



Fort Lauderdale/Broward County EMA
Broward County HIV Health Services Planning Council
An advisory board of the Broward County Board of County Commissioners
200 Oakwood Lane, Suite 100 • Hollywood, Florida 33020 954-561-9681 • FAX 954-561-9685

System of Care Committee Meeting

AGENDA

Date: April 1, 2021 at 9:30 a.m.

Location: [WebEx Virtual Meeting Platform](#)

Chair: Andrew Ruffner; **Vice Chair:** Joshua Rodriguez

Facilitator: Planning Council Support Staff

hivpc@brhpc.org

(954) 561-9681 ext. 1250

SOC Purpose: To evaluate the system of care and its impact on people living with HIV and receiving Part A services in the Broward County EMA.

1. **Call to Order**
2. **Welcome & Public Record Requirements**
 - a. Welcome
 - b. Review Meeting Ground Rules, Public Comment and Public Record Requirements (Statement of Sunshine)
 - c. Council Member, Guest, and Phone Introductions
 - d. Moment of Silence
3. **Approvals**
 - a. Meeting Agenda 04/01/2021
 - b. Last Meeting Minutes 02/04/2021
4. **Public Comment (10 minutes)**
5. **Standard Committee Items**

None.
6. **Unfinished Business**
 - I. **FY2021-2022 System of Care Committee Work Plan (Continued) (Handout A)**
[Action Item: Review the FY2020 SOC Work Plan and discuss edits for the FY2021 SOC Work Plan.](#)
7. **Meeting Activities/New Business**
 - I. **Service Delivery Model (SDM) Discussion (Handout B1-B4)**
[Action Item: Discuss the changes that have been made to the Disease Case Management SDM, Centralized Intake and Eligibility Determination SDM, Non-Medical](#)



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.

Case Management SDM, and the Integrated Primary Care & Behavioral Health SDM by CQM Support Staff.

II. Ending the HIV Epidemic (EHE) Needs Assessment Findings (Handout C)

Action Item: Review EHE preliminary findings based on community engagement completed by the FL Department of Health-Broward County.

III. Ending the HIV Epidemic (EHE) Eligible Metropolitan Area (EMA) Presentation (Handout D)

Action Item: Review the EHE presentation by the Ryan White Part A Office detailing EHE services in Broward County.

8. Recipient's Report

9. Public Comment (10 minutes)

10. Agenda Items/Tasks for Next Meeting

- a. Next Meeting Date: May 6, 2021 at 9:30 a.m. via WebEx Videoconference
- b. Next Meeting Agenda Items

11. Announcements

12. Adjournment

**FOR A DETAILED DISCUSSION ON ANY OF THE ABOVE ITEMS,
PLEASE REFER TO THE MEETING MINUTES.**

Meeting Packets are available at: [The HIV Planning Council Website](http://www.brhpc.org/programs/hiv-planning-council/)
(<http://www.brhpc.org/programs/hiv-planning-council/>)

Please complete your meeting evaluations [here](#)

Three Guiding Principles of the Broward County HIV Health Services Planning Council

- Linkage to Care • Retention in Care • Viral Load Suppression •



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Broward County Board of County Commissioners

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HIV HEALTH SERVICES PLANNING COUNCIL MEETING GROUND RULES



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

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



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

KONSÈY PLANIFIKASYON SÈVIS SANTE POU HIV RÈGLEMAN RANKONT-YO



1. Manm-yo dwe rekonèt epi respekte pwosesis komite-a ke Konsèy-la adopte. Diskisyon ak analiz total pwoblèm-yo fèt nan nivo komite-a; li pa fèt pandan rankont tout Konsèy-la.
2. Anvan yon manm ka fè yon pwopozisyon oswa nenpòt ki moun gen dwa pale pandan yon deba, fòk Prezidan Komite-a bali dwa esklizif pou fè moun tande-li nan moman sa-a.
3. Yo atann-yo aske tout moun k'ap pale ak Konsèy-la fè-li avèk respè, pou pèsonn pa koupe moun ke Konsèy-la bay dwa pale lapawòl, pou moun k'ap pale-a respekte kantite tan yo ba-li pou pale-a, pou li di sa l'ap di-a rapidman epi avèk presizyon, epi pou li respekte ajanda-a.
4. Si manm ki fè pwopozisyon-an mande pou li pale epi si li poko pale sou keksyon-an deja, li gen priyorite sou lòt manm-yo.
5. Pèsonn moun pa gen dwa pran lapawòl de fwa sou yon menm sijè si gen lòt moun ki poko pale epi ki vle esprime tèt-yo.
6. Deba-a dwe rete sou keksyon oswa pwopozisyon k'ap fèt-la. Moun k'ap pale-a dwe adrese sa l'ap di-a bay Prezidan Komite-a epi pale sou yon ton ki make ak respè.
7. Manm piblik-la dwe pale ak Konsèy-la sèlman si Prezidan Konsèy-la bay-yo lapawòl. Yo dwe respekte menm règleman kondwit avèk manm Konsèy-yo. Lè sa nesèsè 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 posesyon 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.



Meeting of the
System of Care Committee

Thursday, February 4, 2021
9:30-11:30 AM
By WebEx Videoconference

MINUTES

SOC Members Present: A. Ruffner (Committee Chair), J. Rodriguez (Committee Vice-Chair), H. B. Katz, T. Pietrogallo

Members Absent: D. Shamer

Members Excused: E. Chrispin

Ryan White Part A Recipient Staff Present: K. Giglioli, W. Cius, G. James, T. Thompson, S. Scott, N. Walker

Planning Council Support Staff Present: D. Cestaro-Seifer, G. Martinez, V. Oratien, N. Duong, F. Ukpai, W. Saint-Fleur

Guests Present: S. Cook, B. Mester

Agenda Item #1: Call to Order, Welcome & Public Record Requirements

The *SOC Chair* called the meeting to order at 9:38 a.m. The *SOC Chair* welcomed all meeting attendees that were present. Attendees were notified that the SOC meeting is based on Florida's "Government-in-the-Sunshine Law and meeting reporting requirements, including the recording of minutes. In addition, it was stated that the acknowledgment of HIV status is not required but is subject to public record if it is disclosed. Introductions were made by the *SOC Chair*, committee members, Recipient staff, PCS staff, and guests by roll call, and a moment of silence was observed.

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

Agenda Item #2: Meeting Approvals

The approval for the agenda of the February 4, 2021 System of Care Committee meeting was proposed by *J. Rodriguez*, seconded by *H.B. Katz*, and passed unanimously. The approval for the minutes of the October 1, 2020 meeting was proposed by *T. Pietrogallo*, seconded by *J. Rodriguez*, and approved with no further corrections.

Mr. Rodriguez, on behalf of SOC, made a motion to approve the February 4, 2021 System of Care Committee agenda as presented. The motion was adopted unanimously.

Mr. Pietrogallo, on behalf of SOC, made a motion to approve the October 1, 2020, System of Care Committee meeting minutes as presented. The motion was adopted unanimously.

Agenda Item #3: Unfinished Business

There was no unfinished business for committee members to discuss.

Agenda Item #4: Meeting Activities/New Business

Mr. Biggs shared his experience of receiving care from the Ryan White HIV AIDS Program (RWHAP) in Broward County with the Committee. While his overall experience of the RWHAP has been positive, recent interactions have detracted from that. *Mr. Biggs* discussed his recent difficulties with the gatekeepers at agencies. He described argumentative and cold experiences with agency representatives. *Mr. Biggs* also noted that novices might have more challenges navigating the Part A Program. *Mr. Biggs* noted that the RWHAP could be very confusing, especially for newly diagnosed individuals. It would be beneficial for some community members to have more of a hand-holding experience. Members and guests discussed the system's setup and potential methods to address this need.

SOC discussed using navigators to assist consumers through the system and the potential cost as a limiting factor. Members also discussed requiring a visit with a Case Manager upon entry into care. *Mr. Biggs* noted the repetitive nature of entering into care among the different RWHAP Programs. It can be confusing or frustrating for new clients to complete similar paperwork and surveying for each Part of their care. Additionally, clients are often confused about the differences between Part A and Part B or which services they qualify to utilize. Finally, SOC discussed whether there was a difference in the needs of clients who are new to care and clients reentering care. Returning to care can be difficult for clients and can indicate a broken relationship between the client and the care provider.

The *SOC Chair* emphasized the need for consumer and frontline worker voices on the Committee. Members were encouraged to invite community members who can speak to the experience of accessing and providing care.

Ms. Debbie Cestaro-Seifer provided an overview of the secret shopper initiative previously completed by the Part A Program (Handout A on file). Members and guests discussed the importance of the client's perception of care. The Chair requested that SOC discuss this presentation further at its March meeting.

ACTION ITEM: Members will review Handout A and consider key takeaways to be discussed at the March 4, 2021 SOC meeting.

A request was made that if a flow chart for clients moving through the system exists, it be shared with the Committee. The Recipients of Part A & B noted that a flowchart would be challenging to map out because it would have to be tailored to each client's needs. Members emphasized the complexity of the RWHAP, with one stating that the most effective way for clients to navigate through this system is with knowledgeable guides who can help individuals move through it.

FY2021-2022 System of Care Committee Work Plan: The SOC Work Plan was tabled until the March meeting in the interest of time. At the March meeting, the Committee will review their progress FY2020 and determine what changes should be made to the work plan for FY2021.

Agenda Item #5: Recipient Report

The Recipient's Office is collecting fiscal information from Providers. However, due to administrative issues caused by the pandemic, the process is taking longer than usual. The Recipient will be reaching out to HRSA regarding its stance on carryover penalties. Renewal letters will be sent to

the Broward Board of County Commissioners on Feb 23rd, after renewal letters have been sent to agencies on February 18th or 19th. The Community Rightful Center is now the MAI service provider and will be represented at the March HIVPC meeting to make a presentation. The Recipient's Quality Team is working with Clinical Quality Management to complete Service Delivery Models and continue Quality Initiatives. Monitoring will likely be virtual again this year. Neil Walker is the Ending the HIV Epidemic (EHE) lead and will have program information available in the coming weeks.

Mr. Walker added that a formalized grievance process is available to address consumer issues. If any client feels he/she/they are not making progress with an agency, please reach out to the Recipient's Office directly. The Recipient takes pride in responding to client issues. Mr. Walker can be contacted at the following phone numbers regarding provider concerns:

Mr. Neil Walker: 954-357-7809

Main Office: 954-357-5390

Agenda Item #6: Public Comment

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

Agenda Item #7: Member Tasks

Members will review Handout A and discuss perspectives and key takeaways from the information.

Agenda Item #10: Agenda Items/Tasks for Next Meeting

The next SOC meeting will be held on March 4, 2021, at 9:30 a.m. via WebEx Videoconference.

Agenda Items for Next Meeting:

- FY2021 Work Plan
- Customer Health Experiences Initiative Discussion
- Needs Assessment Presentation

Agenda Item #11: Announcements

- Broward Regional Health Planning Council: The Health Insurance Premium Assistance Program has a special enrollment period open from February 15, 2021 through May 15, 2021. Part A clients are encouraged to enroll and obtain insurance as well as premium payment. From the ADAP perspective, the Florida Department of Health saw an increased number of ACA enrollments, but not a substantial one. It is very important to discuss this with clients because there are benefits to clients to having insurance.
- Poverello: The Recipient has lifted its restrictions on the number of clients' food pantry visits.
- World AIDS Museum and Educational Center: The Community Dialogue Series continues with an event on Tuesday, February 9th at 7:00 p.m. The event is called, "Discovery at the CDC – The Sandy Ford Story." More information can be accessed [at this link](#).

Agenda Item #12: Adjournment

There being no further business, the meeting was adjourned at 11:33 a.m.

SOC Attendance for CY 2021

Consumer	PLWHA	Absences	Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
				Meeting Date	C	4											
0	0	0	1	Chrispin, E.		E											
1	1	0	2	Katz, H.B.		X											
0	1	0	3	Pietrogallo, T.		X											
0	0	0	4	Rodriguez, J. <i>Vice Chair</i>		X											
0	0	0	5	Ruffner, A. <i>Chair</i>		X											
0	0	1	6	Shamer, D.		A											
Quorum = 4					0	4	0	0	0	0	0	0	0	0	0	0	

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

FY 2020-21 System of Care Committee Work Plan

The work plan is intended to help guide the work of the committee and to assist the System of Care Committee in achieving its objectives in the coming year. For each activity, the time period of activity is highlighted in blue and the completion date is noted with an "X".

GOAL: By February 2021, identify the inventory of resources available for service delivery for PLWHA in Broward County to ensure a seamless continuum for Part A eligible clients

Objective 1: Determine if Part A services are delivered as designed by identifying client needs, service gaps, barriers, and outcomes of populations.

Activities	Frequency	Responsible Party	Outcomes	Action Items/Data Prep	Sept	Oct	Nov	Dec	Jan	Feb
1.1 Receive Needs Assessment training	Ongoing	PCS Team	Increase understanding of needs assessment process	Develop Committee knowledge of Needs Assessment purpose and process.						
1.2 Receive presentations from funders outside the Ryan White Part A Program including Needs Assessments	Ongoing	PCS Team	Increase knowledge of Broward County's Ryan White system of care	Recipients of Ryan White/HIV funding will review the landscape of HIV care and treatment in Broward County. Reviews will include information on Needs Assessments completed by each funder.		X				X
1.3 Analyze utilization trends for the HIV population in the Ryan White Part A system of care	Ongoing	PCS Team	Increase knowledge of Broward County's Ryan White system of care	Conduct utilization focused evaluation of the HIV Care Continuum to identify and address the drop-offs along the stages specific to service provider, geographic location and individual characteristics (Integrated Plan Strategy 2.2.a)		X				
1.4 Develop How Best to Meet the Need (HBTMTN) language based on findings.	Annually	SOC	Data driven PSRA process	Develop strategies specific to the needs, attitudes and behaviors of the identified priority/MAI populations (Integrated Plan Strategy 3.1.a)						

Objective 2: Ensure that issues pertaining to specific populations are addressed and make recommendations to appropriate HIVPC standing committees.

Activities	Frequency	Responsible Party	Outcomes	Action Items/Data Prep	Sept	Oct	Nov	Dec	Jan	Feb
2.1 Identify needs resulting from disparities in HIV-related service availability.	Ongoing	SOC/PCS Team	Increase knowledge of Broward County's Ryan White system of care	Utilize data to identify areas of need along the RWPA Care Continuum						
2.2 Collaborate with community partners to address inequities along the Broward County RWPA Care Continuum.	Ongoing	SOC/PCS Team	Collaboration with CEC and/or HIV-facing organizations	Determine information useful to the community in decreasing the identified disparity. Information will be disseminated during events and/or via other mediums. Ensure the receipt and integration of information from community partners.						
2.3 Receive presentations on Quality Improvement Projects (QIPs) taking place among service providers.	As Needed	SOC/QMC	Increase knowledge of Ryan White Part A's system of care	Receive presentations regarding current QIPs						
2.4 Recommend areas of inequities to the Quality Management Committee (QMC) for further review.	As Needed	SOC	Collaboration with QMC to lessen disparities along the continuum	Recommend identified areas of inequities for QMC to conduct systemwide quality improvement activities and strategies						
2.5 Present findings related to inequity to a health and/or racial equity expert to receive recommendations for addressing & improving disparities in health outcomes along the Broward County RWPA Care Continuum.	As Needed	SOC/PCS Team	Collaboration with experts to lessen disparities along the continuum	Develop recommendations in partnership with experts to improve outcomes along the RWPA Care Continuum						
2.6 Present findings to QMC for potential updates to service delivery models (SDM).	As Needed	SOC	Utilize findings to improve RWPA system of care	Recommend service delivery model updates based on data and recommendations						



**Broward County Ryan White Part A Program
Central Intake and Eligibility Determination (CIED)
Service Delivery Model**

Summary of Recommended Changes

(Last Updated October 23, 2014)

CHANGES MADE THROUGHOUT THE CIED SDM

- Instead of having a “Protocol” section, contents of this section are now included in the “Key Service Components & Activities” section.
- Eligibility Verification, Target Population, Client Intake, Service Caps, Access to Primary Medical Care, Retention in Primary Medical Care, Documentation, Continuous Quality Improvement, Payor of Last Resort, Responsibilities of Staff, Professional Requirements and Training sections were either consolidated or removed to eliminate duplication from the Ryan White Part A Universal SDM, individual contracts, and provider handbook.

CHANGES MADE TO CIED DEFINITIONS

Description of Change	Justification
Language change in local definition.	New language more accurately describes activities conducted in CIED.

CHANGES MADE TO CIED OUTCOMES AND INDICATORS

Description of Change	Justification
Outcome 1 is now, “Increase access, retention, and medical adherence to primary medical care.”	Standardization among new Service Delivery Models.
Indicator 1.2 has been added: “80% of clients will not experience a lapse in Ryan White Part A eligibility.”	Increasing process efficiency.
Outcome 2 has been removed: “Provide access to benefits for which client is eligible.”	This activity is detailed in the Assessment section of the Service Delivery Model.
Removal of columns, “Inputs,” “Strategies,” and “Data Source.”	Fields offer unclear information in data collection of outcomes.
Columns now titled, “Outcomes,” “Indicators,” and “Measure.”	Standardization among new Service Delivery Models.

CHANGES MADE TO CIED STANDARDS FOR SERVICE DELIVERY

Description of Change	Justification
<i>Standards 1 & 2</i> were combined into <i>Standard 1</i> .	Client eligibility profile standards were merged to increase efficiency in the Service Delivery Model.
<i>Standard 4</i> has been expanded to <i>Standards 5 & 6</i> .	This provides more detail regarding provider standards.
<i>Standards 5 & 6</i> were combined into <i>Standard 4</i> .	Increasing efficiency in the Service Delivery Model.
Removal of “Indicator” Column and rename “Data Source” column to “Measure.”	Standardization among new Service Delivery Models.
<i>Standard 7</i> including methods of communication between clients and providers was added.	This outlines the different options for client engagement.

<i>Standard 8</i> indicating an online recertification option was added.	This indicates the availability of the online Ryan White Part A Client Recertification Portal.
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CHANGES MADE TO KEY SERVICE COMPONENTS & ACTIVITIES

- References were inserted to link providers to adherence of the Universal Service Delivery Model, the Broward County Provider Handbook for Contracted Services, and state, local, and federal standards.
- Services must be provided at centralized offices and with staff stationed at Ryan White Part A core medical and support service sites.
- Clients must be oriented to the Broward Ryan White Part A system of care. This activity was added to encourage clients' use of available services and improve engagement & retention in care.
- Community Outreach through an annual marketing plan was added to improve community knowledge of the Ryan White Part A Program and available services.