

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

Community Empowerment Committee Meeting

Tuesday, November 1, 2022 - 3:00 PM LOCATION: Broward Regional Health Planning Council

Chair: Shawn Tinsley • Vice Chair: Andrew Ruffner

Join the meeting via: +1-408-418-9388 US Toll Access code: 132 916 3211

This meeting is audio and video recorded.

Quorum for this meeting is 7

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 November 1, 2022
- 5. **ACTION:** Approval of Minutes from September 6, 2022
- 6. Standard Committee Items
 - a. Action Item: CEC Listening Session (Handout A)- Continue discussion on how to host a series of CEC listening sessions within the community, specifically for Consumers to discuss their experiences navigating the Fort Lauderdale/Broward EMA's system of care.

Work Plan Activity 1.1: Engage consumers in townhalls/listening sessions.

- 7. New Business
 - a. Discussion Item: Review Date and Time for CEC Committee
- 8. Public Comment
- Agenda Items for Next Meeting
 - a. Next Meeting Date: January 3, 2022, at 3:00 p.m. LOCATION: Broward Regional Health Planning Council
 - b. Agenda Items for Next meeting

- i. CEC Listening Session
- 10. Announcements
- 11. Adjournment

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

HIV Planning Council Website

Please complete your <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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Community Empowerment Committee

Tuesday, September 6, 2022 - 3:00 PM
Location: Broward Regional Health Planning Council and Virtual Meeting via WebEx

DRAFT MINUTES

CEC Members Present: S. Tinsley (Chair), A. Ruffner (Vice-Chair), L. Robertson, R. Bhrangger, W. Marcoviche, V. Biggs, R. Shore, H. Franks, D. Gunion

Members Absent: None

Members Excused:

Ryan White Part A Recipient Staff Present: G. James

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

Guests Present: I. Wilson, J. Shirley, A. Tramel-McIntyre, Q. Cowan

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

The CEC Chair called the meeting to order at 3:00 p.m. The CEC Chair welcomed all meeting attendees that were present. Attendees were notified that the CEC 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 CEC Chair, Committee members, Recipient staff, PCS & CQM staff, and guests by roll call, and a moment of silence was observed.

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. V. Biggs gave a public comment. He recommended that the HIVPC creates a visual representation of Broward County community members who live with HIV/AIDS in the planning council's promotional materials: ad videos, social media, etc.

Meeting Approvals

The approval for the September 6, 2022, agenda of the Community Empowerment Committee meeting was proposed by V. Biggs, seconded by L. Robertson, and passed unanimously. The approval for the minutes of the July 5, 2022, meeting was proposed by L. Robertson, seconded by V. Biggs, and approved with no further corrections.

Motion #1: Mr. Biggs, on behalf of the CEC, made a motion to approve the September 6, 2022, Community Empowerment Committee agenda as presented. The motion

was adopted unanimously.

Motion #2: Mr. Robertson, on behalf of the CEC, made a motion to approve the July 5, 2022, Community Empowerment Committee meeting minutes as presented. The motion was adopted unanimously.

Standard Committee Items

Members continued the CEC listening session discussion by briefly reviewing what happened at the National HIV Faith Awareness Day event on August 9, 2022. W. Rolle summarized the discussion topics and reviewed the panelists' recommendations on addressing prevention and HIV/AIDS-related stigma between the local community and faith-based organizations.

Next, the committee discussed the upcoming listening sessions for September 2022 through January 2023.. L. Robertson and G. James recommended for the event HIV/AIDS in the Gay Community planned for September 23rd to be combined with the Leather Kink community event planned for October 2022. G. James encouraged the CEC to develop questions reflecting a fresh, newer approach when discussing HIV/AIDS awareness in the LGBTQ+ community. For the Leather Kink event, some of the meeting participants recommended that the event be hosted at The Eagle, a bar located in Wilton Manors, Florida. V. Biggs stated that there are five confirmed panelists for the event, and they all identify across the gender spectrum.

The committee agreed to forego a September community conversation and support the National Latinx AIDS Awareness Day by attending the Latinos in Action activity at Hunters Night Club in Wilton Manors, Florida.. Additionally, the committee discussed the possibility of having an event for World AIDS Day on December 1, 2022. After much discussion, CEC will continue brainstorming about partnering with other organizations for World AIDS Day. Specifically, the committee will discuss in a future meeting on whether to collaborate with Delta Sigma Theta Sorority, Inc. for the event.

Lastly, there will be a community conversation event in January 2023 with a working title called "Language Matters," in collaboration with Positive People Network, Inc. This event is centered around cultural competency and how to educate community members on new educational information related to HIV/AIDS. A. Tramel-McIntyre stated that she would be willing to attend the event in person as a community partner to promote HIV/AIDS educational awareness and address stigma. Additionally, the committee briefly discussed planning a community conversation event for February 2023. In future meetings, there will be more time dedicated to planning the event.

<u>Unfinished Business</u>

None.

New Business

During the meeting, committee members reviewed the CEC's FY2022-2023 Work Plan, which revealed that everything is on track for September.

Recipient's Report

There was no Recipient's report for this meeting.

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 Items for Next Meeting

The next CEC meeting will be held on October 6, 2022, at 3:00 p.m. at Broward Regional Health Planning Council and via WebEx Videoconference.

CEC Listening Sessions

Announcements

 Ruffner stated that on September 13, 2022, ArtServe is planning an event about HIV Serodifferent couples (one partner has HIV and the other does not). This is event is a partnership with the Sero Project, an organization in Orlando, Florida. The event organizer is looking for more Serodifferent couples to be a part of the event.

Adjournment

There being no further business, the meeting was adjourned at 4:24 p.m.

CEC Attendance for CY 2022

Consumer	PLWHA	Absences	Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun		Aug	Sep	Oct	Nov	Dec	Attendance Letters
				Meeting Date	4	1	1	5	3	CX	5	С					
1	1	0	1	Bhrangger, R.	Х	Х	Х	Х		NQX	Χ		Χ				
0	1	1	2	Biggs, V.	X	Х	Α	Χ		NQX	Χ		Χ				
0	0	1	3	Franks, H.	X	Х	Х	Χ		NQA	Χ		Χ				
0	0	1	4	Gunion, D.	Х	Х	Χ	Χ	X	NQA	Ε		Χ				
1	1	0	5	Marcoviche, W.	X	Χ	Χ	Χ	X	E	Χ		Χ				
0	1	1	6	Robertson, L.	X	Х	Χ	Χ	X	NQA	Χ		Χ				
0	0	0	7	Ruffner, A., V. Chair	Х	Χ	Χ	Χ	X	E	Ε		Χ				
0	0	0	8	Shore, R.	Х	Х	Χ	Χ	Е	NQX	Χ		Χ				
0	0	4	8	Wilson, I.	Α	Е	Α	Α	X	NQA R- 06/09		W- 03/02					
0	1	0		Castillo, J.	Х	Х	Χ	Χ	X	Z- 06/07							
1	1	1	9	Jackson, S., Chair	Α	Е	Х	Χ	N-4/28	NQX	Χ		Χ				
0	0	0		Magula, S	N	-03/2	24	Е	Х	Z- 05/05							
1	1	0		Lanear, A	N-03/24		Е	Е	Z-05/23								
1	1	2	10	Spencer, S	N-03/24 E A		Α	NQA Z-05/23									
5				Quorum = 6	9	9	9	10	10	4	7	0	9	0	0	0	

Legend:

X - present
A - absent
E - excused
NQA - no quorum absent
NQX - no quorum present
CX - canceled due to quorum
R - removal letter

Community Empowerment Committee Meeting Minutes – September 6, 2022 Minutes prepared by PCS Staff

HANDOUT A

	,
Leather Kink in Healthcare: What Your Provider Should Know	Date: October 18, 2022 Location: The Eagle Wilton Manors Guest Speakers: Von Biggs, James Lee, Blade Onyx, Christophe Leong, MsKitty, Miss Marion Twain In-Person Attendance: 110 people Virtual: 70 views (Facebook) & 5 views (Zoom)
Topics that were discussed	 Panelists discussed what the leather community stands for, what they exemplify, and stigmas that they experience when people discover they are part of this community. Stigmas need to be addressed about the community which should be done through more education via events, outreach, and networking. Educating the staff at the provider agencies on cultural competency for the leather community. Some members of the leather community do not feel comfortable when attending their scheduled appointments, and do not know the best way to communicate their risk factors with their provider. Not all providers are aware of the risk factors that members of the leather community have, and what activities they partake in which affects the care they provide. How to have open conversations with your provider to ensure you are receiving the best care possible, and not being afraid to change your providers until you find the one right for you. Members discussed boundaries that they set for themselves and how others can set the same based on their level of comfortability and pleasure. Resources that are available to the community such as the National Coalition for Sexual Freedom. Ways that providers can create a safe space for members of the leather community, including educating themselves, having leather friendly paraphernalia in their office, and participating in discussions. Panelists shared their thoughts on advocacy, particularly in rural areas and in the transgender communities. A key factor is to identify allies and resources nearby. The leather community would like more visibility to be able to voice their concerns and challenges.

Recommendations	 Create safe spaces for people who want to engage with the leather community but do not know how or where to start. Being open and honest with providers is the only way for growth and learning to take place. A second event like this should occur to be able
	 to continue this conversation. Having medical providers and other primary providers present is necessary to move in this conversation forward.

Community Empowerment Committee Listening Session

December 1 World AIDS Day	-	-	 Collaboration with WAM at the Galleria Candle Light vigil with Pride Center
January 2023	Language Matters	Positive People Network	 Event is centered around cultural competency and how to educate community members on new educational information related to HIV/AIDS.
February 2023	HOPWA Conversation	-	 How can HOWPA better serve our Ryan White Clients as it relates to housing? What are some activities or protocols HOWPA have in place to alleviate the housing crisis in Broward County?
February 2023	National Black HIV/AIDS Awareness Day	Ujima Men	TBA
March 2023	National Women and Girls HIV/AIDS Awareness Day	Positive People Network	 Why do Cis-Gender Black women have an increased risk of HIV in comparison to other race and ethnicities? What can be done to address the inequities that women living with HIV experience? Why is there resistance of PrEP usage in the Cis-Gender Black Women community? How can we promote positive sexual health education and relationship wellness amongst black women?