

WELCOME

Thank you for joining today's

Joint Integrated Plan Review Team Meeting

Please sign in to have your attendance recorded.



Call to Order



Strategic Planning Committee and Prevention Committee Joint Integrated Plan Review Team Meeting

Tuesday, October 10, 2023

10:00 AM - 12:00 PM

Miami-Dade County Main Library 101 West Flagler Street, Auditorium, Miami, FL 33130

AGENDA

Abril Sarmiento

1.	Can to Order	Hom Sammento
II.	Introductions	All
III.	Housekeeping	David Goldberg
IV.	Floor Open to the Public	Dr. Angela Mooss
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of November 14, 2022	All
VII.	Reports	
	MembershipPartnership (no report)	Staff
VIII.	Standing Business	All
IX.	New Business	All
	■ Integrated Plan Evaluation Workgroup	Abril Sarmiento
	 □ Report on Activities to Date □ Request to Renew Workgroup in 2024 	
	■ Integrated Plan Successes and Challenges	All
	 □ Goal 1: Prevent new HIV infections □ Goal 2: Improve HIV-related health outcomes of people with HIV □ Goal 3: Reduce HIV-related disparities and health inequities □ Goal 4: Achieve integrated, coordinated efforts that address the HIV epidemic among all partners and stakeholders 	
X.	Announcements and Open Discussion	All
XI.	Next Meeting Dates (details TBA)	Dr. Diana Sheehan
	January 2024: Integrated Plan Evaluation WorkgroupFebruary 2024: Joint Integrated Plan Review Team	
XII.	Adjournment	Abril Sarmiento

For more information about the Joint Integrated Plan Review Team, please contact Christina Bontempo, (305) 445-1076 or cbontempo@behavioralscience.com.





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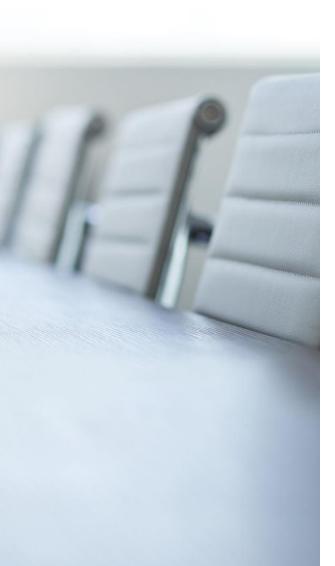
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Meeting Housekeeping

Updated September 8, 2023 Miami-Dade County Main Library Version

Disclaimer & Code of Conduct

- ☐ Audio of this meeting is being recorded and will become part of the public record.
- ☐ Members serve the interest of the Miami-Dade HIV/AIDS community as a whole.
- ☐ Members do not serve private or personal interests, and shall endeavor to treat all persons, issues and business in a fair and equitable manner.
- ☐ Members shall refrain from side-bar conversations in accordance with Florida Government in the Sunshine laws.

Language Matters!

In today's world, there are many words that can be stigmatizing. Here are a few suggestions for better communication.

Remember **People First** Language . . . **People** with HIV, **People** with substance use disorders, **People** who are homeless, etc.

Please don't say **RISKS** . . . Instead, say **REASONS**.

Please don't say, **INFECTED with HIV** . . . Instead, say **ACQUIRED HIV**, **DIAGNOSED with HIV**, or **CONTRACTED HIV**.

Please **do not** use these terms . . .

Dirty . . . Clean . . . Full-blown AIDS . . . Victim . . .

General Housekeeping

- ☐ You must sign in to be counted as present.
- □ Place cell phones on mute or vibrate *If you must take a call, please excuse yourself from the meeting.*
- ☐ Have your Cultural Center Parking Garage ticket validated at the Library front desk for a reduced parking rate.
- ☐ Eligible committee members should see staff for a voucher at the end of the meeting.

Meeting Participation

- Raise your hand if you need clarification about any terminology or acronyms used throughout the meeting.
- ☐ Raise your hand to be recognized by the Chair or added to the queue.
- ☐ Discussion should be limited to the current Agenda topic or motion.
- ☐ Speakers should not repeat points previously addressed.
- ☐ Any attendee may be permitted to address the board as time allows and at the discretion of the Chair.

Resources

- ☐ Behavioral Science Research Corp. (BSR) staff are the Resource Persons for this meeting.
- ☐ See staff after the meeting if you are interested in membership or if you have a question that wasn't covered during the meeting.
- □ Today's presentation and supporting documents are online at <u>aidsnet.org/meeting-documents/</u>.







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Floor Open to the Public

"Pursuant to Florida Sunshine Law, I want to provide the public with a reasonable opportunity to be heard on any item on our agenda today. If there is anyone who wishes to be heard, I invite you to speak now. Each person will be given three minutes to speak. Please begin by stating your name and address for the record before you talk about your concerns.

"BSR has a dedicated line for statements to be read into the record. No statements were received."





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Strategic Planning Committee and Prevention Committee Joint Integrated Plan Review Team (JIPRT) Meeting Miami-Dade County Main Library 101 West Flagler Street, Auditorium, Miami, FL 33130 November 14, 2022

#	Members	Present	Absent
	Strategic Planning Cor	nmittee	
1	Cardwell, Joanna		X
2	Gallo, Giselle	X	
3	Goldberg, David	X	
4	Hess, Amaris	X	
5	Hilton, Karen		X
6	Hunter, Tabitha		Х
7	Machado, Angela		Х
8	Neff, Travis		X
9	Puente, Miguel	Х	
10	Sheehan, Diana M.	X	
11	Singh, Hardeep	X	
	Prevention Commi	ttee	
12	Bahamón, Mónica		X
13	Buch, Juan		X
14	Darlington, Tajma		X
15	Duberli, Francesco		X
16	Forrest, David		X
17	Johnston, Jeremy	X	7
18	Ledain, Ron	X	
19	Lee, Aquilla		X
20	Lopez, Crystal		Х
21	Marqués, Jamie	X	
22	Mills, Grechen		X
23	Mills, Vanessa		X
24	Orozco, Eddie	X	
25	Richardson, Ashley		x
26	Sarmiento, Abril	X	
27	Shmuels, Diego	X	
	Members of Both Com	mittees	
28	Monestime, Roselaine	X	
29	Mooss, Angela	Х	
Ora	 		
Que	Tulli = 11		

Guests	
Ichite, Amanda	
Kubilus, Barbara	
Mester, Brad	
Pierre, Ross	
Villamizar, Kira	
Staff	
Bontempo, Christina	
Ladner, Robert	

Note: All documents referenced in these minutes were accessible to members and the public prior to (and during) the meeting, at www.aidsnet.org/meeting-documents. The meeting agenda, minutes, and draft documents were distributed to members. All meeting documents were projected on the meeting room projection screen.

I. Call to Order

Prevention Committee Chair, Abril Sarmiento, called the meeting to order at 10:13 a.m.

II. Introductions

Members, guests, and staff introduced themselves.

III. Housekeeping

Strategic Planning Committee Chair, David Goldberg, presented the PowerPoint, *Partnership Meeting Housekeeping*, including people first language, code of conduct, resource persons, and attendance.

IV. Floor Open to the Public

Prevention Committee Vice Chair, Dr. Angela Mooss, opened the floor to the public with the following statement:

"Pursuant to Florida Sunshine Law, I want to provide the public with a reasonable opportunity to be heard on any item on our agenda today. If there is anyone who wishes to be heard, I invite you to speak now. Each person will be given three minutes to speak. Please begin by stating your name and address for the record before you talk about your concerns. BSR has a dedicated telephone line as well as a general email address for statements to be read into the record. No statements were received via the telephone line or email."

There were no comments; the floor was then closed.

V. Review/Approve Agenda

Members reviewed the agenda. Next Meeting will be changed to reflect Ms. Sarmiento as the activity leader; and the meeting date of Review/Approve Minutes will be changed to September 13, 2022.

Motion to approve the agenda with noted changes.

Moved: Miguel Puente Seconded: David Goldberg Motion: Passed

VI. Review/Approve Minutes of October 14, 2022

Minutes of October 14, 2022 were reviewed. The minutes indicated the date of the last meeting as September 13, 2022, and September 23, 2022; staff will review and correct the date.

Motion to approve the minutes of the October 14, 2022 meeting with correction.

Moved: Miguel Puente Seconded: David Goldberg Motion: Passed

VII. Reports

Membership

Staff advised there are many vacancies on the Miami-Dade HIV/AIDS Partnership (HIV Partnership) and Committees. Assistance is requested to identify candidates for membership. See staff for details.

Partnership

Staff advised the motions approved by the HIV Partnership are posted on www.aidsnet.org.

VIII. Standing Business

Miami-Dade County 2022-2026 Integrated HIV Prevention and Care Plan

□ Review and Approval of Final Draft Plan

Members received the final draft of *the Miami-Dade County 2022-2026 Integrated HIV Prevention and Care Plan*. There were no additional edits. The Plan is due for submission to HRSA by December 9, 2022. Prior to submission, the draft will be reviewed again by staff to correct any final scrivener's errors. Members of the Partnership and all committees will receive a copy of the submitted Plan.

Motion to approve the final draft of the Miami-Dade County 2022-2026 Integrated HIV Prevention and Care Plan, with the understanding that staff will review to correct any final scrivener's errors.

Moved: Miguel Puente Seconded: Giselle Gallo Motion: Passed

□ Review and Approval of Letter of Concurrence

Members reviewed the required Integrated Plan Letter of Concurrence. The letter indicates the September meeting date as September 13, 2022, which staff will confirm.

In order to demonstrate the collaborative effort of the Plan development, the letter includes the signatures of Dennis Iadarola, Partnership Chair; Daniel T. Wall, Assistant Director, Office of Management and Budget, Miami-Dade County & Ryan White/EHE Program Director; and Kira Villamizar, FDOH-MDC STD/HIV Prevention Program Director.

Motion to approve the Letter of Concurrence after the September meeting date has been confirmed by staff.

Moved: Dr. Diego Shmuels Seconded: Miguel Puente Motion: Passed

IX. New Business

Formation of the Integrated Plan Evaluation Workgroup

As detailed in Section VI of the draft Plan, an Integrated Plan Evaluation Workgroup is recommended to be formed to monitor and guide the progress of the Plan activities. The Workgroup is to operate from January 1, 2023 – December 31, 2023 at which time an extension of the group may be requested, or the group may be disbanded.

Motion to form the Integrated Plan Evaluation Workgroup to report to the Joint Integrated Plan Review Team.

Moved: Miguel Puente Seconded: Giselle Gallo Motion: Passed

X. Announcements

Dr. Diana Sheehan announced a Consumer Advisory Board at Florida International University is seeking HIV-positive Latino males over the age of 50 as members. There is financial compensation for meeting attendance. Anyone interested may contact Dr. Sheehan or ask staff to forward a contact.

Jaime Marqués announced a new grant received by Project Access Foundation to increase access to mental health care, including educational seminars, yoga, and healthy life skills.

Staff asked for a show of hands of HIV Partnership members who will be in attendance at the November 21, 2022 meeting.

XI. Next Meeting

Dr. Sheehan announced the next meeting dates are to be announced. Staff noted committees will meet in standalone meetings again in 2023.

XII. Adjournment

Ms. Sarmiento thanked members for their work over the past year and adjourned the meeting at 12:42 p.m.







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Join the Ryan White Program Planning Council and receive up to \$40 in store vouchers per month!*



Scan for details and the New Member Interest Form.

* RESTRICTIONS APPLY!

Vouchers are available for meeting participation by official members who meet eligibility requirements. Complete the New Member Interest Form to get started.





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2023 Timeline Integrated Plan Evaluation Workgroup (IPEW)

January 19, 2023

The Miami-Dade HIV/AIDS Partnership approved the slate of members for the IPEW.

February 14, 2023

- Final officers were elected:
 Sarah Suarez, Chair; Amaris
 Hess, Vice Chair.
- Breakout teams reviewed the first draft of IP goals.
- Members refined the evaluation and reporting templates.

May 9, 2023

- Activities were formatted to the Evaluation Template.
- Breakout teams began populating the Evaluation Template with baselines, targets, responsible parties, and reporting frequency details.

Sept. 12, 2023

- Breakout teams finalized the Evaluation Templates (as much as possible based on available information to date.)
- Members agreed to disband for 2023.

January 23, 2023

- Officers were elected: Abril Sarmiento, Chair; David Goldberg, Vice Chair.
- Draft templates for evaluation and reporting were reviewed and edited.
- Members began work in three breakout teams based on NHAS Goals 1-3.

April 11, 2023

- Breakout teams continued review of the IP goals, including refining activities and measurements.
- Members finalized the evaluation and reporting templates.

June 6, 2023

- Breakout teams continued populating the Evaluation Template with baselines, targets, responsible parties, and reporting frequency details.
- Members discussed activities around reducing stigma (Goal 3); and coordinated efforts (Goal 4).

2024

Upon recommendation of the JIPRT and approval by the Partnership, members will regroup in 2024 to act as a steering committee for the JIPRT.

For more information, please contact

hiv-aidsinfo@behavioralscience.com







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Integrated Plan Evaluation Workgroup 2024 Workgroup Proposal

October 10, 2023

Per the Partnership Bylaws, "Workgroups are appointed as needed by the Partnership to assist a standing committee and the Partnership with a specific issue or need."

The Integrated Plan Evaluation Workgroup (IPEW) completed its 2023 activities and requested a continuation through 2024 as a steering committee for the Joint Integrated Plan Review Team.

The workgroup may have up to 16 members. These 2023 members of the IPEW indicated interest in membership in 2024. Staff will advertise remaining vacancies.

Proposed 2024 IPEW Members			
#	Name	Company / Affiliation	
1	Luigi Ferrer	Florida Health Department in Miami Dade County	
2	Amaris Hess	New Hope C.O.R.P.S.	
3	Karen Hilton	University of Miami	
4	Trillion Ingram	Empower U Community Health Center	
5	Camille Lowe	Florida Health Department in Miami Dade County	
6	Angela Machado	Public Health Trust/Jackson Hospital System	
7	Jamie Marques	Project Access Foundation	
8	Angela Mooss	Behavioral Science Research Institute	
9	Abril Sarmiento	Florida Health Department in Miami Dade County	
10	Sarah Suarez	Latino Commission on AIDS	

A motion is required to recommend the continuation of the IPEW and the slate of members.



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October 2023

Miami-Dade County 2022-2026 Integrated HIV Prevention and Care Plan

PROGRESS REPORT









Introduction

In 2022, the Partnership's Joint Integrated Plan Review Team - the Strategic Planning Committee and the Prevention Committee - developed the Miami-Dade County 2022-2026 Integrated HIV Prevention and Care Plan.

The Partnership approved an evaluation workgroup - the Integrated Plan Evaluation Workgroup (IPEW) - and the workgroup began meeting in January 2023. Over the course of six meetings, the workgroup refined the Plan's activities and measurements, developed an evaluation template, developed a reporting template, identified baselines, established quarterly, annual, and end of Plan (December 31, 2026) targets, and, where available, reviewed data.

The Integrated Plan is structured around the National HIV/AIDS Strategy Goals:

- Goal 1: Prevent new HIV infections.
- Goal 2: Improve HIV-related health outcomes of people with HIV.
- Goal 3: Reduce HIV-related disparities and health inequities.
- Goal 4: Achieve integrated, coordinated efforts that address the HIV epidemic among all partners and stakeholders.

The progress on Integrated Plan development and evaluation could not have been achieved without the significant efforts of members of the Partnership, its committees, and its workgroups. All members of the community are invited and encouraged to be a part of the ongoing evaluation and review of the Integrated Plan.

This report includes our "Glows and Grows" - our progress and achievements, and our challenges to date - for which we have data. It is not intended to be comprehensive of all Integrated Plan strategies and activities.

The complete Integrated Plan is available online at www.aidsnet.org, however, the goals, objectives, and strategies should be reviewed with caution, as significant changes have been made by the IPEW and continue to be under review and development.

The Integrated Plan was submitted to HRSA and CDC in December 2022. A review by HRSA and CDC indicated no deficiencies, and a follow up virtual meeting resulted in clarifying some questions about the narrative but indicated no action items for the Partnership or stakeholders to address.

Please contact hiv-aidsinfo@behavioralscience.com for more information.

Acronyms and Terminology

Refer to this page for acronyms, symbols, and terminology used throughout this report.



• Indicates activities "On Target" for the reporting period.



• Indicates we're making progress.



- Indicates an item for discussion.
- ARVs: Antiretroviral therapy medications
- BSR: Behavioral Science Research Corp.
- CQM: Clinical Quality Management
- HCV Viral hepatitis
- HOPWA: Housing Opportunities for People with AIDS Program
- HRSA: Health Resources and Services Administration
- IPEW: Integrated Plan Evaluation Workgroup
- FDOH: Florida Department of Health in Miami-Dade County
- MCM: Medical Case Management or Medical Case Manager
- MSM: Men Who Have Sex with Men (refers to people)
- MMSC: Male-to-Male Sexual Contact (refers to transmission)
- NHAS: National HIV/AIDS Strategy
- OAHS: Outpatient/Ambulatory Health Services
- Partnership: The Miami-Dade HIV/AIDS Partnership
- QI: Quality Improvement
- RiMC: Retention in Medical Care
- RWP: Ryan White Program
- RWP FY: Ryan White Program Fiscal Year (March 1 through February 28)
- STI: Sexually Transmitted Infection
- TTRA: Test and Treat/Rapid Access protocol
- VL: Viral Load

Prevention

Increase the percentage of people living in MDC who are aware of their HIV status from the national baseline of 87% in 2019 to 90% by December 31, 2026.

Successes & Challenges



- 41 healthcare facilities committed to conducting routine opt-out HIV testing, and 33 implementing routine opt-out HIV testing, from January 2023-June 2023.
- 199 licensed clinical providers educated on routine testing (HIV, HCV, STIs), from January 2023-June 2023.
- 19,708 people tested and 1,058 people with HIV identified through routine opt-out HIV testing, from January 2023-June 2023:
 - 231: Jackson Memorial Hospital
 - 27: Homestead Hospital
 - 58: Other agencies
 - o 742: EHE team



How can we engage more facilities in routine opt-out testing?

Prevention

Increase the percentage of people living in MDC who are aware of their HIV status from the national baseline of 87% in 2019 to 90% by December 31, 2026.

Successes & Challenges



- 9 healthcare organizations implementing STI testing from January 2023-June 2023.
- 7 community testing partners implementing HIV/STI testing at non-traditional settings from January 2023-June 2023.



- 12,827 HIV tests integrated with HCV tests from January 2023-June 2023:
 - 12,289: Jackson Memorial Hospital
 - 538: Other agencies



- 3,055 HIV tests integrated with STI tests from January 2023-June 2023:
 - 1,642: Homestead Hospital
 - 1,413: Other agencies



- 4,468 **STI tests** done at healthcare organizations from January 2023-June 2023:
 - 3,055: Homestead Hospital
 - 1,413: Other agencies



How can we expand collection of data outside EHE?

Prevention

Increase the percentage of people living in MDC who are aware of their HIV status from the national baseline of 87% in 2019 to 90% by December 31, 2026.

Successes & Challenges



- 398 people who received one or more HIV self-test kits from January 2023-June 2023.
- 84 people who confirmed taking the test from January 2023-June 2023.



How can we increase the use of home HIV self-testing kits as an alternative option for HIV testing?

Prevention

Ilncrease the number of free condoms distributed from 1,929,715 in 2021 to 2,026,200 by December 31, 2026.

Successes & Challenges



- 1,235,837 condoms distributed from January 2023-June 2023.
- 35 Business Responds to AIDS (BRTA) sites established from January 2023-June 2023.



How can we increase the number of condom distribution sites across the jurisdiction?

Prevention



Ongoing Activities



- Maintain the number of infants born with HIV in Miami-Dade County each year at zero (0).
- Increase the percentage of persons screened for pre-exposure prophylaxis (PrEP) who are prescribed PrEP from 53% in 2021 to 75% by December 31, 2026.
- Increase the number of agencies offering nPEP (Non-occupational Post-Exposure Prophylaxis) in the community from 7 in 2021 to 10 by December 31, 2026.
- Support the local Syringe Service Program (SSP) locally, the Infectious Disease Elimination Act (IDEA Exchange) – and ensure access to harm reduction services.
- Increase the number of advertisement types to expand culturally appropriate messaging concerning HIV prevention, testing, and treatment from four (4) in 2021, to six (6) by December 31, 2026.
- Improve HIV prevention and testing efforts toward youth (ages 13-18 and 19-24) who are at risk of or living with HIV.

Linkage to Care

Increase the percentage of newly diagnosed persons with HIV who are linked to care through initial TTRA within seven (7) days, from 68% in 2021 to 80% by December 31, 2026.

Successes & Challenges



- 30 new testing sites were established by FDOH as of June 30, 2023.
- 123 people were newly diagnosed with HIV and entered RWP care through the TTRA protocol from January 1, 2023, through June 30, 2023.
 - On target to add 246 new to care clients in 2023; a 4% increase over 2022.



- 1 RWP EHE HealthTec campaign for information was disseminated to people newly diagnosed with HIV.
- 2 trilingual English, Spanish, and Creole brochures for RWP EHE HealthTec were designed for the RWP EHE HealthTec campaign.



How can we increase the number of people with HIV who are using EHE HealthTec mobile units?



- 314 providers were educated on TTRA from January 1, 2022 September 1, 2023.
- 79 providers are committed to providing immediate ARVs as of September 1, 2023.



38 providers did not agree to provide TTRA but agreed to refer clients to TTRA service providers.

Retention in Care

Increase the percentage of people with HIV retained in RWP MCM care from 84% in December 2022 to 95% by December 31, 2026.

Successes & Challenges



• 93% of clients were in contact with a RWP MCM within the past 90 days as of August 31, 2023; up from 84% in RWP FY 2022.



How can increased Peer involvement in client care improve client retention and viral load suppression?



- Ensure "whole person" holistic treatment approach by MCMs through a central resource hub to expand referral options for clients.
 - BSR: Reformatting www.aidsnet.org to serve as a resource hub.
 - RWP EHE: Developing a flow chart connected to the resource hub that will assist MCM in responding to social determinants of health.

Disparities in Retention in Care

Increase RWP RiMC to 90% by December 31, 2026, among priority populations.

Successes & Challenges



 All MCM and OAHS service sites report semi-annual RiMC data to BSR CQM staff, the CQM Committee, and the Recipient for disparity populations. The following was reported as of August 31, 2023:

Black/African American Males

- **81%**: 2021 RiMC baseline.
- 79%: Integrated Plan RiMC rate in August 2023, losing ground relative to the Integrated Plan baseline.
- Five subrecipients have Part A or MAI QI projects underway for improving RiMC among Black/African American males.
 - > 84%: RiMC rates reported by two subrecipients with QI projects.

Black/African American Females

- **88%**: 2021 RiMC baseline.
- 78%: Integrated Plan RiMC rate in August 2023, losing ground relative to the Integrated Plan baseline.
- Five subrecipients have Part A or MAI QI projects underway for improving RiMC among Black/African American females.
 - 86%: The highest rate reported by any subrecipient with a QI project.

Hispanic MSM

- 85%: 2021 RiMC baseline.
- 84%: Integrated Plan RiMC rate in August 2023, no significant change since 2021
- Eight subrecipients have Part A or MAI QI projects underway for improving RiMC among Hispanic MSM.
 - 89%: RiMC rates reported by four subrecipients with QI projects.



Should a program-wide RiMC effort be undertaken for Black/African American males and females, rather than program-specific QI initiatives?

Disparities in Viral Load Suppression

Increase RWP VL suppression rates to 90% by December 31, 2026, among priority populations.

Successes & Challenges



 All MCM and OAHS service sites report semi-annual VL suppression data to BSR CQM staff, the CQM Committee, and the Recipient for priority populations. The following was reported as of August 31, 2023:

Black/African American Males

- 81%: 2021 VL suppression baseline.
- 84%: Integrated Plan VL suppression rate in August 2023, improved over Integrated Plan baseline.
- Five subrecipients have Part A or MAI QI projects underway for improving VL suppression among Black/African American males.

Black/African American Females

- 84%: 2021 VL suppression baseline.
- 88%: Integrated Plan VL suppression rate in August 2023, improved over Integrated Plan baseline.
- Five subrecipients have Part A or MAI QI projects underway for improving VL suppression among Black/African American females.

Haitian Males and Females

- 86%: 2021 VL suppression baseline.
- 93%: Integrated Plan VL suppression rate in August 2023, improved over Integrated Plan baseline.
- Five subrecipients have Part A or MAI QI projects underway for improving VL suppression among Haitian males and females.



Should a program-wide VL suppression effort be undertaken, rather than program-specific QI initiatives?

Special Populations

Improve health outcomes for women with HIV.

Successes & Challenges



• 2 RWP subrecipients have initiated QI projects for improving RiMC and VL suppression for women in care.



 82% of female RWP clients were retained in medical care as of August 31, 2023.

- An increase from 80% as of the close of RWP FY 2022, and
- Greater than the 79% overall RWP RiMC average.



- 89% of female RWP clients were virally suppressed as of August 31, 2023
 - o An increase from 85% as of the close of RWP FY 2022, and
 - Greater than the 87% overall RWP VL suppression average.



• BSR: A resources and service needs survey for RWP MCM and OAHS subrecipients is being developed to determine the range of childcare needs for women in care.

Special Populations

Improve health outcomes for adults over age 50 with HIV.

Successes & Challenges



- 86% of clients over 50 in MCM care were RiMC as of August 31, 2023.
 - Greater than the 79% overall RWP RiMC average.



- 93% of clients over 50 in MCM care were virally suppressed as of August 31, 2023.
 - Greater than the 87% overall RWP VL suppression average.



- BSR: The FY 2023 Client Satisfaction Survey includes an "aging community needs assessment" component to measure levels of medical co-morbidities and other co-occurring conditions among this special population.
- The Partnership's Community Coalition Roundtable reviewed an Aging with HIV Survey and provided significant feedback.
- The CQM Committee prioritized "HIV Clients Over 50" as a special population for Quality Improvement projects.



RWP clients who are transitioning to Medicare continue to be a concern.

- BSR will determine whether there are MCM protocols in place for assuring clients who are 64+ years of age have a smooth transition to Medicare.
- BSR will draft an MCM protocol for review by the Partnership's Care and Treatment Committee and the Recipient.

Special Populations

Improve health outcomes for transgender people with HIV.

Successes & Challenges



- The Recipient is evaluating:
 - appropriate training in transgender sensitivity, to be provided to direct service staff (front desk personnel, MCMs, physicians), and
 - the creation of a transgender-friendly audit for RWHAP subrecipients.



How can we expand existing programs and collaborations to address the needs of transgender people with HIV?

Special Populations

Improve health outcomes for homeless or unstably housed people with HIV.

Successes & Challenges



- The most recent EHE funding cycle has recommended three subrecipients to provide EHE Housing Stability Services - transitional, short-term, and emergency housing assistance - to persons with HIV, totaling \$2,250,000:
 - Care Resource Community Health Centers;
 - Empower U Community Health Center; and
 - Health Council of South Florida.



- The Partnership's Housing Committee is tasked with reorganizing to identify housing assistance beyond HOPWA.
 - Integrated Plan activities need to differentiate between persons
 experiencing "homelessness," and persons who are "unstably housed."
 Depending on the circumstances, affected persons have different needs
 and access to different resources. This will be an ongoing activity of the
 Housing Committee and the IPEW.



How can we expand existing programs and collaborations to address the needs of people with HIV experiencing homelessness or housing instability?

Special Populations

Improve health outcomes for RWP MSM clients with co-occurring STIs.

Successes & Challenges



• Data-sharing agreements between RWHAP and ADAP and Part B have been executed to allow a fuller definition of STIs in the RWP records of clients in OAHS care.



- Client outcome data indicate RiMC and VL suppression outcomes for MSM with STIs are substantially higher than the RWHAP program averages, and in fact are above the client outcomes for any other special population or disparity population mentioned in the Integrated Plan.
 - 88%: RiMC rate for RWP MSM clients with co-occurring STIs in August 2023.
 - 93%: VL suppression rate for RWP MSM clients with co-occurring STIs in August 2023.



Should this group be removed as a "Special Population"?

Stigma

Reduce HIV-related stigma and discrimination.

Successes & Challenges



 560 RWP clients will complete the 2023 Client Satisfaction Survey which includes questions to identify areas of stigmatizing behavior by RWP personnel.



 A survey of health care provider attitudes toward persons with HIV will address issues identified in the Client Satisfaction Survey from the perspective of MCM and OAHS providers, and these data will be used to develop a capacity-building curriculum. This activity was suggested during the HRSA evaluation of the Integrated Plan.



• The Recipient has committed to creating a "safe space hotline" where instances of stigmatizing behavior may be reported confidentially, without fear of retribution or breach of confidentiality.

Coordinated Efforts

Develop strong community partnerships to leverage available services and funding for ongoing HIV care and treatment, and to be able to respond quickly to HIV outbreaks.

Successes & Challenges



• The Integrated Plan Evaluation Workgroup consists of representatives from FDOHC, RWP, EHE, and GR, as well as community providers, however...



We continue to struggle with low participation/membership by persons with HIV. What can we do to engage people with HIV?



 Presenting this report to stakeholder groups who contributed to the development of the Integrated Plan is a primary activity of BSR staff throughout the end of 2023.



How do we engage other recommended stakeholder groups, such as faithbased groups, schools, and business leaders?





Strategic Planning Committee and Prevention Committee Joint Integrated Plan Review Team Meeting

Tuesday, October 10, 2023

10:00 AM - 12:00 PM

Miami-Dade County Main Library 101 West Flagler Street, Auditorium, Miami, FL 33130

AGENDA

I. Call to Order Abril Sarmiento П. Introductions All III. Housekeeping David Goldberg IV. Floor Open to the Public Dr. Angela Mooss V. Review/Approve Agenda All VI. Review/Approve Minutes of November 14, 2022 All VII. Reports Staff Membership Partnership (no report) VIII. Standing Business All IX. All **New Business** Integrated Plan Evaluation Workgroup Abril Sarmiento Report on Activities to Date Request to Renew Workgroup in 2024 A11 Integrated Plan Successes and Challenges Goal 1: Prevent new HIV infections ☐ Goal 2: Improve HIV-related health outcomes of people with HIV Goal 3: Reduce HIV-related disparities and health inequities Goal 4: Achieve integrated, coordinated efforts that address the HIV epidemic among all partners and stakeholders X. Announcements and Open Discussion All XI. Next Meeting Dates (details TBA) Dr. Diana Sheehan January 2024: Integrated Plan Evaluation Workgroup February 2024: Joint Integrated Plan Review Team XII. Adjournment Abril Sarmiento





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II.	Introductions	All
III.	Housekeeping	David Goldberg
IV.	Floor Open to the Public	Dr. Angela Mooss
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of November 14, 2022	All
VII.	Reports	
	MembershipPartnership (no report)	Staff
VIII.	Standing Business	All
IX.	New Business	All
	■ Integrated Plan Evaluation Workgroup	Abril Sarmiento
	 □ Report on Activities to Date □ Request to Renew Workgroup in 2024 	
	 Integrated Plan Successes and Challenges 	All
	 Goal 1: Prevent new HIV infections Goal 2: Improve HIV-related health outcomes of people with HIV Goal 3: Reduce HIV-related disparities and health inequities Goal 4: Achieve integrated, coordinated efforts that address the HIV epidemic among all partners and stakeholders 	
X.	Announcements and Open Discussion	All
XI.	Next Meeting Dates (details TBA)	Dr. Diana Sheehan
	 January 2024: Integrated Plan Evaluation Workgroup February 2024: Joint Integrated Plan Review Team 	
XII.	Adjournment	Abril Sarmiento





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For more information about the Joint Integrated Plan Review Team, please contact Christina Bontempo, (305) 445-1076 or cbontempo@behavioralscience.com.

