DATA

15. AGENDA ITEMS FOR NEXT MEETING: September 28, 2017 LOCATION: GC-430

<i>Tasks for next Meeting</i>	<i>Responsible Party</i>	<i>Action to be taken, presentation, discussion, brainstorm etc.</i>
HOPWA Presentation	HOPWA	ACTION ITEM: Receive a presentation regarding HOPWA funding and services in the EMA

PLEASE COMPLETE YOUR MEETING EVALUATIONS

September 2017

Broward County HIV Health Services Planning Council Calendar

HANDOUT B

Last Updated: 8/16/2017

Meeting dates & times are subject to change. Unless otherwise noted, meetings are held at: Governmental Center Annex, Ryan White Part A Program Office, 115 S. Andrews Ave.; Ft. Lauderdale, 33301. Please contact support staff at 954-561-9681 ext. 1343 or visit <http://www.brhpc.org> for updates.

Monday	Tuesday	Wednesday	Thursday	Friday
				1
4	5 Community Empowerment Committee Meeting 3:00 p.m., A-337^	6	7	8 SFAN 10:00 a.m., ~
11	12	13 By-Laws Committee Meeting 12:30 p.m., TBD	14	15
18 Quality Management Committee Meeting 12:30 p.m., A-335^	19	20	21 Executive Committee Meeting 11:30 a.m., A-337^	22
25	26 System of Care Committee 1:00 p.m.*	27	28 HIV Planning Council Meeting 9:30 a.m., GC-430^	29

^Governmental Center — 115 S Andrews Ave, Ft. Lauderdale, 33301
 ~Dorothy Mangurian Comp. Center—1000 NE 56th St, Ft. Lauderdale, 33334
 *Children's Diagnostic & Treatment Center—1401 S Federal Hwy,
 Ft. Lauderdale, FL 33316

Meetings in **Red** are cancelled.
 Meetings in **Blue** are for the HIV Planning Council Committees & QI Networks.
 Meetings in **Black** are not associated with the HIV Planning Council.

September 2017

Broward County HIV Health Services Planning Council Calendar

HANDOUT B

Last Updated: 8/16/2017

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TODOS ESTAN BIENVENIDOS!

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

Governmental Center
115 S. Andrews Ave.
Ft. Lauderdale, FL 33301

(Acceso de Downtown Bus Terminal y Tri-Rail/Broward County Transit)

Para confirmar información acerca de la reunión de Consejo de Planeación VIH, 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.

ALL ARE WELCOME!

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

Governmental Center
115 S. Andrews Ave.
Ft. Lauderdale, FL 33301

(Access from Downtown Bus Terminal and Tri-Rail/Broward County Transit)

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.

BON VINI!

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

Governmental Center
115 S. Andrews Ave.
Ft. Lauderdale, FL 33301

(Access from Downtown Bus Terminal and Tri-Rail/Broward County Transit)

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

HIVPC Committee Descriptions

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.

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.

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.

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.

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.

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.

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.

MINUTES

HIV Executive Planning Bodies

August 9, 2017

Location: Secret Woods Nature Center, Julia Hall

1:00 pm – 3:00 pm

1:00 pm – 1:15 pm

Welcome, Introductions, Purpose, Goals

Facilitator: Jersey Garcia**Action Items:** Introduction of participants and identification of meeting purpose, goals and follow up activities**Discussion:** Introductions were made by those in attendance.

The group reviewed the May 15th facilitated meeting summary. The SFAN Chair requested edits to the attendance, as well as preferences for future email correspondences (not blind copied, instructions and timelines, notice of lunch availability).

Since the last meeting, SFAN has met with their planning body members and selected 3 people to serve on the Integrated Workgroup. BCHPPC has not yet selected their members. The Part A HIVPC must establish the structure and purpose of the Workgroup before amending their By-Laws and submitting the proposed membership and Workgroup format for approval by the HIVPC members.

There was also discussion on the structure of the group; either defined as a workgroup or a committee. The former group was tasked with overseeing the development of the Integrated Plan was structured as a workgroup, and was less formal than a County Board committee but still governed under Florida in the Sunshine Laws. If the next iteration of the group is structured as a committee, it must be governed under one of the planning bodies and would operate under more formal conditions.

Decision: The group decided to operate under a workgroup structure, with each group of member reporting back their respective bodies.**Directives:** In future meetings the members must decide how to proceed if planning bodies do not reach consensus or approve decisions made by representatives during workgroup meetings.

1:15 pm – 2:15 pm

Staff Support and Funding

Facilitator: Joey Wynn**Action Items:** Discuss use of resources (program support, funding, etc.) to plan and prepare for meetings Integrated Workgroup Members

Discussion: The group discussed the resources needed for planning, implementing and documenting Integrated Workgroup meetings. Resources needed include securing meeting locations, providing food, member communications, printed materials, research, Sunshine notices, minutes, etc. Part A provided the staff resources for the development of the Integrated Plan, as well as for the first Integrated Workgroup. The Part B representative explained that the FDOH-Broward cannot provide food, but can commit to providing clerical support, etc. Part A and FDOH-Broward will meet to determine the delegation of Staff responsibilities and resources.

Decision: Part A will provide 50% of the Staff support and funding for workgroup meetings. SFAN and BCHPPC will each contribute 25% of the needed resources. Jersey Garcia and Broward Regional Staff will work together to facilitate and prepare for Integrated Workgroup meetings.

2:15 pm – 2:45 pm

Integrated Workgroup Membership

Facilitator: Brad Barnes

Action Items: Discuss membership of Integrated Workgroup; determine number of members and Planning Body representation; community vs. government association; term limits

Discussion: The meeting participants discussed the makeup and membership of the reformed Integrated Workgroup. As Part A has committed to providing 50% of the resources for the Workgroup, the HIVPC Chair proposed having 6 voting members, while SFAN and BCHPPC each have 3 members. Other participants felt the group should respect the original workgroup make-up decided in the May facilitated meeting: 3 members from each body. The two proposals represented two thought processes: 3 equal planning partners, or 2 funding agencies with representation based on resources (Part A and FDOH-Broward). The Part B representative explained that while SFAN is an advisory body for HRSA's Part B funding and makes recommendations to the FDOH, the Part B program serves as the board's administrative body and provides no funding for SFAN. BCHPPC receives funding from the CDC, and the Prevention program is at FDOH-Broward. The HIVPC receives HRSA Part A funding and is administered by Broward County.

The BCHPPC and SFAN members stated that SFAN does not fall under the DOH, and that if SFAN/BCHPPC are working with Part A to split resources, then equity in representation should not be affected by funding streams. The participants discussed their different viewpoints.

The group then discussed the representation of community stakeholders vs. government representative on the Workgroup. SFAN leadership would only like community representation on the workgroup. Both the HIVPC and SFAN are comprised of community stakeholders, however BCHPPC is required to have half government

and half community membership. BCHPPC will recommend community membership, but will select members based on area of expertise.

Finally, the participants discussed how the bodies will work to ensure the diversity of the Integrated Workgroup. If every group sends diverse members, then the group as a whole should be representative of the Broward County epidemic. Once the group convenes, if a stakeholder group or area of expertise is not represented, then the Workgroup can identify Members At Large to fill in any gaps in representation.

Directives: The group decided to have 3 members from each planning body. Each planning body will select a diverse group of 3 members and one alternate to serve on the Integrated Workgroup.

2:45 pm – 3:00 pm

Wrap-Up and Next Steps

Facilitator: Jorge Gardela

Action Items: Wrap up discussion; determine next steps for upcoming meeting(s)

Next Steps: The meeting participants will go back to their respective planning bodies and select 3 members and 1 alternate to serve on the Integrated Workgroup. They will send the names of their selected members to Planning Staff.

Next meeting: Next meeting date will be set for late October; all meetings will be governed under the Florida Sunshine Law.

**By-Laws of the
Broward County HIV Health Services Planning Council**

Adopted, January 1992

as Amended April 1995, April 1996, November 1996, June 1998, March 1999, May 1999, February 2000, January 2002, September 2004, April 2006, January 2010, January 2012, May 2013, December 2013, May 2014, July 2014, March 2015, July 2015, August 2015, December 2015, April 2017

ARTICLE VIII

COMMITTEES

SECTION 10: There shall be an Integrated Comprehensive Plan Work Group

- A. Membership. The work group will be composed of ~~both~~ the Prevention, ~~and~~ Part A, and Part B programs, with ~~50%~~ one-third of members representing their respective planning bodies. Members from the Part A program may include HIVPC members, committee members, or other appropriate community stakeholders, such as HOPWA/housing; FQHC/Hospital districts; Broward County Public Schools; Funded community-based service providers; Behavioral health provider; Client engagement systems, including linkage and re-linkage to care and retention in care; Community leaders. Part A members will be selected for recommendation by the Executive Committee but must be approved by the HIVPC. The desired membership of the work group should be reflective of the demographics of the epidemic in Broward County, and consideration shall be given to race, ethnicity, self-acknowledged HIV-positivity, and gender.
- B. **Leadership.** The work group will have one Part A Co-Chair and one Prevention Co-Chair. Each Co-Chair will have a Vice Chair who may step in if a Co-Chair is absent from a work group meeting. The Part A Co-Chair will be selected from the list of recommended members developed by Executive Committee and will be subject to approval by the HIVPC.
- C. Purpose. The work group will be responsible for ~~developing,~~ monitoring, and ~~updating~~ providing recommendations for the completion of the activities outlined in the ~~the~~ Broward County Integrated HIV Prevention and Care Comprehensive Plan for Broward County. The work group will conduct a comprehensive analysis and review of data received from community stakeholders to ~~conduct a comprehensive analysis and review of data from both Part A and Prevention, which will be used to develop the plan and to~~ provide robust recommendations to the Prevention and Care planning bodies and to the ~~Grantees~~ Recipients. The work group will ~~be responsible for receiving information from Prevention and Part A, synthesizing the information, and serving~~ as the feedback loop for collaborative implementation of the Plan, and ~~making~~ ing

appropriate recommendations to the respective planning bodies and [HIV funders](#).

- D. Flow of Information. The work group is expected to interact with numerous Prevention, ~~and~~ Part A, [and Part B](#) teams, work groups, and committees. The work group's main point of contact and coordination will be the Executive Committees of the HIVPC, ~~and~~ Prevention Planning Council [and South FL AIDS Network \(SFAN\)](#). All of the work of the work group is provided to the HIVPC, ~~and the~~ Prevention Planning Council, [and SFAN](#) in the form of recommendations, and is subject to approval of the respective planning body.

DRAFT**2017 AD-HOC NOMINATING COMMITTEE TIMELINE**

Activity	Proposed Date
First ad-Hoc Nominating Committee meeting. Review & approve procedures and questionnaire.	October 5, 2017
HIVPC meeting. Procedure & questionnaire approved by HIVPC. Questionnaire given to all eligible parties interested in running. Candidates have approximately one month to submit the questionnaire to HIVPC staff.	October 26, 2017
Deadline to return completed questionnaire to HIVPC staff.	November 30, 2017
HIVPC meeting. Present slate of candidates and ask for verbal call of nominations. Q&A session for all candidates. Candidates nominated from the floor have two weeks to submit questionnaire to HIVPC staff.	December 7, 2017
Deadline to return completed questionnaire to HIVPC staff for candidates nominated from the floor.	December 21, 2017
Nominations closed.	December 21, 2017
Second ad-Hoc Nominating Committee meeting. Review & approve slate of candidates, election process, and ballots.	January 4, 2018
HIVPC meeting. Candidates presented and voting takes place. Votes read into record.	January 25, 2018
Start of new HIVPC Chair and Vice Chair terms 2018-2020	March 22, 2018



Integrated Planning Meeting

Anne Kolb's Nature Center
May 15, 2017 9:00 a.m. – 4:00 p.m.



Summary of Meeting Objectives

Participants were welcomed and the purpose of the Integrated Planning Meeting was discussed. Included in this discussion was a revisiting of the overall purpose of the Integrated Planning Committee (IPC). It was agreed that the purpose of the committee was to monitor and ensure that implementation of the Plan occurred through evaluation, feedback and recommendations.

Introductions were made and participants engaged in a networking activity that allowed participants to identify a major strength that each represented organization possessed. As a result of this activity and discussion that followed, the organizations determined that their major strengths were reflected as follows:

- **Broward County HIV Prevention Planning Council** (BCHPPC) – *Diverse services dependent on need*
- **HIV Planning Council** (HIVPC) – *Treatment and organization*
- **South Florida Aids Network** (SFAN) – *Community involvement*

The meeting focused on the following five objectives:

1. Define expectations of each member of the IPC
2. Define the criteria for serving on the IPC
3. Identify the member composition of the IPC
4. Development of a structure for monitoring the implementation process
5. Creation of monitoring action items that need to be accomplished and by whom

Expectations and Criteria

It was discussed that expectations and criteria for membership had overlap and so the participants were asked to develop their five key expectations and/or criteria of the members that would be serving on the IPC.

Participants ~

Broward County HIV Prevention Planning Council

- Emilio Aponte
- Janelle Taveras
- Jorge Gardella
- Krystle Kirkland-Mobley
- Lorenzo Robertson
- Marcello DiMaria
- Michael Alonso
- S. F. Makalani-MaHee
- Sebrina James
- Tatiana Braxton
- Yvette Gonzalez

HIV Planning Council

- Brad Barnes
- Claudette Grant
- Marie Hayes
- Patricia Fleurinord
- Requel Lopes
- Rick Siclari
- Vincent Foster
- Will Spencer

South Florida Aids Network

- Allison Ruby
- Gary Hensley
- H. B. Katz (Brad)
- Joey Wynn
- Kim Saiswick
- Leslie Washington
- Lisa Agate
- Trudy Love

Observers

Joe May
Joshua Rodriguez
Leonard Jones
William Green

Organizers

Leah Ewart
Teresa Anderson
Vanessa Oratien

Lead Facilitator – Maria Pearson

Co- Facilitator – Ronnie Glotzbach

As a result of a prescribed selection process, and a review of similarities and differences, the following were the finalized criteria and expectations that each member would follow in order to continue being an active IPC member:

1. Attend meetings and complete work assigned as a result of the meetings (*Be careful/ respectful of members time*)
2. Fulfill the member role by:
 - a. Being a subject matter expert (SME)
 - b. reading materials in advance of the meetings
 - c. representing one's community
3. Be a liaison to the community by:
 - a. providing feedback to and from
 - b. reporting back in a timely manner (TBD)
4. Stay committed to the process with an open mind, supporting decisions that had been reached
5. Adopt the plan as his/her own and work toward collective goals
6. Act with integrity (*Authentic and remembering the end user*)
7. Keep the plan as a working document
8. Represent and include all communities and the diversity that exists

Recommendations were requested of the participants regarding what should occur if the IPC committee member failed to meet the desired expectations identified above. Several paths were identified and fell into the following categories:

- Disciplinary process determined by the IPC members
- Removal and Replacement
- Combination of the above

Committee Composition

The participants discussed the four areas that needed to be considered when recommending the composition of the IPC. They were manpower, budget, time, and technology availability. It was clarified that resources available in the past may not be available in the future. This would imply that committee members would take on more active roles in planning, facilitating and recording the meeting minutes.



As a result of another prescribed facilitation process, the participants selected the following composition for the IPC:

- A total of nine (9) voting members consisting of the following:
 - Three (3) members from each of the organizations:
 - BCHPPC
 - HIVPC
 - SFAN
 - One (1) designated alternate for each of the organizations that will not have voting rights unless they are acting on behalf of the voting member of the IPC.
 - One (1) to four (4) members at large each with voting ability representing different aspects of the community such as faith based, medical, etc. The number of “at large” members will be determined and voted on by the nine (9) voting members at their first meeting.

Structure for Monitoring and Implementation

Four areas were determined to be key when determining the structure for the IPC. After much discussion, below are the key areas as well as the results that were recommended:

- *Leadership Choices*
 - Chair and Vice Chair (voting rights to be determined)
- *Terms*
 - Two (2) year term limits for the leadership
 - Five (5) year term limits for the membership
- *Meeting Intervals*
 - Monthly meetings for the first six months, then quarterly thereon
- *Work Assignments*
 - Three (3) members (*one from each organization*) plus one (1) At Large member
 - At Large member is the lead for the sub-group
 - Monitoring and Ad Hoc sub-groups added as needed

Creation of Monitoring Actions

Several actions fell out of the Integrated Committee Retreat and were captured; however, they were not able to be pursued due to limitation of time during the retreat:

Action	Responsible Party	Date
Review of recommendations made at Integrated Committee Retreat dated May 15, 2017	Leadership Team	By first IPC meeting (TBD)
Determination of budgetary considerations based on existing budget	Leadership Team	By first IPC meeting (TBD)
Selection of IPC membership	Leadership Team of each group	By first IPC meeting (TBD)

Review of integrated City-Only HIV Prevention and Care Plan dated 2017-2021	All participants at the Integrated Committee Retreat May 15, 2017 All IPC members selected by Leadership Team	By first IPC meeting (TBD)
Determination of first IPC meeting	Leadership Team of each group	Two weeks prior to first IPC meeting(TBD)
Determination of Chair and Vice-Chair	IPC Membership	At first meeting (TBD)
Discussion and Agreement of IPC Member Expectations	IPC Membership	At first meeting (TBD)
Discussion and Agreement of IPC Member Recommendations if Expectations not met	IPC membership	At first meeting (TBD)
The number of “at large” members	IPC Membership	At first meeting (TBD)
Discussion of Structure for Monitoring and Implementation	IPC membership	At first meeting (TBD)

GROUP Strengths Chart

Overall Strengths	BCHPPC	HIVPC	SFAN
	<i>Diverse services dependent on need</i>	<i>Treatment and organization</i>	<i>Community involvement</i>
List of Strengths <i>+ designates listed more than one time</i>	Strategic planning for HIV prevention	Full access to the people we are trying to link to care	Open to community participation
	Focus	Data presentations	Community+++++
	Prevention tools and skills	Effective & efficient process	Community involvement++++++
	Community	Organization++	Community information
	New	Caring+	Consistency / Community
	Bringing together prevention efforts	Provides treatment services to HIV positive people	Works with community to reduce HIV rates
	Jobs+	Care and treatment	Community networking
	Conducts surveys and prevention actions	Care to the community	Strong organizational tools
	Community work and prevention	Works with community to reduce HIV rates	Clear consumer content
	Works with community to reduce HIV rates	Patient care tools	Strong & valuable consumer input
	Access to national prevention partners who can assist with Broward HIV infection rates	Planning for future	State & national awareness
	Great access to state resources	Distributes funding based on data, utilization of services by consumer	Passionate people working in the HIV prevention field
	Missing link on the prevention side	Resources	Informational
	Diversity	Funds	Awareness++
	Includes involvement from all participants	Knowledge	Determination
	Important	Access to national partners	