

# Central Florida HIV Planning Council

## Service Systems Planning & Quality (SSPQ) Committee Minutes

May 14, 2026

**Call to Order:** The SSPQ Committee Chair, Paolo Mancini, called the meeting to order at 1:30 PM at Heart of Florida United Way located at 1940 Cannery Way, Orlando, FL 32804.

**Members Present:** Paolo Mancini, Jules Smith, Angie Buckley, Charlie Wright, Glorybee Nuñez, Rene Cotto-Lewis, Alelia Munroe, Tim Collins, Mike Alonso, Andre Antenor (via teleconference), Iradarnell Westbrook (via teleconference), Nino Franklin, Monika Trejos Kweyete

**Members Excused:** Priscilla Torres-Theobald, Jessica Seidita

**Recipient & Lead Agency Staff Present:** Maria Torres, Claudia Yabrudy, Whitney Marshall, Doris Huff (via teleconference), Tessa Bricker

**PCS Staff Present:** Whitney Marshall, Laura Perez, Nishika Stafford

**Guests Present:** David Cavalleri, Raymond Macon, Vel Cline

<b>Approval of the agenda:</b>	<p>The committee reviewed the meeting agenda and recommended the following changes:</p> <p>Replace “Pedro Huertas-Diaz” with “Claudia Yabrudy” for the Part A &amp; EHE Reports</p> <p><b>Motion:</b> Mike Alonso made a motion to accept the agenda with the recommended changes. Tim Collins seconded the motion.</p> <table border="1" data-bbox="712 1283 1252 1360"><thead><tr><th>In Favor</th><th>Against</th><th>Abstain</th></tr></thead><tbody><tr><td>11</td><td>0</td><td>0</td></tr></tbody></table> <p>The motion was adopted unanimously without debate.</p>	In Favor	Against	Abstain	11	0	0
In Favor	Against	Abstain					
11	0	0					
<b>Approval of the April 9 Minutes:</b>	The committee reviewed the April 9 minutes and approved them as presented.						
<b>Open the floor for public comment:</b>	<ul style="list-style-type: none"><li>• PCS did not receive any comment cards.</li><li>• There were no public comments in the room or online.</li></ul>						
<b>Reports:</b>	<p><b>Part A Monthly Expenditure Report</b> <i>(Expenditures as of March 31, 2026)</i></p> <p>Claudia Yabrudy reported the following:</p> <ul style="list-style-type: none"><li>• Grant Month Number: 1</li></ul>						

- Target Expenditures: 8.33%
- Actual Expenditures 5.91%
- Difference: 2.42%

Claudia Yabrudy provided the following information regarding the Part A monthly expenditure:

- Part A is still operating on a partial award from HRSA.
- Some agencies are delayed in their invoicing.
- Clients were able to access medications through other funding sources through March.
- ADAP is anticipating changes to the medication formulary in June.
- The state is in session working to approve a fiscal budget, so the future of the ADAP program structure is still uncertain.

**Part A Close-Out Report for FY 2025-26**

Claudia reported the following:

- 100% of funds were expended from the prior year
- The Planning Council approved three (3) allocations during the year,
- The Recipients office reallocated funds during the final sweep to cover expenses in Outpatient Ambulatory Health Services, Oral Health, and Medical transportation.
- \$2,647 in Program Income was received and spent in OAHS.

**Motion:** Mike Alonso made a motion to accept the FY 2025-2026 Final Allocations Report. Tim Collins seconded the motion.

In Favor	Against	Abstain
11	0	0

The motion was unanimously adopted by roll call vote and without debate.

**Part A Clinical Quality Management Report**

Tessa Bricker reported the following:

	Baseline 2025	2026 Q1	National Target
EMA VLS	92%	91%	95%
OAHS VLS	93%	93%	95%
MCM VLS	89%	84%	92%
Referral VLS	92%	93%	94%

- Data for Q1 Annual Retention was not available at the time of reporting.
- CQM Work Plan Goals include 1) Goal 1: Viral Load Clean Up – Increase EMA-wide VLS from 91% to 94% by improving timely viral load monitoring, follow-up, and data accuracy across service providers; and 2) Goal 2: Quality Care Awards – Refine the

recognition program for QI achievements and the process for implementing QI awards, using the QI Resource Guide.

- 2026 Client Satisfaction Survey Data shows that 14% (825) of clients have responded to the survey.
- Satisfaction survey responses show

	Q1 Medical	Q1 Case Management
Friendliness	98.8%	99.7%
Timeliness	98.2%	99.3%
Understanding	99.0%	99.3%
Guidance	98.6%	100%
Environment	99.6%	98.8%
Confidence	99.4%	98.4%
Satisfaction	98.8%	99.7%

**Part B Monthly Expenditure Report**  
***(Expenditures as of March 31, 2026)***

Whitney Marshall reported the following:

- Grant Month Number: 12
- Target Expenditures: 100%
- Actual Expenditures 100%
- Difference: 0%

Whitney provided the following information regarding the Part B monthly expenditures:

- The Part B grant year funds were 100% spent with the submission of a final invoice.

**GR Monthly Expenditure Report**  
***(Expenditure as of March 31, 2026)***

Whitney Marshall reported the following:

- Grant Month Number: 9
- Target Expenditures: 75%
- Actual Expenditures: 79%
- Difference: -4%

**Part B Clinical Quality Management Report**

Whitney Marshall reported the following:

	Baseline 2025	2026 Q1	National Target
EMA VLS	89%	91%	95%
OAHS VLS	90%	89%	95%
MCM VLS	90%	88%	95%
NMCM VLS	83%	81%	95%

Referral VLS	91%	86%	95%
EMA Retention	72%	70%	90%
OAHS Ret.	80%	81%	90%
MCM Retention	66%	69%	90%
NMCM Ret.	70%	78%	90%
Referral Ret.	65%	76%	90%

For the sake of time, the committee agreed to review the 2027-2031 Integrated Plan Draft at the start of New Business.

**New Business**

**2027-2031 Integrated Plan Draft**

Dr. David Cavalleri presented the first draft of the Integrated Plan:

- Formatting and language was modified from the previous iteration due to changes in HRSA’s styling.
- Epidemiology data is based on 2024 data from the state.
- Barriers identified in Figure 9: Barriers to HIV Prevention – Service Gaps were gathered through the town hall and focus group process.
- The focus group held at Florida Department of Health in Lake County was held in Umatilla.
- Additional questions or corrections identified should be sent directly to PCS and Dr. Cavalleri by May 22, 2026.
- The Planning Council will approve the final draft of the plan in June and sign the letter of concurrence.

**Medical Case Management (MCM) Service Standard**

The Committee reviewed proposed changes to the MCM Service Standard:

- The note limiting caseloads for ICM was removed.
- Standard 1.2 was removed so that so that MCM and ICM share the same staff qualifications.
- “Cultural Competence” was removed and replaced with “Patient-centered care”
- Training requirements were revised from 15 hours to 25 hours.
- Confidentiality/HIPAA and professional ethics was split in two:
  - Confidentiality/HIPAA
  - Professional Ethics and Boundaries
- HIV/AIDS Resources was changed to HIV Resources
- The frequency of Part B F2F contact requirements, acuity updates, and care plan updates was removed and revised to align with the Part B approved acuity scale.
- The discharge process and documentation requirements were revised.

**Motion:** Mike Alonso made a motion to approve the Medical Case Management Service Standard with the proposed changes. Tim Collins seconded the motion.

<b>In Favor</b>	<b>Against</b>	<b>Abstain</b>
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