

#### 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

### **Executive Committee Meeting**

Thursday, April 21, 2022 - 11:30 AM Meeting via WebEx Videoconference

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

Join the meeting via phone: 1-408-418-9388 US Toll (access code: 2631 661 8601)

This meeting is audio and video recorded.

Quorum for this meeting is 5

#### DRAFT AGENDA

#### **ORDER OF BUSINESS**

- 1. Call to Order/Establishment of Quorum
- 2. Welcome from the Chair
  - a. Meeting Ground Rules
  - b. Statement of Sunshine
  - c. Introductions & Abstentions
  - d. Moment of Silence
- 3. Public Comment
- 4. ACTION: Approval of Agenda for April 21, 2022
- 5. **ACTION:** Approval of Minutes from March 17, 2022
- 6. Standard Committee Items
  - a. Review and Approve April 28, 2022, HIVPC Agenda, Meeting Materials and Motions (Handout A)
  - b. Review May 2022 HIVPC Calendar (Handout B)
- 7. Unfinished Business
  - a. Ad-Hoc MOU Committee
- 8. New Business None.
- 9. Public Comment
- 10. Agenda Items for Next Meeting
  - a. Next Meeting Date: May 19, 2022, at 11:30 a.m. via WebEx Videoconference
  - b. Agenda Items for Next meeting
    - i. FY2022 HIVPC & Committee Work Plan Progress Update

- ii. Integrated HIV Prevention and Care Plan progress update
- iii. EHE Plan progress update
- 11. Announcements
- 12. Adjournment

For a detailed discussion on any of the above items, please refer to the minutes available at:

HIV Planning Council Website

Please complete you <u>meeting evaluation</u>.

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

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

Vision: To ensure the delivery of high quality, comprehensive HIV/AIDS services to low income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care.

Mission: We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, we: (1) Foster the substantive involvement of the HIV affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.



**Broward County Board of County Commissioners** 

Mark D. Bogen • Lamar P. Fisher • Beam Furr • Steve Geller • Jared Moskowitz• Nan H. Rich • Tim Ryan •Torey Alston • Michael Udine

**Broward County Website** 

# 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 respektè 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 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.//////

## **Acronym List**

ACA: The Patient Protection and Affordable Care Act 2010

ADAP: AIDS Drugs Assistance Program

**AETC: AIDS Education and Training Center** 

AHF: AIDS Health Care Foundation

AIDS: Acquired Immuno-Deficiency Syndrome

ART: Antiretroviral Therapy

ARV: Antiretrovirals

**BARC: Broward Addiction Recovery Center** 

**BCFHC: Broward Community and Family Health Centers** 

BH: Behavioral Health

BISS: Benefit Insurance Support Service

BMSM: Black Men Who Have Sex with Men

BRHPC: Broward Regional Health Planning Council, Inc.

**CBO:** Community-Based Organization

CDC: Centers for Disease Control and Prevention

CDTC: Children's Diagnostic and Treatment Center

**CEC: Community Empowerment Committee** 

CIED: Client Intake and Eligibility Determination

CLD: Client Level Data

CM: Case Management

CQI: Continuous Quality Improvement

CQM: Clinical Quality Management

CTS: Counseling and Testing Site

DCM: Disease Case Management

DOH-Broward: Florida Department of Health in Broward County

eHARS: Electronic HIV/AIDS Reporting System

EIIHA: Early Intervention of Individuals Living with HIV/AIDS

EFA: Emergency Financial Assistance

EMA: Eligible Metropolitan Area

FDOH: Florida Department of Health

FPL: Federal Poverty Level

FQHC: Federally Qualified Health Center

HAB: HIV/AIDS Bureau

HHS: U.S. Department of Health and Human Services

HICP: Health Insurance Continuation Program

HIV: Human Immunodeficiency Virus

HIVPC: Broward County HIV Planning Council HMSM: Hispanic Men who have Sex with Men

HOPWA: Housing Opportunities for People with AIDS

HRSA: Health Resources and Service Administration

HUD: U.S Department of Housing and Urban Development

IW: Integrated Workgroup

IDU: Intravenous Drug User

JLP: Jail Linkage Program

LPAP: Local AIDS Pharmaceutical Assistance Program

MAI: Minority AIDS Initiative

MCDC: Membership/Council Development Committee

MCM: Medical Case Management

MH: Mental Health

MNT: Medical Nutrition Therapy

MOU: Memorandum of Understanding

MSM: Men Who Have Sex with Men

NBHD: North Broward Hospital District (Broward Health)

NGA: Notice of Grant Award

NHAS: National HIV/AIDS Strategy

NOFO: Notice of Funding Opportunity

nPEP: Non-Occupational Post Exposure Prophylaxis

NSU: Nova Southeastern University

OAHS: Outpatient Ambulatory Health Services

OHC: Oral Health Care
PE: Provide Enterprise

PLWH: People Living with HIV

PLWHA: People Living with HIV/AIDS

PrEP: Pre-Exposure Prophylaxis

PRISM: Patient Reporting Investigating Surveillance System

PROACT: Participate, Retain, Observe, Adhere, Communicate and Teamwork is DOH-

Broward's treatment adherence program.

PSRA: Priority Setting & Resource Allocations

QI: Quality Improvement

QIP: Quality Improvement Project

QM: Quality Management

QMC: Quality Management Committee

RSR: Ryan White Services Report

RWHAP: Ryan White HIV/AIDS Program

RWPA: Ryan White Part A

SA: Substance Abuse

SBHD: South Broward Hospital District (Memorial Healthcare System)

SCHIP: State Children's Health Insurance Program

SDM: Service Delivery Model

SOC: System of Care

SPNS: Special Projects of National Significance

STD/STI: Sexually Transmitted Diseases or Infection

TA: Technical Assistance

TB: Tuberculosis

TGA: Transitional Grant Area

VA: United States Department of Veteran Affairs

VL: Viral Load

VLS: Viral Load Suppression

WMSM: White Men who have Sex with Men

WICY: Women, Infants, Children, and Youth

### **Frequently Used Terms**

**Recipient:** Government department designated to administer Ryan white Part A funds and monitor contracts.

**Planning Council Support (PCS) Staff/'Staff':** Provides professional staff support, meeting coordination and information to the HIVPC, its standing and ad-Hoc Committees, Chair, and Recipient.

Clinical Quality Management (CQM) Support Staff: Provides professional support, meeting coordination and technical assistance to assist the Recipient through analysis of performance measures and other data with implementation of activities designed to improve patient's care, health outcomes and patient satisfaction throughout the system of care.

**Provider/Sub-Recipient:** Agencies contracted to provide HIV Core and Support services to consumers.

**Consumer/Client/Patient:** A person who is an eligible recipient of services under the Ryan White Act.



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#### **Executive Committee**

Thursday March 17, 2022 - 11:30 AM Meeting via WebEx

#### **DRAFT MINUTES**

Executive Members Present: L. Robertson (HIVPC Chair), V. Biggs (HIVPC Vice-Chair), B. Barnes (PSRA Chair), V. Foster (MCDC Vice-Chair), B. Fortune-Evans (QMC Chair), A. Ruffner (SOC Chair & CEC Vice-Chair), T. Moragne (MCDC Vice-Chair)

Members Excused: S. Jackson (CEC Chair)

Members Absent: V. Moreno (PSRA Vice-Chair),

Ryan White Part A Recipient Staff Present: G. James, N. Walker, W. Cius, J. Roy, E. Reynoso

Planning Council Support Staff Present: G. Berkeley-Martinez, T. Williams, J. Rohoman, W.

Rolle, B. Miller

Guests Present: B. Mester, G. Beltran

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

The Executive Committee Chair called the meeting to order at 11:31 a.m. The Executive Committee Chair welcomed all meeting attendees that were present. Attendees were notified that the Executive Committee 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 Executive Committee Chair, Committee members, Recipient staff, PCS/CQM staff, and guests by roll call, and a moment of silence was observed.

#### 2. Public Comment

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

#### 3. Meeting Approvals

The approval for the agenda of the March 17, 2022, Executive Committee meeting was proposed by V. Foster, seconded by T. Morange, and passed unanimously. The approval for the minutes of the February 17, 2022, meeting was proposed by V. Foster, seconded by V. Biggs, and approved with no further corrections.

Motion #1: Mr. Foster, on behalf of Executive Committee, made a motion to approve the March 17, 2022, Executive Committee agenda as presented. The motion was adopted unanimously.

Motion #2: Mr. Foster, on behalf of Executive Committee, made a motion to approve the

# February 17, 2022, Executive Committee meeting minutes as presented. The motion was adopted unanimously.

#### 4. Standard Committee Items

The Executive Committee reviewed the HIV Planning Council agenda for the 3/24/2022 meeting. The Committee voted to approve the agenda as presented. The approval for the agenda of the March 24, 2022, HIV Planning Council meeting as presented was proposed by V. Foster, seconded by V. Biggs, and passed unanimously.

Motion #3: Mr. Foster on behalf of the Executive Committee, made a motion to approve the March 24, 2022, HIV Planning Council meeting agenda as presented. The motion was adopted unanimously.

The Committee also reviewed the April 2022 HIV Planning Council calendar of activities. There was one amendment to the calendar. V. Biggs proposed to add the Community Conversation Sessions hosted by CEC to the calendar scheduled on April 12<sup>th</sup> and 18<sup>th</sup>, 2022, seconded by R. Lopes, and passes unanimously.

Motion #4: Mr. Biggs on behalf of the Executive Committee, made a motion to approve the April 2022 HIVPC Calendar with an amendment of adding Community Conversation Sessions on the 12<sup>th</sup> and 18<sup>th</sup>. The motion was adopted unanimously.

Lastly, members discussed the possibility of transitioning back to face-to-face meetings. PCS Staff reminded the Committee that an executive order is updated weekly. The Chair requested that the Committee receive the weekly updates to add to the conversation. Quorum is still required to be established in the room, even with a hybrid option. B. Barnes suggested that the Chair and Vice-Chair write a letter to the Commissioner to amend this requirement to establish quorum in person and through a virtual platform. R. Lopes proposed that the Chair and Vice-Chair write a letter to the Commissioner to allow quorum to be placed in person and through a virtual platform, seconded by V. Biggs, and passed unanimously.

Motion #5: Dr. Lopes on behalf of the Executive Committee, made a motion for the Chair and Vice-Chair to write a letter to the Commissioner's office to allow quorum to be established in person and through virtual platform. The motion was adopted unanimously.

#### Unfinished Business

The Committee continued the conversation to convene an ad-Hoc Memorandum of Understanding (MOU) committee. It was recommended that anyone interested in joining this ad-Hoc Committee should contact PCS Staff. PCS Staff informed the Committee that there is no updated MOU, and a lot of the language is not updated. It was recommended to create an ad-Hoc committee to oversee the revision and work with the recipient's office accordingly to complete the MOU. B. Barnes suggested that the ad-Hoc MOU committee be open to the community and allow former chairs and people from the Planning Council to join so all parties can work together with the PCS Staff and grantee's office. B. Barnes suggested that MOUs from other jurisdictions should also be reviewed. He recommended, New York, Boston, and Los Angeles.

Additionally, the Committee discussed reinstating the ad-Hoc By-Laws Committee. The By-laws were last updated in 2018. It was recommended that anyone interested in joining this ad-Hoc Committee should contact PCS Staff. B. Barnes mentioned that if HIV Planning Council and SFAN were to have collaborative meetings, this should be reflected in the updated By-Laws. The Chair stated that the Executive Committee voted against joint meetings and invited SFAN to join the Planning Council and any committee of their choosing. PCS Staff reminded that all the ad-Hoc Committees would need a minimum of five persons. Information for both

ad-Hoc Committees will be announced in all committee meetings and the Planning Council meeting next week, March 24, 2022.

#### 6. New Business

The Committee reviewed the HIVPC membership status of the entire Planning Council and the individual committees. There has been an update to the member budget since the initial meeting packet was distributed. There are 21 members with three unaffiliated consumer seats, which is now 14% of the member body. The HRSA mandate is 33%. There are two unaffiliated consumers pending approval for the April MCDC Committee meeting, increasing the percentage of unaffiliated consumers to 21%. PCS Staff also discussed the open jobbased seats that are occupied and vacant. The Committee brainstormed ideas that could help increase recruitment and retention. PCS Staff informed the Committee that more HIVPCinformational banners are being distributed to provider agencies. B. Barnes discussed the new changes in the eligibility process. He suggested that the Chair and Vice-Chair speak to the HRSA Project Officer and Grantee's office to update the language to reflect these changes for the membership process. B. Barnes proposed for the Chair and Vice-Chair to speak on the behalf of the Planning Council to speak with the Project Officer and Grantee Office to make changes in the language to allow people living with HIV, regardless of affiliate or unaffiliate status, to be counted towards the 33% membership in Planning Council, seconded by R. Lopes, and passed unanimously.

Motion #6: Mr. Barnes, on behalf of Executive Committee, made a motion for the Chair and Vice-Chair to speak on the behalf of the Planning Council to speak with the project officer and Grantee Office to make changes in the language to allow people living with HIV, regardless of affiliate or unaffiliate status, be counted towards the 33% membership in Planning Council.

#### 7. Recipient's Report

There was no Recipient's report for this meeting.

#### 8. 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.

#### 9. Agenda Items for Next Meeting

The next Executive Committee meeting will be held on April 21, 2022, at 11:30 a.m. via WebEx Videoconference.

#### 10. Announcements

There were no announcements during this meeting.

#### 11. Adjournment

There being no further business, the meeting was adjourned at 12:16 p.m.

#### Executive Committee Attendance for CY 2021

Consumer	PLWHA	Absences	Count	Meeting Month  Meeting Date	Jan 20	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
1	1	0	1	Jackson, S	-	3/03	E										
0	1	0	2	Biggs, V., V. Chair	Χ	Χ	Χ										
0	0	0		Fortune-Evans, B.	Х	Х	Χ										
0	0	0	4	Foster, V.	Χ	Χ	Х										
0	0	0	5	Lopes, R., Ex-Officio	Χ	Χ	Х										
0	0	2	6	Moragne, T.	Α	Α	Χ										
0	1	0	7	Robertson, L., Chair	Χ	Χ	Χ										
0	0	0	8	Ruffner, A.	Е	Е	Χ										
1	1	1	9	Shamer, D.	Α	Χ					Z-03	3/14					
0	1	2	10	Barnes, B.	Α	Α	Χ										
0	0	3	11	Moreno, V.	Α	Α	Α							·			
				Quorum = 5	5	6	8	0	0	0	0	0	0	0	0	0	

Legend:						
X - present	N - newly appointed					
X - present 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					

Executive Committee Meeting Minutes – February 17, 2022

Minutes prepared by PCS Staff



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# Broward County HIV Health Services Planning Council Meeting

Thursday, April 28, 2022 - 9:30 AM Meeting via WebEx Videoconference

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

Join the meeting via phone: 1-408-418-9388 US Toll (access code: 132 007 3138)

This meeting is audio and video recorded.

Quorum for this meeting is 11

#### **DRAFT AGENDA**

#### **ORDER OF BUSINESS**

- 1. Call to Order/Establishment of Quorum
- 2. Welcome from the Chair
  - a. Meeting Ground Rules
  - b. Statement of Sunshine
  - c. Introductions & Abstentions

Proposed By: MCDC

- d. Moment of Silence
- 3. Public Comment
- 4. **ACTION:** Approval of Agenda for April 28, 2022
- 5. **ACTION:** Approval of Minutes from March 24, 2022
- Federal Legislative Report Kareem Murphy (Handout A)
- 7. Consent Items
  - a. Motion to approve Vince Foster from the Health Care Providers seat to the Part C Grantee seat.
    - Justification: Mr. Foster's seat change fills an empty seat on the Council without affecting the unaffiliated consumer membership percentage.

      PROPOSED BY: MCDC
  - b. Motion to approve Stephanie Magula to join the HIV Health Services Planning Council
    in the Mental Health and Substance Abuse Providers seat.
    Justification: Ms. Magula has years of experience as an HIV peer educator. She is
    advocate for the HIV community dedicated to helping those in need.
  - c. Motion to approve Andrea Lanear to join the HIV Health Services Planning Council in the Non-affiliated Consumer seat.
    - Justification: Ms. Lanear is a PWH who is committed to advocating for and serving the

HIV/AIDS community to improve the quality of life of those affected by HIV. Proposed By: MCDC

d. Motion to approve Semi Spencer to join the HIV Health Services Planning Council in the Non-affiliated Consumer seat.

Justification: Mr. Spencer is a PWH who has a vested interest in serving the HIV/AIDS community to improve the quality of life of those affected by HIV. She was recently employed by BRHPC as the ACA Enrollment Coordinator

Proposed By: MCDC

e. Motion to approve Shawn Jackson to join the HIV Planning Council in the Hospital/Healthcare Planning Agencies seat.

Justification: Ms. Jackson is a PWH who is committed to advocating for and serving the HIV/AIDS community by improving the quality of life of those affected and diagnosed. She was recently employed by BRHPC as the ACA Enrollment Coordinator Proposed By: MCDC

f. Motion to approve Shawn Jackson to join the Community Empowerment Committee. Justification: Ms. Jackson is a PWH who is committed to advocating for and serving the HIV/AIDS community by improving the quality of life of those affected and diagnosed.

Proposed By: HIVPC Chair

g. Motion to approve Johanne Casseus to join the HIV Health Services Planning Council in the Health Care Provider seat.

Justification: Ms. Casseus has years of experience in disease process, prevention, and treatment of HIV as a healthcare worker.

Proposed By: MCDC

h. Motion to approve Johanne Casseus to join the Quality Management Committee. Justification: Ms. Casseus has years of experience in disease process, prevention, and treatment of HIV as a healthcare worker.

Proposed By: QMC Chair

i. Motion to approve Natasha Markman to join the System of Care Committee. Justification: Ms. Markman is a versatile leader proficient in handling diverse functions and offering 20+ years of experience in program development with a results-driven and innovative approach.

Proposed by: SOC Chair

8. Discussion Items

None.

9. New Business

None.

- 10. Committee Reports
  - a. Community Empowerment Committee (CEC)
     Chair: Shawn Jackson Vice Chair: Andrew Ruffner April 5, 2022
    - i. Work Plan Item Update/Status Summary:
    - ii. Data Requests:
    - iii. Rationale for Recommendations:
    - iv. Data Reports/ Data Review Updates:
    - v. Other Business Items:
    - vi. Agenda Items for Next Meeting:
      - a. CEC Listening Session
      - b. PSRA Rankings Presentation
      - c. FY2023-2024 CEC Rankings
    - vii. Next Meeting date: May 3, 2022, at 3:00 PM via WebEx Videoconference

b. System of Care Committee (SOC)

Chair: Andrew Ruffner • Vice Chair: Jose Castillo

April 7, 2022

Work Plan Item Update/Status Summary:

- Work Plan Item Update/Status Summary:
- ii. Data Requests:
- iii. Rationale for Recommendations:
- iv. Data Reports/ Data Review Updates:
- v. Other Business Items:
- vi. Agenda Items for Next Meeting:
  - a. Needs Assessment/ Community Input Presentation
  - b. Part A Client Health Outcomes Presentation
- vii. Next Meeting date: May 5, 2022, at 9:30 AM via WebEx Videoconference
- c. Membership/Council Development Committee (MCDC)

Chair: Vincent Foster • Vice Chair: Dr. Timothy Moragne

April 14, 2022

- i. Work Plan Item Update/Status Summary:
- ii. Data Requests:
- iii. Rationale for Recommendations:
- iv. Data Reports/ Data Review Updates:
- v. Other Business Items:
- vi. Agenda Items for Next Meeting:
- vii. Next Meeting date: July 14, 2022, at 9:30 AM via WebEx Videoconference
- d. Quality Management Committee (QMC)

Chair: Bisiola Fortune-Evans • Vice Chair: Vacant

April 18, 2022

- i. Work Plan Item Update/Status Summary:
- ii. Data Requests:
- iii. Rationale for Recommendations:
- iv. Data Reports/ Data Review Updates:
- v. Other Business Items:
- vi. Agenda Items for Next Meeting:
- vii. Next Meeting date: May 16, 2022, at 12:30 PM via WebEx Videoconference
- e. Executive Committee

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

April 21, 2022

Work Plan Item Update/Status Summary:

- i. Work Plan Item Update/Status Summary:
- ii. Data Requests:
- iii. Rationale for Recommendations:
- iv. Data Reports/ Data Review Updates:
- v. Other Business Items:
- vi. Agenda Items for Next Meeting:
  - a. FY2022 HIVPC & Committee Work Plan Progress Update
  - b. Integrated HIV Prevention and Care Plan progress update
  - c. EHE Plan progress update
- vii. Next Meeting date: May 19, 2022, at 11:30 AM via WebEx Videoconference
- f. Priority Setting & Resource Allocation Committee (PSRA)

Chair: Brad Barnes • Vice Chair: Valery Moreno

April 21, 2022

i. Work Plan Item Update/Status Summary:

- ii. Data Requests:
- iii. Rationale for Recommendations:
- iv. Data Reports/ Data Review Updates:
- v. Other Business Items:
- vi. Agenda Items for Next Meeting:
  - a. HIV Surveillance Epidemiological Data Presentation
  - b. Needs Assessment/Community Input Presentation
  - c. Part A Client Health Outcomes Presentation
- vii. Next Meeting date: May 19, 2022, at 9:00 AM via WebEx Videoconference
- 11. Recipient Reports
  - a. Part A
  - b. Part B
  - c. Part C
  - d. Part D
  - e. Part F
  - f. HOPWA
  - g. Prevention Quarterly Update (April, July, October, January)
- 12. Public Comment
- 13. Agenda Items for Next Meeting
  - a. Next Meeting Date: May 26, 2022, at 9:30 a.m. via WebEx
  - b. Agenda Items for next meeting
- 14. Announcements
- 15. Adjournment

For a detailed discussion on any of the above items, please refer to the minutes available at:

HIV Planning Council Website

Please complete you <u>meeting evaluation</u>.

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 • Torey Alston • Nan H. Rich • Tim Ryan • Jared Moskowitz • Michael Udine

**Broward County Website** 







# May 2022 HANDOUT B BROWAR



## Broward HIV Health Services Planning Council Calendar

Sunday	Monday	Monday Tuesday Wednesday Thursday		Thursday	Friday	Saturday			
Junuay	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 <a href="https://www.brhpc.org">https://www.brhpc.org</a> for updates.								
1	2	Community Empowerment Committee Meeting (CEC) 3:00 PM – 5:00 PM WebEx Video-Conference	Quality Network Meeting 9:00 AM – 10:15 AM	5 System of Care Committee Meeting (SOC) 9:30 AM – 11:30 AM WebEx Video-Conference	South Florida AIDS Network Meeting (SFAN) 9:30 AM –11:30 AM Disease Case Management 2:30 PM – 3:45 PM	7			
8	9	10	11	12	13	14			
15	Quality Management Committee Meeting (QMC) 12:30 PM – 2:30 PM WebEx Video-Conference	17	National HIV Vaccine Awareness Day  Community Conversation Zoom Video-Conference 6:00 PM – 7:00 PM	19 PSRA Committee Meeting 9:00 AM – 11:00 AM WebEx Video-Conference Executive Committee Meeting 11:30 AM – 1:30 AM WebEx Video-Conference National Asian & Pacific Islander HIV/AIDS	20	21			
22	23	24	25	Awareness Day  26  HIV Planning Council (HIVPC) Meeting 9:30 AM – 11:30 AM WebEx Video Conference	27	28			
29	30	31				GET CARE BROWARD TREAT HIV BEAT HIV RYAN WHITE I PART A			

Version 04/28/21 Information on this calendar is subject to change.