Wednesday, November 7, 2018

The AIDS Institute received 32 evaluations from Representatives and Alternates who attended the meeting. Information was used to tabulate the summary below. (The scale used was 1 for Strongly Disagree through 5 for Strongly Agree).

What is your primary goal or objective that you hope to achieve at this meeting?

- To learn about the areas
- To learn more about Prevention and Patient Care and how to work together
- News and update from FL DOH to take back to my area
- A better understanding of how thing work on the state level
- Get updated information on changes in the field that have been implemented or under consideration for implementation
- Be part of an Advisory Body to the State of FL to assist the FL DOH in implementing the Integrated HIV Prevention and Care Plan. To represent my area/community at the table and provide input and take back information.
- To learn about the state and federal updates as well as prevention and patient care updates on a state level
- Gaining knowledge
- To learn what is going on in FL around HIV/AIDS and what’s coming
- Gain information to take back to my organization and area
- Get updated information to share with my local area and to continue to work with professionals here to make change
- Represent my area
- Update on HIV Section activities including patient care, prevention, ADAP, HOPWA, etc. Ability to ask questions and receive clarification.
- Receive up to date information to assist my area with compliance and moving forward
- Learn from best practices with integrated planning.
- To understand the current state of HIV prevention as well as patient care around the state of FL. Also, to learn about new/innovative HIV prevention strategies occurring across the state.
- How are we integrating of the HIV Patient Care and Prevention
- Bring back information to Area to keep the area updated on new goals provided by the state
- My goal is to continue participating in monthly committee virtual meetings as well as represent the area 3/13
- Receive important, detailed updates from the HIV Section and progress on the Comp Plan
- Prevention Participation
- Better understanding of CQM Process

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<tr>
<th>Please rate each item on the meeting agenda:</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
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Review and Provide Updates to Action Items from April 2018 Meeting

Kim Saiswiclk, R.N., Ed.D., L.M.H.C., Community Co-Chair; Psyche Doe, DOH Co-Chair; Ken Bargar, Community Co-Chair; Jim Roth, M.A., DOH Co-Chair

I found this session useful. 4.2
There was adequate time for discussion. 4.2

Comments:
- Great job Kim & Ken
- Do we really need everyone's credentials after their names?
- It is the second time attending this meeting. I was impressed that it was organized
- Good job co-chairs of moving meeting along Ken, Jim, Kim, Psyche.
### HIV/AIDS Section Update

**Laura Reeves, Administrator, HIV/AIDS Section, Bureau of Communicable Diseases**

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<tr>
<th>I found this session useful.</th>
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<td>There was adequate time for discussion.</td>
<td>4.2</td>
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**Comments:**
- Very nice
- This is one of the most important items on the agenda. I certainly felt at a without ADAP update (sic)
- Couldn’t answer any questions and the minority community was mentioned but the room demographics says something else
- Great info

### 2017 Data Review

**Lorene Maddox, M.P.H., Surveillance Data Analysis Manager**

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<th>I found this session useful.</th>
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<td>There was adequate time for discussion.</td>
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**Comments:**
- Would recommend integrating the transgender information into the general information instead of presenting it separately. The info should be included, then pulled out similarly like any other subpopulations along the gender identity continuum.
- This needs to be provided at each FCPN meeting as we don’t get any updates due to the lack of communication from DOH.
- It’s the same information on the web
- Why are we still waiting on 2017 data at the end of 2018?
- Always look forward to Lory’s updates
- Very informative.

### PCPPG Committee Meeting – Membership, Nominations, and Bylaws Committee

**David Brakebill & Valerie Mincey, Co-Chairs**

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<th>I found this session useful.</th>
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<td>There was adequate time for discussion.</td>
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**Comments:**
- Nicely done
- Logistically horrific. Please never have these groups meeting simultaneously in the same room. Additionally, newly appointed members really need a summary of each workgroup to include the work already completed by the group
- Only 4 people attended this meeting, was a bit disappointed that there wasn’t more input offered

### PCPPG Committee Meeting – Needs Assessment Committee

**Earl Hunt & Alelia Munroe, Co-Chairs**

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**Comments:**
- There was someone who used their area's way of doing things to take over the group
- I hope the needs assessment committee will allow representation from those who are in the target population (minority community) to come to the table when preparing questions for the assessment tool. i.e. some areas only have the input of older white females
- Strong group, making good progress
- Encourage members to join for input
PCPPG Committee Meeting - Statewide Quality Management Advisory Committee  
Robert Bobo & Sandra Ellis, Co-Chairs

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<th>I found this session useful.</th>
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**Comments:** I hope something good comes out of the committee.

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PCPPG Committee Meeting - Coordination of Efforts Committee  
Timothy Dean & Joey Wynn, Co-Chairs

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<th>I found this session useful.</th>
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<td>There was adequate time for discussion.</td>
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**Comments:** Co-Chair should be at the meetings.

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PCPPG Committee Meeting - Medication Access Committee  
Sharon Murphy & Dan Wall, Co-Chairs

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**Comments:**
- Good, open and honest conversation with good outcomes and measurable objectives
- Great discussion

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Call for Nominations-Prevention Community Co-Chair  
David Brakebill & Valerie Mincey, Co-Chairs, Membership, Nominations, and Bylaws Committee

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**Comments:** I think it is a good way to get new members further involved.
**Thursday, November 8, 2018**

**PCPPG Committee Report Out - Membership, Nominations, and Bylaws Committee**  
*David Brakebill & Valerie Mincey, Co-Chairs*

- I found this session useful. 4.3
- There was adequate time for discussion. 4.1

**Comments:**
- Little long David; I recommend that language be incorporated in the Bylaws for the single Community & DOH Co-Chair that would indicate that every effort shall be made to ensure that nominees/appointees have experience in both prevention and patient care.
- Feels verbiage should be added that says alternates are required to attend
- Report could have been more concise
- Was disappointed in the lack of feedback/input from the body

**PCPPG Committee Report Out - Needs Assessment Committee**  
*Earl Hunt & Alelia Munroe, Co-Chairs*

- I found this session useful. 4.3
- There was adequate time for discussion. 4.3

**Comments:**
- Helps to inform others of what the other committees are doing
- Good input from the body regarding making the survey short, sweet, accessible and utilizing existing staff via agency's Outreach, ARTAS staff, etc.
- Very well prepared and gave a detailed report
- I have some very grave concerns about the ability to conduct a COMPREHENSIVE survey, based on the lack of clarity regarding how the survey is going to be conducted

**PCPPG Committee Report Out - Statewide Quality Management Advisory Committee**  
*Robert Bobo & Sandra Ellis, Co-Chairs*

- I found this session useful. 4.1
- There was adequate time for discussion. 4.1

**Comments:** Not much information provided.

**PCPPG Committee Report Out - Coordination of Efforts Committee**  
*Timothy Dean & Joey Wynn, Co-Chairs*

- I found this session useful. 4.3
- There was adequate time for discussion. 4.3

**Comments:**
- Very little information shared with the group
- Lots of terminology used that new members may not be up to speed on. Dashboard comes to mind.

**PCPPG Committee Report Out - Medication Access Committee**  
*Sharon Murphy & Dan Wall, Co-Chairs*

- I found this session useful. 4.3
- There was adequate time for discussion. 4.3

**Comments:**
- Demand letter was confusing
- Very productive group and work
- Looking forward to answers from the HIV Section
- Increase 90 day Direct Dispense Program
HIV Prevention Update
*Mara Michniewicz, M.P.H., Prevention Program Manager*

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**Comments:**
- She was GREAT!
- Prevention updates need to be scheduled for more time on the agenda in the future.
- A lot of good discussion thanks
- Needed more time here
- Mara was excellent!
- I would like to see more time dedicated to prevention on the statewide level. It seemed like it was all (PrEP, testing, etc.) being crammed together in short time. Mara was great
- Always good
- I think Mara should have been allowed time to finish her presentation without breaking it up into 2 presentations
- Outstanding info
- Loved her presentation
- Need more prevention.

Stigma in HIV Discussion
*Christa L. Cook, PhD, MSN, RN, APHN-B, Assistant Professor, University of Florida & Robert Lucero PhD, MPH, RN, FAAN, Associate Professor of Nursing, University of Florida*

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<th>I found this session useful.</th>
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**Comments:**
- Really informative and well done
- Thought a lot of people were soap boxing... Dealing with their own feelings and not what need for the community
- Interesting and thought provoking. I look forward to hearing updates as the project progresses and reaches conclusion.
- Would like to follow these results I feel that a list of stigmatizing words may be a good reference
- This was boring, and I think, not really helpful. I appreciate the fact that work is being done, but not much info on how to incorporate it into daily practice.

Molecular Surveillance
*Emma Spencer, Ph.D., M.P.H., Surveillance Program Manager*

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**Comments:**
- Thank you
- Maybe once seen in the final form, an opinion can be correctly formed
- Thank you for seeking out input on the development of this presentation
- Emma read the slides. She is very smart but needs to bring the information down to the level of the audience. Discuss the slides, no reason to have session if you just read them.
- This presentation went from trying to get feedback regarding a presentation for the community at large to much ado about the same thing over and over
- Great information, group was productive
- Lots of good feedback provided
### Health Equity in HIV

**Ron Henderson, Statewide Minority AIDS Coordinator & Joe May, Communications & Health Equity Manager**

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**Comments:**
- Waste of time
- We need to see more of Ron
- Not helpful
- Joe May had no input. There was feedback from a white audience that was not appropriate. I found that the minority community was not represented in the conversation. Shame.
- While I think it is wonderful to encourage more African Americans to join the fight against HIV/AIDS it is discouraging to others to say they cannot understand how someone of color feels and therefore provide testing and care. The fight against HIV/AIDS started with gay white men, which is perhaps why so many white men and women are involved now. As the leaders age, they must pass the torch, so take up the cause but don’t criticize those who first lit the flame
- I’m scratching my head as to why we even bothered with this. Neither gentleman seemed prepared and especially disappointed that there wasn't a more substantial plan in place to improve communication.

### Ryan White Resources for Providers Discussion

**Laura Reeves, Administrator, HIV/AIDS Section, Bureau of Communicable Diseases & Brandi Knight, M.P.H, Performance and Quality Manager**

**Comments:** Session did not take place.

### Public Comment

**All Meeting Participants**

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<td><strong>4.2</strong></td>
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**Comments:** None

### Prevention Community Co-Chair Vote

**David Brakebill & Valerie Mincey, Co-Chairs, Membership, Nominations, and Bylaws Committee**

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**Comments:** None
Friday, November 9, 2018

Integrated Plan Progress
Brandi Knight, M.P.H., Performance and Quality Manager & Kassandra McGlonn, M.S., Integrated Planning Coordinator/ Clinical Quality Management (CQM) Liaison

I found this session useful.  
There was adequate time for discussion.  

4.3  4.3

Comments:
- Need to talk to us and not at us
- Need more direction at the local level regarding local plans
- This was a big let down. Very superficial, and thought the whole purpose of having a longer meeting in the fall was to work more intently on the Plan.

Local Area Highlights
Patient Care and Prevention Planning Group Representatives

I found this session useful.  
There was adequate time for discussion.  

4.2  4.2

Comments:
- Nice format
- Area 11a was too long
- Interesting presentations and hearkens back to our old "best practices" sharing. However, I thought the 11A show was a bit long.
- Hard to understand presenters.

State and Federal Update
Michael Ruppal, Executive Director, The AIDS Institute

I found this session useful.  
There was adequate time for discussion.  

4.7  4.6

Comments:
- Always welcomed and informative
- Thank you Michael. I always look forward to your update
- The negative political jokes grow tiresome. Rather just stick to the facts
- Great info Michael.

Updates and Discussion of Activities from Statewide Advisory Groups
Representatives from Statewide Advisory Groups

I found this session useful.  
There was adequate time for discussion.  

4.0  4.3

Comments:
- Need them at the table
- Both updates were too short and lacked detail
- Good job

Public Comment
All Meeting Participants

I found this session useful.  
There was adequate time for discussion.  

4.5  4.3

Comments: Need a time keeper.
Next Steps, Future Meeting Topics and Proposed Dates

Kim Saiswick, R.N., Ed.D., L.M.H.C., Community Co-Chair; Psyche Doe, DOH Co-Chair; TBD, Community Co-Chair; Jim Roth, M.A., DOH Co-Chair

I found this session useful. 4.2
There was adequate time for discussion. 4.3

Comments:
- Not near Easter
- Dates piece is dumb as it will depend on the HIV Section availability and hotel contract agreement.

Logistics

<table>
<thead>
<tr>
<th>Please rate each item:</th>
<th>Strongly Disagree</th>
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<th>Neutral</th>
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<td>Agree</td>
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<td>Self-Participation as a Member</td>
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<td>I came to the meeting prepared</td>
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<td>I contributed to the meeting</td>
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<tr>
<td>I understood what was presented</td>
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<td>I felt comfortable with the planning process</td>
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<td>I felt comfortable asking questions</td>
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<td>My question was answered in a way that I understand</td>
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Meeting Dynamics

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<th>Productive</th>
<th>Well Organized</th>
<th>Facilitated Well</th>
<th>respectful</th>
<th>Inclusive</th>
<th>Good Discussions</th>
<th>Good Decisions</th>
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<td>4.5</td>
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Did you meet your primary goal or objective by participating in this meeting?

27 Yes 1 No 5 No Response – If no, what could we have done to help you meet this goal or objective?

Comments:
- No update from state and federal updates and no ryan white discussion
- Clear definition regarding program income ie 34B and HAB vs HRSA guidelines
- More prevention maybe 1 day of it and 1/2 prevention.

Suggested Topics for Future Meetings

Please suggest topics/emerging issues that should be covered at future Patient Care and Prevention Planning Group meetings.

Comments:
- How to bring us together as a group instead of dividing us. Remove the terms like MSM, black, white, Gay, straight, ethnicity. AIDS does not care about that and we shouldn’t either.
- Always ADAP update, always state and federal updates and always prevention/patient care updates as well as surveillance data
- Discuss getting PIR, transgender to the table. Comprehensive Plan updates, ADAP update
- Add standing mtg agenda items for updates: 90-day dispensation; ADAP to discuss issues/concerns, provide updated statistics for the program, discuss changes that can be made. Open enrollment. HOPWA - never anything discussed. Ryan White - discussion on overall contract issues, new funding, new RFA, RSR, case
management.
- Follow up on molecular surveillance. Language discussion. I don’t want to accidentally stigmatize
- How to straighten out the institutional racism in the field of HIV/AIDS
- CAREWare info is always helpful
- Most of our break outs are care related. Could we have a prevention breakout. STD update new programs which are most successful.
- We will miss Karen's voice and Ken's leadership.

Additional Feedback
Please share any additional feedback that you feel will help The AIDS Institute and the HIV/AIDS Section be more effective in planning and facilitating future conferences and meetings.

Comments:
- Karen Klubertanz will be missed. Ken Barger did a great job too. The two new co-chairs should’ve sat next to the seasoned ones for guidance and questions. Seemed off to have them sit together as they are both new. Folks were coming in really late and some left really early. This is unacceptable and something needs to be done.
- Holiday Inn is no Bueno
- The new setup for facilitating was fantastic. However, can we please not come back to this property.
- Much better room set up. More space.
- Planning was excellent
- I like the meeting ending on a Friday. It is hard to end on a week day, drive home and go into work the next day exhausted. I would rather go in over the weekend if needed. Sorry Ken.
- This agenda packed good information so we probably need this much time, or at least a day and a half.
- The meeting room set-up was pretty awkward, though having the 3 screens was a nice touch. Sightlines were bad and not enough microphones. Much prefer Embassy Suites.
- I felt that some of the comments and discussions were too long in the middle of a presentation. Someone needs to have a handle on these types of situations so the presenters have time to finish in an adequate amount of time and not taking away from other agenda items.
- Why are we still operating on 2016 DRAFT HOPWA guidelines with 100 errors? When will it get out of draft? Slide handouts rather than the graded color variations.
- It was difficult hearing comments via web meeting without additional microphones for participants
- Personal agendas should be left at home. The ground rules should be enforced. One person should not be allowed to monopolize the meeting with finger pointing and negative comments throughout the meeting.

The AIDS Institute Disclaimer Statement
The AIDS Institute (TAI) shall not be held liable for any verbal or written comments made by participants at any meetings, conferences or workshops which TAI arranges, coordinates or sponsors that includes any written, published or stated comments of participants. Such comments, written or verbal do not reflect the opinions, philosophy, policies or intentions of TAI.