

**Prevention Planning Group
Meeting Minutes Summary
November 1-2, 2012
USF Embassy Suites, Tampa**

Thursday, November 1, 2012

Bobby Davis welcomed the group to the meeting. Bobby conducted roll call and established a quorum. Bobby reviewed the meeting packet and asked the members to acknowledge a moment of silence.

Bobby Davis asked the members to review the meeting summary from the April 2012 meeting.

Prevention Update, Marlene LaLota, HIV/AIDS Prevention Program Manager, HIV/AIDS & Hepatitis Program

Marlene Lalota provided the following HIV/AIDS Prevention updates:

- 9 Separate budgets for the state now
- Applied for the maximum amount of funding
- Prevention Grant-administration has decided that they need more administrative costs-raise to 12% from 10%.
- We have to continue to carve out administrative, but can't come from county health departments
- Prevention grant heavily funds people, contracts, and stuff we purchase, educational, condoms, etc.
- The STD program budget is very small compared to Prevention.
- STD budget had people, DIS, lab testing, etc.
- Cut lab testing for 2013, forced to go to county health departments to cut the lab tests-local CHD will have to pay for it some way
- This is what they are looking to do in the future-no other choice
- How it will be implemented is unknown, it is just an idea

Q: Are the health department directors aware that it is going back to the health departments?

A: Not sure whether they are aware or not, there has been an enormous amount of cuts over the years.

- Future of Prevention Funding is uncertain at this point: election, budgets, health care, etc.
- CAPUS-Care and Prevention in the United States-expanded to include non-health-build infrastructure, capacity building-did not get funded. There were individuals who were funded that the money did not follow the epidemic-upset quite a few people.
- ECHPP-progress is being made and we are looking to complete journal articles
- Behavioral surveillance--a whole page on the website dedicated to surveillance including the most recent cycles
- High Impact Prevention (HIP)-we are working really hard to integrate HIP into the programs throughout the state. Hosted a series of webinars, released and closed the RFA for community-based organizations, released who was funded and that the funds were divided by area based on the epidemic. However, there were four areas that did not apply, so we raised the threshold for their areas, and then used a formula to determine funding.
- We received 44 applications and 27 organizations were funded. Every area of the state submitted an application except Area 14 and their money went back in to the eligible amount.

Marlene showed a map of the funded organizations and a chart of the priority populations that the organizations were serving. **Marlene agreed to send it to Michelle Scavnicky to distribute to the members.**

Jeffrey Pope asked that of the 27, how many specifically address peer programs. Marlene agreed to get the actual number of programs funded from Nita Harrelle. Marlene explained that she is getting quite a bit of feedback that the peer programs are working and they are successfully doing a peer program for inmates in the sentencing center in Orlando. It is where inmates go before they get assigned, and there is an educator that is funded full-time that provides HIV education seeks those interested in becoming Peer trainers.

Much discussion ensued in regards to a specific structure on how to get the peer programs funded?

Marlene suggested contacting Bruce Campbell or Nita Harrelle for help with getting started on peer programs. Bruce's email is Bruce_Campbell@doh.state.fl.us and Nita's email is Nita_Harrelle@doh.state.fl.us.

Lindsey Redding asked about the grant restrictions, more specifically regarding subcontracts. She inquired about the logic behind subcontracts not being allowed in the prevention contracts. Was this a CDC requirement?

Marlene responded that due to the administrative costs and that the limited money needs to go to direct prevention, subcontracts were restricted. She explained the difference between consultants who work on staff, usually hired by main agency, on payroll versus subcontracts, where one agency or another agency gives money to provide services. She reiterated that subcontract restrictions were clear to the department, clear in the RFA, and covered at length in webinars.

Marlene comments continued:

- Perinatal HIV-only 2 babies born HIV positive so far in 2012
- Plans made to host a Grantees mandatory meeting for the new Prevention providers on February 19-21, 2013. It will be a 2 day provider meeting for the 27 funded organizations, invitation-only meeting, geared to the grantees, CBO staff and contract managers, etc.
- Updated Educational Materials which includes searchable database for all approved materials
- New Transgender materials
- New transgender workgroup-designed posters and palm cards. Contact Mara or John Mark at DOH for access to materials
- World AIDS Day-not doing a big event in Tallahassee at the Capitol but every area of the state is doing events. There is a Giant Red Ribbon being created and permission to display at the Capitol in Tallahassee starting November 26, 2012—December 1, 2012 (Winterfest is held that same week—which is great promotion)
- MSM Needs Assessment Survey-working with WellFlorida to conduct the surveys, key informant interviews, and focus groups

Lindsey Redding asked for volunteers to host a group to conduct key informant interviews or a focus group. She explained that she needs focus groups to be conducted in four different areas: Tampa, Orlando, Panhandle, and Jacksonville. They need to identify 8-12 MSM participants per group per area.

Marlene comments continued:

- HIV Testing—working for months to change the administrative rule with how we do HIV Testing in Florida—in addition to the statute, we have an administrative rule and there is two model protocols: one for health departments, one for non health departments. We have been working to streamline the administrative rule. Health care providers have had different rules than county health departments and registered testing sites.
 - Family planning and health clinics fall within HD function.
 - Health care settings within HD, make pre-test available.
 - Local STD Clinic, make available or offer pre or post-test counseling.
 - Non HC settings-same rule applied no change.
 - HC setting-changes, within the rules, defined the settings, etc.
 - Target date is late November for the administrative rule changes.

Marlene explained that Tom Bendle will address the home HIV test information. She commented that there is no budget for the over the counter (OTC) tests because it is expensive.

Much discussion ensued in regards to private health care settings, routine testing, consent, statutes, and billing protocols.

Marlene comments continued:

- 500/501 testing training—accessible online to County Health Department employees, and then will be open to others. It will be a 4 hour course and then half of the 501 training course will be put online in 2013 in phase two. They will be able to take their time with the course and then take the test.

- Early Intervention Consultants (EIC)-since counseling will be made optional, they decided to make this a local decision whether to require doctors and/or nurses to go through 500/501 course, but they will be required to go through the update.
- The annual update can't be made available online due to it being customized and having to be updated every year.

Tom Bendle, HIV Testing Team Leader, HIV Testing Algorithm Update

A Power Point presentation was distributed to the members. The purpose of the presentation was to provide members with the new HIV Testing Algorithm. For additional questions, please contact Tom Bendle at Thomas_Bendle@doh.state.fl.us.

Q: If you test positive from the OTC test, what is the confirmatory test?

A: You would still need to go to your physician and get a lab test for accuracy.

Charles W. Martin commented that the state is doing an amazing job on HIV Testing

Q: Is there a time limit to linkage to care?

A: Within 90 days

Q: If the administrative money is going to local health departments are we going to be charging for testing?

A: We won't tell Health Department directors that they will not have to limit their income. No person should be turned away for not being able to pay for testing.

Stephanie L. Marhefka, Ph.D., Associate Professor, Department of Community and Family Health, College of Public Health, University of South Florida
Increasing Access to Group Based Program for PLWHA: The HER Study

A PowerPoint presentation was distributed to the members. The purpose of the presentation was to provide members with information about increasing access to group based programs for person living with HIV. More specifically, details and information about the HER study was presented. For additional questions, please contact Stephanie Marhefka at smarhefk@health.usf.edu.

Stephanie agreed to provide the link to the survey, once available to Michelle Scavnicky to share with the PPG members.

Breakout Sessions:

The members were distributed among the following workgroups: **Methodology, Needs Assessment and Special Projects** to begin working on activities related to the next planning cycle.

The **Methodology** workgroup members in attendance were: Laverne Elam-Bell, Bobby Davis, Sylvia Hubbard, Marlinda Jefferson, Robert Merlosi, Derrick Traylor and Kira Villamizar, Niya Hubbard and Donna Sabatino were not in attendance, but are additional members of the workgroup.

The **Needs Assessment** workgroup members in attendance were Ken Bargar, Walter Bryant, John Curry, Donna Markland, Dan Merkan, Valerie Mincey, Dan Mitton, Nilda Proenza and Lindsey Redding. Keith Boyd, Valerie Hutchison, Yul Knighten and Jim Roth were not in attendance, but are additional members of the workgroup.

The **Special Projects** workgroup members in attendance were John Acevedo, Juliette Love, Charles W. Martin, Joseph Mims, Cynthia Poitier, James Talley, Philip Toal and JaDawn Wright. Bernadette Bass, Eric Boson, and Manh Nguyen were not in attendance, but are additional members of the workgroup.

Friday, November 2, 2012

Valerie Mincey welcomed the group to the meeting. Roll call was conducted and quorum was established.

Patient Care Update, Joe May, Patient Care Manager, HIV/AIDS and Hepatitis Program

A Power Point presentation was distributed to the members. The purpose of the presentation was to provide members with a Patient Care program update. For additional questions, please contact Joe May at Joe_May@doh.state.fl.us.

Much discussion ensued about possible funding cuts, healthcare reform, Ryan White, election impact, PrEP, ADAP, and potential policy changes.

Local Broward Community Planning Partnership Presentation, Juliette Love, Area 10 Prevention Representative

A Power Point presentation and handouts were distributed to the members. The purpose of the presentation was to provide members an overview of the local Broward Community Planning Partnership process and present local area activities. For additional information, please contact Juliette Love at Jelove10@yahoo.com

Juliette presented the following information:

- Discussed the planning group structures including new team structures, how often the teams will meet and the terms of each group
- Discussed advisory groups and how the groups will be created, when will they meet and when there will be member email addresses made available
- Discussed the Executive Team, High Impact/Core Prevention Team and Epidemiology & Research Teams
- Reviewed the membership application and discussed the demographics experience page

Much discussion ensued regarding who's responsible and parity, inclusion and representation among the group.

- Discussed suggested letter of commitment; employer commitment is used

Concern was raised regarding ensuring diversity, parity, lead persons, the voice of the community, and assuring no one person has full control over the process

Discussion ensued in regards to funding for specific populations and what the funding is to be used for: i.e. National HIV/AIDS Strategy, Community funding, etc.

Workgroup breakout sessions were held and the following workgroup reports were provided to the group.

Special Projects: Juliette Love reported that the group discussed how to increase Transgender attendance in the planning group as well as the following ideas:

- Create strategies to bring transgender to the table.
 - Research your immediate area - have gatekeepers help you identify potential members.
 - Create focus groups
 - Educate the professional population
 - Remain culturally competent & sensitive
 - Request for future meetings: suggest Dr. Toal present on Transgender
 - Conference calls to follow up

Needs Assessment: Dan Merkan reported on the following:

- Much has changed since the 2010 needs assessment survey – suggestion to go into the old tool and revise it
- Review questions on assessment
- Is there a question about PREP?
- Need to determine how the assessment tool will be used?
- Host a conference call in January to revise the assessment tool

Methodology: Derrick Traylor

- Need to follow the CDC planning process and determine if the survey is applicable
- Follow up with conference calls

Local Community Area Progress Reports:

Area 1-James Talley discussed their local film festival and also reported on the Ryan White funding and community care.

Area 2A-Valerie Mincey announced that BASIC was funded again for the 2nd year.

Area 3 & 13-Lindsey Redding reported they have palm cards with QR codes on them.

Area 5, 6 & 14-Lisa Cohen reported on the Expanded Testing Initiative funding and that the awards will be executed. JaDawn Wright highlighted their activities for World AIDS day.

Area 7-John Curry discussed their World AIDS day events starting Nov. 30th in the park where they will be conducting HIV testing, Orlando History museum, Brevard County at the Tropical Inn Resort and hosting a candle light vigil.

There were local area reports that were previously submitted and included in the meeting packets.

Ken Bargar motioned that we need to go green and not print the area progress reports. He suggested that we send them electronically to The AIDS Institute. TAI will email them as an attachment with the minutes. James Talley seconded the motion. *Motion approves unanimously.*

Next Meeting/Wrap Up

Ken Barger suggested the need for revisions and updates to the Bylaws. He is willing to chair an ad hoc committee, if needed.

Bobby Davis reported that the next PPG meeting is planned for April 4-5, 2013 in Tampa and possibly working with Patient Care co-chairs and leadership on a combined meeting.

Allison Herring reported that nominations for PPG membership are being accepted through January 18, 2013 for "even" numbered areas as well as at-large representatives for Behavioral Science and Persons Living with HIV/AIDS (PLWHA). She agreed to send the current area representatives the nomination forms to distribute among their local areas. Please contact Allison Herring at Allison.Herring@doh.state.fl.us for membership applications or if you have questions.

Michael Ruppel reminded the eligible PPG members to complete their travel reimbursement forms and contact Michelle Scavnicky if you need a copy of your form.

Derrick Traylor asked for clarification regarding all original receipts. Michael confirmed that you don't need receipts for food.

Lindsey Redding reminded of the focus groups that she is trying to set up for MSM in the Orlando area. Phil Toal responded.

No further business to discuss, the meeting ended at 11:20.

Summary of Discussion	Action Items	Person(s) Responsible	Timeline
Presentation follow-up to members	<p>The following Power point presentations and handouts from the meeting will be made available to the members:</p> <ol style="list-style-type: none"> 1. Marlene Lalota-Map of 2013 High Impact Prevention Funded Providers 2. Tom Bendle-HIV Testing 3. Stephanie Marhefka, PhD-The HER Study 4. Joe May-Patient Care Update 5. Juliette Love-BCPPP presentation & handouts 	The AIDS Institute/HIV/AIDS & Hepatitis Program Staff	Post meeting
Nominations for new members for PPG are being accepted through January 18, 2013 for “even” numbered areas as well as at-large representatives for Behavioral Science and Persons Living with HIV/AIDS (PLWHA).	Allison agreed to send PPG nomination forms to the current representatives.	The AIDS Institute/HIV/AIDS & Hepatitis Program Staff	Prior to next meeting
Next 2013 Meeting Dates: April 4-5, 2013	<p>Submit proposed 2013 meeting dates for approval.</p> <p>Proposed agenda topics:</p> <ol style="list-style-type: none"> 1. Philip Toal-transgender 	The AIDS Institute/HIV/AIDS & Hepatitis Program Staff/PPG Co-chairs	Post meeting