Central Florida HIV Planning Council Planning Council Business Meeting Minutes

August 25, 2021

Call to Order: The Jr. Co-Chair, Ms. Rodriguez called the meeting to order at 6:05 p.m. at the Hilton Garden Inn located at 1275 Lee Road, Winter Park, FL 32789.

Members Present: Tim Collins, Ira Westbrook, Angela Hunt, Maria Buckley, Dean Hutchins, Marion Stephney, Vel Cline, Vickie Cobb-Lucien, Flora Kavitch, Gabriella Rodriguez via teleconference, Keith Tremain via teleconference, Kim Murphy via teleconference, Jordan Almazan via teleconference, Grisela Hernandez via teleconference, Charlie Wright via teleconference.

Members Excused: Earl Hunt, Willie Beasley, Angus Bradshaw, Mike Alonso, Jessica Seidita, John Curry

Absent: Sam Graper, Roy Harry

The committee reviewed the agenda and made the following updates:

- Replaced Mr. Hunt's name Ms. Rodriguez's name for the welcome, housekeeping, introductions, approval of the agenda, approval of the July minutes, and open the floor for public comment.
- Replaced Ms. Seidita's name with Ms. Hunt's name for the Membership and PR & Marketing committee report.
- Replaced Mr. Hutchins's name with Mr. Collins's name for the SSQ and Needs Assessment & Planning committee report.

Motion: Mr. Collins made a motion to approve the agenda with the changes. Mr. Cline seconded the motion.

In Favor	Against	Abstention
14	0	0

 The motion to approve the August agenda passed by a unanimous roll call vote.

Approval of the agenda:

Approval of the July 28 Minutes:	The Planning Council reviewed the July 28 th minutes and corrected a spelling error and replaced the word "agenda" with the word "minutes" for the motion to approve the June 30 th minutes. The minutes were approved with the minor updates.
Open the Floor for Public Comment:	 Mr. Gwyn expressed his concern that organizations are having issues with retaining case managers which is having a direct effect on the quality of care provided to clients. Ms. Yabrudy informed that there are currently several case management vacancies and that they are working diligently to fill the open positions. Ms. Yabrudy offered to have someone from her office reach out to Mr. Gwyn to address any challenges or additional concerns regarding case management. Ms. Stephney mentioned that there needs to be more referral specialists and case managers available for clients to get the services that they need. Mr. Antenor recommended that a special study be created to find out why there seems to be a high turnover rate for case managers. Mr. Wright inquired about the process for clients who had dental work completed but need additional work done. Mr. Bent informed that he would forward Mr. Wright's inquiry to the proper individual to get an answer. Comment Cards:
	No commend cards were received.
Reports:	Membership and PR & Marketing Committee:
	The committee discussed the membership matrix, PC reflectiveness, and committee roster. There are currently 23 Planning Council members, 11 (47.8%)

members that are PWH, and 8 (34.7%) unconflicted members.

- The committee reviewed the Central Florida HIV Planning Council social media account insights for Facebook and Instagram.
- The committee discussed the annual committee reports and decided that the reports should be merged this year.
- The committee updated and approved their 2021 2022 committee work plans.
- The committee reviewed the summaries for two applicants and determined that both applicants should move forward to the next step in the application process.

World AIDS Day Update:

- Due to a venue schedule conflict, the date of the World AIDS Day event has changed to November 30, 2021.
- Sponsorship letters, run of show and WAD Flyer were discussed and details solidified.
- Program and entertainment details are in the process of being confirmed.

Service Systems & Quality and Needs Assessment & Planning Committee:

- The committee received an overview of the Part A Monthly Expenditure report, Part B Expenditure report, and the Part B Quarter 1 Monthly Utilization report.
- The committee reviewed and approved two action items: To decrease Clinical Quality Management by \$100,000 to increase Emergency Financial. Also, to decrease Substance Abuse Residential by \$100,000 to increase Food Bank.
- The committee discussed their annual committee reports and decided that the reports should be merged this year.
- The committee reviewed and approved the Data Presentation Process, Priority Setting Process, and Resource Allocation Process. The committee also approved the evaluation forms for each process.

Ryan White Community Meeting:

- The participants received a program overview from Daniel Downer with Bros In Convo, Yasmin Flasterstein with Peer Support Space, Dean Hutchins with the Florida Department of Health, and Andrea Dunn with Let's BeeHIVE.
- The participants provided recruitment suggestions and infographic recommendations for the Red Ribbon Times newsletter.
- The participants received a bridge report for the Membership and PR & Marketing Committee meeting and the SSQ and Needs Assessment & Planning Committee.
- The next Ryan White Committee meeting with be on Tuesday October 19, 2021 at 6:00 p.m.

Part A Monthly Expenditure Report: (Expenditures as of June 30, 2021)

Mr. Yabrudy reported the following:

Target: 33.33%Actual: 28.11%Dif: 5.22%

Action Item #1

Decrease Clinical Quality Management by \$100,000 to increase Emergency Financial Assistance.

Reason:

Clinical Quality Management funds are being transferred to an increase in utilization.

 After a brief discussion, the committee decided to approve action item #1.

Motion: Mr. Collins made a motion to decrease Clinical Quality Management by \$100,00 to increase Emergency Financial Assistance. Mr. Westbrook seconded the motion.

In Favor Against Abstention

15	0	0

 The motion to decrease Clinical Quality Management by \$100,000 to increase Emergency Financial Assistance was approved by a unanimous roll call vote.

Action Item #2

Decrease Substance Abuse Residential by \$100,000 to increase Food Bank.

Reason:

Utilization for Substance Abuse Residential services has decreased due to COVID-19 and other funding sources being utilization. Food services utilization continues to increase, and additional funds are needed to cover the services until the end of the grant year.

• After a brief discussion, the committee decided to approve action item #2.

Motion: Mr. Cline made a motion to decrease Substance Abuse Residential by \$100,000 to increase Food Bank. Ms. Cobb-Lucien seconded the motion. The motion was adopted unanimously by a roll call vote.

In Favor	Against	Abstention
12	0	2

 The motion to decrease Substance Abuse Residential by \$100,000 to increase Food Bank was approved by a roll call vote 12 for, zero against and two abstentions.

Part B Monthly Expenditure Report: (Expenditures as of June 30, 2021)

Ms. Andre reported the following:

Target: 25%Actual: 21%Dif: 4%

RW Part B Quarter 1 Utilization Report:

Ms. Andre reported the following:

- The area 7 Ryan White Part B provides services in Orange, Osceola, Seminole, and Brevard counties.
- All data presented in the report was compiled from CAREWare and the AIDS Information Management System, the electronic database management system used by area 7.

Total Clients Served:

Q1 2020-21:1252 Q1 2021-22: 1213

New Clients:

Q1 2020-21:172 Q1 2021-22: 126

Comparison by Gender:

Male:

Q1 2020-21: 835 Q1 2021-22: 827

Female

Q1 2020-21: 409 Q1 2021-22: 373

Transgender:

Q1 2020-21: 6 Q1 2021-22: 13

Comparison by Race:

White:

Q1 2020-21: 478 Q1 2021-22: 440

Black:

Q1 2020-21: 426 Q1 2021-22: 425

Hispanic

Q1 2020-21: 321 Q1 2021-22: 326

Other:

Q1 2020-21: 27

Q1 2021-22: 22 Comparison by Age: 2-12 Q1 2020-21: 0 Q1 2021-22: 0 13-24 Q1 2020-21: 30 Q1 2021-22: 33 25-44 Q1 2020-21: 449 Q1 2021-22: 445 45-64 Q1 2020-21: 640 Q1 2021-22: 602 65+ Q1 2020-21: 133 Q1 2021-22: 133 Comparison by County: Orange: Q1 2020-21: 133 Q1 2021-22: 206 Osceola: Q1 2020-21: 184 Q1 2021-22: 180 Seminole: Q1 2020-21: 15 Q1 2021-22: 24 Brevard: Q1 2020-21: 853 Q1 2021-22: 763 Other: Q1 2020-21: 67 Q1 2021-22: 40

Comparison by Core Services:

LPAP:

Q1 2020-21: 87 Q1 2021-22: 38

EIS:

Q1 2020-21: 153 Q1 2021-22: 109

Health Insurance: Q1 2020-21: 172 Q1 2021-22: 171

MCM:

Q1 2020-21: 689 Q1 2021-22: 495

Mental Health: Q1 2020-21: 100 Q1 2021-22: 102

Oral Health: Q1 2020-21: 25 Q1 2021-22: 5

OAHS:

Q1 2020-21: 144 Q1 2021-22: 92

Comparison by Support Services:

Non-MCM

Q1 2020-21: 563 Q1 2021-22: 713

Food Bank: Q1 2020-21: 59 Q1 2021-22: 59

Medical Transportation:

Q1 2020-21: 36 Q1 2021-22: 77

	EFA: Q1 2020-21: 60 Q1 2021-22: 43
	Assessment of the Administrative Mechanism: (Key findings for the Ryan White HIV/AIDS Program Part A Fiscal year 2020 – 2021) Julia Hidalgo with Positive Outcomes highlighted the following: To date 62% of identified Planning Council members
New Business:	 To date 63% of identified Planning Council members have returned a completed survey. Most respondents served one year or greater on the Planning Council. Most respondents reported that the Recipient provides the Planning Council with easily understood data in the priority setting process. Most respondents reported that the Recipient followed the Planning Council's service priorities, resource allocations, and re-allocations. The Recipient was reported to answer questions from the Planning Council about resource allocation, reallocation, and expenditures. Most respondents reported that the Recipient reports easily understood expenditure data. All respondents reported that the Recipient keeps the Planning Council informed about Ryan White policies, procedures and news that impacts the Ryan White Program. Almost all respondents reported that the Recipient effectively administered Ryan White grant funds.
	 To date 62% of identified subrecipients have returned a completed survey. All but one subrecipient reported that the Recipient effectively administered Part A funds in FY 2020-2021. All but one subrecipient reported Part A contracts were executed in a timely manner. Two recipients reported not needing technical assistance (TA), all other subrecipients received TA.

- Prompt payments were reported by all but one Recipient.
- POI analyzed the payment data to assess this issue further.
- The Recipient contacted all subrecipients that did not reach their targeted service utilization and expenditures.
- All but one subrecipient reported being informed by the Recipient about reallocations methods.
- All subrecipients reported that the Recipient communicated effectively about Part A reported requirements, Planning Council directives, and eligibility requirements.
- All but one subrecipient reported that the Recipient communicated effectively.
- All subrecipients reported that the Recipient adequately monitored the impact of Covid-19 on client service utilization and Part A spending.
- All subrecipients requesting TA from the Recipient received it.
- There were a few comments included in the survey responses.

Timely requests for proposals, execution of contracts, and contract amendments.

- Contract Amendments for existing Part A contracts were executed on a timely basis.
- One Part A Request for Proposals (RFPs) was issued, One-Stop shopping.
- Initial allocations were consistent with Planning Council priorities.
- Covid-19 pandemic resulted in service utilization and expenditures patterns.
- Recipient made some last quarter sweeps across service categories that remain relatively consistent with Planning Council priorities.
- Despite efforts by Recipient and Subrecipients, over \$1million of carry over funds were accrued.
- Consistent with Part A recipients nationwide.
- HAB is considered methods to allow recipients to roll over unexpended funds, but no final policy has been announced.

Timely payment of subrecipient invoices.

- All invoiced were paid within 45 days.
- On average, payments within 2.3 working days, wit the number of working days ranging from one working day to 15 working days submission.
- The number of working days of payments was not associated with the size of the invoice

Progress in accomplishing recommendations for ways to best meet the needs.

- A new recipient has been added to the RWHAP System of Care that is providing 1 weeknight and 1 weekend day a month to offer after hours services.
- One-stop-shop subrecipient has been added to the RWHAP System of Care, as well as a few subrecipients have MOUs in place to co-locate services.
- All services are available to clients residing in all five counties.
- Community members in all 5 counties trained by AETC to provide Customer Service and Cultural Humility Training to subrecipients. Contractually, all subrecipients must provide culturally and linguistically appropriate services.
- A linkage module in a shared electronic database was created for testing agencies to enter positive client's data and refer them to Recipient services.
- Recipient has created a 3-hour training/presentation for subrecipients.
- Recipient surveys distributed by all subrecipients and submitted to the Recipient regularly by mail.
- EIS staff completing the out-of-care surveys with clients meeting the criteria.

Applicant Summary:

 Mr. Bent reviewed the applicant summary and interview update for Candidate 2020-10. After a brief discussion, the Planning Council decided to recommend the candidate for appointment. Motion: Mr. Collins made a motion to recommend Candidate 202010 for appointment to the Central Florida HIV Planning Council. Mr. Cline seconded the motion.

In Favor	Against	Abstention
15	0	0

 The motion to recommended Candidate 2020-10 for appointment was approved by a unanimous roll call vote.

Data Presentation Process:

 The Planning Council reviewed the data presentation process. After a brief discussion, the Planning Council decided to approve the data presentation process with the updates.

Motion: Ms. Buckley made a motion to approve the data presentation process with the updates. Mr. Colins seconded the motion.

In Favor	Against	Abstention
13	1	0

• The motion to approve the data presentation process passed by a majority roll call vote.

Data Presentation Evaluation Form:

 The Planning Council reviewed the data presentation evaluation form. After a brief discussion, the Planning Council decided to approve the data presentation evaluation process.

Motion: Mr. Cline made a motion to approve the data presentation evaluation form. Mr. Westbrook seconded the motion.

In Favor	Against	Abstention
15	0	0

 The motion to approve the data presentation evaluation form passed by a unanimous roll call vote.

Priority Setting Process:

 The Planning Council reviewed the priority setting process. After a brief discussion, the Planning Council decided to approve the priority setting process with the updates.

Motion: Mr. Collins made a motion to approve the priority setting process with the updates. Ms. Cobb-Lucien seconded the motion.

In Favor	Against	Abstention
15	0	0

• The motion to approve the priority setting process was approved by a unanimous roll call vote.

Priority Setting Evaluation Form:

 Ms. Rodriguez opened the floor for discussion. There was no discussion regarding the priority setting evaluation form.

In Favor	Against	Abstention
15	0	0

• The roll call vote to approve the priority setting evaluation form passed unanimously.

Resource Allocation Process:

 Ms. Rodriguez opened the floor for discussion. Ms. Munroe recommended changing the word "slates" to "slate" on page three of the resource allocation process.

In Favor	Against	Abstention
15	0	0

 The roll call vote to approve the resource allocation process passed unanimously.

Resource Allocation Evaluation Form:

 Ms. Rodriguez opened the floor for discussion. There was no discussion regarding the resource allocation evaluation form.

In Favor	Against	Abstention
15	0	0

• The roll call vote to approve the resource allocation evaluation form passed unanimously.

2021-2022 Planning Council Work Plan:

 The Planning Council reviewed and updated the 2021-2022 Planning Council work plan.

In Favor	Against	Abstention
15	0	0

• The roll vote to approve the 2021-2022 Planning Council work plan passed unanimously.

Motion: Mr. Cline made a motion to extend the meeting by 15 minutes to complete the remaining items on the meeting agenda. Ms. Buckley seconded the motion. The motion was adopted unanimously.

Quality Management Report:

Ms. Andre reported the following:

- The Quality Management workgroup met on July 12, 2021.
- Reviewed 1st quarter performance measure data.
- Reviewed 1st quarter viral load suppression rate disparity data.
- Finalized the 2021-2022 quality management plan.

•	Received an update on the the annual quality improvement project. The next workgroup meeting is scheduled for November 15, 2021.	
2021 -	-2021 Integrated Plan Implementation Update:	
•	Ms. Marshall reviewed the goals and updates for the Integrated Plan. Ms. Marshall informed that PCS would email a copy to the update to all members.	
Annua	al Training Update:	
•	Ms. Marshall informed the Planning Council that the second opportunity to attend the virtual training will be Saturday August 28, 2021, at 9:00 a.m.	
ACTION ITEMS		
Item		
Email AAM findings to PC members	PCS	
Email 2021 -2022 Integrated Plan	PCS	
Implementation updates to PC members		
Next Meeting	September 24, 2021	
Adjournment:	8:17 P.M.	
Prepared by: David Bent Date:	/2021	

Approved by: <u>Sabriella Rodrig</u> Dete: 10/25/2021