



**COMMUNITY ADVISORY COMMITTEE  
HILLSBOROUGH COUNTY HEALTH DEPARTMENT  
THURSDAY January 23, 2014  
2:00 P.M. – 3:00 P.M.**

**MINUTES**

- CALL TO ORDER**      The meeting was called to order by Brandi Geoit, Chair, at 2:19 pm
- ATTENDANCE**      Members Present: Brandi Geoit, Andrew Maldonado,  
Members Absent: Jackson Youmas, Pamela Sabella  
Guests Present: Reva Iman, Joyce Johnson  
Grantee Staff Present:  
Lead Agency Staff Present:  
Health Councils Staff Present: Ashley Richards
- CHANGES TO AGENDA**      No changes were made to the agenda.
- ADOPTION OF THE MINUTES**      The minutes for September 26, 2013 were approved as written (**M:** Sabella; **S:** Maldonado).
- CARE COUNCIL REPORT**      Care Council did not meet in January. Brandi Geoit reported briefly on the Care Council meeting from December 4<sup>th</sup>, 2013.  
  
Brandi reported that there was discussion during the meeting that Part B is now non-competitive extending all current contracts. Current contracts will be under review until further notice from the Part B Lead Agency. There were some concerns expressed that this would make our area out of compliance with HRSA regulations but that will be addressed at a meeting between the funding agencies and the providers in February.
- COMMUNITY INPUT/CONCERNS**      Reva Iman reported on a recent experience with the client satisfaction survey. Reva reported that there are still issues with providers administering the survey correctly. These issues will be brought to Care Council again with the hope that the guidelines regarding how to return surveys back to each respective agency are reinforced.



One suggestion was that there are volunteers to sit in the lobby of each agency to assist with the completion and comprehension of the Client Satisfaction survey. Privacy issues along with monitoring and keeping track of the volunteers could be an obstacle for this effort.

Surveys are also given to different departments at each provider (case management, front desk, nursing staff may all be a point of contact for the survey).

Joyce had an issue with clients not being able to perform testing and counseling after completing the HIV 501 course. The issue was eventually resolved because she was informed that she had to be affiliated with an agency to be able to do the testing. This will be communicated to other client's interested in taking the 501 and getting certified to do testing and counseling.

PAC waiver is currently on a statewide waiting list. Jan 10<sup>th</sup> applications submitted from then on will be placed on the waiting list. Currently there are 10 people on the waiting list. If a current PAC waiver client dies or falls out of care they will be placed at the end of the waiting list (must be done by a CM, does not happen automatically). The next person on the waiting list, no matter where they are in the state, will come off and be enrolled in PAC.

If a client is no longer PAC eligible, then they no longer qualify for Medicaid and they will not be eligible for ADAP. This could be a huge problem and will need to be addressed.

## **ANNOUNCEMENTS**

Andrew Maldonado is finalizing a High Impact Prevention Program that will be a high risk behavior assessment tailored to MSM (due to the exceptionally high rates of infection in this population). They will be assessing the use of female condoms for MSM as well as going into the high risk areas such as bath houses and underground parties to distribute surveys. The program will be using new ways to engage the high risk populations and assess risk.

## **ADJOURNMENT**

There being no further business to come before the committee, the meeting was adjourned at 3:15 p.m.