



Metropolitan Jacksonville Area HIV Health Services

## PLANNING COUNCIL

*Ryan White Part A and Part B Programs*

Social Services Division

1809 Art Museum Drive, Suite 100 ♦ Jacksonville, FL 32207

# A G E N D A

Meeting Date: **3:00 PM - Thursday, July 28, 2016**

CALL TO ORDER ..... Antoinette Turner

MOMENT OF SILENCE

MISSION STATEMENT ..... Member

PARLIAMENTARY POINTERS ..... Ellen Schmitt

ROLL CALL ..... Heather Vaughan

APPROVAL OF MAY 26, 2016 MINUTES ..... Antoinette Turner

ADMINISTRATIVE AGENCY – PART A REPORT ..... Deidre Kelley

LEAD AGENCY – PART B REPORT ..... Max Wilson

ADMIN AGENCY PERFORMANCE EVALUATION ..... Planning Council

### COMMITTEE REPORTS:

Executive .....Page 9 ..... Kendall Guthrie

Membership .....Page 15 ..... Kim Geib

- ♦ Motion to recommend Christie Mathews as Local Health Department Rep
- ♦ Process on resignation from the Council or a committee

W.A.C. ....Page 21 ..... Errol Schell

PLWHAA .....Page 25 ..... Gloria Coon

### *OUR MISSION:*

The mission of the Planning Council is to provide a means for planning and implementing a coordinated response to the needs of people living with and affected by HIV.

Priority & Allocations .....	Page 29 .....	Kendall Guthrie
<ul style="list-style-type: none"> <li>• Committee recommends approval of the list of prioritized services for FY2017</li> <li>• Committee recommends approval of the allocation of funding for FY2017</li> </ul>		
Integrated Comp Plan .....	Page 51 .....	Heather Vaughan
Bylaws .....		Ellen Schmitt
<ul style="list-style-type: none"> <li>• Final reading of proposed bylaws changes</li> <li>• Committee recommends approval of the proposed bylaws changes</li> </ul>		
EIIHA .....	Page 57 .....	Todd Reese <i>Acting Chair</i>
UNFINISHED BUSINESS .....		Antoinette Turner
NEW BUSINESS .....		Antoinette Turner
PUBLIC COMMENTS .....		Members of the Public
ANNOUNCEMENTS .....		All
ADJOURNMENT .....		Antoinette Turner
MEET and GREET .....		Guests and Members



Metropolitan Jacksonville Area HIV Health Services  
**PLANNING COUNCIL**

*Ryan White Part A and Part B Programs*  
Social Services Division  
1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207

# MINUTES

**Meeting Date: Thursday, July 28, 2016**

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**Council Members Present:** Antoinette Turner (*Chair*), Kendall Guthrie (*Vice Chair*), Heather Vaughan (*Secretary*), Nathaniel Hendley (*Treasurer*), Gloria Coon (PLWHA Rep), Ellen Schmitt (*Parliamentarian*), Dana Barnes, Michael Bennett, Sheila Broderick, Vernard Clinkscales, Kim Geib, Sharon Hunter, Terri Mims, Verlon Murray, Beth Parker, Pat Sampson, Errol Schell, and Max Wilson

**Council Members Absent:** Veronica Hicks and Torrencia Shiloh

**Proxy Members Present:** Jim Bernert

**Proxy Members Absent:** Michael Kyger

**Support Staff Present:** Deidre Kelley, Mary Martinez, and Sandy Sikes

**Guests:** Ne-Tosha Dopson, Sandra Ellis, Delmar Esannason, Dierdre Esannason, Denice Grace, Tiffany Green, Steven Greene, Christie Mathews, Walter Morrison, Janice Murphy, Jerry Murray, Katrina Odell, DeWeece Ogden, Todd Reese, and Linda Williams

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## **Call to Order**

The meeting was called to order at 3:00 p.m. by Council Chair Antoinette Turner.

**Moment of Silence was observed.**

## **Mission Statement**

Kim Geib read the Planning Council's Mission Statement.

## **Roll Call**

The Secretary took the roll and a quorum was declared.

## **Approval of Minutes**

Motion was made and seconded to accept the May 26, 2016 Minutes as presented.

### **Administrative Agency Report**

Part A Program Manager Deidre Kelley announced that the Part A Program office received a new cell phone early last week. Not being able to send text messages from staff to Planning Council and Committee members had become a problem, since there were times when staff needed to get an immediate message out. Sandy Sikes will continue using email for the majority of correspondence to members, but for more urgent matters text messaging could be used.

The Youth Summit held July 19 was a success. Twenty-seven agency representatives attended, along with four young people from JASMYN and APEL and Logan Hopkins, son of CAREWare Administrator Brian Hopkins. We collected responses to questions posed to discussion groups that will assist us in our comprehensive planning as well as EIIHA activities. The purpose of the Summit was to develop a framework for the delivery of quality, culturally competent medical services for youth. A final report will be prepared and shared with the Planning Council.

One of the responsibilities of the Planning Council is to evaluate the effectiveness of the Administrative Agency in performing their legislatively mandated responsibilities. Evaluation forms were given to Council Members during the meeting, and then collected by the Council Secretary. The Planning Council evaluated the Administrative Agency on their responsibilities including the routine grant administration and monitoring activities, development of applications for Part A funds, the receipt and disbursement of program funds, the development and establishment of reimbursement and accounting systems, the preparation of routine programmatic and financial reports, compliance with grant conditions and audit requirements, and all activities associated with the grantee's contract award procedures, including the development of requests for proposals, contract proposal review activities, negotiation and awarding of contracts, monitoring of contracts, reporting on contracts, and rapidly allocating funds in areas of greatest need within the Jacksonville metropolitan area. The Administrative Agency also assists the Planning Council in establishing priorities for the allocation of funds, developing a comprehensive plan, establishing methods for obtaining input on community needs and priorities which may include public meetings, conducting focus groups, and convening ad-hoc panels, and developing a strategy to coordinate the provision of such services with programs for HIV prevention including outreach and early intervention or EIIHA activities.

The podium was then turned over to Chief Johnnetta Moore who handed out Certificates from the Mayor to the reappointed and newly appointed Planning Council members.

### **Lead Agency Report**

Max Wilson of the Part B Office stated that the state's HIV Needs Assessment Survey will be conducted from October 2016 into January 2017. Agencies are asked to encourage their Ryan White clients to complete this survey.

Max announced several organizational changes at the Florida Department of Health, including Todd Reese, who recently joined the AIDS Program Office as a consultant.

## **Administrative Agency Evaluation**

Planning Council members each completed an evaluation on the Administrative Agency. Evaluation forms were collected by the Council Secretary and turned over to the Program Manager following the meeting.

## **Committee Reports**

### **Executive**

Kendall Guthrie

The committee met June 23, but did not have a quorum. As such, there was no business acted on, but members did share committee reports and talked about the upcoming Technical Assistance training.

### **Membership**

Kim Geib

The committee met twice this month. Kim briefly went over the resignation process as follows:

- A. Committee Members (non-Council) – Committee members should submit a resignation to their committee chair, with a copy to Sandy Sikes. Resignation can either be in writing or by email. Resignation should state the effective date of their resignation.
- B. Planning Council and Proxy Pool (not on Executive) – Member should submit their resignation to the Membership Chair, with a copy to Sandy Sikes. Resignation can either be in writing or by email. Resignation should state that they are resigning from the Planning Council and give the effective date of their resignation. If the member is also resigning from a committee, they should name the committee(s) as well. If the Planning Council or Proxy Pool member is only resigning from a committee, then they can simply notify the committee chair, with copy to Sandy Sikes, and give the effective date.
- C. Executive Committee Members – Elected officers and committee chairs should submit their resignation directly to the Planning Council Chair, with a copy to Sandy Sikes. Resignation can either be in writing or by email. Resignation should state that they are resigning from the Planning Council and give the effective date of their resignation. If the member is also resigning from a committee, they should name the committee(s) as well. If the Executive Committee member is only resigning from a committee, then they can simply notify the committee chair, with copy to Sandy Sikes, and give the effective date.

Kim Geib announced her resignation from the Planning Council, effective September 1. She will continue on the Coordination of Care Committee. Kim also announced the resignation of Sheila Broderick, the Medicaid Representative. Sheila stated that her resignation is due to job responsibilities, but that she has enjoyed her tenure with the Council. Kim and Council Chair Antoinette Turner presented Sheila with a Certificate of Appreciation for her work on the Jacksonville Planning Council.

During the committee's July 28 meeting, members interviewed Christie Mathews, an employee with the FDOH – St. Johns County. The committee's recommendation is that the **Planning Council put forward the name of Christie Mathews to the Mayor for appointment to the Planning Council.** A vote was taken and the motion passed.

#### Women, Adolescents, and Children (W.A.C.)

Errol Schell

The committee has participated in several health fairs recently. At the June 27 National HIV Testing Day Event held at New Bethel AME Church, 100 people were tested. Torrencia Shiloh has asked the W.A.C. committee to consider co-hosting the Northeast Florida Women's Awareness Conference in 2017. The committee will meet again next week and discuss further before making a final decision.

Gloria Coon recently attended a Consumer Advisory Board Conference in June, and will be sharing some information at the next meeting.

#### PLWHAA

Gloria Coon

PLWHAA Committee meeting in June included a Public Hearing. Nathaniel Hendley talked about the health department's new HIV Care Now campaign. Torrencia introduced a Priority and Allocation activity that got the members involved in this process and it generated more discussion about Ryan White services.

One of the last auction items the committee has is the Jack Daniels fun pack, and Gloria asked those in attendance to please consider placing a bid. Proceeds go towards the Oasis Scholarship.

#### Priority and Allocations

Kendall Guthrie

The committee has met twice since the Planning Council last met. During the June committee meeting, members reviewed all possible services that could be funded, and determined that what Parts A and B have currently prioritized for 2016 is working quite well. During their July meeting, members looked at the unmet needs in the area and how effective the currently funding is.

The Priority and Allocations Committee made two separate recommendations to the Council, and both recommendations, or motions, were presented and voted on separately. The first motion was **for the Planning Council to prioritize the same services in FY2017 as they currently have in 2016.** That motion was voted on by a roll call vote, and passed. The second motion was **for the Planning Council to keep the allocated funding at the same level for FY2017 as they currently have for 2016.** That motion was also voted on by a roll call vote, and passed.

Core Medical Services		Support Services	
Ambulatory/Outpatient Medical Care	29.18	Non-Medical Case Management (Eligibility)	4.62
AIDS Pharmaceutical Assistance	6.13	Substance Abuse – Residential	4.76
Medical Case Management	23.68	Medical Transportation	0.43
Mental Health	2.53	Legal Services	2.67
Substance Abuse – Outpatient	0.18	Outreach	1.27
Oral Health	12.72	Child Care	0.11
Medical Nutrition Therapy	2.30	Food	0.59
Home & Community Based Health	0.08	Emergency Financial Assistance	0.61
Health Insurance Premium	6.49	Transitional Housing	1.65
Subtotal:	83.29	Subtotal:	16.71

D. Barnes	Yes / Yes	K. Guthrie	Yes / Yes	E. Schell	Yes / Yes
M. Bennett	Yes / Yes	S. Hunter	Yes / Yes	E. Schmitt	Yes / Yes
S. Broderick	Yes / Yes	T. Mims	Yes / Yes	A. Turner	Yes / Yes
V. Clinkscales	Yes / Yes	V. Murray	Yes / Yes	H. Vaughan	Yes / Yes
G. Coon	Yes / Yes	B. Parker	Yes / Yes	M. Wilson *	Yes / Yes
K. Geib	Yes / Yes	P. Sampson	Yes / Yes		

\* voting on behalf of Florida Dept. of Health – Duval County

#### Continuum of Care Coordination (*Integrated Comp Plan*)

Heather Vaughan

The Integrated Comp Plan sub-committee has met three times since the end of May. Members have put in over 300 hours working on the TGA's portion of the IHPCP, and this work will be a roadmap for the Planning Council over the next five years. Their next meeting will be August 11, following the PLWHAA Committee, and everyone is invited to attend.

#### Bylaws

Ellen Schmitt

The changes to the Bylaws had been read aloud during the May Council meeting. Ellen asked members present if anyone wished to have them read again? In that there were no changes offered at the first reading, and no one needed them re-read a second time, the floor was then opened to any questions or further discussion regarding any changes to the Bylaws. One question was asked as to why Article IV, Section 2B was included, since Medicaid and Part B are housed in two different state agencies? The answer was that this particular language came from the Part A Manual, which covers all states. There are some states where Part B and the Medicaid Office might fall under the same agency. There was no further discussion and the **motion to approve the proposed bylaws changes** was voted on and unanimously passed.



Acting Committee Chair Todd Reese gave a report from the committee's May meeting. Much of the meeting was spent going over youth-centric HIV care. The committee was also told of the Youth Summit, and Dee covered that with the Planning Council earlier in this meeting. Ellen Schmitt is the committee's Co-Chair, and the next EIIHA meeting will be July 29.

**Unfinished Business**

- There was no unfinished business.

**New Business**

- There was no new business.

**Public Comments**

- There were no public comments.

**Announcements**

- Sheila introduced her co-worker, DeWeece Ogden, who is interested in getting involved with the Planning Council and its committees.
- Max Wilson said the '*save the date*' notices will be out soon for the September 27 HIV Conference that FDOH is coordinating, along with UF Health and JASMYN.

**Adjournment**

The meeting was adjourned at 4:00 p.m.



Antoinette Turner, Chair



Heather Vaughan, Secretary

AT/HV:ss



**EXECUTIVE COMMITTEE**

*Ryan White Part A and Part B Programs*

Social Services Division

1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207



**Summary of Meeting for Thursday, June 23, 2016**

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**Committee Members Present:** Heather Vaughan (*Secretary*), Nathaniel Hendley (*Treasurer*), Gloria Coon (*PLWHA Rep*), Dana Barnes (*Pharmacy & Therapeutics*), Kim Geib (*Membership*), and Errol Schell (*W.A.C.*)

**Committee Members Absent:** Antoinette Turner (*Chair*), Kendall Guthrie (*Vice-Chair*), and Ellen Schmitt (*Parliamentarian*)

**Support Staff Present:** Sandra Sikes

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**CALL TO ORDER**

The meeting began at 3:01 p.m. and was facilitated by Council Secretary Heather Vaughan. There was no quorum.

**MOMENT OF SILENCE OBSERVED**

**COMMITTEE CHAIRS' REPORTS**

**Bylaws:**

- ♦ First reading of proposed bylaws changes was done during the May Planning Council meeting. Bylaws Committee Chair is requested to just ask members during the July meeting if they want the changes read aloud a second time; if not, then proceed with asking for questions and comments about the changes, before announcing the motion. Staff to send out an email asking Council members to bring their hard copies of the bylaws back, in order to cut down on copying.
- ♦ Exec Committee feels that members are still getting something from Ellen's 'Parliamentary Pointers'. For the July Council meeting, perhaps Ellen can research and report on '2<sup>nd</sup> Readings', when second readings are required, i.e. for bylaws changes?

**W.A.C.:**

- ♦ Announced a testing day event coming up next Monday at New Bethel A.M.E. Church.
- ♦ Torrencia had asked the W.A.C. Committee to think about hosting the 2017 NEFWAC. Committee would be responsible for selecting the date, securing location, finding vendors, getting a caterer for lunch, pulling an invitation list, etc. Executive Committee suggested

that W.A.C. make sure they have enough members to commit to the work of this event, and to make sure that it's not just two or three members doing almost all of the work. Errol said that the committee will carefully review this once more during their August meeting before making a decision to commit.

#### **Priority & Allocation:**

- ♦ The committee prioritized services during their June 9 meeting.
- ♦ The third and final Public Hearing will take place tomorrow at the NFAN Luncheon. There have only been two comments so far; one comment was regarding mental health.
- ♦ Next meeting is July 14, when the committee will propose funding for each of those services. Both the list of prioritized services and their proposed funding will be presented at the same time to the Planning Council July 28.

#### **PLWHAA:**

- ♦ Hosted a Public Hearing during their July 9 committee meeting.
- ♦ Torrencia showed the group the new FDOH campaign, *HIV Care Now*. Several members followed along with her presentation by opening up the campaign on their own cell phones and iPads, and a couple of people called the phone number to test it out.
- ♦ Committee did a Priority & Allocations activity that involved listening to a story, and then filling out a form to list the services they felt were most needed in the Jacksonville area. Their forms were collected and given to the Priority and Allocations Committee Chair.

#### **Membership:**

- ♦ Kim reviewed the attached unaligned ratio sheet, which listed all current Planning Council members in their mandated categories. Planning Council membership is currently at 20, with an unaligned ratio of 35.0%. This bump is due to one of our consumer members who recently moved from aligned to unaligned.
- ♦ The Proxy Pool is down to two members: Jim Bernert and Michael Kyger. Several applications have been received recently and the Membership Committee will review at their next meeting.
- ♦ A candidate for the Health Department category is scheduled to be interviewed soon.

#### **Coordination Committee:**

- ♦ The Integrated HIV Prevention and Care Plan is now finished and ready to be submitted to the AIDS Institute.
- ♦ A Letter of Concurrence from the Planning Council needs to be signed, so it can be attached to the submission. Staff will get the Vice Chair to sign letter tomorrow at the Public Hearing. FCCAPP will also be signing a similar letter to send.
- ♦ The Comp Plan Sub-committee will meet again July 7, to receive hard copies of the final version of the IHPCP.

### **Pharmacy and Therapeutics:**

- ♦ A committee meeting will be called either September 7 or September 14. Purpose is to do a six-month review on the Hepatitis-C pilot program.
- ♦ This is a small committee and several members have left since their last meeting. Committee Chair is looking to add additional members and asked that everyone think about possible new recruits for Pharmacy and Therapeutics.

### **UNFINISHED BUSINESS**

There was no unfinished business.

### **NEW BUSINESS**

- ♦ Warning Letter: None.
- ♦ Request for Removal: None.
- ♦ EIIHA Committee Chair: The Council still needs a chair for the EIIHA Committee. E-Board was given a list of their members, with Planning Council members noted. Staff suggested that if there is still difficulty in finding a Planning Council member who can take on this additional task, then the Executive Committee might have to name a non-Council member to be “Acting” Committee Chair or Co-Chair. Heather volunteered to contact several of the members (Schmitt, Reese, and Cunningham) to see if they would be willing to take Chair or Co-Chair slot.

### **STAFF REPORT**

- ♦ July 28 Planning Council meeting will include a performance evaluation on the Administrative Agency staff. Heather to distribute and collect the evaluation forms.
- ♦ The July Council agenda was reviewed. Parliamentary Pointers will remain on the agenda; the ‘meet and greet’ has been successful and will continue. In order to make sure that guests who leave immediately after the meeting are also greeted, maybe put a new process in place. The Planning Council Chair, when selecting a member to read the Mission Statement, also asks that member to serve as a greeter in the outer hallway at the conclusion of the meeting.
- ♦ Reviewed July and August calendars. Committee was advised that Sandy Sikes and Dee Kelley will not be at the August 25 Planning Council meeting. Since that meeting might not be recorded, Executive Committee was advised that they should have one or two members taking notes of the Council meeting to contribute towards the meeting minutes.
- ♦ Committee chairs will be doing a mid-year report at the September 6 Executive meeting.
- ♦ Sandy has been in touch with the HRSA Project Officer, Andy Tesfazion, about providing some Technical Assistance (TA) training for the Executive Committee. This TA is specifically for Jacksonville recruiting PLWHA’s to the Proxy Pool, and Andy offered to coordinate a conference call between Jacksonville and Miami-Dade. He has asked for a list

of questions we might have for Miami, and the committee came up with around 15 questions to ask. This list of questions will be sent to Andy prior to the TA training which is set for August 2.

## **PUBLIC COMMENTS**

None.

## **ANNOUNCEMENTS**

- ♦ Youth Summit is Tuesday, July 19.
- ♦ Affordable Care Enrollment (ACE) Technical Assistance Center is offering training via webinar or telephone conferencing to Planning Councils. There are several topics to choose from.

## **ADJOURNMENT**

The meeting ended at approximately 4:25 p.m.

**COMMITTEE RECOMMENDATION TO THE PLANNING COUNCIL:**      None



ACE TA Center  
[www.targethiv.org/ace](http://www.targethiv.org/ace)  
[acetacenter@jsi.com](mailto:acetacenter@jsi.com)

June 23, 2016

Ryan White HIV/AIDS Program Planning Councils and Planning Bodies

Dear Planning Council/Planning Body Representative,

The Affordable Care Enrollment (ACE) Technical Assistance Center provides resources, technical assistance and training to Ryan White HIV/AIDS Program (RWHAP) recipients and subrecipients to assist with the enrollment of diverse clients in health coverage. The ACE TA Center has developed over 35 tools and 10 webinars that can be found online at the TARGET Center Website using this link:

<https://careacttarget.org/ace>

As part of our national outreach efforts, the ACE TA Center would like to make available technical assistance, in the form of a presentation to your Part A Planning Council or state planning body, on the resources and supports offered by the ACE TA Center. This presentation could be accomplished remotely, or possibly, depending on timing and location, in person. Presentation topics could include, but are not limited to: Engaging and Enrolling Clients; Enrolling Diverse Clients including Immigrants; Staying Covered and Using Coverage; Resources for Enrollment Assistants New to HIV; Financial Help and Taxes, and Building Consumer Capacity.

If you are interested in having a presentation made to your Planning Council/Planning Body, please [click here](#) to complete an application, or contact us at [acetacenter@jsi.com](mailto:acetacenter@jsi.com). Training dates are available through August 31, 2016. The first step in the process would be a brief discussion, to identify the particular resources that might be of greatest interest or help to your group. Due to the large volume of RWHAP recipients and sub-recipients, and depending on the response to this letter, we may not be able to work with all groups interested in having a presentation of this kind.

Thanks for all that you do to meet the needs of people living with HIV, as well as to prevent new HIV infections.

Best wishes,

A handwritten signature in blue ink that reads "Stewart Landers".

Stewart Landers, Principal Investigator  
Affordable Care Enrollment (ACE) TA Center  
JSI Research & Training Institute, Inc.

A handwritten signature in blue ink that reads "Mira Levinson".

Mira Levinson, Project Director  
Affordable Care Enrollment (ACE) TA Center  
JSI Research & Training Institute, Inc.

CC: Michael Goldrosen, Director, Division of State HIV/AIDS Programs  
Steven R. Young, Director, Division of Metropolitan HIV/AIDS Programs

**MEMBERSHIP COMMITTEE**

*Ryan White Part A and Part B Programs*  
Social Services Division

1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207



**Summary of Meeting for Wednesday, July 6, 2016**

**Committee Members Present:** Kim Geib (*Chair*), Gloria Coon, Nathaniel Hendley, Sharon Hunter, and Antoinette Turner

**Support Staff Present:** Sandra Sikes

**CALL TO ORDER**

The meeting was called to order at 10:05 a.m. by Nathaniel Hendley

**MOMENT OF SILENCE OBSERVED**

**REVIEWED UNALIGNED RATIO AND PC REPRESENTATION**

		<u>Epi Data for the TGA</u>		<u>Planning Council Representation</u>	
Total Membership:	20	White:	28%	40%	White
Total Unaligned:	7	Black:	64%	55%	Black
		Hispanic:	05%	00%	Hispanic
		Other:	03%	05%	Other
Unaligned Ratio:	35.0%	Male:	65%	35%	Male
		Female:	35%	65%	Female

Kim Geib arrived and the meeting was turned over to her.

**UNFINISHED BUSINESS**

There was no unfinished business.

**NEW BUSINESS**

Applications: Committee reviewed the membership application and attendance for Christie Mathews. She has been attending Planning Council meetings since January and is actively involved in the Coordination Committee. Committee agreed to interview Ms. Mathews at the earliest opportunity; staff will schedule date and notify everyone.

Application Log: Copies of the application log were given to committee, and members discussed applicants who had been placed on the inactive list. Kim and Nathaniel asked if those applicants had lost interest or if they were just waiting for someone to talk to them about taking the next step. Kim, Nathaniel, Gloria, and Sharon each took several names from the list and agreed to contact them and invite them to the PLWHAA committee meeting and to ask if they are still interested in joining the Proxy Pool.



Identifying Candidates: Committee reviewed a list of people who have been attending the PLWHAA Committee this year and identified several individuals to contact who might be good prospective candidates for the Proxy Pool.

New Application Form: Staff recently revised a membership application form specifically for the Proxy Pool. Instead of the four page Membership Application, this form is only two pages and is geared towards individuals who would be applying for the consumer mandated category. Kim will share this with the Planning Council at their July meeting and we will have blank copies of the form to distribute at the Council meeting.

Resignation: Kim Geib announced that she is resigning from the Planning Council at the end of August. Her term would have been completed in February 2017, but due to recent changes in her job, she needs to step away sooner. Kim will continue on at least one committee, representing the voice of Nassau County, but she will be leaving the Membership Committee. Nathaniel Hendley will assume the reins of committee chair beginning in September.

TA Questions: HRSA is coordinating TA training for the Executive Committee on August 2. During the June 23 meeting, the Executive Committee came up with a number of questions to ask, regarding recruiting. Questions were typed and sent to committee members after the meeting with a request to review and critique. After receiving further input, the questions were revised and the final version was presented to the Membership Committee for their information.

A reverse Questionnaire was given to Membership Committee. This form included the same questions as the above form, but was directed to Jacksonville. Committee members were asked to look at some of the answers already given, and decide if they really represent the Jacksonville Planning Council. A few questions were not yet answered and members were asked to think about those. When finished, we can give this Questionnaire to Miami-Dade, which will provide them with more details about Jacksonville's Council.

While discussing guests and recruiting, members came up with an idea to provide survey or comment cards to guests who attend Planning Council or committee meetings. This will be similar to a customer service, or *'how are we doing?'* comment card, and guests will be asked just a few questions about how they liked the meeting and if they would be interested in coming back. Kim and Nathaniel will forward to staff the Department of Health's survey cards, so we'll have an idea of what to put down.

Survey: A new survey for the PLWHAA Committee was developed that will gauge the involvement in the community by its committee members. There are also several questions to see how effective case managers and peer navigators are in getting the message to their clients about the PLWHAA Committee.



## **PUBLIC COMMENTS**

Nathaniel is involved in a project to survey local infectious disease physicians, to see if they are aware of PrEP and PEP, and if they would prescribe these medications to their patients. Discussion turned to the HIV Routine Testing booklets that EIIHA came up with earlier this year. There are about 80 more booklets to be distributed, and Nathaniel agreed to provide staff with these doctors' contact information, so the EIIHA booklets can be given to them as well.

## **ANNOUNCEMENTS**

No announcements

## **ADJOURNMENT**

The meeting was adjourned at approximately 11:30 a.m.

**COMMITTEE RECOMMENDATION TO THE PLANNING COUNCIL:**     None.

## QUESTIONS FOR MIAMI-DADE PLANNING COUNCIL

(Would like to have Miami-Dade's Planning Council Chair, and committee chairs for PLWHA and Membership.)

Does the Miami-Dade Planning Council attend any non-Council events where they recruit new members or talk about the role of the Planning Council? (The focus here is on recruiting Ryan White consumers, either aligned or non-aligned.)

Does the Planning Council conduct any activities on their own, such as an Open House, where they recruit or inform the local Ryan White community about the Planning Council?

How does Miami-Dade engage their local Ryan White agencies in recruiting for the Planning Council? Does the Planning Council routinely get applications, or at least inquiries, from consumers who were referred by their case managers?

How does Miami-Dade feel about a Planning Council only recruiting RW consumers from its own PLWHA committee, in lieu of recruiting from outside sources, events, or agencies?

What do they think motivates consumers to want to visit the Miami-Dade Planning Council?

- Guest was invited to a Council meeting by a friend
- A special event or meeting topic
- Person is looking to make a difference
- Wants to learn more about the Ryan White program, where the money comes from and how it's spent
- Social need (enjoys being around people and/or looking for something to do)
- Other

What does Miami-Dade Planning Council do when someone visits their Planning Council meeting for the first time? What's the process – what does staff do, what do Council members do – what does the member do? How do you get that guest to return to the next meeting?

What happens after a guest visits? Is there a follow-up with the guest? What happens on their second visit? Anything different, or more, that staff or Council members do?

How often does the Miami-Dade Planning Council meet?

How often does the consumer group (PLWHA committee/caucus) meet?

How many committees does Miami-Dade Planning Council have?

Has Miami-Dade scheduled any committees to meet back-to-back, in order to cut down on number of times to attend meetings? In other words, Committee A meets 2:00 to 3:00, and Committee B meets 3:15 to 4:15?

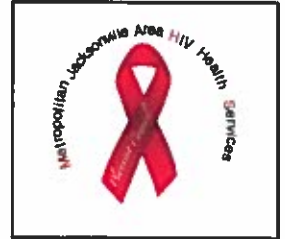
How does the Miami-Dade Planning Council engage its members during their Council meetings? In other words, how do they get members to talk, to offer suggestions and advice on matters coming before the Planning Council? How does the Council monitor its members to make sure that every member understands the topic they are voting on and/or the business being discussed? How would they make sure that members are making independent decisions, and not 'following the leader'?

How do you recruit Planning Council members in the other categories?

What is the hardest mandated category to fill in your EMA?

Does Miami-Dade have a Youth Council that's part of either the Planning Council or the consumer (PLWHA) committee where youth **are** the members of that council, not just the topic of that council? If so, what is the age range of the youth?

Has Miami-Dade looked at a mentoring program for young PLWHAs (18 to 29), where seasoned Planning Council Members can mentor younger new or potential members?



## Summary of Meeting for Thursday, June 2, 2016

**Committee Members Present:** Errol Schell (*Chair*), Gloria Coon (*Co-Chair*), CoCo Adkins, Bonita Drayton, Diedre Esannason, Audrey Green, Terri Mims, Sherda Pierre, Ella Russell, and Alfreda Telfair

**Guest:** Chris Shavers and Torrencia Shiloh

**Support Staff Present:** Sandy Sikes

### CALL TO ORDER

The meeting was called to order at 9:05 a.m. by Co-Chair Gloria Coon.

### MOMENT OF SILENCE OBSERVED

### SELF-INTRODUCTIONS BY MEMBERS

### UNFINISHED BUSINESS

- ♦ Recap of May 14 Edward Waters event: Ella and Audrey gave the recap. The event was a little different than what they had expected; Edward Waters was looking to have about 1,000 attend, but that number was overestimated. Several people did stop by the W.A.C. table and ask questions. River Region had the HIV testing unit there, but has not released number tested at that event.
- ♦ Tablecloth: More discussion on getting another tablecloth. Members agreed that it should be a cloth tablecloth of good quality, and be long enough to fit either a 6' or an 8' table. The title 'Women, Adolescents, and Children's Committee' should be shown on the front, and it was agreed to not have those letters painted on the tablecloth, as the paint would flake off after a couple of washings. Another suggestion was to keep the tablecloth plain, but to get a silk screen print of the W.A.C. logo and just drape it across the table. Members will check vendors and pricing for screen print.

- ♦ Take It To The Streets: This is Alfreda's event and is scheduled for Saturday, June 4 from noon to 3:00 p.m. The location is the Flossie Brunson Eastside Park at 1<sup>st</sup> and Franklin Streets. There will be some tables and chairs provided for vendors.

The health fairs and events occurring on Saturdays brought up a point for several committee members. Not everyone has a car, and buses operate on a weekend schedule, so it makes it difficult for some members to participate, even though they want to. It was suggested that contact information be shared with everyone on the committee, so if a member would like to attend an event but are lacking transportation, that they can call other members to see about possibly getting a ride, if that member is able. Staff provided a list to everyone present that included committee members' names, email addresses, and telephone numbers.

- ♦ NHTD: National HIV Testing Day is Monday, June 27, and UF CARES, Lutheran, and several other agencies are coordinating a mini health fair at New Bethel AME Church, 1231 Tyler Street (a/k/a Bonita's Church). Scheduled time is 1:00 to 7:00 p.m. and W.A.C. committee members will be attending; W.A.C. will not have a table, but rather members will man the agencies' tables as needed. UF CARES has requested at least a couple of members to sit at their table, in order to free up UF staff as they do testing.

Torrencia stated that the APO and AHF are doing an NHTD event from 1:00 to 9:00 p.m. at the Sav-A-Lot on Lem Turner.

- ♦ West Jacksonville Restoration: This was from a health fair request the APO sent to W.A.C.; date is Saturday, August 6 at 8601 Youngerman Court. The committee had agreed a couple of months ago to participate; Alfreda agreed to work at this health fair; looking for additional volunteers.

## NEW BUSINESS

- ♦ Display Board: Committee was to look over the board and see if any updates or changes were needed. This was **tabled** until the August meeting, as the display board was not available. Also, Torrencia stated that a new board has been ordered.
- ♦ Upcoming Health Fairs:  
Friday, June 10 from 1:00 to 5:00 p.m. at Oakwood Villas – 8201 Kona Avenue in Arlington. Audrey Green will be attending, and asked for other volunteers. HIV and pregnancy testing will be offered at the health fair.

Saturday, October 8 from 8:00 a.m. to 1:00 p.m. at First Chronicles Baptist Church - 2559 W. 30<sup>th</sup> Street. Committee will make more plans when the date gets closer.

- ♦ **Conference Opportunity:** Torrencia asked the W.A.C. Committee to consider hosting the Northeast Florida Women's Awareness Conference (NEFWAC) in 2017.

Q: Has a date been set for the NEFWAC?

A: No, that would be up to the committee, should they agree to host. Torrencia suggested that a date in March be heavily considered, in that National Women and Girls HIV Awareness Day and the National Week of Prayer for the Healing of AIDS both occur in early March.

Q: What would be involved in hosting this event?

A: You would need to invite vendors and line up guest speakers, decide on topics for break-out sessions, arrange for lunch to be provided, and to advertise the conference.

Q: Since the Planning Council and its committees cannot sign any contracts or provide insurance coverage, will that prohibit W.A.C. from hosting?

A: No, that would not prohibit committee from hosting. The main duties would be planning, getting the word out, and doing the behind-the-scenes work that goes into putting on a conference. FDOH will provide the funds for whatever is needed and they handle any contracts that need to be signed.

Bonita reminded the group that if W.A.C. does says yes to hosting, then **all** members will be responsible to help pull this off.

## **PUBLIC COMMENTS**

There were no public comments.

## **ANNOUNCEMENTS**

Gloria will be attending a conference for Consumer Advisory Boards June 12 - 15 in Virginia. She will be representing UF CARES C.A.B.

## **ADJOURNMENT**

The meeting adjourned at approximately 10:02 a.m.

## **COMMITTEE RECOMMENDATION TO THE PLANNING COUNCIL:**

None.

**PLWHAA COMMITTEE**

*(People Living With HIV/AIDS and Affected Community)*

*Ryan White Part A and Part B Programs*

Social Services Division

1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207



**Summary of Meeting for Thursday, June 9, 2016**

**Members in Attendance:** Gloria Coon (*Chair*), Torrencia Shiloh (*Co-Chair*), Deirdre Esannason, Delmar Esannason, Sharon Hunter, Denise Jackson, Frieda Saraga, Terri Mims, LaTanya Adkins, Verlon Murray, Jerry Murray, Vernard Clinkscales, Zane Urbanski, Mary Glenn, Beth Parker, Rikki Stubbs, Charlie Taylor.

**Guests:** Linda Williams, Eric Peeples, Yolanda Kellam-Carter, Robert Dawson, Tasha Brundge

**The PLWHAA Committee meeting was called to order at 12:05 p.m.** by Chair Gloria Coon. Following a **moment of silence**, Vernard Clinkscales read the **Mission Statement:**

*Our mission is to educate, advocate, support and empower all PLWHAA (People Living with HIV/AIDS and Affected) in Northeast Florida communities. We exist as a vocal planning body, focused on raising awareness through high impact prevention strategies, leading us to our goal of getting to zero.*

Denise took the roll and guests were recognized and encouraged to think about joining this committee. There were no public comments, but there were **several announcements:**

- **Rules for Public Forum** were read by Gloria Coon and reiterated by Torrencia Shiloh.
- **WAD Fundraiser at Hamburger Mary's** in July 2016, and all are welcome to participate.
- **August 2016 PLWHAA Meeting** will be the meeting names are drawn for the all-inclusive scholarship award to the Positive Living Conference in Ft. Walton Beach, Florida. Scholarships are not transferrable if individual is unable to attend.
- **Sandy Sikes and Dee Kelly** were recognized and appreciated for their participation in the Jail Fundraiser by the WAD committee.
- **Remember all sick and shut-in members** and to pay a visit or call to encourage them. Update on some of our missing members: Jim B. is doing well, Selene P. recuperating at home, Antoinette Turner is recovering well from knee surgery. Planning to be released from the hospital within the week.

**JUNE BIRTHDAYS** were acknowledged as: Dierdre Esannason, and Elinor Holmes.



## **Program:**

## **New Business:**

**Public Forum** question and concern addressed by Mary Glenn was as follows: *Limited assistance for Mental Health patients who have little or no health insurance.*

Torrencia asked those who were ambivalent about stating their concerns in person, to anonymously write concerns on blank sheets of paper. Each committee member chose a written concern from the box to read aloud to the committee as a way to express the concerns, or appreciation of the services received by each member.

**HIVCARENOW.COM** was introduced to the committee. Each member was asked to locate the website on their smartphones, and instructions on how to maneuver the site were given at the meeting. Showed on the screen all features of the new FDOH Campaign.

**Priority and Allocation activity** was introduced. Members were encouraged to attend the P & A meeting to get involved in the program funding process.

**Kendall Guthrie** shared information about the Planning Council and how membership opportunities are always available to eligible PLWHAA members. Questions and answers regarding the process were presented.

## **Wrap-up:**

**Volunteers needed** for community outreaches that are planned for June 17-19 at the River City Marketplace Theaters, as well as Northwest Jacksonville 12<sup>th</sup> Annual Neighborhood Day on June 18<sup>th</sup>. Sign-up sheet was shared, and reminder that tickets for scholarships will be earned for participation.

**Monthly item for Bid:** Bid started at \$100. For a queen comforter set, Jack Daniels Grilling package, an area rug, and a bottle of Vendage wine.

**Topics on Agenda** that were not discussed today were tabled for the July meeting.

The meeting was adjourned at 1:35p.m.

**Next meeting:** July 14, 2016

**PLWHAA COMMITTEE**

*(People Living With HIV/AIDS and Affected Community)*

*Ryan White Part A and Part B Programs*

Social Services Division

1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207



## **Summary of Meeting for Thursday, July 14, 2016**

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**Members in Attendance:** Gloria Coon (*Chair*), Nathaniel Hendley, Deirdre Esannason, Delmar Esannason, Denise Jackson, Veronica Hicks, Frieda Saraga, Selene Pickens, Terri Mims, Verlon Murray, Jerry Murray, Zane Urbanski, Mary Glenn, Beth Parker, Rikki Stubbs, Todd Reese, Robert Dawson, Antoinette Turner.

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**Guests:** Denice Grace, Elinor Holmes

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**The PLWHAA Committee meeting was called to order at 12:00 p.m.** by Chair Gloria Coon.

Following a **moment of silence**, Denise Jackson read the **Mission Statement**:

*Our mission is to educate, advocate, support and empower all PLWHAA (People Living with HIV/AIDS and Affected) in Northeast Florida communities. We exist as a vocal planning body, focused on raising awareness through high impact prevention strategies, leading us to our goal of getting to zero.*

Denise took the roll and guests were recognized and encouraged to think about joining this committee. There were no public comments, but there were **announcements along with shared reflections**:

- **Reflections** were shared by member from 11:30am to noon.
- **Ouch Rule** re-emphasized by Nathaniel.
- **Auction item for July** (Jack Daniels and Wine package) was shared and bid list was distributed.
- **Positive Living Update** applications were distributed. Scholarship winners will be announced at the August 2016 meeting.
- **Remember all sick and shut-in members** and to pay a visit or call to encourage them. Update on some of our missing members: Jim B. was admitted into the hospital for a few days, and is now resting at home.

**JULY BIRTHDAYS** were acknowledged as:

*Jim Bernert, Mary Glenn, Michelle Handy, Denise Jackson, Terri Mims, Rikki Stubbs, and Zane Urbanski.*

### **Lunch and New Business:**

**Community Partners Survey** Each committee member was given a survey to complete regarding RW services. Sandy Sikes was the facilitator of the survey and mentioned that the Priorities and Allocations meeting today was where funding would be discussed, voted and approved for the new fiscal year. Encouraged all committee members to attend.

### **Program:**

**Legal Aid presentation** Heather Kilpatrick spoke about the many legal services that Legal Aid provides. She particularly spoke about the importance of the Power of attorney process, Social Security disability claims, and the food stamp process issue.

### **Wrap-up:**

**Encouraged participation at the WAD Fundraiser at Hamburger Mary's** July 25, 2016 at 7:30pm.

**Positive Living Conference Scholarship** recipients will be chosen at the August meeting. Encouraged all to complete the application today and turn in to Denise Jackson.

**Beth Parker shared** information from an email she received from an individual who expressed concern with the ADAP process at the Comprehensive Care Center pharmacy. Nathaniel Hendley volunteered to follow-up with the citizen concern.

The meeting was adjourned at 1:05p.m.

**Next meeting:** August 11, 2016

**PRIORITY and ALLOCATIONS COMMITTEE**

*Ryan White Part A and Part B Programs*  
Social Services Division  
1809 Art Museum Drive, Suite 100 ♦ Jacksonville, FL 32207



## **Summary of Meeting for Thursday, June 9, 2016**

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**Committee Members Present:** Kendall Guthrie (*Chair*), Coco Adkins, Justin Bell, Sandra Ellis, Heather Kilpatrick, Terri Mims, Jerry Murray, Verlon Murray, Patricia Sampson, Torrencia Shiloh, Zane Urbanski, Heather Vaughan, and Linda Williams

**Absent:** Dana Barnes, Michael Bennett, Debbi Carter, Mark Cleveland, Vernard Clinkscales, Gloria Coon, Diedre Esannason, Veronica Hicks, Todd Reese, Halima Scurry, Antoinette Turner, and Shaundia White

**Guests:** Frieda Saraga

**Support Staff Present:** Deidre Kelley and Sandy Sikes

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### **CALL TO ORDER**

The meeting was called to order at 1:50 p.m. by Chair Kendall Guthrie.

### **MOMENT OF SILENCE OBSERVED**

### **ROLL CALL**

Kendall took the roll call; thirteen members present and twelve members absent.

### **PLWHAA INPUT**

Torrencia shared with the group that during the PLWHAA committee meeting earlier today, members and guests did an exercise on priority and allocations where they listed by percentage how they would fund various core and support services. Torrencia said that they wanted to share those results with this committee. Kendall agreed that this was valuable to know, and should be taken into consideration before the committee sets the resource allocation; it will be placed on the July agenda for Priority and Allocations.

## **SERVICE GAPS**

Duke Study - Last year Duke University conducted surveys and interviews on the HIV Care Continuum on behalf of the Southern HIV/AIDS Strategy. One of the areas researched was the Jacksonville TGA, and a graph of this area's service strengths and gaps was shared with the committee.

Local Study – In late 2014, the Jacksonville TGA implemented a re-linkage program to HIV medical care, initially called the '661 Project'. Outreach staff surveyed PLWHAs returning to care, and identified a number of barriers contributing to PLWHAs falling out of care. A one-page synopsis outlining their findings was also shared with the committee. Lack of transportation and housing remain top of the list. Outreach staff also stated that PLWHAs still report mistreatment and/or perceiving a bad attitude from front office staff.

## **2015 UTILIZATION DATA**

Handouts were included with the agenda and committee reviewed the following:

Client Demographic Report – for the period of March 2015 through February 2016. Report broke epi data down by age, by race, household income, housing status, insurance, and HIV/AIDS status. During this twelve month time frame, 459 individuals were newly diagnosed and linked to care. There were just over 4,100 Ryan White clients served in 2015.

Service Utilization – for the period of March 2015 through March 2016. This chart listed each category of service that was funded, and showed the number of clients served and the number of units provided.

Needs Assessment – The power point presentation on the Jacksonville TGA's 2016 Anonymous Needs Assessment Survey was presented to the committee. This survey had previously been shared with the Planning Council and with the Comprehensive Planning Sub-Committee. The survey was conducted in February 2016 by local Ryan White agencies and also the PLWHAA Committee.

## **CORE CLINICAL PERFORMANCE MEASURES**

	FY 2014	FY2015
Clients linked to care	91%	92.6%
Clients in care	82%	84.1%
Clients on ART	76%	77.9%
Viral Load (VL) Suppression	69%	71.2%

Overall, the core clinical performance in the Jacksonville TGA has increased by 2%.

## REVIEW OF CORE AND SUPPORT SERVICES

During the May meeting, the Committee Chair had read over the definitions of the core medical and support services, and provided several examples for the group. Members were provided with a list of all the services; a notation was made on those services that are currently funded.

## COMMENTS FROM THE PUBLIC

Information regarding service gaps, demographics, needs assessment, and performance measures had been shared with committee and guests, along with detailed information on each of the core medical and support services categories. Kendall opened the floor to guests and members of the public for their questions, comments, or concerns. There were no comments or questions from the public.

## PRIORITIZE SERVICES

Kendall opened the floor for committee discussion on prioritizing services. The services that the Jacksonville TGA has been prioritizing and funding over the past few years match the assessment information the committee looked at earlier in the meeting. In other words, the TGA has already been funding the services that local Ryan White clients say they need the most. A **motion** was then made by Jerry Murray, seconded by Heather Kilpatrick, **to recommend that the Planning Council prioritize the same services in 2017 as they currently have in 2016.** Those services are:

### Core Medical Services

Medical Case Management  
Ambulatory/Outpatient Medical  
Oral  
AIDS Pharmaceutical Assistance  
Health Insurance Premium  
Mental Health  
Medical Nutrition Therapy  
Substance Abuse – Outpatient  
Home & Community Based Health

### Support Services

Substance Abuse - Residential  
Legal Services  
Non-Medical Case Management  
Transitional Housing  
Outreach Services  
Emergency Financial Assistance  
Medical Transportation  
Child Care  
Food Bank/Home-Delivered Meals

After brief discussion, a roll call vote was taken and the motion passed.

J. Bell	Yes	T. Mims	Yes	Z. Urbanski	Yes
S. Ellis *	Yes	J. Murray	Yes	H. Vaughan **	Yes
K. Guthrie	Yes	V. Murray	Yes	L. Williams	Yes
H. Kilpatrick	Yes	P. Sampson	Yes		

\* voting on behalf of Florida Dept. of Health – Duval County

\*\* voting on behalf of Lutheran Social Services

Several members talked about the occasional need for a translator or someone who signs. Dee volunteered to send an email to the providers, asking each agency to list employees who can speak another language and who could be contacted if needed by another agency for translation. This will also be brought up at the next Providers' Meeting.

## **ANNOUNCEMENTS**

There were no announcements.

## **ADJOURNMENT**

The meeting was adjourned at 3:10 p.m.

## **COMMITTEE RECOMMENDATIONS TO THE PLANNING COUNCIL:**

- That the Jacksonville Planning Council approve the prioritized list of services for FY2017



Figure 1. Jacksonville MSA Services and Service Gaps for each Step of the HIV Care Continuum

Prevent New Infections	Identify Those Infected	Link to Care	Retain in Care	Treat/Suppress Viral Load
SERVICE STRENGTHS				
HIV PREVENTION	HIV TESTING	LINKAGE TO HIV CARE	RETENTION IN HIV CARE	VIRAL SUPPRESSION
<ul style="list-style-type: none"> <li>▶ Evidence-based prevention programs (JASMYN);</li> <li>▶ Duval Health Department (HD) some prevention in schools (DASH)</li> <li>▶ HIV prevention/education in churches (Duval HD, NFAN, Women on a Mission)</li> <li>▶ Community Rehabilitation Center provides HIV prevention among older minority individuals</li> </ul>	<ul style="list-style-type: none"> <li>▶ HIV/STD testing at all Health Departments in MSA</li> <li>▶ STD clinic at JASMYN provides STD/HIV testing</li> <li>▶ River Region Human Services provides on-site testing</li> <li>▶ Testing services in the community through River Region, AHF, JASMYN)</li> <li>▶ Mobile outreach testing van through River Region and AHF</li> </ul>	<ul style="list-style-type: none"> <li>▶ Linkage services provided through River Region and JASMYN testing programs and linkage services provided by Duval HD and Lutheran Social Services</li> <li>▶ Recent effort funded through Ryan White to hire peers to assist individuals not in medical care to return to care if willing. Program may continue on a smaller scale</li> </ul>	<ul style="list-style-type: none"> <li>▶ Bus passes/gas stipends to reach medical care through local ASOs</li> <li>▶ Case management services through ASOs</li> <li>▶ HOPWA (housing) services provided by Catholic Charities, Lutheran Social Services, River Region</li> <li>▶ Legal services through Jackson Area Legal Aid</li> <li>▶ Support groups available through ASOs and medical care</li> </ul>	<ul style="list-style-type: none"> <li>▶ UF Cares ID Clinic</li> <li>▶ AIDS Healthcare Foundation</li> <li>▶ Duval HD ID clinic (CCC)</li> <li>▶ HIV primary care clinics in Clay and Baker Counties</li> </ul>
SERVICE GAPS				
<ul style="list-style-type: none"> <li>▶ Lack of funding for HIV/STD education and health promotion programs in the community</li> <li>▶ Challenges reaching youth with effective prevention programs (lack of comprehensive sex education in most schools)</li> <li>▶ Lack of PrEP availability</li> </ul>	<ul style="list-style-type: none"> <li>▶ Stigma concerns delay testing</li> <li>▶ Lack of standard HIV screening and testing protocols in ERs</li> <li>▶ Lack of education and testing by primary care providers</li> </ul>	<ul style="list-style-type: none"> <li>▶ Lack of consistently available transportation resources</li> <li>▶ Stigma concerns limit effectiveness of linkage efforts</li> </ul>	<ul style="list-style-type: none"> <li>▶ Stigma/disclosure concerns affect client engagement</li> <li>▶ Lack of stable housing and not enough transportation funding</li> <li>▶ Limited mental health/substance abuse care</li> <li>▶ Reductions in funding for case management</li> </ul>	<ul style="list-style-type: none"> <li>▶ Significant travel to care is necessary for many individuals in outlying areas of the MSA</li> <li>▶ Stigma concerns</li> <li>▶ Clinic level barriers including movement of care providers and some of perception of lack of welcoming clinic environment</li> </ul>

One of the leaks in the HIV Continuum of Care, (HCC) is client barriers. Therefore, to promote movement along the HCC, stopping leakages is of paramount importance. Hence, in fall 2014, the Jacksonville Transitional Grant Area implemented a relinkage to HIV medical care program that simultaneously identified barriers to retention in care. It is not enough to reconnect clients formerly lost to care without understanding the obstacles to retention in outpatient HIV primary medical care, which remain a deterrent to appropriate and continuous care engagement and involvement. In the JTGA, Part A funded Retention-Outreach staff tracked 37 PLWHAs lost-to-care during 2014 and successfully relinked 36, (97.30%), to HIV primary care providers. The average age of relinked clients was 44.56 years, median age 46 years, with a standard deviation of 10.59 years. The youngest PLWHA was 24; the oldest was 64 years old. The majority of PLWHAs relinked to care were African-Americans, (71%), and female, (53%).

During the case-finding phase of Outreach, Retention staff identified 26 barriers of retention in care. These barriers included: 1) Food Insecurity (9.38%), 2) Financial Instability (9.38%), 3) Resources Deficit (9.38%), 4) Disability (6.25%), 5) Depression (6.25%), 6) Busy lifestyle (6.25%), 7) Work schedule (9.38%), 8) Wait time (3.13%), 9) Illiteracy (3.13%), 10) Health Illiteracy (9.38%), 11) Service Refusal (6.25%), 12) Psychological Distress (3.13%), 13) Listless-No Energy (6.25%), 14) HIV Adjustment Disorder (3.13%), 15) Perceived Lack of Privacy (6.25%), 16) Housing (12.5%), 17) Transportation (53.13%), 18) Healthy Foods (3.13%), 19) Unemployment (3.13%), 20) Traditional Appointments (9.38%), 21) Insomnia (3.13%), 22) Abdominal Pain, (3.13%), 23) Vision Loss (3.13%), 24) Lack Social Support (3.13%), 25) Information Deficit (3.13%), and 26) Neuropsychiatric Disorder—addictions, eating disorder, mood disorders, sleep disorder (3.13%). The list of barriers is long, but prevalence shows that not all barriers are equally pervasive.

The need for transportation stood at the top of the constellation of barriers to retention to HIV care. Thus, we examine whether differences existed in need for transportation by race and gender. For the race of PLWHAs, Pearson Chi-square = 1.15, probability = 0.28 indicated no significant difference in PLWHA's responding with a Yes for lack of transportation. Similarly, for gender, Pearson Chi-square = 1.22, probability = 0.54 indicated no significant difference in PLWHA's responding with a Yes for lack of transportation. PLWHAs in each gendered group and the racial group were equally likely to have transportation need, indicative of the universality of transportation needs.

Moving beyond identification of a single, predominant barrier to retention in HIV care, the data revealed this trend. Of the 26 barriers to retention in HIV care, three categories emerged that can inform the work of Medical Case Managers. A brief description of each follows. In terms of Access to care, transportation and healthcare system traditional operating hours were predominant. In terms of survival and security, housing accommodation, food insecurity, financial instability, resource deficits, and health illiteracy were predominant. Finally, for environment work schedule mattered most. Given these considerations, the JTGA system care can now examine additional strategies to help PLWHAs linked to care remain enrolled in outpatient HIV care.

## Jacksonville TGA Ryan White Part A

## Client Demographic Report

Period: March 1, 2015 - February 29, 2016

	Male		Female		Transgender			
	HIV+	HIV-	HIV+	HIV-	HIV+	HIV-	Total	%
Total Number of Unduplicated Clients	2,420	106	1,469	88	53	0	4,136	
Total Number of New Clients	252	81	97	22	7	0	459	
<b>Age</b>								
< 2	0	34	1	29	0	0	64	1.55%
2 - 12	8	63	14	50	0	0	135	3.26%
13 - 24	218	7	63	5	4	0	292	7.06%
25 - 34	523	1	219	1	15	0	759	18.35%
35 - 44	427	1	371	1	18	0	818	19.78%
45 - 54	705	0	444	0	9	0	1,158	28.00%
55 - 64	442	0	295	2	6	0	745	18.01%
65 and older	102	0	62	0	1	0	165	3.99%
<b>Total</b>	<b>2,420</b>	<b>106</b>	<b>1,469</b>	<b>88</b>	<b>53</b>	<b>0</b>	<b>4,136</b>	<b>100%</b>
<b>Hispanic or Latino/a Ethnicity</b>								
Hispanic or Latino/a	123	4	46	2	1	0	176	4.26%
Non-Hispanic or Non-Latino/a	2,297	102	1,423	86	52	0	3,960	95.74%
<b>Total</b>	<b>2,420</b>	<b>106</b>	<b>1,469</b>	<b>88</b>	<b>53</b>	<b>0</b>	<b>4,136</b>	<b>100%</b>
<b>Race</b>								
White	700	6	252	12	7	0	977	23.62%
Black or African-American	1,617	95	1,176	68	44	0	3,000	72.53%
Asian	27	0	11	1	2	0	41	0.99%
Native Hawaiian/Pacific Islander	3	0	0	0	0	0	3	0.07%
American Indian or Alaskan Native	1	0	0	0	0	0	1	0.02%
More than One Race	70	5	30	7	0	0	112	2.71%
Not Specified	0	0	0	0	0	0	0	0.00%
Other	2	0	0	0	0	0	2	0.05%
Unknown	0	0	0	0	0	0	0	0.00%
<b>Total</b>	<b>2,420</b>	<b>106</b>	<b>1,469</b>	<b>88</b>	<b>53</b>	<b>0</b>	<b>4,136</b>	<b>100%</b>
<b>Household Income</b>								
Equal or below Federal Poverty	1,668	102	1,106	84	47	0	3,005	72.65%
101 - 150% of Poverty	323	2	159	1	2	0	487	11.77%
151 - 200% of Poverty	198	1	87	0	4	0	290	7.01%
201 - 250% of Poverty	118	1	58	2	0	0	177	4.28%
251 - 300% of Poverty	88	0	35	1	0	0	122	2.95%
above 300% of Poverty	31	0	24	0	0	0	55	1.33%
<b>Total</b>	<b>2,420</b>	<b>106</b>	<b>1,469</b>	<b>88</b>	<b>53</b>	<b>0</b>	<b>4,136</b>	<b>100%</b>
<b>Housing/Living Arrangements</b>								
Permanently Housed	1,987	87	1,277	83	40	0	3,474	83.98%
Non-Permanently Housed	433	19	192	5	13	0	662	16.01%
Institution	0	0	0	0	0	0	0	0.00%
Other	0	0	0	0	0	0	0	0.00%
<b>Total</b>	<b>2,420</b>	<b>106</b>	<b>1,469</b>	<b>88</b>	<b>53</b>	<b>0</b>	<b>4,136</b>	<b>100%</b>
<b>Medical Insurance</b>								
Private	100	0	194	2	3	0	299	7.23%
Medicare	338	0	189	2	6	0	530	12.81%
Medicaid	1,148	82	683	77	14	0	2,009	48.57%
Other public	48	0	23	0	0	0	71	1.72%
No Insurance	781	14	379	7	30	0	1,211	29.28%
Other	15	0	1	0	0	0	16	0.39%
Unknown/Unreported	0	0	0	0	0	0	0	0.00%
<b>Total</b>	<b>2,420</b>	<b>106</b>	<b>1,469</b>	<b>88</b>	<b>53</b>	<b>0</b>	<b>4,136</b>	<b>100%</b>
<b>HIV/AIDS Status</b>								
HIV positive not AIDS	1,482	0	870	0			2,332	56.38%
HIV positive AIDS status unknown	153	0	97	0			250	6.04%
CDC defined AIDS	805	0	502	0			1,307	31.60%
HIV negative affected clients only	0	69	0	58			127	3.07%
HIV Indeterminate	0	37	0	30			67	1.62%
Unknown/Unreported	0	0	0	0			0	0.00%
<b>Total</b>	<b>2,420</b>	<b>106</b>	<b>1,469</b>	<b>88</b>	<b>0</b>		<b>4,083</b>	<b>100%</b>

<b>Service Utilization and Expenses</b>				
<b>Funding Sources Included In Report: Ryan White Part A and Part B/GR</b>				
<b>Based Upon Monthly Service Reports by Invoice Date for Period of 3/1/15 - 3/31/16</b>				
<b>Produced: 6/6/2016</b>				
	<b>Category of Service</b>	<b>Unit Description</b>	<b># of Clients Served</b>	<b># of Units of Service</b>
1	Ambulatory/Outpatient Medical Care	1 Visit & Labs	2,615	7,368
2	Medications	1 Prescription	1,570	15,398
3	Medical Case Management	1 Encounter	3,077	16,991
10	Non Medical Case Management	1 Encounter	3,167	5,525
4	Mental Health	1 Service	473	6,603
5	Substance Abuse - Outpatient	1 Service	43	1,363
11	Substance Abuse - Residential	1 Day	48	1,723
6	Oral Health	1 Procedure	451	2,750
8	Home & Community-Based Health	1 Item	22	199
12	Medical Transportation	1 Bus Pass/Gas Card	463	1,764
13	Legal Services	1 Hour	318	1,968
9	Health Insurance Premiums	1 Payment	313	4,274
7	Medical Nutrition Therapy	1 Encounter	657	1,744
15	Child Care	1 Hour	55	357
16	Food Bank	1 Bag of Food	141	755
14	Outreach	1 Encounter	350	2,540
	<b>TOTALS</b>		<b>5,611</b>	<b>71,322</b>

## **CORE MEDICAL SERVICES**

**Medical Case Management**  
**Ambulatory/Outpatient Medical Care**  
**Oral Health**  
**AIDS Pharmaceutical Assistance**  
**Health Insurance Premium**  
**Mental Health**  
**Medical Nutrition Therapy**  
**Substance Abuse – Outpatient**  
**Home & Community Based Health**

Early Intervention Services - *currently have 4 EIS that already get Part C funds*  
Home Health Care  
Hospice Services

## **SUPPORT SERVICES**

(25% or less of total funds)

**Substance Abuse – Residential**  
**Legal Services**  
**Non-Medical Case Management**  
**Transitional Housing**  
**Outreach Services**  
**Emergency Financial Assistance**  
**Medical Transportation**  
**Child Care**  
**Food Bank/Home-Delivered Meals**

Pediatric Developmental Assessment  
Health Education/Risk Reduction  
Linguistics Services  
Housing Referral Services  
Permanency Planning  
Psychosocial Support Services  
Referral for Health Care/Supportive Services  
Rehabilitation Services  
Respite Care  
Treatment Adherence Counseling

**PRIORITY and ALLOCATIONS COMMITTEE**

*Ryan White Part A and Part B Programs*  
Social Services Division  
1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207



**Summary of Meeting for Thursday, July 14, 2016**

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**Committee Members Present:** Kendall Guthrie (*Chair*), Dana Barnes, Justin Bell, Michael Bennett, Gloria Coon, Diedre Esannason, Heather Kilpatrick, Terri Mims, Jerry Murray, Verlon Murray, Todd Reese, Antoinette Turner, Zane Urbanski, and Heather Vaughan

**Absent:** Coco Adkins, Debbi Carter, Mark Cleveland, Vernard Clinkscales, Sandra Ellis, Veronica Hicks, Patricia Sampson, Halima Scurry, Torrencia Shiloh, Shaundia White, and Linda Williams

**Guests:** Delmar Esannason and Frieda Saraga

**Support Staff Present:** Deidre Kelley and Sandy Sikes

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**CALL TO ORDER**

The meeting was called to order at 1:45 p.m. by Chair Kendall Guthrie.

**MOMENT OF SILENCE OBSERVED**

**ROLL CALL**

Kendall took the roll call; fourteen members present and eleven members absent.

**PUBLIC HEARING REPORT**

The committee was provided with a written report covering the three Public Hearings. There was a short discussion on the comments recorded at these meetings. One question was regarding information the case managers have access to, particularly when they are asked to refer a client to a service. The blue books are being updated by the Florida Department of Health, and the information will be put online so that contact information can be quickly updated.

**CORE CLINICAL PERFORMANCE MEASURES**

Dee Kelley shared with the committee the FY2015 numbers, and how they compared to FY2014. She noted that the measures show a favorable trend.



	FY 2014	FY 2015
Linked to Care	91%	92.6%
In Care	82%	84.1%
On ART	76%	77.9%
VL Suppression	69%	71.2%

Overall, an increase of 2%

## 2015 UTILIZATION DATA BY SERVICE CATEGORY

Committee members received a chart showing the WICY (Women, Infants, Children & Youth) Expenditures for last year. It was noted that the TGA continues to hold down the number of mother-to-child transmissions. However, the number of diagnosis among youth is climbing, which is due primarily to behavioral transmission.

The spreadsheet showing service utilization and expenses for FY2015 was distributed. The spreadsheet was broken down by unit description, number of clients and units served, the total expenses for each category, and the average cost per client.

## FUNDING STREAMS

A chart was presented that listed each service category, and showed where each service received funding from, whether it was Part A, B, C, D, F, SAMHSA, HOPWA or the CDC. The chart also listed the amount of dollars allocated per each funding source. The Chair reiterated that Part A is not the only funding sources for all services in this area.

## COMMENTS FROM THE PUBLIC

There were no comments.

## ALLOCATION OF FUNDING

Committee reviewed the current prioritized services and the percentage of funding allocated to each area. During the June meeting, members had voted to prioritize and keep the same service categories for FY2017. Several questions were answered regarding residential substance abuse, dental care, health insurance premiums, and transitional housing.

**A motion was made by Justin Bell, seconded by Jerry Murray, to keep the allocated funding at the same level for FY2017 as we currently have.**

Core Medical Services		Support Services	
Ambulatory/Outpatient Medical Care	19.89	Non-Medical Case Management (Eligibility)	2.49
AIDS Pharmaceutical Assistance	7.53	Substance Abuse – Residential	5.85
Medical Case Management	28.52	Medical Transportation	0.43
Mental Health	2.81	Legal Services	3.28
Substance Abuse – Outpatient	0.22	Outreach	1.56
Oral Health	14.34	Child Care	0.14
Medical Nutrition Therapy	2.55	Food	0.00
Home & Community Based Health	0.09	Emergency Financial Assistance	0.75
Health Insurance Premium	7.52	Transitional Housing	2.03
Subtotal:	83.47	Subtotal:	16.53



There was no further discussion, and following a roll call vote, the motion passed.

D. Barnes	Yes	D. Esannason *	Yes	J. Murray	Yes
J. Bell	Yes	K. Guthrie	Yes	V. Murray	Yes
M. Bennett	Yes	H. Kilpatrick	Yes	T. Reese **	Yes
G. Coon	Yes	T. Mims	Yes	A. Turner	Yes
				Z. Urbanski	Yes

\* Voted on behalf of Lutheran Social Svs

\*\* Voted on behalf of FL Dept of Health – Duval

## **ANNOUNCEMENTS**

There were no announcements.

## **ADJOURNMENT**

The meeting was adjourned at 2:30 p.m.

## **COMMITTEE RECOMMENDATIONS TO THE PLANNING COUNCIL:**

- That the Jacksonville Planning Council approve the allocation of funding for FY2017

**PUBLIC HEARINGS**

*Ryan White Part A and Part B Programs*  
Social Services Division  
1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207



**PUBLIC HEARINGS**

**THURSDAY, MAY 26, 2016**

Jacksonville Planning Council • Hearing opened at 4:15 p.m.

Jerry Murray: Mr. Murray spoke about a conference he recently attended, 'HIV Is Not A Crime'. Mr. Murray shared a couple of examples he heard about during the conference. Florida still has laws on the books that criminalize sexually active PLWHAs, regardless if there is transmission of HIV.

There being no further speakers, the Hearing closed at 4:20 p.m.

**THURSDAY, JUNE 9, 2016**

PLWHAA Committee • Hearing opened at 12:10 p.m.

Mary Glenn: Commented on lack of mental health services in this area. Appears that Case Managers do not have much information to give to clients regarding where to go to get services, outside of their own agency. She asked that Case Managers get additional training and/or receive more information about services in the North Florida area that they can share with their clients.

There being no further speakers, the Hearing closed at 12:15 p.m.

**FRIDAY, JUNE 24, 2016**

NFAN Luncheon held at Trinity Lutheran Church, 1415 S. McDuff Avenue at 12:00 p.m.

Teresa Braddy: Asked that funding continue in order to assist clients with medical insurance co-pays. Also wanted the Planning Council to look into assisting with co-pays for mental health.

Mary Glenn: Would like to see additional training for case managers. Feels there is a lack of sharing information between Ryan White agencies. An example would be case manager 'A' who might know a lot of mental health providers and their contact information, but case managers in other agencies who might need that information don't know to contact 'A'.

Denice Grace: Wanted to know why it is so hard to access mental health services in this area? There seems to be a problem getting mental health provider information to Ryan White clients; where to go, who to see, and providing payment to access the services.

Kristin Maranville: Would like additional medical care for more than just HIV treatments, i.e., specialists for other health conditions not related to HIV.

Ranking		# Votes	
1	AIDS Pharmaceutical Assistance	23	
2	Emergency Financial Assistance	20	
3	Medical Case Management	19	
4 (tie)	Medical Transportation	15	
4 (tie)	Food Bank/Home Delivered Meals	15	
4 (tie)	Health Insurance Premium	15	
5	Mental Health	14	
6	Transitional Housing	13	
7	Ambulatory/Outpatient Medical Care	11	
8 (tie)	Substance Abuse – Outpatient	10	
8 (tie)	Dental	10	
9 (tie)	Non-Medical Case Management	8	
9 (tie)	Legal Services	8	
10 (tie)	Medical Nutrition Therapy	7	
10 (tie)	Substance Abuse – Residential	7	
11	Outreach	6	
12 (tie)	Home & Community Based Health	1	
12 (tie)	Child Care	1	

WIC Report

5,274,338.00 Ryan White Part A: March 1, 2015 through February 29, 2016

	Category of Service	Unit Description	# of Women Served	# of Units of Service	Total Expenses	%	# of Infants Served	# of Units of Service	Total Expenses	%	# of Children Served	# of Units of Service	Total Expenses	%	# of Youth Served	# of Units of Service	Total Expenses	%
1	Outpatient Medical	1 Visit	488	1,375	\$402,932	7.64%	15	28	\$6,204	0.16%	12	34	\$9,838	0.19%	114	321	\$94,127	1.78%
2	Medications	1 Rx	363	3,064	\$182,519	3.46%									92	778	\$46,253	0.89%
10	Non-Medical Case Management	1 Encounter	708	1,119	\$55,956	1.09%									114	180	\$9,011	0.17%
3	Medical Case Management	1 Encounter	836	4,901	\$490,897	9.29%	30	72	\$7,200	0.14%	23	81	\$9,100	0.15%	127	744	\$74,448	1.41%
6	Oral Health	1 Procedure	162	987	\$285,964	5.42%									4	24	\$7,059	0.13%
5	Substance Abuse: Outpatient	1 Service	15	475	\$3,637	0.07%												
11	Substance Abuse: Residential	1 Day	22	789	\$137,409	2.61%									2	72	\$12,482	0.24%
9	Health Insurance Program	Premium Payment	70	976	\$94,030	1.78%									12	167	\$18,116	0.31%
12	Medical Transportation	Bus Tokens/Gas Cards	173	859	\$6,508	0.12%									14	53	\$688	0.01%
4	Mental Health	1 Service	140	2,294	\$49,340	0.94%									23	378	\$8,107	0.15%
13	Legal Services	1 Hour	132	817	\$68,437	1.32%									7	43	\$3,862	0.07%
15	Child Care	1 Hour	49	318	\$6,361	0.12%									6	39	\$779	0.01%
8	Home and Community-Based Services		0	0	\$0	0.00%												
7	Medical Nutrition Therapy	1 Encounter	305	909	\$93,984	1.71%	1	3	\$150	0.00%	4	15	\$750	0.01%	37	98	\$4,910	0.09%
14	Service Outreach	1 Encounter	71	515	\$18,590	0.31%									6	43	\$1,369	0.03%
16	Food	1 Bag	52	278	\$22,092	0.42%									41	219	\$17,446	0.33%
	TOTAL		1,391	19,378	\$1,888,733	35.81%	39	103	\$18,554	0.29%	23	146	\$19,538	0.37%	278	3,168	\$298,519	5.52%
	Weighted Percentage					33.97%				0.82%				8.34%				8.59%

Service Utilization and Expenses							
Funding Sources Included In Report: Ryan White Part A and Part B/GR							
Based Upon Monthly Service Reports by Invoice Date for Period of 3/1/15 - 3/31/16							Average Cost Data
Produced: 6/6/2016							for Period of Report
	Category of Service	Unit Description	# of Clients Served	# of Units of Service	Total Expenses	Avg. Cost per Client	Avg. Cost per Unit
1	Ambulatory/Outpatient Medical Care	1 Visit & Labs	2,615	7,368	\$1,919,222.00	\$ 733.93	\$ 260.48
2	Medications	1 Prescription	1,570	15,398	\$575,611.00	\$ 366.63	\$ 37.38
3	Medical Case Management	1 Encounter	3,077	16,991	\$1,581,452.00	\$ 513.96	\$ 93.08
10	Non Medical Case Management	1 Encounter	3,167	5,525	\$344,135.00	\$ 108.66	\$ 62.29
4	Mental Health	1 Service	473	6,603	\$152,952.00	\$ 323.37	\$ 23.16
5	Substance Abuse - Outpatient	1 Service	43	1,363	\$10,428.00	\$ 242.51	\$ 7.65
11	Substance Abuse - Residential	1 Day	48	1,723	\$299,749.00	\$ 6,244.77	\$ 173.97
6	Oral Health	1 Procedure	451	2,750	\$796,628.00	\$ 1,766.36	\$ 289.68
8	Home & Community-Based Health	1 Item	22	199	\$5,000.00	\$ 227.27	\$ 25.13
12	Medical Transportation	1 Bus Pass/Gas Card	463	1,764	\$22,770.00	\$ 49.18	\$ 12.91
13	Legal Services	1 Hour	318	1,968	\$167,218.00	\$ 525.84	\$ 84.97
9	Health Insurance Premiums	1 Payment	313	4,274	\$432,946.00	\$ 1,383.21	\$ 101.30
7	Medical Nutrition Therapy	1 Encounter	657	1,744	\$137,826.00	\$ 209.78	\$ 79.03
15	Child Care	1 Hour	55	357	\$7,140.00	\$ 129.82	\$ 20.00
16	Food Bank	1 Bag of Food	141	755	\$60,000.00	\$ 425.53	\$ 79.47
14	Outreach	1 Encounter	350	2,540	\$81,623.00	\$ 233.21	\$ 32.14
	<b>TOTALS</b>		5,611	71,322	\$6,594,700.00	\$1,175.32	\$92.46

48

	2016 Allocation Amount		2016 Percentage
<b>Core Medical Services</b>			
Ambulatory/Outpatient Medical Care	1,065,704		19.89
AIDS Pharmaceutical Assistance	403,488		7.53
Medical Case Management	1,528,072		28.52
Mental Health	150,277		2.81
Substance Abuse – Outpatient	11,861		0.22
Oral Health	768,032		14.34
Medical Nutrition Therapy	136,648		2.55
Home & Community Based Health	5,000		0.09
Health Insurance Premium	402,946		7.52
<i>Subtotal:</i>	4,472,028		83.47
<b>Support Services</b>			
Non-Medical Case Management	133,750		2.49
Substance Abuse – Residential	313,200		5.85
Medical Transportation	22,770		0.43
Legal Services	175,640		3.28
Outreach	83,552		1.56
Child Care	7,500		0.14
Food	-0-		0.00
Emergency Financial Assistance	40,092		0.75
Transitional Housing	108,559		2.03
<i>Subtotal:</i>	885,063		16.53
<b>Total:</b>	<b>\$ 5,357,091</b>		<b>100.00%</b>

**CONTINUUM OF CARE COORDINATION COMMITTEE**

Integrated Comp Plan Sub-Committee

Ryan White Part A and Part B Programs

Social Services Division

1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207



## **Summary of Meeting for Thursday, June 2, 2016**

**Committee Members Present:** Max Wilson (*Co-Chair*), Justin Bell, Michael Bennett, Bonita Drayton, Sandra Ellis, Frances Lynch, Joe Mims, Torrencia Shiloh, Herb Smith, and Cindy Watson

**Absent-in-Service:** Kim Geib

**Support Staff Present:** Sandy Arts, Brian Hopkins, Deidre Kelley, Sandra Sikes, and Graham Watts

### **CALL TO ORDER**

The meeting was called to order at 2:08 p.m. by Committee Co-Chair Max Wilson.

### **MOMENT OF SILENCE OBSERVED**

### **ACTIVITY**

Members participated in a bean counting contest. Frances Lynch won by being closest to the mark of 299, which represented the number of man-hours this committee has invested in since November in committee meetings.

### **WORK PLAN TIMELINE**

Dee Kelley reviewed the timeline with the group. The goal of today's meeting is to review the draft of the narrative; the committee remains on target with their timeline.

### **IHPCP NARRATIVE**

The Integrated HIV Prevention and Care Plan narrative had been emailed earlier to committee members for their review. Several small changes were suggested and the IHPCP will be revised and emailed in a few days.

### **PUBLIC COMMENTS / ANNOUNCEMENTS**

There were no public comments or announcements.

### **ADJOURNMENT**

The meeting was adjourned at approximately 2:45 p.m.

### **COMMITTEE RECOMMENDATION TO THE PLANNING COUNCIL:**

None.





## Summary of Meeting for Thursday, June 16, 2016

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**Committee Members Present:** Heather Vaughan (*Chair*), Max Wilson (*Co-Chair*), Michael Bennett, Bonita Drayton, Kim Geib, Nathaniel Hendley, Frances Lynch, Torrencia Shiloh, and Herb Smith

**Support Staff Present:** Brian Hopkins, Deidre Kelley, Sandra Sikes, and Graham Watts

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### CALL TO ORDER

The meeting was called to order at 2:08 p.m. by Committee Chair Heather Vaughan.

### MOMENT OF SILENCE OBSERVED

### WORK PLAN TIMELINE

Members reviewed the timeline. The AIDS Institute is requesting each EMA/TGA to email a draft of their Comp Plan, so that they can get an idea of the length for each section. Either Max or Dee will send this electronically in a few days, after final changes are made from today's meeting.

### REVISIONS TO GOAL #3

In a recent email Cindy Watson asked if the committee would take another look at Objective 3.1 and replace the AIDS statistics with statistics on HIV. Committee members also wanted to make a slight change within the goal. A **motion** was made by Graham Watts, seconded by Herb Smith **to add 'preventing new infections' to the goals**. There was no further discussion and the motion passed.

### REVIEW DASHBOARD

The committee looked at a print-out of the Dashboard the APO has worked on. The Dashboard shows a resource inventory, one for the prevention side, and another one for the patient care side. Max asked for help in providing the final pieces of information for this. Michael Bennett made a **motion**, seconded by Herb Smith, **to accept these changes as presented**. There was no further discussion and the motion passed.

## **IHPCP NARRATIVE**

Members have now had the opportunity to study the draft of the IHPCP Narrative and to offer any final revisions to the Plan. Several members have submitted revisions, including the ones addressed during today's meeting. The AIDS Institute would like to have our final version as soon as possible. Dee volunteered to input the last of the changes made today, and she should have them completed by Friday afternoon. Chair Heather Vaughan advised the committee that if they are satisfied with this plan, after today's revisions are applied, then she would entertain a motion to accept. Frances Lynch made a **motion**, seconded by Nathaniel Hendley, **to accept the Jacksonville TGA's Integrated HIV Prevention and Care Plan, after the revisions are made from today's meeting.** There being no further discussion, the motion was voted on. All committee members voted in favor; there were none opposing or abstaining, and the motion passed.

## **PUBLIC COMMENTS**

There were no public comments.

## **ANNOUNCEMENTS**

- National HIV Testing Day Event Monday, June 27 at New Bethel AME Church; 1231 Tyler Street.
- Registration forms for the Positive Living Conference (a/k/a Oasis) in September are now out. New requirement this year is that you must include your full payment at the time of registration.

## **ADJOURNMENT**

The meeting was adjourned at approximately 2:45 p.m.

## **COMMITTEE RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE:**

- To accept, on behalf of the Jacksonville Planning Council, the Integrated HIV Prevention and Care Plan (IHPCP)
- To sign-off on the Letter of Concurrence to HRSA, advising that the Planning Council approves the IHPCP and is submitting same to the Florida Department of Health

## **COMMITTEE RECOMMENDATION TO THE PLANNING COUNCIL:**

None.

**CONTINUUM OF CARE COORDINATION COMMITTEE**

Integrated Comp Plan Sub-Committee

Ryan White Part A and Part B Programs

Social Services Division

1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207



## Summary of Meeting for Thursday, July 7, 2016

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**Committee Members Present:** Heather Vaughan (*Chair*), Max Wilson (*Co-Chair*), Justin Bell, Michael Bennett, Mark Cleveland, Bonita Drayton, Sandra Ellis, Audrey Gardner, Kim Geib, Nathaniel Hendley, Frances Lynch, Christie Mathews, Todd Reese, Patricia Sampson, and Cindy Watson

**Support Staff Present:** Brian Hopkins, Deidre Kelley, Sandra Sikes, and Graham Watts

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### CALL TO ORDER

The meeting was called to order at 3:00 p.m. by Committee Chair Heather Vaughan.

### MOMENT OF SILENCE OBSERVED

### IMPLEMENTATION TIMELINE

Graham presented sample tasks assignment lists for Goals 1 and 3. Members went over Goal 1, making minor changes on the tasks and agreeing with the suggested timeline.

Members went over Goals 3.1.1 through 3.2.2, making minor changes on the tasks. The committee will pick up at Goal 3.2.3 for the next meeting. Heather asked that members bring their hand-outs back to the next meeting, which will be 1:45 p.m. on August 11.

### PUBLIC COMMENTS

There were no public comments.

### ANNOUNCEMENTS

- The World AIDS Day Committee is hosting a fundraiser on Monday, July 25, beginning at 7:30 p.m.

### ADJOURNMENT

The meeting was adjourned at approximately 4:30 p.m.

### COMMITTEE RECOMMENDATION TO THE PLANNING COUNCIL:

None.



## **Summary of Meeting for Friday, May 20, 2016**

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**Present:** CoCo Adkins, Manny Andrade, Rayland Cunningham, Katrina Odell, Ellen Schmitt, and Heather Vaughan

**Guests:** Sabrina Cluesman and Vivian Lanham

**Staff:** Brian Hopkins, Deidre Kelley, Sandy Sikes, and Graham Watts

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### **CALL TO ORDER:**

The meeting was called to order at 10:40 a.m. by Deidre Kelley

### **MOMENT OF SILENCE WAS OBSERVED.**

### **MEMBERS DID SELF-INTRODUCTIONS.**

### **ANNOUNCEMENTS AND PUBLIC COMMENTS:**

- ♦ Rayland Cunningham of AHF announced that Dr. Lauer is no longer with AHF. Dr. Diane Sinnatamby is their new physician. Also, Todd Reese is no longer with AHF; his replacement will be named soon.
- ♦ Sabrina Cluesman of JAYSMN announced that they will have a new head of Case Management on May 31, and she will begin attending the Providers' Meeting. Sabrina will continue her role as Assistant Director of Clinical Services.

### **ACTION ITEMS**

**Youth-Centric HIV Care and Services:** Graham Watts discussed his recent paper on *Integration of Youth-Centric HIV Care and Services in the Jacksonville TGA*; copies were provided to each of the attendees.

There was brief discussion on the four parts of developing a youth-centric program:

- ✓ Transitioning adolescents and young adults to adult HIV care
- ✓ Characteristics of youth-centered HIV care and services
- ✓ Youth participation as a component of engagement in healthcare
- ✓ Standards for improving quality of care for young people

In terms of the work being done in this TGA, the idea is to tie our conversations to the Integrated HIV Prevention and Care Plan for 2017 – 2021. When dealing with a youth-centric program we need to understand that not only are we dealing with sexually transmitted infections, but also anxiety, depression, and other psychoses that are affecting young people.

Sabrina brought up the fact that when young people are invited to participate on committees or attend meetings, often times this competes with a dozen other things that are going on in a young person's life, so they may not give the same level of attention to detail that older adults may give. One of the youth models indicate that when you are trying to include young people in leadership, you should also be providing them transportation to and from meetings, providing an incentive or compensation to attend, and providing them reminders the week before and the day before the meeting. If we say that we want young people to be involved in these meetings and planning, then we need to provide the support that they need in order to show up fully in the room and be able to contribute; realize that by asking them to attend a meeting or work on a committee, you are taking away from their school, work, or free time.

The committee agreed that there is a need to come up with a community-wide age range for youth and for young adults.

Youth Summit: Dee announced that she and Dr. Rathore are putting together a youth summit on July 19. She will share with the EIIHA Committee what items were discussed at that summit during the next meeting.

Members agreed to move the next EIIHA Meeting from July 15 to July 22, which will be a few days after the Youth Summit. The July 22 meeting will run from 10:30 to approximately 12:30 or 1:00 p.m., and lunch will be provided.

#### **ADJOURNMENT:**

The meeting was adjourned at 11:45 a.m.

**COMMITTEE RECOMMENDATION TO THE PLANNING COUNCIL:**      None.



CALIFORNIA  
STD/HIV PREVENTION  
TRAINING CENTER

# Deconstructing Homophobia and Transphobia: A Way Forward!

Registration required for August 8th & 9th, 9:00– 4:00

Jacksonville online at:

([www.stdhivtraining.org/class\\_information.html?id=1369](http://www.stdhivtraining.org/class_information.html?id=1369) )



## Course Description

In considering the disparities related to HIV, high rates among MSM and transwomen of color are less likely the result of individual risk behaviors but are more commonly linked to structural inequalities such as homophobia, transphobia, racism, and poverty. This two-day training focuses specifically on the impact that homophobia and transphobia has on health outcomes and the provision of prevention and care services. Topics include considering root causes, examining LGBT history, acknowledging heterosexual privilege, the effects of layered stigma, and developing strategies to create more inclusive systems at an organizational level. The goal is to create institutional change to improve client-provider relationships and community health outcomes by examining and responding to homophobia and transphobia.

## Training Objectives

By the end of the training participants will:

- Be able to define and contrast heterosexism, homophobia, and transphobia
- Increase knowledge of the sources of homophobia and transphobia
- Gain awareness of privilege and oppression related to sexual orientation and gender identity
- Increase knowledge of the impact that LGBT history has on the HIV epidemic
- Increase knowledge of strategies to create inclusive prevention and care services

## Who should attend?

HIV prevention and care providers working with diverse populations in health departments or community based organizations. Contact us at 510.625.6000 for more information or visit our website at [www.stdhivtraining.org](http://www.stdhivtraining.org)

***We are happy to announce that this training has been co-sponsored by the University of Florida Center for HIV/AIDS, Research, Education, and Service.***