



FORT LAUDERDALE/BROWARD EMA
BROWARD HIV HEALTH SERVICES PLANNING COUNCIL
AN ADVISORY BOARD OF THE BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS
200 OAKWOOD LANE, SUITE 100, HOLLYWOOD, FL 33020
(954) 561-9681 • FAX (954) 561-9685

Broward County HIV Health Services Planning Council Meeting

Thursday, April 27, 2023 - 9:30 AM

Meeting at Broward Regional Health Planning Council and 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 10

DRAFT AGENDA

ORDER OF BUSINESS

I. CALL TO ORDER/ESTABLISHMENT OF QUORUM

II. WELCOME FROM THE CHAIR

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

III. PUBLIC COMMENT

IV. ACTION: Approval of Agenda for April 27, 2023

V. ACTION: Approval of Minutes from March 23, 2023

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

VII. STANDARD COMMITTEE ITEMS

- a. Discussion on the status of the Integrated HIV Prevention and Care Planning activities; (Quarterly)

VIII. CONSENT ITEMS

- a. None

IX. DISCUSSION ITEMS

- a. None

X. OLD BUSINESS

- a. Discuss the status of the Revised By-Laws (**Handout A**)

XI. NEW BUSINESS

- a. Overview: 2023 Biomedical HIV Prevention Summit, Las Vegas, April 11 – 12, Presented by Von Biggs, HIVCP Vice Chair (**Handout B**)
- b. Update on the Billing status of the Health Insurance Cost Sharing Program (HICP).

XII. COMMITTEE REPORTS

A. Community Empowerment Committee (CEC)

Chair: Shawn Jackson • Vice Chair: Irvin Wilson

April 4, 2023: No official CEC meeting was held. Members voted to join the FL Dept of Health's Black AIDS Advisory Group meeting.

- i. **Work Plan Item Update/Status Summary:** In place of the regular CEC meeting, CEC members joined the Black AIDS Advisory Group meeting on April 4th at 1:00 pm. The HIVPC and CEC Chairs presented an overview of the HIVPC and community outreach activities.
- ii. **Data Requests:** None
- iii. **Rationale for Recommendations:** N/A
- iv. **Data Reports/ Data Review Updates:** None
- v. **Other Business Items:** None
- vi. **Agenda Items for Next Meeting:** Community Conversations Planning; Presentation on Ryan White Part A Services; and ranking of Ryan White Part A Services.
- vii. **Next Meeting date:** May 2, 2023, at 3:00 PM at BRHPC and via WebEx Videoconference

B. System of Care Committee (SOC)

Chair: Andrew Ruffner • Vice Chair: Jose Castillo

April 6, 2023: Canceled

- i. **Work Plan Item Update/Status Summary:** None
- ii. **Data Requests:** None
- iii. **Rationale for Recommendations:** None
- iv. **Data Reports/ Data Review Updates:** None
- v. **Other Business Items:** None
- vi. **Agenda Items for Next Meeting:** To Be Determined
- vii. **Next Meeting date:** May 4, 2023, at 9:30 AM at BRHPC and via WebEx Videoconference

C. Membership/Council Development Committee (MCDC)

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

April 13, 2023: Canceled

- i. **Work Plan Item Update/Status Summary:** None
- ii. **Data Requests:** None
- iii. **Rationale for Recommendations:** None
- iv. **Data Reports/ Data Review Updates:** None
- v. **Other Business Items:** None
- vi. **Agenda Items for Next Meeting:** Review New Member Applications; Review Recruitment and Mentorship Plans
- vii. **Next Meeting date:** June 8, 2023, at 9:30 AM at BRHPC and via WebEx Videoconference

D. Quality Management Committee (QMC)

Chair: Bisiola Fortune-Evans • Vice Chair: Vacant

April 17, 2023 (Workshop Session)

- i. **Work Plan Item Update/Status Summary:**
CQM Support Staff reviewed the progress in accomplishing tasks in the fiscal year (FY) 2023-2024 CQM Annual Work Plan and it is up to date.

Two main projects are the System Mapping Project and the Provide Enterprise (PE)

training. For the System Mapping Project, the CQM team is conducting meetings with different stakeholders to create a visual that depicts how a client maneuvers throughout the Ryan White Part A system. For the PE training, the CQM team has gathered information from different Network providers to create a comprehensive PE training session that addresses the barriers to PE.

- ii. **Data Requests:** None
- iii. **Rationale for Recommendations:** None
- iv. **Data Reports/ Data Review Updates:**

CQM Support Staff went over notable trends with the committee, including the 6.5% increase in the overall retention which did not have an impact on the viral suppression rate. They highlighted that the transgender clients had a 4.73% increase in retention, while the viral suppression rate had a 5.94% decrease within the reporting period.

For Agency B, they wanted to increase medication adherence in clients aged fifty-nine and older to increase viral suppression from 71% to 73%. Their Plan Do Study Act (PDSA) cycle included increasing medication adherence with clients during medical appointments and improving pharmacist-patient relationships. Agency B exceeded their original aim of their QIP by 13% and they are looking into focusing interventions on aging and managing HIV.

For Agency E, their aim was to increase the reportability of viral suppression by improving their data entry into PE. The results showed that they did not meet their viral suppression goal of 92%, they were successful in increasing their viral suppression rates from 424 to 471 individuals. They will continue to monitor data and report data discrepancies to PE.

Agency I's aim was to increase the utilization of legal services from FY2021-2022 quarter two and three to FY2022-2023 quarter three by 6%. Their PDSA cycle consisted of increasing outreach activities to inform case managers of legal services and providing in-person and remote office appointments to help address client barriers. The results showed an increase in service utilization for the months of August and September 2022. The retention rate also went up 5% from quarter three FY2021-2022 to quarter three FY2022-2023. Agency I will continue to adopt this QIP and use various outreach methods.

Agency J focused on increasing in-care retention rates among Black women between the ages of 36 and 45 years old from 88% to 90% by December 2022. The PDSA cycle included activities such as referring clients to mental health and case management services, providing transportation services for clients, and identifying barriers that lead to non-compliance within this patient population. The results showed that they did not reach their aim, but they were able to re-engage two out-of-care patients back into medical care, case management, and mental health counseling. They plan to adopt this QIP cycle into their current patient care plans.

- v. **Other Business Items:**
The Recipient's Office announced that there are some issues with the retention in-care data in PE and GTI are currently fixing the coding issues.
- vi. **Agenda Items for Next Meeting:** To Be Determined
- vii. **Next Meeting date:** May 22, 2023, at 12:30 PM at BRHPC and via WebEx Videoconference

E. Priority Setting & Resource Allocation Committee (PSRA)

Chair: Brad Barnes • Vice Chair: Vacant

April 20, 2023, Canceled

- i. **Work Plan Item Update/Status Summary:** None
- ii. **Data Requests:** None
- iii. **Rationale for Recommendations:** None
- iv. **Data Reports/ Data Review Updates:** None
- v. **Other Business Items:** None

- vi. **Agenda Items for Next Meeting:** May 11th: Ryan White Funders and Stakeholders' presentations/May 18th: Data Presentations -HIV Surveillance Epidemiology, Part A Client Health Outcomes, Service Utilization Scorecard; Needs Assessment; CEC Service Ranking Results.
- vii. **Next Meeting date:** May 11, 2023 (*Rescheduled due to canceled April meeting*) and May 18, 2023, at 9:00 AM via WebEx Videoconference

F. Ad-Hoc Term Limits

Chair: Brad Barnes • Vice Chair: Vacant

April 14, 2023

i. **Work Plan Item Update/Status Summary:**

Committee members reviewed and discussed the Broward County Term Limits Resolutions which were submitted and approved by the Board of County Commissioners.

The Broward County Term limits speak on establishing the terms limits as well as membership and rotations to ensure that each planning council reflects the demographics of the jurisdiction with HIV. Council members shall be appointed for a three-year term. Following any three consecutive terms, an individual is ineligible to serve for one year, after which the individual may be reappointed to the Council.

Committee members agreed to adopt a similar language from Boston's EMA to assist the committee to develop their own language for the Term Limits Policy and Procedures. Voting on the new language for HIVPC Term Limits Policy and Procedures did not take place at this time.

- ii. **Data Requests:** None
- iii. **Rationale for Recommendations:** None
- iv. **Data Reports/ Data Review Updates:** None
- v. **Other Business Items:** None
- vi. **Agenda Items for Next Meeting:**

For the next Ad-Hoc Term Limits Committee Meeting, reviewing, and adding the By-Law will be discussed. PCS Staff will divide members into 3 different tiers by years of service to present to the planning council as a starting point. Further discussion on what will be the policy and procedures will be discussed.

- vii. **Next Meeting date:** May 12, 2023; at 1:00 p.m. Location TBD

G. Executive Committee

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

April 20, 2023

- i. **Work Plan Item Update/Status Summary:** The Executive Committee discussed the progress of developing Term Limits policies and procedures for existing and new members.
- ii. **Data Requests:** None.
- iii. **Rationale for Recommendations:** None.
- iv. **Data Reports/ Data Review Updates:**
- v. **Other Business Items:** Dr. Martinez updated the members on the status of the Integrated HIV Prevention and Care Planning activities. Lastly, PCS Staff presented the HIVPC Quarterly Evaluations. PCS staff intends on changing the evaluation submission process from paper to virtual by utilizing Alchemer.
- vi. **Agenda Items for Next Meeting:** To be Determined.
- vii. **Next Meeting date:** May 18, 2023, at 1:30 PM at Ujima Men's Collective Conference Room and via WebEx Videoconference

XIII. RECIPIENT REPORTS

- a. Part A
- b. Part B (**Handout C**)
- c. Part C
- d. Part D
- e. Part F
- f. HOPWA
- g. Prevention – Quarterly Update (**April**, July, October, January) (**Handout D**)

XIV. PUBLIC COMMENT

XV. AGENDA ITEMS FOR NEXT MEETING

- a. Next Meeting Date: May 25, 2023, at 9:30 a.m. at BRHPC and via WebEx

XVI. ANNOUNCEMENTS

XVII. ADJOURNMENT

*For a detailed discussion on any of the above items, please refer to the minutes available at:
[HIV Planning Council Website](#)*

Please complete your [meeting evaluation](#).

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

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

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

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



Broward County Board of County Commissioners

Mayor Lamar P. Fisher • Vice Mayor Nan H. Rich • Mark D. Bogen • Michael Udine • Steve Geller
Beam Furr • Tim Ryan • Robert McKinzie • Hazelle P. Rogers

[Broward County Website](#)



May 2023



Broward HIV Health Services Planning Council Calendar

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<p>All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change.</p> <p>Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1244/1343. Visit http://www.brhpc.org for updates.</p>						
	1	2 <u>Community Empowerment Committee Meeting (CEC)</u> 3:00 PM – 5:00 PM Location: BRHPC	3	4 <u>System of Care Committee Meeting (SOC)</u> 9:30 AM – 11:30 AM Location: BRHPC/WebEx	5 South Florida AIDS Network Meeting (SFAN) 10:00 AM Disease Case Management Network Meeting 2:30 PM – 3:45 PM	6
7	8	9	10	11 <u>PSRA Committee Meeting</u> 9:00 AM – 11:00 PM Location: WebEx April's Meeting Rescheduled	12 <u>AdHoc Committee Meeting</u> 1:00 PM – 3:00 PM Location: BRHPC/WebEx	13
14	15	16	17 Quality Network Meeting 9:00 AM – 10:15 AM	18 <u>PSRA Committee Meeting</u> 9:00 AM – 1:00 PM Location: WebEx <u>Executive Committee Meeting</u> 1:30 PM – 3:30 PM Location: Ujima Men's Collective Conference Room/WebEx	19	20
21	22 <u>Quality Management Committee Meeting (QMC)</u> 12:30 PM – 2:30 PM Location: BRHPC/WebEx	23	24	25 <u>HIV Planning Council (HIVPC) Meeting</u> 9:30 AM – 11:30 AM Location: BRHPC/WebEx	26	27
28	29	30	31			

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

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



May 2023



Broward HIV Health Services Planning Council Calendar

All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change. Unless otherwise noted, meetings will be held via WebEx. Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1292 or 1343. Visit <http://www.brhpc.org> for updates.

TODOS ESTAN BIENVENIDOS!

ALL ARE WELCOME!

BON VINII!

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

Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020

Para confirmar información acerca de la reunión de Consejo de Planeación HIV, o confirmar la reserva de servicios especiales tales como: Traducción Inglés a Español o a Criollo (Haitiano), servicios para discapacitados en visión o audición, por favor llame con 48 horas de antelación para que puedan hacerse los arreglos necesarios.

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

Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020

To confirm HIV Planning Council meeting information, or reserve special needs services such as Translation from English to Spanish or Creole, or are hearing or visually impaired, please call 48 hours in advance so that arrangements can be made for you.

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

Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020

Pou konfime enfòmasyon ou 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

HIV Health Services Planning Council (HIVPC) - Monitors, evaluates, and continuously improves systematically the quality and appropriateness of HIV care and services provided to all patients receiving Part A and MAI-funded services.

Executive Committee - Sets agenda for Council meetings, addresses conflict of interest issues, reviews attendance reports, oversees the planning activities established in the Comprehensive Plan, oversees committee work plans, reviews committee recommendations, ratifies recommendations for removal for cause, and addresses unresolved grievance issues.

Priority Setting Resource Allocation (PSRA) Committee - Recommends priorities and allocation of Ryan White Part A funds. Facilitates the Priority Setting and Resource Allocation Process to include the review of appropriate data (service utilization, epidemiological data). Develops, reviews, and monitors eligibility, service definitions, as well as language on 'how best to meet the need.

Quality Management Committee (QMC) - Ensures highest quality HIV medical care and support services for PLWHA by developing client and system-based outcomes and indicators. Provides oversight of standards of care, develops scopes of service for program evaluation studies, assesses client satisfaction, and provides QM staff/client training/education.

Membership/Council Development Committee (MCDC) - Recruits and screens applications based on objective criteria for appointment to the Council in order to ensure demographic requirements of the Council are maintained according to the Ryan White Treatment and Modernization Act. Presents recommendations to the Council. Institutes orientation and training programs for new and incumbent members.

Community Empowerment Committee (CEC) - Encourages the participation of individuals infected and affected with HIV/AIDS in the planning, priority-setting and resource-allocation processes. Function as a primary level of appeal for unresolved grievances relative to the Council's decisions regarding Ryan White Part A funding.

System of Care (SOC) Committee - Evaluates the system of care and analyzes the impact of local, state, and federal policy and legislative issues impacting PLWHA in the Broward County EMA. Plans and addresses coordinated care across diverse groups by engaging community resources to eliminate disparities in access to services.

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 priorite 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.

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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HIV Health Services Planning Council

Thursday, March 23, 2023 - 9:30 AM

Meeting at Broward Regional Health Planning Council and via [WebEx](#)

DRAFT MINUTES

HIVPC Members Present: L. Robertson (HIVPC and Executive Chair), R. Bhrangger, W. Marcoviche, A. Cutright, V. Foster (MCDC Chair), T. Moragne (MCDC Vice-Chair), J. Castillo (SOC Vice-Chair), J. Rodriguez, B. Fortune-Evans (QMC Chair), E. Dsouza, S. Jackson-Tinsley (CEC Chair), A. Ruffner (SOC Chair), B. Barnes (PSRA Chair), I. Wilson (CEC Vice Chair), R. Jimenez

Members Absent: J. Casseus, V. Biggs (HIVPC and Executive Vice-Chair)

Ryan White Part A Recipient Staff Present: T. Thompson, T. Currie

Planning Council Support Staff Present: G. Berkley-Martinez, B. Miller, D. Liao, M. Patel, N. Del Valle

Guests Present: B. Mester, R. Honick, K. Kirkland-Mobley, E. Davis, M. Cassini, M. Schweizer, A. Abdool, S. Cook

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

The HIVPC Chair called the meeting to order at 9:33 a.m. The HIVPC Chair welcomed all meeting attendees that were present. Attendees were notified that the HIVPC 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 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. L. Aguilar, on behalf of the University of Miami, announced regional training opportunities for health care providers on an array of topics involving mental health.

Meeting Approvals:

The approval for the agenda of the March 23, 2023, HIVPC meeting with amendments was proposed by *V. Foster*, seconded by *W. Marcoviche*, and passed unanimously. The approval for the minutes of February 23, 2023,

meeting as presented, was proposed by *V. Foster*, seconded by *A. Cutright*, and passed unanimously.

Motion #1: *V. Foster*, on behalf of HIVPC, made a motion to approve the March 23, 2023, HIV Health Services Planning Council agenda with amendments. The motion was seconded by *W. Marcoviche* and adopted unanimously.

Motion #2: *V. Foster*, on behalf of HIVPC, made a motion to approve the February 26, 2023, HIV Health Services Planning Council meeting minutes with the correction of the PSRA Chair as presented. The motion was seconded by *A. Cutright* and adopted unanimously.

Federal Legislative Report:

M. Cassini shared the release of the President's budget and how the numbers have increased. However, this is a suggested budget and Congress will have to further discuss the appropriation bills. Lastly, *M. Cassini* shared that the reappointment of *M. Schweizer* will take place on April 4th at the Broward County Commissioners regular meeting along with new appointments.

Consent Items:

Motion #3: The Priority Setting & Resource Allocation Chair, *B. Barnes*, made a motion to reinstate Dr. M. Schweizer to the PSRA Committee which was seconded by *J. Rodriguez* and adopted unanimously.

The motion to approve the consent items was passed unanimously.

Discussion Items:

None.

Old Business:

- The Status of the MOU with the Ryan White Part A Office has officially been executed.
- The Revised By-Laws have been sent to the county office and further steps are on hold.
- The Ad-Hoc Committee on Term Limits will be meeting in the month of April with *B. Barnes*, *L. Robertson*, *J. Castillo*, *Dr. T. Moragne*, and *V. Foster*.

New Business:

- The Integrated HIV Prevention and Care Planning will be meeting on March 30th at 2:00PM.
- The Ryan White Part A Virtual Site Visit by HRSA will be taking place on June 5th at 1:00PM. The meeting with PWH/Part A Consumers will also take place on this day at 3:00PM.
- The Ryan White Part A Providers' Quality Improvement Projects FY 2022-2023 was presented by *D. Liao* and *B. Miller*.

Committee Reports

a. Community Empowerment Committee – March 7, 2023

Chair: S. Jackson, Vice Chair: A. Ruffner

The report stands.

b. System of Care Committee – March 2, 2023.

Chair: A. Ruffner, Vice Chair: Jose Castillo

The report stands.

- c. **Membership/Council Development Committee – No Meeting**
Chair: V. Foster, Vice Chair: T. Moragne
The report stands.
- d. **Quality Management Committee – March 20, 2023**
Chair: B. Fortune-Evans, Vice Chair: Vacant
The report stands.
- e. **Priority Setting & Resource Allocation Committee – March 16, 2023**
Chair: B. Barnes, Vice Chair: V. Moreno
The report stands.
- f. **Executive Committee – March 16, 2023**
Chair: L. Robertson, Vice Chair: V. Biggs
The report stands.
- g. **Ad-Hoc By-Laws and MOU Committee – No Meeting**
Chair: B. Barnes, Vice Chair: Vacant
The report stands.

Recipient's Report

- a. **Part A:** There was no Part A report for this meeting.
- b. **Part B:** The Part B Recipient provided a report showcasing expenditures from the February 2023 ADAP Report, the Ryan White Part B service category expenditures for February 2023, and Broward County enrollments and re-enrollments by the total of selected counties and areas.
- c. **Part C:** The Part C Representative reported that the mental health crisis has increased due to environmental stressors.
- d. **Part D:** The Part D representative reported that they are still actively searching for a full-time provider for HIV patients.
- e. **Part F:** There was no Part F report for this meeting.
- f. **HOPWA:** From the remaining funds of the previous fiscal year, HOPWA is taking steps to invest in two housing projects for clients living with HIV. Of the two facility based proposal, the Board of Commissions approved one proposal while the second proposal, which involves a capital investment project, is being considered pending further information.
- g. **Prevention:** There was no Prevention Report for this meeting.

Public Comment
None.

Agenda Items for Next Meeting

The next HIVPC meeting will be held on April 27, 2023, at 9:30am. Location: Broward Regional Health Planning Council.

Announcements:

- S. Tinsley: On April 4th, the CEC will have a joint presentation with BAAG to increase awareness of the HIVPC Activities and Membership.
- S. Tinsley: On April 19th, the CEC will host a Community Conversation: HOPWA Housing Event at the World AIDS Museum.
- S. Tinsley: Announced on behalf of CEC's Language Matters training sessions will be available in-person and virtual.
- B. Barnes: Announced Aging into Medicare presentation at Poverello on March 28th at 2:00PM.
- A. Ruffner: Announced on March 28th, School Board Meeting regarding the policy surrounding sex education in schools will convene and a final vote will be held in April.
- S. Cook: SFAN has been rescheduled to April 14th at 10:00AM.

- M. Schweizer: Highlighted that the use of illicit substances are increasing at a rapid rate among the community.
- L. Robertson: Ujima’s Men Collective will be hosting a Community Conversation event on April 5th, 2023, to discuss on Being Woke in the State of Florida at the YMCA.

Adjournment

There being no further business, the meeting was adjourned at 10:59am.

HIVPC Attendance for CY 2022 -2023

Consumer	PLMHA	Absences	Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
				Meeting Date	26	23	23										
0	1	1	1	Barnes, B.	A	X	X										
1	1	0	2	Bhrangger, R.	X	X	X										
0	1	1	3	Biggs, V., V.Chair	X	X	A										
0	0	0	4	Cutright, A.	X	X	X										
0	0	0	5	Fortune-Evans, B.	X	X	X										
0	0	0	6	Foster, V.	X	X	X										
1	1	0	7	Marcoviche, W.	X	X	X										
0	0	0	8	Moragne, T.	X	X	X										
0	1	0	9	Robertson, L., Chair	X	X	X										
0	0	0	10	Rodriguez, J.	X	X	X										
0	0	1	11	Ruffner, A.	A	X	X										
0	0	0	12	Schweizer, M.			X										
0	0	0	13	Wilson, I.	X	X	X										
0	1	0	14	Jackson-Tinsley, S.	X	X	X										
0	1	0	15	Castillo, J.	X	X	X										
0	0	0	16	Dsouza, E.	X	X	X										
0	0	1	17	Jimenez, R.	X	A	X										
0	0	3	18	Casseus, J.	A	A	A										
2	7			Quorum = 10	14	13	16										
11%	39%																

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	R - removal letter
CX - canceled due to quorum	

HIV Health Services Planning Council Meeting Minutes – March 26, 2023
 Minutes prepared by PCS Staff

**By-Laws of the
Broward County HIV Health Services Planning Council
Amended February 23, 2023**

REVISION HIGHLIGHTS

Article II; Sections 2 & 3	Added Mission and Vision Statements
Article IV; Section 7	Added a statement regarding “Term Limits.”
Article IV; Section 12A	Added language that clarifies the process for the removal of members and alternates.
Article IV; Section 12 F, G, & H	Added language clarifying: <ul style="list-style-type: none">• The process when switching from Affiliated to Unaffiliated status.• The process for seat changes.• Members’ participation in outreach and training activities.
Article VII; Section 1	Added language regarding submission of the conflict-of-interest form.
Article VIII; Section 11	Added language clarifying the Integrated HIV Prevention and Care Planning Group and the Joint Planning Body.
Article X; Sections 5 & 6	Added language: <ul style="list-style-type: none">• On the frequency of reviewing the By-Laws.• Virtual Meetings.



BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL

BY-LAWS

Last amended: February 23, 2023

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

Adopted: January 1992

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, August 2017, October 2018, February 2023

ARTICLE I

NAME AND AREA OF SERVICE

SECTION 1: The name of the Planning Council shall be “The Broward County HIV Health Services Planning Council” (Council) or such successor name as may be designated by the Broward County Board of County Commissioners.

SECTION 2: The area served by the Council shall be Broward County, Florida. The governing body of Broward County is the Broward County Board of County Commissioners.

SECTION 3: The Council is established by a resolution of the Board of County Commissioners codified in Part X of Chapter (12 of the Broward County Administrative Code as amended by the Board of County Commissioners.

ARTICLE II

PURPOSE, MISSION, VISION, AND DUTIES

SECTION 1: The purpose of the Council is to provide planning to promote the development of HIV/AIDS health services, personnel, and facilities that meet identified health needs in a cost-effective manner, reduce inefficiencies, and develop HIV-related health plans.

SECTION 2: The Council's mission is to ensure optimal HIV care and treatment for low-income and uninsured people with improved health outcomes.

SECTION 3: The Council's vision is that no resident of Broward County acquires HIV. However, when new cases of HIV occur, every person, regardless of age, gender, race/ethnicity, sexual orientation, gender identity, or socio-economic circumstance will have full access to optimal HIV care, free from stigma and discrimination.

SECTION 4: The duties of the Council shall be those specified by the Ryan White Act.

ARTICLE III

DEFINITIONS

1. *Ad-Hoc Committee* means a committee established for a limited time or limited and definite purpose.
2. *Alternate* means a person appointed by the Board that may be called upon to participate as a voting member of the Council upon the occurrence of certain conditions.
3. *Board* means the Broward County Board of County Commissioners.
4. *Cause* means an action determined by the Council as a basis for discipline or removal from the Council or a Committee.
5. *Committee* means a committee established by the Council in furtherance of Council business.
6. *Community Stakeholder* means representatives from Ryan White Part B, C, D, or F, Prevention, or representatives of HIV/AIDS care in the community, including but not limited to consumers, providers, and regulators.
7. *Consumer* means a person who is an eligible recipient of services under the Ryan White Act.
8. *Council* means the Broward HIV Health Service Planning Council created in Chapter 21, Part X, Broward County Administrative Code, and mandated by the Ryan White Act, Part A.
9. *EMA* means Eligible Metropolitan Area.
10. *Ex officio* means a committee member who does not have a vote on that committee and does not count as quorum.
11. *Manual* means the Council's Local Policies and Procedures Manual.

12. *Member* means a person appointed to the Council by the Board.
13. *Non-Elected Community Leader* means someone active in the community not elected in formal governmental elections.
14. *PWH/PWHA* means a person with HIV Disease or AIDS.
15. *Part A* means the Ryan White Act, Part A, administered by the County with advice from the Council.
16. *Ryan White Act* means the Ryan White HIV/AIDS Treatment Extension Act of 2009.
17. *Unaffiliated Consumer* means individuals who are receiving HIV-related services from Ryan White-funded service providers and not compensated by, representative of, or employed by a provider funded under the Ryan White Act.
18. *Work Group* means a group that has a specific task and makes recommendations but does not follow attendance, membership, or quorum requirements.

ARTICLE IV

MEMBERSHIP

SECTION 1: Appointment to the Council

- a) All Members and Alternates of the Council shall be appointed by the Broward County Board of County Commissioners.
- b) The Council shall consist of not less than twenty (20) members nor more than thirty-five (35) members.
- c) The process for forwarding recommendations to the Board is outlined in the Membership/Council Development Committee Section of the COUNCIL Local Policies and Procedure Manual.

SECTION 2: An individual may serve on the Council only if the individual agrees that the individual has a financial interest in an entity if the individual is an employee of a public or private entity, or if the individual is a member of a public or private organization, and such entity or organization is seeking amounts from a grant under the Ryan White Act, the individual will not, with respect to the purpose for which the entity seeks such amounts, participate (directly or in an advisory capacity) in the process of selecting entities to receive such amounts for such purposes.

SECTION 3: The membership of the Council shall be as delineated in the Ryan White Act, as amended.

SECTION 4: Recruitment Efforts

Affirmative recruitment efforts shall be made to attract eligible candidates for membership on the Council and the committees with particular attention to gender balance and adequate representation from racial and ethnic minorities that is reflective of the EMA.

SECTION 5: HIV Representation

As part of the Council's efforts to increase the percentage of persons with HIV, it is recommended that the Council strive, whenever possible, to nominate persons living with HIV disease to vacancies in all other categories as appropriate.

SECTION 6: Office Term.

The term of office for members and alternates shall be at the pleasure of the Broward County Board of County Commissioners.

SECTION 7: Term Limits.

The Planning Council will follow any Broward County direction regarding term limits.

SECTION 8: Attendance: Council and Committee.

Attendance of Council meetings shall be in accordance with the Broward County Code of Ordinances section 1-233. The Council may recommend reappointing members who were removed pursuant to the Broward County Code of Ordinances section 1-233. The committee attendance policy mirrors the Council attendance policy. The Chair of the Council shall, at their discretion, determine whether the member's absence meets any of the criteria for an excused absence as set forth in Broward County Code of Ordinance section 1-233. Excused absences for COUNCIL-related business mean business outside the regular time and place of COUNCIL business. Failure to adhere to attendance requirements shall be grounds for removal from the Council or committees.

SECTION 9: Designation of Alternates.

There shall be a minimum of at least three persons living with HIV that reflect the demographics of the epidemic in the County who shall serve as

Alternates, appointed and approved by the Broward County Board of County Commissioners.

- a) An Alternate may only serve as a voting member of the Council when a member with HIV is unable to serve due to HIV-related illness. In such case, the Chair shall appoint an alternate who, to the greatest extent possible, matches the gender, race, and ethnic background of the individual with HIV that is absent. Thereafter, alternates, as directed by the Chair, shall alternate their substitution for PWH members unable to serve due to HIV-related illness.
- b) Alternates may be appointed by the chair as voting members only after Quorum has been established. Alternates may be removed from their seats as described in Section 11 below.

SECTION 10: Membership on a Standing Committee.

Council members and Alternates shall be a member of at least one standing committee. Failure to participate on a standing committee within thirty (30) days shall be grounds for removal from the Council.

SECTION 11: Meeting Ground Rules.

All persons in attendance at a meeting of the Council and Committees shall comply with the meeting ground rules adopted by the Council.

SECTION 12: Removal of Members and Alternates

- A. Removal of Council members and alternates shall be in accordance with the Broward County Code of Ordinances section 1-233:
 - 1. Board meetings on a quarterly or less frequent basis:** Members will be removed after two (2) consecutive unexcused absences or missing two (2) properly noticed meetings in one (1) calendar year.
 - 2. Board meetings more frequently than quarterly:** Members will be removed after three (3) consecutive unexcused absences or missing four (4) properly noticed meetings in one (1) calendar year. If the committee has a joint meeting same attendance policy applies.
- B. **Procedure for removal.** If a member or alternate fails to comply with Paragraphs B or C, or for reasons documented in Paragraph D, the Council shall recommend to the Broward County Board of County Commissioners the removal of that Member or Alternate. A recommendation of removal is based upon a majority vote of the Council members in attendance at a meeting at which Staff has provided written notification to the member or alternate recommended for removal that such item will be on the meeting's agenda. Unaffiliated members and alternates may also be automatically

removed for reasons outlined in Paragraph E.

C. Recommendation for Removal by Council.

- a) The Council shall recommend that a member or alternate be removed from service on the Council for refusing to cooperate in a conflict-of-interest review, or when it is determined that the member or alternate knowingly acted intended to influence the conduct of the Council in a manner as defined in ARTICLE IV, SECTION 2 of these By-laws.
- b) The Council shall terminate from service any committee member who is not also a Council member for refusing to cooperate in a conflict-of-interest review, or when it is determined that the member knowingly acted intended to influence the conduct of the Council in a manner as defined in ARTICLE IV, SECTION 2 of these By-laws.
- c) The Council shall recommend that a member or alternate be removed from the Council for, but not limited to, failure to comply with County regulations or the Council Local Procedures Manual, failure to comply with meeting ground rules, or failure to maintain committee membership.

D. Recommendation for Removal by Individual Council Members. A Council Member, Council Chair, or Committee Chair may recommend removal for cause of a member or alternate by forwarding to the Membership Committee said recommendation, documenting the reasons for requesting removal. The Membership Committee will review the evidence and make recommendations to the Executive Committee. The Executive Committee will review the recommendation and forward the recommendation to the Council. The final decision to remove a member or alternate must be ratified by the Planning Council. Once ratified, the Planning Council will forward all recommendations for removal to the Board of County Commissioners.

E. Automatic Removal. A member or alternate shall be automatically removed from the Council for failure to comply with attendance policies as outlined in ARTICLE IV, SECTION 8 of these By-laws. A member or alternate shall be automatically removed from the Council in accordance with the Broward County Administrative Code Section 12.108c.

F. Affiliated to Unaffiliated Status. Members changing from affiliated

status to unaffiliated status can be appointed by majority vote from one seat to the other without resigning from the Council. An official letter stating that the Council has voted to appoint the member in the new position with an updated application must be secured and submitted to the Intergovernmental Affairs/Board Section of the Broward County Board of Commission within ten (10) business days.

- G. **Seat Change.** MCDC and the Council shall be notified of changes to representation involving members of the Council holding a mandated seat due to their employment. Such changes shall be informational and immediately forwarded to the Broward County Board of County Commissioners.
- H. **Member participation in outreach and training activities.** Members are expected to participate in a minimum of two (2) Council outreach and training activities per calendar year.

ARTICLE V

OFFICERS

SECTION 1: The officers of the Council shall be members of the Council and shall be a Chair and a Vice Chair.

SECTION 2: ELECTIONS

- A. **Election of Officers** shall utilize a majority vote double election system (primary election and a secondary run-off election). Officers shall be elected by the majority vote of those members or alternates serving as members of the Council present and voting at the meeting during which the election is held.
- B. **Regular Biannual Elections.** Regular biannual elections will take place every two years. The ad-Hoc Nominating Committee shall present a slate of candidates for consideration as described in the ad-Hoc Nominating procedure. The Officers shall take office on March 1 or at the first Council meeting of the calendar year. All Officers shall serve a two-year term and shall remain in office until a successor is selected. No officers shall serve more than two consecutive terms in one office.
- C. **Special Elections.** Special Elections will take place as needed. In the event of resignation or other reason for vacating the Chair or Vice Chair positions, a special election will be held following the procedures outlined in Nominating Procedure (Article VIII, Section 3, Part A). Until the election is held, the Council will adhere to the line of succession outlined in Article VI, Section 8. Individuals elected by virtue of special election will not be considered to have served a full term, and this service will not impact the individual's ability to run for two additional terms.

SECTION 3: **The Duties of the Officers** are those which usually apply to such officers and in addition thereto, such other duties as may be designated from time to time by the Council.

SECTION 4: **The Official Liaison.** The Chair of the Council will serve as the official liaison of the Council with the Broward County Board of County Commissioners and its designated administrative entity. No other Member of the Council or its committees may speak for the Council.

SECTION 5: **Council Officers.** Except for the Executive Committee, the current Council officers may not serve as Chair or Vice Chair of any Council committee while holding office.

SECTION 6: **Acting Committee Chair.** Upon proper notice to the committee, the Council Chair or Vice Chair may sit as acting chair of the committee when the Committee Chair or Vice Chair is unable to attend a properly scheduled meeting of the committee. In the event the Council Chair or Council Vice Chair is serving as acting committee chairs, they count towards quorum and have a vote. If the Council Chair or Vice-Chair attends as a guest for a committee meeting, the Chair or Vice-Chair can count toward quorum if needed.

ARTICLE VI

MEETINGS

SECTION 1: Meeting Protocol

- a) The Council shall meet at least nine (9) times per fiscal year (March 1 – February 28).
- b) Special meetings may be called by the Chair or upon petition of one-third of the membership of the Council.
- c) Written notice shall be given at least one week prior to each meeting.
- d) All HIV Planning Council meetings are open to the public.
- e) Attendance at mandatory Training Activities is also part of Council attendance requirements.

SECTION 2: Quorum

- a) Fifty percent (50%) of the members plus one shall constitute a quorum for the HIV Planning Council, and all standing and ad-Hoc

- Committees, but with no less than 3 members voting.
- b) Once a quorum has been established by members physically present at a meeting, members who are not physically present may attend and participate in such meetings by telephone or video. Quorum should be established within fifteen minutes of the meeting time.
 - c) A majority of Members present and voting at any meeting at which a quorum is present shall be sufficient to act on behalf of the Council.
 - d) The number of Members needed to determine quorum shall be the total number of Members of the Council, not including the Member representing the Broward County Board of County Commissioners.

SECTION 3: Voting Privileges

- a) Only duly appointed Members of the Council and/or committee (or the appointed Alternate in their absence) may vote, and each Member (or Alternate) shall have one vote.
- b) Voting privileges are non-transferable. In the event of a tie vote, there shall be a roll call vote and the Chair shall vote last.

SECTION 4: Public Notice of Council Meetings

- a) Public notice of Council meetings shall be given in accordance with Florida Statutes and Broward County Ordinances.
- b) Meetings shall be open to the public.
- c) Records and data shall be made available to the public under the applicable laws.
- d) Minutes of each meeting of the Council or Committee shall be kept.
- e) The accuracy of all minutes shall be certified by the Chair of the Council and/or committees.

SECTION 5: COUNCIL AGENDAS

- A. The Executive Committee shall meet five (5) working days before the regularly scheduled full Council meeting. The Executive Committee (or in the absence of Executive Meeting action), the Council's Designated Staff Member shall prepare an agenda for full Council meetings based upon the following:
 - a) Each committee chair, the Recipient, or the Council Support Staff will inform the Executive Committee (or Council Designated Staff Member) of committee recommendations and other actions to be presented for the full Council's approval.
 - b) Motions passed by Committees may be sponsored by the Chair of the Committee on behalf of the Committee and annotated on the Council

Agenda as sponsored by the Committee.

- c) Individual Members of the Council may request action items be placed on the agenda by providing them in writing to the Council Designated Staff Member before the Executive Committee meeting.
- d) Members of the public who wish to bring matters before the full Council for consideration must obtain sponsorship of the item by a Member of the Council.
- e) Requesters of Council actions must provide appropriate backup documentation to explain the requested action.
- f) The Executive Committee may refer proposed actions to the appropriate committee to examine and make a recommendation before presenting the matter to the full Council for action.
- g) Proposed motions requiring the full Council's vote shall be listed on the agenda and sent to members 48 hours before the full Council meeting.
- h) At the Executive Committee's discretion, backup documentation will be labeled and distributed with the Council's agenda.
- i) At the discretion of the Council Chair, action items requested at the Council meeting, not on the published agenda, may be added to the agenda's old/new business portion of the agenda, deferred until the next Council meeting, or referred to the appropriate committee.

B. The Council agenda shall include: Call to Order, Welcome, and Self-introductions (includes an explanation of Ground Rules, Sunshine Law, and HIV self-disclosure), Moment of Silence, Excused Absences and Appointment of Alternates, Adoption of Agenda, Approval of Minutes, Consent Items, (no discussion required), Discussion Items (discussion required), Committee Reports, Recipient and Other Reports (including, but not limited to Part A, Part B, Part C, Part D, Part F, HOPWA, Prevention), Old/New Business, Public Comment, Announcements, Next Meeting Date, Agenda Items for the Next Meeting, Adjournment. The Executive Committee may order agenda items for the efficient and effective administration of the Council's business.

C. The Executive Committee (or Council Chair in the absence of the Executive Committee) will determine the order of discussion action items in the agenda.

SECTION 6: All persons in attendance of a meeting of the Council or Committee shall comply with the meeting ground rules adopted by the Council.

SECTION 7: TIME LIMITS

The Executive Committee will establish time limits for each agenda item for each meeting. The Chair may use discretion to impose time limits on each speaker, to be consistently applied. Upon expiration of the time for discussion of a particular action item, the Chair shall close the debate and call for a vote. A person who has spoken once on a pending matter may not speak again on that matter until all others requesting the floor have been recognized.

SECTION 8: LINE OF SUCCESSION

In the event, the Chair and the Vice Chair do not attend the Council Meeting and neither the Chair nor the Vice Chair has notified the Council that they are not attending the Council Meeting, the immediate past chair, if present and a member of the Council, shall chair the meeting.

- A. In the absence of the immediate past chair the Council meeting may be chaired by Committee Chairs, in the following order:
1. Chair of Priority Setting and Resource Allocation
 2. Chair of Membership/Council Development
 3. Chair of Community Empowerment
 4. Chair of Quality Management
 5. Chair of System of Care
- B. In the event of a vacancy of the Planning Council Chair or Vice Chair position, the duties of the Chair or Vice Chair will be assumed by the immediate past chair. If the immediate past chair is no longer a member of the Planning Council, duties will be assumed in the following order:
1. A past Planning Council Chair
 2. Chair of Community Empowerment
 3. Chair of Priority Setting and Resource Allocation
 4. Chair of Quality Management
 5. Chair of System of Care
 6. Chair of Membership/Council Development

Pursuant to the revised paragraph C, the order of assumption of duties is prescribed for the following reason: a third party oversees the special election process, during which the current Chair or Vice Chair may participate. Duties will be assumed upon the Chair or Vice Chair vacancy until the vacancy is filled by a special election as outlined in Article V, Section 2C.

ARTICLE VII

CONFLICT OF INTEREST

- SECTION 1:** Members and Alternates of the Council and all committees established by the Council shall abide by the Florida Statutes, Broward County Ordinances, and Administrative Code, as may be amended from time to time, regarding conflicts of interest for public officials and the Government in the Sunshine Law. Copies of these documents shall be furnished to all Council Members and Alternates. Each member must submit the conflict of interest form at the beginning of the fiscal year and declare their conflict at each Council and PSRA committee meeting.
- SECTION 2:** The Executive Committee of the Council shall be authorized to formulate Council policy, review all concerns, and make recommendations to the full Council regarding conflict-of-interest issues.
- SECTION 3:** All Council members and alternates must identify conflicts of interest and are encouraged to request a review of a potential conflict of interest for themselves or of another Member or Alternate.
- SECTION 4:** All concerns regarding conflict of interest shall be recorded in the Council's meeting minutes and referred to the Executive Committee for review. The full Council shall take, based on the recommendations of the Executive Committee, whatever actions it deems appropriate and are in compliance with standing Council policies.
- SECTION 5:** In the event of a conflict of interest during the period of review of said conflict of interest, Member(s) or Alternate(s) under review may participate in the discussion of the matter in conflict/question but shall abstain from voting on the matter.
- SECTION 6:** A Member or Alternate shall be recommended for termination from service on the Council and any of its committees for refusing to cooperate in a conflict of interest review, or when it is determined that they knowingly took action(s) intended to influence the conduct of the Council in a manner prohibited by the By-Laws or federal, state or local laws.

ARTICLE VIII

COMMITTEES

SECTION 1:

- A. The Council shall establish standing and Ad-Hoc committees necessary to fulfill the requirements of the Ryan White Act.
- B. **Committee Chairs and Vice Chairs.**
1. All Council committees shall be chaired by a Part A member of the Council.
 2. The Council Chair shall appoint the Committee Chairs and Vice Chairs of each Committee beginning with the date of the Council Chair's term of office.
 3. The current Committee Chairs and Vice Chairs shall continue to serve until the new Committee Chairs and Vice Chairs are appointed; the Council Chair may ask current Committee Chairs and Vice Chairs to remain in their positions.
 4. Committee Chairs and Vice Chairs may be appointed, removed, or replaced at the sole discretion of the Planning Council Chair.
- C. **Appointment of Committee membership.**
1. Committee Chairs shall appoint, with the approval of the Council, the members of each committee.
 2. Except as otherwise provided by the By-Laws, a standing or ad-Hoc Committee may include members of the Council and community stakeholders.
 3. Committee membership should all be based on the demographics of the epidemic and consideration shall be given to race, ethnicity, self-acknowledged HIV positivity, and gender.
- D. **Removal of Committee membership.** The removal of Committee members shall be that of Council members as provided for in Article 4, Section 12, where applicable.
- E. **Committee Policies and Procedures.**
1. The Council will approve written policies and procedures for all Committees which will be published in the "Local Procedures Manual."
 2. The policies and procedures of each committee must be periodically reviewed by that committee and subsequently approved by the Council.

SECTION 2: Standing Committees

A standing committee of the Council is a committee, which has a purpose that requires a standing membership and a regular meeting schedule. The standing committees of the Council are:

- A. Executive
- B. Community Empowerment
- C. Membership/Council Development
- D. Priority Setting and Resource Allocation
- E. Quality Management
- F. System of Care

SECTION 3: Ad-Hoc Committees

An Ad-Hoc committee of the Council does not require a standing membership and may meet on a periodic but not regular schedule. The continuing ad-Hoc committees are the ad-Hoc Nominating Committee and the ad-Hoc By-Laws / Memorandum of Understanding (MOU) Committee. The Council may establish other ad-Hoc committees as necessary.

A. Ad-Hoc Nominating Committee.

1. Membership. The Nominating Committee shall be composed of not less than five (5) Council members who shall be appointed by the Chair. At least one member shall be a person living with HIV/AIDS.
2. Purpose. The Nominating Committee shall provide a slate of nominations for Members for Chair and Vice Chair of the Council from among current Council Members. The process utilized by the Nominating Committee to prepare and present the slate of officers for consideration for office is identified in that committee's written policies and procedures.

B. Ad-Hoc By-Laws/ MOU Committee.

1. Membership. The members of the committee shall only include Council members and alternates.
2. Purpose. The ad-Hoc By-Laws/MOU Committee shall have the responsibility of periodically reviewing, updating, and maintaining the Council's By-Laws.

SECTION 4: There shall be an Executive Committee.

- A. Membership. The Executive Committee shall consist of the Council Chair, the Council Vice Chair, and the Chair or Vice-Chair of each of the standing committees. The immediate past Council Chair (if the past Chair is currently a member of the Council) will serve as an ex officio member of the Committee. In absence of the Standing Committee Chair, the Standing Committee Vice Chair may serve and count towards quorum.
- B. A Vice-Chair of a committee does not need to be a member of the Council.
- C. The Executive Committee meets to conduct the business of the Council (excluding priority setting and allocation decisions). The Executive Committee shall:
 - 1. Set the agenda for Council meetings.
 - 2. Address Conflict of Interest issues.
 - 3. Review Membership/Council Development Committee Attendance report to identify Council members, not in compliance with attendance requirements.
 - 4. Oversee the planning activities established in the integrated HIV prevention and care plan.
 - 5. Develop and oversee committee work plans that address comprehensive planning goals and objectives.
 - 6. Ratify recommendations for removal for cause from the Membership/Council Development Committee.
- D. The Committee shall have responsibility for oversight of the planning activities established in the integrated HIV prevention and care plan and development and oversight of committee work plans to address integrated planning goals and objectives.

SECTION 5: There shall be a Community Empowerment Committee.

- A. Membership. The members of the committee shall include but are not limited to, representatives of the Council and community stakeholders. No less than 51% of the Council committee members shall be unaffiliated individuals living with HIV.
- B. Chair. The Committee Chair or Vice Chair shall be an unaffiliated individual with HIV.
- C. Purpose. The Committee shall inform and solicit the participation of individuals infected and affected with HIV/AIDS in the planning, priority

setting, and resource allocation processes.

SECTION 6: There shall be a Priority Setting and Resource Allocation Committee.

- A. Membership. The Members of the Committee shall include but is not limited to, representatives of the Council and community stakeholders.
- B. Purpose.
 - 1. The Committee shall recommend to the Council priorities and allocation of Ryan White Part A funds.
 - 2. The Committee shall review, at least quarterly, any deviations in planned expenditures exceeding 10% in any given funding category for reallocation and/or possible reprioritization.
 - 3. The Committee will facilitate the Priority Setting and Resource Allocation Process to include the review of appropriate data (service utilization, epidemiological data).
 - 4. The Committee shall develop, review, and monitor eligibility, and service definitions, including improving the quality, cost-effectiveness, and allocation of resources to pharmacy services.
 - 5. When recommended, the Committee shall develop and implement a standardized mechanism for pharmacy services (i.e., drug access, formulary changes, and cost/impact analysis) and coordinate pharmacy services in collaboration with other funding streams (i.e., ADAP, Part B, Medicaid, private payers, including private insurance providers).
 - 6. The Committee shall determine eligibility for Part A services and Federal Poverty Level.

SECTION 7: There shall be a Membership/Council Development Committee.

- A. Membership.
 - 1. The Members of the Committee shall include but are not limited to, representatives of the Council and community stakeholders.
 - 2. At least two-thirds of the committee members must be Planning Council members.
- B. Purpose.
 - 1. The Committee shall solicit, and screen applications based on objective criteria for appointment to the Council to ensure that the demographic requirements of the Council are maintained according to the Ryan White Treatment and Modernization Act and present its

- recommendations to the full Council.
- 2. The Committee shall institute orientation and training programs for new and incumbent members.
- 3. The Committee shall continue to educate the Council and committee members about their respective duties, and the Council's functions and roles in the organization and delivery of HIV/AIDS health and support services.

SECTION 8: There shall be a Quality Management Committee.

- A. Membership. The members of the Committee shall include but are not limited to, representatives of the Council and community stakeholders.
- B. Purpose. The purpose of the Quality Management Program for Ryan White Part A in the Broward County EMA is to systematically monitor, evaluate, and continuously improve the quality and appropriateness of HIV care and services provided to all clients receiving Ryan White Part A and Minority AIDS Initiative (MAI) funded services in Broward County.

SECTION 9: There shall be a System of Care Committee

- A. Membership. The members of the Committee shall include representatives of Part A, consumers, community stakeholders, and health policy or healthcare system experts.
- B. Purpose. The purpose of the System of Care Committee is to evaluate the system of care in Broward County and analyze the impact of local, state, and federal policy and legislative issues impacting people living with HIV in the Broward County EMA. The Committee will be responsible for advising the Planning Council on how these issues may impact the Broward County EMA and may recommend response strategies.

SECTION 10: There shall be an Integrated Work Group

- A. Membership.
The workgroup will be composed of the Ryan White Part A HIV Health Services Planning Council, South Florida AIDS Network (SFAN), and the Broward County HIV Prevention Planning Council (BCHPPC) with three members and one alternate representing their respective planning or advisory body, as applicable.
 - 1. Members from the Part A program may include Council members,

committee members, or other appropriate community stakeholders, such as Housing Opportunities for People with AIDS (HOPWA) /housing; Federally Qualified Health Centers (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.

2. Part A members will be selected for recommendation by the Executive Committee but must be approved by the Council.
3. The desired membership of the workgroup 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. Purpose.

1. The workgroup will be responsible for monitoring and providing recommendations for the completion of the activities outlined in the Broward County Integrated HIV Prevention and Care Plan.
2. The workgroup will conduct a comprehensive analysis and review of data from community stakeholders to provide robust recommendations to the Prevention and Care planning bodies and to the Recipients.
3. The workgroup will serve as the feedback loop for the collaborative implementation of the Plan and make appropriate recommendations to the respective planning bodies and HIV funders.

C. Flow of Information.

1. The work group is expected to interact with numerous Prevention, Part A, and Part B teams, work groups, and committees.
2. The workgroup's main point of contact and coordination will be the Executive Committees of the Council, BCHPPC, and SFAN.

D. Ratification. The work of the workgroup is provided to the Council, the BCHPPC, and SFAN in the form of recommendations, and is subject to the approval of the respective planning body.

Section 11: Joint Planning Body Meeting.

A joint planning body meeting does not require a standing membership and may meet on a periodic but not regular schedule. The joint planning bodies are the Ryan White Part A HIV Health Services Planning Council, South Florida AIDS Network, and the Broward County HIV Prevention Planning Council.

ARTICLE IX
ADOPTION AND AMENDMENTS OF BY-LAWS

SECTION 1: These By-Laws may be adopted, amended, or repealed by a majority vote of the Council.

SECTION 2: Notice of all proposed amendments, with amendments enclosed, shall be mailed or transmitted electronically to each Council member and Alternates at least ten (10) days prior to the meeting at which time such amendments are to be considered for adoption.

SECTION 3: DATE OF EFFECTIVENESS

Unless otherwise provided, these By-Laws and any amendments shall be effective immediately upon approval by the Council.

ARTICLE X
GENERAL PROVISIONS

SECTION 1: The fiscal year for the Council shall begin on March first and end on the last day of February.

SECTION 2: When procedures are not covered by Broward County Ordinance or these By-Laws, the latest version of the Council's Policies and Procedures shall prevail. The Chair of the Council and committees shall follow Robert's Rules of Order.

SECTION 3: Unless otherwise provided for in the Ryan White Act or other law or regulation, the relationship between the Council and the Recipient is described in the Ryan White Part A Manual and the Ryan White Part A Planning Council Primer. Relations between providers and clients are the responsibility of the Recipient.

SECTION 4: Member Reimbursement. Funds from the Planning Council Support (PCS) budget shall be available to enable unaffiliated: Council members, alternates, and Committee members with HIV, to be reimbursed for their reasonable expenses for attending Council or Committee meetings which shall include, but not be limited to, the following: transportation, parking, mileage, childcare wise being regularly provided to the child, and appropriate refreshments. The

Council member or alternate shall execute an affidavit attesting to the validity of the reimbursement request.

SECTION 5: Review of By-Laws: The Executive Committee shall ensure that the By-Laws are reviewed every two years or as needed based on new County ordinance or legislation.

SECTION 6: Virtual meetings: The Council shall conduct virtual meetings based on County Ordinance or Executive Order.



biomedical
HIV prevention
summit

April 11-12, 2023
The Cosmopolitan of Las Vegas
Las Vegas, NV

2023 Program

biomedical HIV prevention summit

Von Biggs attended on an NMAC
Scholarship

April 2022

Sex Positivity

- Attending this event showed an amazing insight of where we as a country have come in talking about sex. Still a lot of taboo and stigma but the conversations are happening and being recognized.
- We cannot talk about HIV without talking about sex.







Your Mom did it bareback too!

- + Gay sex = Bareback or raw
- + Heterosexual = sex
- + “We have come to the homophobic conclusion that when gay men engage in the act of intercourse without a barrier, we label it psychotic barebacking, but when straight people do it, we call it sex.” Mark S King 2013
- + Body fluid exchange
- + Bug Chasers



Von's Take-away's

- + U=U is a strong message in a lot of markets not so much in Florida.
- + HIV Positive individuals:
 - + Be Unapologetic
 - + Share your Scars
 - + Network
 - + Nothing to Lose but chains
- + 20 years ago, we were having conversations about demographics yet today we are still engaging in the same demographics and the needle has not moved, and we are focused on the same demographics. What needs to change?
- + We cannot end HIV because we are not centered on Women (specifically black women)
- + What Lola Wants Lola Gets! Embrace your sexy self!

HIGH RISK IS STIGMATIZING

**Our Identities
are HIV
Prevention
THEY ARE NOT
HIGH RISK**

**Our JOY is HIV
Prevention IT
IS NOT HIGH
RISK**

**Our PLEASURE
is HIV
Prevention IT
IS NOT HIGH
RISK**

**Prevention
That
Supports
Desire**



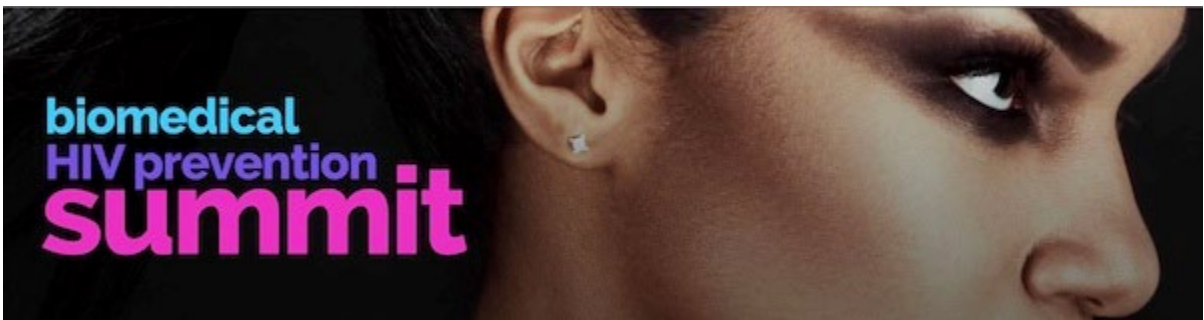
Questions?

Von Biggs

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317-410-9450 (cell)

954-542-1671 (office)



This year's **Biomedical HIV Prevention Summit** was a risk. I'm sure some thought we were crazy. Honestly, I had concerns, especially in this political environment. Thank you to the over 1,300 attendees. To be clear, there was **no** federal funding for the meeting. In fact, most feds stayed away. I understand, especially right now. NMAC is very privileged to talk about issues that others can't, especially people in government. It is also hard for some to fully comprehend the damage caused when every day on the news your people are called sick and demented because of whom they love or how they express their gender. [Attendees are requested to submit their final Summit evaluation.](#)

Communities highly impacted by HIV are demonized and weaponized in the courts, state legislatures, governors' offices, and churches. Their prejudice and misinformation create my communities' trauma and shame. Folks are making impossible decisions about how to live, especially if they reside in a deep red state. Families with transgender children are literally moving. NMAC celebrates what bigots try to vilify. That's why the 2023 meeting was so transformative. We do not accept judgements from people who have not walked in our shoes. We are more than enough.



Open discussions at the Summit shined a spotlight on the trauma and shame felt by too many. Even the most evolved of us are suffering. This amazing email helped to crystalize my thinking...

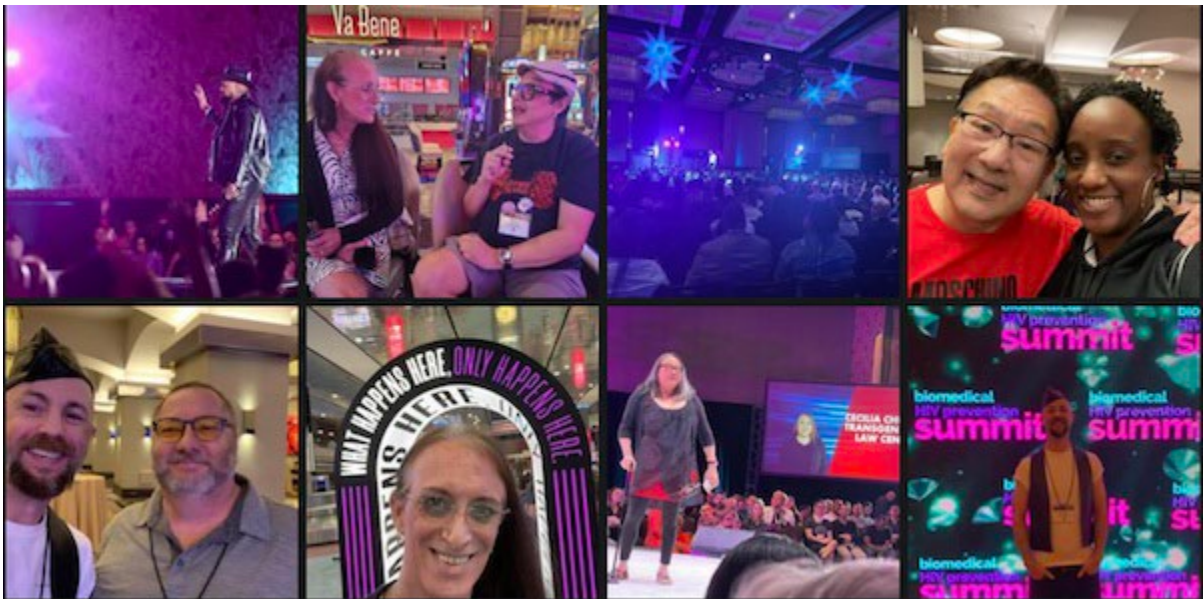
"There was something different about this conference—something magical and for me, transformative. Even as I sit here writing this message and reminiscing on the last two days, tears are starting to well up in my eyes. I've spent the last several hours trying to figure out why this particular conference evoked such strong emotion from me. Is it because of the looming legal perils that our communities face? Is it because of the raw emotion that was felt in the room during the plenaries? Is it just being so angry and tired of constantly being under attack for being who I am? The answer to all of these is a resounding 'yes.'"

HIV is mostly sexually transmitted, yet we've minimized discussions about sex because it makes us and our donors, especially government donors, uncomfortable. Politics drive the message and too many HIV prevention efforts have bought into that shame. When the extreme right calls us "groomers" or other ridiculous lies, we validate their stupidity when we stay silent. Sex is something to be celebrated and treasured. I hope the 2023 Summit reminds our movement to never apologize for who we are and whom we love.

Being the oldest Queen in the room, I remember when explicit discussions about sex were

essential to HIV prevention. Our movement had to educate gay men about condoms using bananas. It was revolutionary. Over time and thanks to pharmaceuticals, the conversation moved to taking your meds and being adherent. Yet safe sex and not transmitting HIV remains a major motivator for why people go on PrEP or become undetectable.

There is something very liberating about a standing room only space where presenters talked about HIV prevention and sex without shame or judgement.



How does this political environment impact the Biomedical HIV Prevention Summit? We wanted to announce the 2024 meeting in Tennessee but decided against it. Rather than make a political statement, the safety of attendees comes first. Some may think this is unnecessary. Just know LGBTQ organizations are getting Department of Justice briefings about how to manage the safety of events during these divided times, especially with Pride in June. Yes, it is that bad. Look for an announcement later this year.

Thank you to everyone who joined us. You are heroes in the fight for equality and justice in this crazy world. This meeting was made possible thanks to our Presenting Sponsor, Gilead. I look forward to seeing YOU at the [2023 United States Conference on AIDS](#). The 2023 USCHA is NMAC's love letter to Black women (cis & trans).

Yours in the struggle,



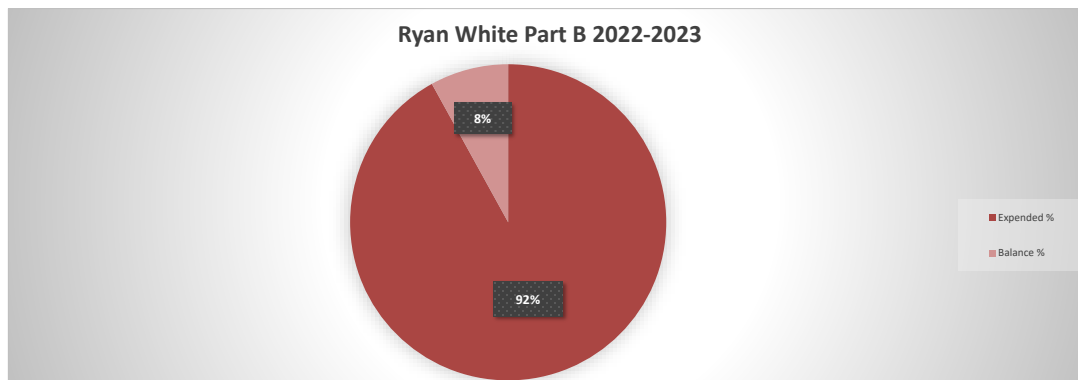
[Paul Kawata](#)

Ryan White Part B
PTC23: April 1, 2022 to March 31, 2023

HANDOUT C

Expenditures for February 2023

<i>Service Category</i>	<i>Allocated</i>	<i>February 2023</i>	<i>Expended Year-to-Date</i>	<i>Expended %</i>	<i>Balance %</i>	<i>Balance</i>
Administrative Services	\$ 85,825	\$ 4,812	\$ 85,825	100%	0%	\$ -
Health Insurance Premium/Cost Sharing	\$ 147,750	\$ 19,254	\$ 142,984	97%	3%	\$ 4,765.99
Home & Community Based Health	\$ 10,000	\$ 70	\$ 6,625	66%	34%	\$ 3,374.84
Medical Nutritional Therapy	\$ 17,000	\$ 2,836	\$ 13,722	81%	19%	\$ 3,278.14
Emergency Financial Assistance	\$ 342,512	\$ 21,958	\$ 312,475	91%	9%	\$ 30,036.95
Home Delivered Meals	\$ 2,000	\$ -	\$ 1,848	92%	8%	\$ 152.00
Medical Transportation	\$ 60,476	\$ 5,875	\$ 54,530.43	90%	10%	\$ 5,945.57
Non-Medical Case Management	\$ 321,770	\$ 14,031	\$ 286,417	89%	11%	\$ 35,353.09
Residential Substance Abuse	\$ 136,500	\$ -	\$ 126,239	92%	8%	\$ 10,261.20
Clinical Quality Management	\$ 38,096	\$ 5,409	\$ 38,096	100%	0%	\$ -
Planning and Evaluation	\$ -	\$ -	\$ -	0%	0%	\$ -
TOTALS	\$ 1,161,929	\$ 74,246	\$ 1,068,761	92%	8%	\$ 93,168



ADAP REPORT MARCH 2023

Total Enrolled MARCH 2023	
Total Virally Suppressed	4,358
Percentage of Virally Suppressed at 6 months	93.28%
ADAP Enrollments and Re-enrollments Processed	825
No Show Report <i>(multiple invalid telephone numbers identified when appt. reminder calls were placed.)</i>	
	40%

AREA: 10 (Broward County)
HAPC: Joshua Rodriguez
Quarter: January-March 2023

What activities have you and/or your staff accomplished this quarter regarding the Four Key Components?

Test and Treat

- The table below displays the Test and Treat enrollments in Q1 2023:

Quarter	1-2023 through 3-2023	
	n	%
Referred	168	
Newly HIV Positive	66	39%
Reengagement	102	61%
unspecified*	0	0%
Enrolled	165	98%
Newly HIV Positive	63	95%
Reengagement	102	100%
Refused	0	
Unable to Locate	1	
Pending	2	
Ineligible		
Jail	0	
Out of Jurisdiction	0	
Negative	0	
Deceased	1	
Navigation	1	
Already in care	5	
Avg Days from Referral to Enrollment	0.94	
<1 day	142	86%
2 to 3 Days	5	3%
4 to 7 Days	3	2%
8+ days	15	9%

*Ineligible, Navigation, and Already in Care are not included in the Total Referred. Navigation Clients already have medication, but needs assistance navigating care. Ineligible Clients are either incarcerated, out of jurisdiction, found to be a false positive, or deceased.

Antiretroviral pre-exposure prophylaxis (PrEP) and non-occupational post- exposure prophylaxis (nPEP)

- The following table displays a report of the individuals enrolled in the R-PrEP program from its inception in June 2018 to the end of Q1 2023:

R-PrEP Program Totals as of:	6/1/2018	3/31/2023
TOTAL NUMBER R-PREP CLINICAL VISITS	8181	
Total Enrolled in PrEP Navigation:	6175	75%
Private Insurance	2967	48%
PAP Assistance	3208	52%
Ineligible for Navigation	2003	25%
OOJ	1974	99%
Walk Outs:	29	1%
CONTRAINDICATED POST ENROLLMENT:	164	3%
HIV Positive	10	6%
Laboratory	154	94%

- The table below displays the PrEP enrollments during Q1 2023:

R-PrEP Program Totals as of:	1/1/2023	3/31/2023
TOTAL NUMBER R-PREP CLINICAL VISITS	589	
Total Enrolled in PrEP Navigation:	468	79%
Private Insurance	248	53%
PAP Assistance	220	47%
Ineligible for Navigation	121	21%
OOJ	120	99%
Walk Outs:	1	1%
CONTRAINDICATED POST ENROLLMENT:	0	0%
HIV Positive	0	#DIV/0!
Laboratory	0	#DIV/0!

- Among enrolled/in-jurisdiction clients, there were **664** follow-up visits to BWC for lab work and PrEP prescription renewal between 1/1/2023 and 3/31/2023.

Routine HIV and STD screening in healthcare settings/targeted testing in non-healthcare settings.

- Virtual HIV 500/501 Courses held:
 - 500/501 on 1/11 and 1/12 with 6 participants
 - 500/501 on 1/18 with 24 participants
 - 500/501 on 2/8 and 2/9 with 9 participants
 - 500/501 on 3/8 and 3/9 with 6 participants

- Rapid HIV Testing Technologies held:
 - INSTI on 1/25 with 4 participants
 - Oraquick on 1/25 with 4 participants
 - SureCheck on 1/25 with 4 participants

- EIP-Capacity Building/Technical Assistance/Essential Support Services:
 - EHE Presentation on 1/11
 - FDOH Train the Trainer from 2/21 to 2/23
 - Contract Monitoring Broward Wellness Center on 3/14
 - IMG T/A call on 3/16
 - Site Renewal T/A call 3/16
 - Site Inspection: Care for You Medical Center on 3/29
 - Site Inspection: Women Networking Together on 3/29

- DOH Broward and non-contracted agencies distributed **598,150** condoms in the community during Q1.

- DOH Broward staff delivered **49** educational sessions in the community: **37** Get PrEP Broward presentations, **6** HIV 101 presentations, and **6** SOGI (sexual orientation and gender identity) presentations.

- DOH Broward staff made **426** visits to businesses participating in the Business Response to AIDS (BRTA) initiative.

HAPC Quarterly Update

- The following table displays the demographics of Broward County residents who requested In-Home HIV Test kits from GetPrEPBroward.com during Q1. Broward’s HIV In-home testing initiative began on May 26, 2020 and has shipped **1869** test kits from 5/25/2020 to 3/31/2023, and **187** test kits from 1/1/2023 to 3/31/2023.

	January 2023		February 2023		March 2023	
	51		66		70	
Gender						
M	23	45.1%	25	37.9%	27	38.6%
F	28	54.9%	40	60.6%	43	61.4%
Transgender	0	0.0%	1	1.5%	0	0.0%
Race/Ethnicity						
BLK/ Non Hispanic	27	52.9%	49	74.2%	43	61.4%
WHT/ Non Hispanic	14	27.5%	5	7.6%	5	7.1%
Hispanic	5	9.8%	7	10.6%	10	14.3%
Asian/Haw Pac Islander	0	0.0%	1	1.5%	1	1.4%
AI/AN	0	0.0%	0	0.0%	0	0.0%
Multiracial	4	7.8%	3	4.5%	5	7.1%
Other	1	2.0%	1	1.5%	6	8.6%
Country of Birth						
US	51	100.0%	66	100.0%	69	98.6%
Outside the US	0	0.0%	0	0.0%	1	1.4%
Age						
13-19	1	2.0%	4	6.1%	0	0.0%
20-29	9	17.6%	13	19.7%	11	15.7%
30-39	18	35.3%	25	37.9%	27	38.6%
40-49	15	29.4%	12	18.2%	22	31.4%
50-59	0	0.0%	7	10.6%	7	10.0%
60+	8	15.7%	5	7.6%	3	4.3%
Referred by agency						
yes	1	2.0%	3	4.5%	0	0.0%
no	50	98.0%	63	95.5%	70	100.0%
Testing History						
Never been tested	3	5.9%	11	16.7%	2	2.9%
More than 12 months	34	66.7%	32	48.5%	40	57.1%
Less than 12 months	14	27.5%	23	34.8%	28	40.0%
Unknown	0	0.0%	0	0.0%	0	0.0%

Community outreach and messaging

10 events were held or attended in Q1: **2** in January, **7** in February, and **1** in March

- On 1/6/23, DOH Broward staff attended the TranSocial Group's Kiki Ball, a traditional ball for the Black and Brown LGBTQ Community that can be traced back to the days of the Harlem Renaissance. Over 250 people attended the event, 146 of whom were engaged by HIV Prevention staff for HIV education and prevention materials.
- On 1/18/23, DOH Broward staff attended Ujima Men's Collective's Community Conversation, an LGBT+ panel discussion. 35 community members attended and were served education and incentives by DOH Broward staff.
- On 2/3/2023 Black AIDS Advisory Group hosted a community awards gala event in observation of National Black HIV AIDS Awareness Day. Data on the state of HIV in the black community was provided by the Department of Health Broward County. The event featured music, poetry and food as several community partners were recognized for the outstanding work they do to assist with ending the HIV epidemic in Broward County. Staff from the Florida Department of Health set up a table and distributed HIV and PrEP education materials to the 150 community attendees.
- On 2/8/2023 the Black AIDS Advisory Group hosted a gala attended by five community members. DOH Broward staff were able to have in depth discussions regarding PrEP and HIV Prevention.
- On 2/11/2023 Pride Fort Lauderdale hosted the Pride of the Americas, presented by Visit Lauderdale, in association with Midland Family & CAN Community Health, Gilead and AHF. The event focused on Central and South American and Caribbean members of the LGBT+ community and featured performance by Boy George. DOH Broward HIV Prevention staff participated in both the parade and the festival, providing education of DOH services, HIV prevention and PrEP, as well as condoms and promotional items, to over 960 individuals.
- On 2/16/2023, Broward College hosted a Campus Safety event to provide students with local resources. During the event the students were able to visit different resources from the community to help them navigate through everyday life such as applications for resources games, incentives, and live demo from the Broward k-9 unit. The Broward County Health Department set up tabling to increase awareness concerning the HIV epidemic in Broward County. Prevention methods such as PrEP were discussed with individuals, as well as HIV data and information on HIV testing locations. A total of 40 people were provided incentives, PrEP education, and condoms.
- On 2/18/2023, HIV Prevention staff attended two events for MSM National Condom Day: one in the Pompano area at the Tiger Tail Festival, a family-friendly outdoor event where the team served 260 individuals, and one in partnership with High Impacto where DOH Broward staff served 30 people, ten of whom also received HIV testing from High Impacto.
- On 2/23/2023 HIV Prevention staff set up a table at the Ujima LGBTQIA+ Black Excellence event at the YMCA on Sistrunk The event featured presentations and performances from the LGBTQIA+ community regarding black excellence. At the event, The Florida Department of Health in Broward County provided tabling to increase awareness of HIV prevention activities, including PrEP. A total of 22 individuals were provided with condoms, PrEP education, and marketing materials.

HAPC Quarterly Update

- On 3/4/2023, DOH Broward staff attended Community Unity Day at Roosevelt Gardens Park. The event is a free health fair that also featured vendors, a D.J., free food, games, a bounce house, entertainment, raffle giveaways, and free haircuts and massages. HIV Prevention table served 130 people with education on HIV prevention as well as incentives.

Perinatal Program

In Q1 2023, the Perinatal Prevention program in Broward County:

- Received referral of 25 Pregnant women for follow up throughout pregnancy
- Followed 20 clients through delivery and confirmed at least one negative PCT at birth.
- Held three Perinatal HIV Providers network meetings.
- Saw zero maternal to child transmission of HIV.
- Participated in one baby shower in Lauderhill, Florida, and provided education and baby clothes to the participants.
- Two congenital Syphilis cases.
- Visited more than 30 OBGYNs for physician detailing for the prevention of perinatal HIV and congenital syphilis.

PROACT

	Jan-23	Feb-23	Mar-23	Total
In Care	69	83	89	241
OOJ	4	5	10	19
Jailed	4	0	0	4
Deceased	1	0	1	2
Unable to Locate	24	23	32	79
Linked to Care	63	103	98	264
TOTAL	165	214	230	609

Accomplishments or challenges

Accomplishments:

- During this quarter 322 medical providers have been detailed and provided educational information and resources on Florida's 4 Key Components/EHE Plan. As a result, we have identified 38 new PrEP/nPEP providers.
- The In-home testing initiative is steadily growing each month. 187 test kits were mailed during this time to residents. Since the inception of the initiative 63% of Broward residents who are requesting the test kits are Black and 59.4% are Females.
- During this reporting period, DOH Broward successfully certified 15 HIV 501 attendees via the CDC's Status Neutral Training.

Challenges:

- None to report

PrEP REPORTING

HAPC Quarterly Update

PrEP Support Services

Please indicate whether activities are carried out by DOH, and/or Community Partners.

PrEP Navigation

1. Who provides PrEP navigation services in your area?

DOH Lead: Krystle Kirkland-Mobley (Broward CHD) Community Partner(s) None

2. Are there any gaps for PrEP navigation services in your area? If so, please elaborate.

N/A

PrEP Patient Assistance/Copay Programs Support

1. Who provides assistance with PrEP Patient Assistance Program/Copay paperwork/processes in your area?

DOH Lead: Krystle Kirkland-Mobley (Broward CHD) Community Partner(s) None

2. Are there any gaps for PrEP Patient Assistance/Copay services in your area? If so, please elaborate.

N/A

DOH PrEP/nPEP Directory Update

Please click on the link, review the Department's PrEP/nPEP Directory and list any updates/changes for your area.

*Please make sure you have consent before adding any new private providers.

<https://getprepbroward.com/directory>

Please provide updates on any new PrEP/nPEP providers identified in your area during this quarter: **38**

- Akiliu & Cobian Infectious Disease, 2151 E Commercial Blvd, 954-489-2260
- AMCA Medical Center, 1610 Sheridan St, 954-922-7400
- Associates MD, 1437 S Federal Hwy, 954-399-9941
- Bridget Silva MD Family Medicine, 10220 West Sample Rd, 954-933-2371
- Care For You Medical Center, 5412 W. Atlantic Blvd, 954-532-2441
- Care Spot Urgent Care, 9035 Pines Blvd, 954-378-0330
- Chen Senior Medical Center, 7401 W. Commercial Blvd, 954-644-8800
- Complete Local Specialty Care, 5355 Lyons Rd., 954-570-9595
- Continental Wellness Center, 3400 NW 9th Ave, 954-462-4599
- Dr. Harry Pepe & Associates, 4510 Sheridan St., 954-893-8900
- Oakland Park Family Medicine, 1555 E Oakland Park Blvd, 954-565-9966
- Dr. Patrick Reme, 401 S Hospital Dr. #2, 954-368-4266
- Extended Wellness, 213 Sheridan St. Ste. 1, 954-921-9555
- Holy Cross Medical Group, 1402 NE 26th Street, 954-565-7789
- Infections Managed (Now Light of Hope), 3012 E Commercial Blvd, 954-776-9992
- Medix Urgent Care Center, 3829 Hollywood Blvd, Ste A, (954) 589-1238
- Premier OB/GYN, 1150 N 35th Ave Suite# 405, 954-961-9993
- C&T (Castillo and Torres), 1307 Lyons Rd, 954-727-8848
- Brigitte A Semexant, 10041 Pines Blvd Suite D, Pembroke Pines, FL 33024, 954-391-8597
- Doctors Medical Center, 368 E Dania Beach Blvd, Dania Beach, FL 33004, 305-685-5688
- Family Medical Center, 17933 NW 7th St. Suite#102, Pembroke Pines, FL 33029, 954-436-1927
- Light Of Hope, 3012 E Commercial Blvd, 2nd Floor, Fort Lauderdale, FL 33308, 954-951-4673
- Manella Health & Wellness PA, 500 N Hiatus Rd, Suite 201, Pembroke Pines, FL 33026, 954-381-8989
- East-West OB/GYN, 2620 N Andrews Avenue, Fort Lauderdale, FL 33311, 954-565-7686
- Sole Health Medical Center, 7261 Sheridan St. Suite# 100D, Hollywood, FL 33024, 954-534-7696
- South Florida Doctors Group, 18503 Pines Blvd Suite# 306, Pembroke Pines, FL 33029, 954-442-0784
- CMRC (Comprehensive Medical & Research Center), 150 NW 70th Avenue, Suite 10, Plantation, FL 33317, 954-368-3529
- Fardales Medical Center, 1806 N Flamingo Rd, Suite 180, Pembroke Pines, FL 33028, 305-400-9702
- 911 Urgent Care, 4000 Sheridan Street Suite A, Hollywood, FL 33021, 954-239-6060
- Memorial Primary Care Pines, 2217 North University Drive, Pembroke Pines, FL 33024, 954-883-8140
- Arianna Center, 2501 NE 30th street, Fort Lauderdale, FL 33306, Arianna Lint
- Sunlife Pediatric Network, 330 S State Rd. 7 Suite# 500, Plantation, FL 33317, Claudine (APRN)
- GILBERT WEINER/Healthstone Bayview, 1130 BAYVIEW DRIVE. FORT LAUDERDALE, FL 33304, Phil (Owner)
- Flex 4 Medical, 2221 North University Drive, Suite D, Pembroke Pines, FL 33024, Eva Hampton

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- Vidalife Primary Care LLC, 5333 N Dixie Hwy Suite 210, Oakland Park, FL 33334, Dania (OM)
- Broward Internal Medicine, P.A., 8890 W Oakland Park Blvd Suite 203, Sunrise, FL 33351, Kiersten
- Cheer Health, 939 N University Dr, Coral Springs, FL 33071, Joana (OM)
- Inter Care Clinic, 4850 W. Oakland Park Blvd Suite 115, Lauderdale Lakes, FL 33313, Shaly Robince (APRN)

For any new PrEP/nPEP providers identified, did you receive consent to have them listed on the Department's PrEP/nPEP Provider Directory? Yes No N/A

PrEP DATA

Number of PrEP Detailing

One-on-one provider/office detailing visits: 322 Providers at Practices: 762	Provider education (group), summits, meetings, institutes, etc.: 0	Educational materials to providers (toolkits, posters, etc.):
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Number of PrEP Referrals

DIS: 0	Navigators: 0	Testing: 253
Outreach & Education Staff: 0	DOH Clinical Staff: N/A	Other: 336
Total Number of Referrals: 589 . Our current PrEP program monitoring system tracks the referral sources listed by self-report only; there are no associated referral forms.		