

Palm Beach County HIV CARE Council
CARE Council Meeting
Monday, June 28th 2021 @ 2:10P.M.
Minutes

Members Present

Chris Dowden
Felisha Douglas - **Vice Chair**
Kim Enright – Chair
Kristina Rowe
Thomas McKissack
‘Richardo Jackson
Kenny Talbot- **Treasurer**
‘Lysette Perez
Lilia Perez
Kristen Harrington
Tyrina Pinkney
Ashaki Sypher’
Ashnika Ali
Eileen Perry- **Secretary**

Members Absent

Cecil Smith
Dale Smith
Damion Baker

Glenn Krabec
Hector Bernardino
Mary Jane Reynolds
Karen Gipson
Miguel Velazquez

Skyler King

Guests

Geoffrey Downey – Midway
Charles Baldwin - FDOH
Denise Brown - FDOH
Jerome Hill –
Tiffany - FoundCare
Stephanie Thomas - Monarch

CARE Council Staff Present

Neeta Mahani

CARE Council Staff Absent

James Green

Grantee Staff Present

Shirley Lanier
Julian Tran
Dr. Daisy Wiebe
Thomas Eaton
Sean Conklin
Rosa Fortuna
Juanita Rivera
Anna Balla
Maria Corona
Helene Hvizd
Dr. Casey Messer – present for latter half of meeting

Grantee Staff Absent

Shoshana Ringer

- I. **The Palm Beach County HIV CARE Council meeting was called to order at 2:10PM.** Roll Call was taken. Guests were introduced. **There was a quorum.**
- II. A Moment of Reflection: **NONE**

A Moment of Silence

A moment of silence is observed in respect to the memory of those individuals who have succumbed to AIDS and those who are living with HIV. Let us remember why we are here today. Let us have the strength to make the decisions that will improve the care of those we serve. Let us be thankful for what we have accomplished to date.

III. Acceptance of Excused Absences: Glenn Krabec and Mary Jane Reynolds.

Chris Dowden made a Motion to excuse Glenn Krabec's absence due to his wife's death; seconded by ---. The Motion carried.

Chris Dowden made a Motion to accept Mary Jane Reynolds' absence as she is out sick. Felisha Douglas seconded. The Motion carried.

IV. Acceptance of the June 28 2021 CARE Council Meeting Agenda: The Chair, Kim Enright, asked everyone to review the agenda before them. She noted that the major business of the day, after the reports, will be the Officers' election, plus a request for volunteers for the Homeless/Housing Committee.

The Chair asked if anyone had anything that needs to be added. **Lilia Perez** pointed out that some changes needed to be made regarding the names of the committee chairs and Neeta agreed. Chris Dowden is Chair of QMEC, Kenny Talbot is Chair of Planning, and Eileen Perry is Chair of Membership.

Chris Dowden made a Motion to Accept today's agenda; Felisha Douglas seconded. The Motion carried.

V. Acceptance of the April 26 2021 CARE Council Meeting Minutes. Minutes were tabled for further review.

VI. Comments by the Chair: The Chair thanked the staff for all the hard work they'd put into the data presentation the previous week. She noted that there were some 200 pages of slides and ten presentations in ten hours, and that the data is needed for us to make decisions. She added that if anyone missed the presentation, the slides are available on the CARE Council website.

VII. Public Comments: NONE.

VIII. Educational Moment: NONE today, but there will be one next month from Taruna Malhotra.

IX. Unfinished Business : NONE.

X. Old Business: NONE.

XI. New Business:

A. Homeless Committee. Requested for Interested Members

Discussion occurred around setting up an Ad Hoc Committee around the Homeless/Housing Committee—Chris Dowden’s brainchild—and a request was made for volunteers to serve as members. **Felisha Douglas will be the chair.** Chris Dowden will also be a member. The *Ad Hoc Housing Committee* was suggested as the committee’s name.

Volunteers for membership:

1. Felisha Douglas - Chair
2. Ashnika Ali
3. Chris Dowden
4. Thomas McKissack
5. Kristina Rowe
6. Dale Smith
7. Tyrina Pinkney
8. Dr Messer & Jacqueline Taylor will be staff member

this is an Ad Hoc Committee so members do not have to be CARE Council members. There was an appeal for us to let others know that the Ad Hoc Housing Committee is open for membership.

The Chair took a Point of Privilege to say it’s great to be here in person, as we were last week, and it’s wonderful to see more and more people coming out in person. She stated that she believes that as more members get vaccinated, more will turn out in person. She thanked those members and guests who were present virtually, but added that having in-person participants helps us to make quorum, so special thanks to those participants, as well. She asked others to please join us in person next time.

XII. Standing Reports:

A. Legislative Update: NONE. Chris Dowden asked if anyone had signed up for *FHAAN* (A News Service of The AIDS Institute for the [Florida HIV/AIDS Advocacy Network](#)) **the email listserv with the AIDS Institute.** FHAAN is a thorough legislative update that goes out during legislative session. Chris noted that he’d sent it to Dr. Messer after the last meeting. Said it gives a lot of info directly and indirectly related to HIV. **Neeta asked him to share it with her. She will send it out to members.**

B. CPP Update: NONE.

C. Part B Report: Patient Care & 4BNWK Report: Brittany McClure is not present: **NONE.**

D. HOPWA:

City of WPB HOPWA: NONE. Miguel Vazquez was not present to give the report.

PBC HOPWA: Jacqueline Taylor gave brief update of PBC HOPWA. She said there is nothing new to report from Friday’s Data Presentation, except that HOPWA is actively seeking staff to join as housing case managers. They are going through the existing wait

list to determine the current need. Hopefully within the next two weeks they will be able to present the CARE Council with the case managers and providers of the process to access that service.

- E. C.H.A.G. Report given by** Denise Brown (of DOH, also a state representative for the consumers of PBC.). Report came later during the meeting as we were unable to hear Denise virtually, so she came into the office for the meeting. Denise stated that she is reporting on C.H.A.G at the state level, and that there is not much to report, except for U=U. She stated that C.H.A.G. had an orientation on May 26th and has new members from different counties. She added that C.H.A.G. sent out the *New Equal You* flyer, and that based on the workshop they had and the demographics of *New Equal You*, she was pleased to see the productivity and outcome and completion of the fact sheet, but it is extremely important to include other sexual orientations on the flyer, as at present it looks like *New Equal You* applies only to one type of individuals, so we need to broaden it to be more inclusive. Denise also noted that the email was sent out to everyone and that C.H.A.G will look at the message and feedback regarding the flyer.

If anyone is interested in becoming a C.H.A.G member, contact Denise Brown @: 561-872-3754 or denise.brown@floridahealth.gov.

- F. Part A Report:** Dr. Casey Messer was absent for the first half of the meeting, so his presentation came later.

- G. Expenditure Report: GY20 Final Expenditures by Maria Corona:**
Core Categories' final expenditure:

AIDS pharmaceuticals final expenditure: \$13,398

Early Intervention Services: \$711,431

EIS for Minority AIDS Initiative: \$112,135, represented 100% of budget

Health Insurance final expenditure: \$1.5 million, represented 94% of expenditures

Laboratory Testing: \$168,394, represented 96% of expenditures

Medical Case Management: \$1.2 million of expenditures (and though there was a small a small balance leftover it represented 100% of expenditures)

Medical Case Management for the Minority AIDS Initiative: \$388,696, represented 95% of expenditures

Medical Nutrition Therapy: \$35,941, represented 97% of expenditures

Mental Health Services: \$157,551, represented 100% of expenditures

Oral Health: \$404,599, represented 98% of expenditures

Outpatient Ambulatory: \$160,673, represented 98% of expenditures

Specialty Outpatient: \$279,258, represented 98% of expenditures

Overall the Core Categories (all the ones mentioned above) were at 97% of expenditures.

Support Services – EFA (Emergency Financial Assistance

Prior authorization vis a vis medications)– total expenditure for the year: \$4,788, represented 91% of expenditures

EFA - \$22,738 – 99% of expenditures

Food Bank/Home Delivery Meals - \$279,372 – 100%

Food Bank Nutritional Supplements - \$5,384 – 98%
Housing \$141,129 – 89%
Legal Services: \$280,00 – 100%
Medical Transportation: \$50,122 – 100%
Nonmedical Case Management Eligibility: \$245,994 – 100%
Nonmedical Case Management Supportive Services: \$229,584 – 99%
Nonmedical Case Management for Minority AIDS Initiative: \$48,688 – 100%
Psychosocial Support Services for Minority AIDS Initiative: \$18,000 -- 76%

Overall for Support Services the expenditure rate was at 98%, combined the Core and Support Services were at 97% of expenditures and our requirement was to meet 95%.

There was a question about the last column to the far right. Maria Corona explained that overall, we met 97% of the expenditure, which is over the 95% requirement. 100% would have meant that we spent every single dollar, though we came close, we had \$185,000 left over for the Support and Core Services.

The Chair and Maria Corona explained that when we get the report on an ongoing basis, we take the amount that each service gets and divide by 12 and so you would get a projection of the amount/percentage of the expenditure expected each month. Within the first 3 months, we would expect to be at 25% of expenditure, and if the expenditure was running high or low, we could gauge where we were.

Jeff Downey asked how the Overall Carryover amount compares to last year: Maria Corona explained that the Overall Carry amount varies every year; that whatever is not spent for the grant year we request to be carried over. This year, including a little bit of administrating, we will have a carryover request of \$188,000. It's up to HRSA whether they approve that CO or not. If we do get that funding, we'll review and discuss who needs the expenditures so they can be spent where there's the most need. We will then distribute it to the agencies where it's most needed.

Chris Downey noted that last year's CO was \$216,000+. Maria Corona said this year we were pushing to get the 95% from all the agencies because of the challenges arising from COVID, but, **ultimately, we did better this year than last because we had less of a carryover.**

- H. LGBTQ:** Kim Enright reported that LGBTQ hasn't met in a few months but will be getting back to meeting and starting a new project.
- I. LPAP:** Felisha Douglas was not available at this juncture during the meeting. Toward the end of the meeting, she provided a brief report.
- J. Membership:** Helene Hzvid thanked Kim for covering for her previously when she was unable to come in. She said she'd like to have a Membership Meeting this coming month to review the data and present an overview/report at the next CARE Council meeting. Helene asked if she could chair the next month's meeting remotely as she will be out of town.

A discussion ensued about whether she could chair the meeting remotely and it was stated that as long as her Vice Chair is present in person, remote chairing is allowed.

- K. P & A: Kenny Talbot stated that for the last 2 months P&A has had training sessions going over the Service Categories and that Dr. Messer has done a good job with that. He said it's been requested to have evening meetings, but he has considered it and will not do it as it will be too taxing on members who have already worked 8-hour days and will result in a 14 or 15-hour day away from their families. Kenny stated that the next P&A Meeting he's going to request that they have it as a lunch meeting to try and encourage everyone to come to that. If that doesn't work, then he'll request the Executive Committee meet again and talk about giving the authority back to the Recipients' staff as we did last year because we cannot handle going through the same struggles that we did last year.**

Neeta proposed having the next P&A Meeting at 12pm, and holding it at 810 Datura Street as that location seemed most convenient for members.

Chris Dowden expressed that lunch meetings may be problematic for individuals who are hourly staff as it may present challenges for them to take time out of their workday to attend a meeting. Said he thinks we should consider both evening meetings and lunch meetings because evening meetings may work better for some. Kenny reiterated that some of the meetings last for 3 hours and traveling also adds time on to the meeting commitment. He also, stated that it's neither necessarily true nor appropriate to make comments about people who don't work having more flexibility regarding meeting times.

- L. QMEC: Chris Dowden provided a brief report later in the meeting.**

- M. Planning: Kenny Talbot did the report.** Kenny stated that Shirley Lanier has a slide presentation with the ongoing study and that he believes it's nearing completion. Shirley Lanier had left the meeting, so we were unable to see the slide presentation.

Dr. Messer joined the meeting at halfway @52.20 minutes in. He apologized for missing first half of meeting but said there's an opportunity for us to request \$2 million in housing funding for people with HIV and it requires us to act rapidly. The grant is due on July 6th and that's what he was working on and what caused him to miss first half of the meeting.

He added that that's going to be his first report is that he's pursuing additional funding for housing for people with HIV and that he hopes it will be fruitful to addressing the concerns at the Annual Data Presentation.

Dr. Messer asked for feedback on the Annual Data Presentation and any constructive comments on how they can make it better.

Chris Dowden said the information presented was complete, easy to absorb and very targeted to some of the discussions and priorities that we've set over the last year. Added that the only constructive criticism he has to offer is not with the Ryan White

staff's presentation, but regarding the presentation at the state level, i.e., the use of the tableau stories—which while an excellent presentation medium—makes it difficult for people to review post presentation. He recommended that in future it would be great if we could have it in PowerPoint slides format/printed info for people who'd like to go back and look up and reference something made in the presentation. He added that the presentation was amazing, and that the entire staff did a wonderful job.

Dr. Messer agreed that the interactive presentation is helpful, but that having a copy in PowerPoint format is more user-friendly for post-presentation use and that they have asked for that presentation to be provided so we can have it for future reference; and will ask that for the PowerPoint slides format to be part of the presentation moving forward. He thanked Chris for his comment and stressed that every member of the team strived to provide us with meaningful info and presentation.

Kenny Talbot thanked Dr. Messer and his team for making the data more personal and not just calling out numbers.

Dr. Messer stated that regardless of whether we are able to secure future funding for housing, it's one of the biggest barriers that we discussed last week at Data Presentation. Hence, he **hopes we can get the Housing Committee started and get volunteers for membership so we can discuss meaningful and productive ways to address housing instability in PBC.**

The Chair told him that we discussed the Housing Committee earlier and, in fact, we already have volunteers for membership. Dr. Messer added that Jacqueline Taylor would serve as the staff member/liaison for the Ad Hoc Housing Committee, but that he will be deeply involved, as well. Neeta added that she will send him the agenda.

QMEC Report: Chris Dowden. We then returned to the QMEC report, which we had skipped over previously. **Chris reported that in the last few meetings QMEC approved our Work Plan for the year,** we defined specific steps and actions that we will be taking, including reviewing Standards of Care, reviewing Quarterly Metrics, some of which were presented at the Data Presentation on Thursday, such as Viral Load Suppression and Retention in Care Service Categories and those roles have been defined as CARE Council Committee or Recipient Staff.

He stated that at the last meeting we began a review of EIS Standards of Care. It needed to go back to Recipient Staff for an internal meeting, but we did provide some feedback, including the Montana Part B Standards of Care which were extremely detailed, and identified target populations and the requirements for care not just for positive tests, but also for linkage type services. He added that we are going to continue development there. **We are not going to have a meeting month but the following month we'll continue looking at that.**

Comments or Questions: A member Tyrina Pinkney stated that she wants to be a part of the committee, but she did not see a reference to that in the printout of the Minutes. Chris Dowden stated that we/the QMEC Committee voted her on, so we'll make sure that's reflected in the Meeting Minutes.

- N. Community Awareness: Felisha Douglas. No report was given at this juncture, but Felisha did make a brief report later in the meeting.** Neeta stated that Community Awareness did not meet. The last time they met was in February, but Felisha Douglas wants to do the Community Awareness and the Homeless Meeting back-to-back. Neeta suggested that perhaps we can do the Homeless/Housing Meeting first during a lunch hour and then Community Awareness right after.

XIII. Other Business:

A. PBC HIV CARE Council Annual Officers Election 2021

The Chair said it's a little strange because we have this hybrid meeting going on, and normally we would use written ballots. **She asked Helene Hvizd to guide us as to how to do this election since we have some members present in person and some present virtually.** Helene said she believes we should follow the same process that we use for the election when Kenny Talbot was elected during a virtual meeting. She said if there is more than one candidate for any office, we'll need to go through an Oral Roll Call of all members who are present and announce by voice who each member is voting for. She added that she will tally the votes. She said she believes that if members who are appearing virtually are going to be required to state their vote aloud, then everyone should have to vote that way in order to make the vote fair. She added that if there's only one candidate for a particular office, then there's no need to vote in that manner, just a Yay or Nay/All in favor/All against will suffice.

The Chair said we would start with the position of Chair and that we would also take nominations from the floor for each position.

Vote 1: Nominees for position of Chair were called out:

Chris Dowden
Kim Enright
Richardo Jackson

Each candidate was asked if they are willing to serve as Chair of the CARE Council. All answered 'Yes,' initially, but then Kim Enright withdrew from the race.

Helene Hvizd said we would need a Roll Call with each member who is present physically and virtually announcing who they are voting for. Neeta and Eileen also kept tally of the Roll Call voting.

A member recommended that we vote via Direct Messaging –typing your voting choice into Direct Message and sending it to a designated person—as this would be much quicker than doing an Oral Roll Call, but Helene Hvizd said that would not suffice as Direct Message would not serve as a Public Record, which the vote is required to be. She added that every other advisory board uses the Oral procedure and that we are the only Advisory Board that has ever used the written ballot, where we write things down, one person tallies it, and that the legality of that process has been called into question. She said she's much more comfortable with the Oral Voting procedure. She asked Kim Enright, the other attorney in the room, if she had any

recommendations. **Ultimately it was decided to go the Oral method because of Public Record.**

After the vote was taken **Chris Dowden was elected as Chair of the CARE Council. (Vote was 12 to 2.)**

Vote 2: Nominees for Vice Chair:

Chris Dowden – was initially nominated but was removed from nomination as he had been elected as Chair in the previous vote.

Felisha Douglas

Kim Enright

Eileen Perry – nominated from the floor

Richardo Jackson – nominated from the floor

Felisha Douglas removed herself from the nomination, while commending Kim Enright for the job she had done as Chair and Vice Chair in the previous term and for her knowledgeability.

Eileen Perry also removed herself from nomination while commending Kim.

Kim Enright and Richardo Jackson accepted the nomination for Vice Chair.

After Roll Call Kim Enright was elected as the Vice Chair. (Vote was 11 to 3.)

Vote 3: Nominees for Treasurer:

Kenny Talbot was nominated from the floor.

Felisha Douglas

The candidates were asked if they would accept the position. Kenny Talbot said ‘Yes.’ Felisha Douglas declined.

After a Voice Vote was called by the Chair/Kim Enright, the Motion Carried and Kenny was elected Treasurer.

Vote 4: Nominees for Secretary:

Eileen Perry

Richardo Jackson

Miguel Velasquez

The candidates were asked if they would accept the position. Both Eileen and Richardo said yes. Miguel was not present, but Eileen Havid stated that we still need to vote as if he has accepted the nomination.

After the Oral Roll Call **‘Richardo Jackson was selected Secretary of the CARE Council. (The vote was 11 to 3 to 0: ‘Richardo – Eileen – Miguel.)**

The current Chair, Kim Enright, congratulated all the newly elected officers. She said that board members are on 24/7, but it is a labor of love. She said it is nice to step into the position

of Vice Chair—as she has been newly elected. She noted that Chris Dowden was very effective the last time he was Chair. She thanked Felisha Douglas for her contributions as Vice Chair, and thanked Eileen Perry as Chair of Membership, which she noted is a very difficult position.

Report on LPAP: Felisha Douglas announced that LPAP did not meet this year; that the last time LPAP met was last year and they addressed it in CARE Council, which is where they did a whole revamp of everything. **She stated that Community Awareness hasn't met, as well, because of the pandemic.**

Neeta officially announced the new officers for PBC HIV CARE Council 2021 and congratulated them:

**Chris Dowden – Chair
Kimberly Rommel Enright – Vice Chair
Kenny Talbot – Treasurer
Richardo Jackson – Secretary**

Chris Dowden stated that as the newly elected Chair of the CARE Council he would have to address several business items in the near future. He stated that he will:

Appoint our Chairs of Committees at the next meeting, to be ratified by the CARE Council.

He added that **if you are a current Sitting Chair of a committee, you should let Neeta Mahani know if you are interested in continuing** in that role; and,

If you are interested in Chairing a committee, you should let Neeta know that, as well.

Chris stated that he is the Current Chair of QMEC and he doesn't see how he can balance that and Chairing the CARE Council and the Executive Committee, so while he's happy to do it until someone else is able to, **he'd very much like it if someone could take over chairing QMEC.**

Chris added that we have a lot of work to do in the coming year and a lot of resources that we've never had before, so he's very much looking forward to working with everyone to make this the best fit for the community that we serve; thank you.

Eileen Perry congratulated Richardo Jackson on his new position as Secretary. She stated that she was torn between accepting the position or not; that she has adopted her 6-year-old grandson, which she never expected at this age, and has her mom down from Orlando, so she does have her hands quite full. She congratulated Richardo and said she's glad he's taking over the reins.

XIV. Announcements:

Felisha Douglas put forward a request which she prefaced by stating that when she started coming to CARE Council she was in a very dark place. She came and heard Chris speak and it gave her light, so she felt like she'll never leave this place. She added that she'd love to continue to be an active member of the CARE Council committees, but her schedule is turbulent, so she is making a request **for a change for one meeting to see if we are able to move the time,** not the

date of the meeting, just the time.

Neeta said that if it's the P&A Meeting, Kenny Talbot already said we can do it at lunchtime.

Chris Dowden announced that he will be giving a presentation at Compass on July 14th in the evening. He stated that he's sure 'Lysette will send out registration information and he's very much looking forward to the presentation.

XV. Adjournment:

Hearing no other announcements, Kim Enright, the Current Chair, adjourned the meeting at 3:58 PM.

***Conflict of Interest**

A CARE Council member who has an identified conflict of interest must abstain from voting on issues related to that conflict. A member who does not abstain from voting on issues where a conflict is identified by the County's Commission on Ethics may be removed from the CARE Council.