



FORT LAUDERDALE/BROWARD EMA
BROWARD HIV HEALTH SERVICES PLANNING COUNCIL
AN ADVISORY BOARD OF THE BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS
200 OAKWOOD LANE, SUITE 100, HOLLYWOOD, FL 33020
(954) 561-9681 • FAX (954) 561-9685

Executive Committee Meeting

Thursday, July 20, 2023 - 11:30 AM

**Meeting location: Ujima Men's Collective Conference Room, 1033 NW Sistrunk Boulevard Fort
Lauderdale, FL, 33311**

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

This meeting is audio recorded.

The Executive Committee meets to conduct the business of the Council and shall:

1. Set the agenda for Council meetings.
2. Address Conflict of Interest issues.
3. Review Membership/Council Development Committee Attendance report to identify Council members, not in compliance with attendance requirements.
4. Oversee the planning activities established in the integrated HIV prevention and care plan.
5. Develop and oversee committee work plans that address comprehensive planning goals and objectives.
6. Ratify recommendations for removal for cause from the Membership/Council Development Committee

Quorum for this meeting is 6

DRAFT AGENDA

ORDER OF BUSINESS

1. Call to Order/Establishment of Quorum
2. Welcome from the Chair
 - a. Meeting Ground Rules
 - b. Statement of Sunshine
 - c. Introductions & Abstentions
 - d. Moment of Silence
3. Public Comment
4. **ACTION:** Approval of Agenda for July 20, 2023
5. **ACTION:** Approval of Minutes from May 18, 2023
6. Standard Committee Items
 - a. Review and Approve July 27, 2023, HIVPC Agenda, Meeting Materials and Motions (**Handout A**)
 - b. Review August 2023 HIVPC Calendar (**Handout B**)
7. Unfinished Business

- a. None.
- 8. New Business
 - a. Discuss and Review the Planning Council Budget and Planning Council Support Scope of Work for FY 2023-2024 (**Handout C**)
 - b. Discussion on the status of developing Term Limits policies and procedures: Ad Hoc Committee Chair
 - c. Review and discuss the HIVPC Mission and Vision Statements (**Handout D**)
 - d. Discussion on appointing the Ad-Hoc Nomination Committee for elections for the FY 2024-2026 term.

9. Public Comment

10. Agenda Items for Next Meeting

- a. Next Meeting Date: August 17, 2023, at 11:30 a.m. LOCATION: Broward Regional Health Planning Council
- b. Agenda Items for next meeting

11. Announcements

12. Adjournment

For a detailed discussion on any of the above items, please refer to the minutes available at: [HIV Planning Council Website](#)

Please complete your [meeting evaluation](#).

Three Guiding Principles of the Broward County HIV Health Services Planning Council
• Linkage to Care • Retention in Care • Viral Load Suppression •

Vision: To ensure the delivery of high-quality, comprehensive HIV/AIDS services to low-income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care.

Mission: We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high-quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, we: (1) Foster the substantive involvement of the HIV-affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.



Broward County Board of County Commissioners

Mark D. Bogen • Lamar P. Fisher • Beam Furr • Steve Geller • Torey Alston • Nan H. Rich • Tim Ryan • Jared Moskowitz • Michael Udine • Robert McKinzie • Hazelle P. Rogers

[Broward County Website](#)



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Executive Committee

Thursday, May 18, 2023 - 1:30 PM

Meeting at Ujima Men's Collaborative and via [WebEx](#)

DRAFT MINUTES

Executive Members Present: L. Robertson (HIVPC Chair), V. Biggs (HIVPC Vice-Chair), S. Jackson (CEC Chair), Jose Castillo (SOC Vice-Chair), V. Foster (MCDC Vice-Chair), T. Moragne (MCDC Vice-Chair), B. Fortune-Evans (QMC Chair), B. Barnes (PSRA & Ad-Hoc Chair)

Members Excused: None.

Members Absent: A. Ruffner (SOC Chair)

Ryan White Part A Recipient Staff Present:

Planning Council Support Staff Present: G. Berkeley-Martinez, M. Patel, N. Del Valle

Guests Present: M. Mullings

1. Call to Order, Welcome from the Chair & Public Record Requirements

The Executive Committee Chair called the meeting to order at 1:33 P.M. and welcomed all meeting attendees. The Chair notified attendees that the Executive Committee meeting is based on Florida's "Government-in-the-Sunshine Law and meeting reporting requirements, including the recording of minutes. In addition, he stated that the acknowledgment of HIV status is not required but is subject to public record if it is disclosed. Introductions were made by the Executive Committee Vice-Chair, Committee members, Recipient staff, PCS/CQM staff, and guests by roll call, and a moment of silence was observed.

2. Public Comment

The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters pertaining to HIV/AIDS and services in Broward County. There were no public comments.

3. Meeting Approvals

The approval of the May 18, 2023, Executive Committee agenda with amendments to include committee updates was proposed by B. Barnes, seconded by V. Foster, and passed unanimously. The approval for the minutes of the April 20, 2023, meeting was proposed by V. Foster, seconded by J. Castillo, and approved with no further corrections.

Motion #1: B. Barnes, on behalf of the Executive Committee, made a motion to approve the May 18, 2023, Executive Committee agenda with amendments to remove the Term Limits discussion. The motion was seconded by V. Foster and adopted unanimously.

Motion #2: V. Foster, on behalf of the Executive Committee, made a motion to approve the April 20, 2023, Executive Committee meeting minutes as presented. The motion was seconded by J. Castillo and adopted unanimously.

4. Standard Committee Items

Motion #3: T. Moragne, on behalf of the Executive Committee, made a motion to approve the agenda and meeting materials with the requested changes for the May 25, 2023, HIVPC meeting. The motion was seconded by V. Foster and adopted unanimously.

Motion #4: B. Barns, on behalf of the Executive Committee, made a motion to send the discussion of new legislation surrounding the LGBTQ+ community to the Integrated Work Group committee for review. The motion was seconded by V. Biggs and adopted unanimously.

5. Unfinished Business
None.
6. New Business
None.
7. Recipient's Report
There was no Recipient's report for this meeting.
8. Public Comment
The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters pertaining to HIV/AIDS and services in Broward County. There were no public comments.
9. Agenda Items for Next Meeting
 - The next Executive Committee meeting will be held on June 15, 2023, at 1:30 pm. LOCATION: BRHPC and via WebEx Videoconference.
10. Announcements
 - V. Biggs: announced that on May 20, 2023, Gilda's Club is hosting an event for the LGBTQ+ community.
 - V. Biggs: announced the CEC: Part II: Leather-In-Kink Community Conversation on June 16, 2023, at the Eagle in Wilton Manners from 7 pm to 9 pm.

There being no further business, the meeting was adjourned at 2:01 pm.

Executive Committee For CY 2023

Consumer	PLMHA	Absences	Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
				Meeting Date	19	16	16	20	18	15							
1	1	0	1	Jackson, S	X	X	X	X	X	C							
0	1	0	2	Biggs, V., V. Chair	X	X	X	X	X	C							
0	0	0	3	Fortune-Evans, B.	X	X	X	E	X	C							
0	0	1	4	Foster, V.	X	A	X	X	X	C							
0	0	2	5	Moragne, T.	A	X	A	X	X	C							
0	1	0	6	Robertson, L., Chair	X	X	X	X	X	C							
0	0	2	7	Ruffner, A.	X	A	X	X	A	C							
0	1	0	8	Barnes, B.	X	X	X	E	X	C							
0	1	0	9	Castillo, J	X	X	X	X	X	C							
Quorum = 5					8	7	8	7	8								

Legend:	
X - present	N - newly appointed
A - absent	Z - resigned
E - excused	C - canceled
NQA - no quorum absent	W - warning letter
NQX - no quorum present	Z - resigned
CX - canceled due to quorum	R - removal letter

Executive Committee Meeting Minutes –May 19, 2023
 Minutes prepared by PCS Staff

HIV HEALTH SERVICES PLANNING COUNCIL MEETING GROUND RULES



1. The Council, its members, and the public recognize and respect the committee process adopted by this Council. The Council, its members, and the public recognize that full discussion and analysis of issues occurs at the committee level rather than at Council meetings.
2. Before a member can make a motion or speak in debate, the member must be recognized by the Chair as having the exclusive right to be heard at that time.
3. All speakers are expected to address the Council in a respectful manner to respect time limits, to speak briefly and to the point, and to stay on agenda. All other persons in attendance should not interrupt the speaker who is recognized by the Chair as having the floor.
4. If the member who made the motion claims the floor and has not already spoken on the question, that member is entitled to be recognized in preference to other members.
5. No person is entitled to the floor a second time in debate on the same item as long as any other person who desires the floor has not spoken on the item.
6. Speakers should restrict comments and debate to the pending question or motion. Speakers must address their remarks to the Chair and maintain a courteous tone. The Chair may impose time limits on debate or discussion to ensure efficient conduct of Council business.
7. Members should not name service providers and/or persons during any discussion unless the service provider or person is identified in the subject of the motion or agenda item. Specific concerns regarding service providers should be directed towards the Grantee, outside of the meeting.
8. Members of the public may only address the Council upon recognition by the Chair. They are subject to the same rules of conduct expected of Council members.
9. No alcohol or drug use (unless prescribed by a licensed physician), is permitted at Council meetings, grantee or support staff offices.
10. No abusive language, threats of violence, or possession of weapons are permitted in Council meetings, grantee or staff offices.
11. Repeated violation of these meeting rules may result in no further recognition of the offending member or attendee by the Chair at that meeting. Any serious breach of conduct which disrupts the Council's meeting may subject the offender to removal from the meeting, administrative or legal process.

Revised 7/24/14

CONSEJO DE PLANEACIÓN DE SERVICIOS DE SALUD VIH REGLAS BÁSICAS DE LA REUNIÓN



1. Los miembros deberán aceptar y respetar el proceso de comité adoptado por este Consejo. Las discusiones y el análisis en pleno de los temas tendrán lugar a nivel de comité y no en las reuniones plenarias del Consejo.
2. Antes de que un miembro pueda iniciar una moción o de que una persona pueda hablar en un debate, el Presidente de la reunión deberá reconocer que él o ella tienen el derecho exclusivo de hablar en ese momento dado.
3. Se espera que todos los ponentes se dirijan al Consejo de una manera respetuosa, que no se interrumpa al ponente con derecho al habla en el momento, que cuando se hable se haga de forma clara y concisa, y que se mantenga la agenda.
4. Si el miembro que inicia una moción no ha hablado todavía y reclama su derecho a hablar sobre un asunto, él/ella tendrán el derecho a que con preferencia se les reconozca.
5. Nadie tendrá derecho a reclamar el habla por una segunda vez, en un debate sobre el mismo tema, cuando otra persona que no ha hablado todavía, desea hacerlo.
6. Los debates deben ceñirse a los asuntos o mociones que estén pendientes. Al hablar, los ponentes deben referirse al Presidente, y mantener un tono cortés.
7. Los miembros del público solo podrán dirigirse al Consejo cuando hayan sido reconocidos por el Presidente de la reunión. Estarán sujetos a las mismas reglas de conducta que se esperan de los miembros del Consejo. Se establecerán límites de tiempo según sea necesario para garantizar que los asuntos del Consejo cursen de manera eficiente.
8. Miembros del público sólo podrán dirigir el Consejo a partir del reconocimiento por el Presidente. Están sujetos a las mismas reglas de conducta que se espera de los miembros del Consejo.
9. No estará permitido el uso de bebidas alcohólicas o de drogas en las reuniones del Consejo y tampoco en las oficinas del personal de soporte y donatarios.
10. No está permitido el uso de lenguaje abusivo, amenazas de violencia y posesión de armas en las reuniones del Consejo ni en las oficinas del personal de soporte y donatarios.
11. La repetida violación de estas reglas básicas dará como resultado que el Presidente de la reunión deje de reconocer al derecho a participación del ofensor o miembro de la audiencia. Cualquier violación de conducta grave, que perturbe la reunión de Consejo, terminará en la remoción del ofensor, de la reunión.

KONSÈY PLANIFIKASYON SÈVIS SANTE POU HIV RÈGLEMAN RANKONT-YO



1. Manm-yo dwe rekonèt epi respekte pwosesis komite-a ke Konsèy-la adopte. Diskisyon ak analiz total pwoblèm-yo fèt nan nivo komite-a; li pa fèt pandan rankont tout Konsèy-la.
2. Anvan yon manm ka fè yon pwopozisyon oswa nenpòt ki moun gen dwa pale pandan yon deba, fòk Prezidan Komite-a bali dwa esklizif pou fè moun tande-li nan moman sa-a.
3. Yo atann-yo aske tout moun k'ap pale ak Konsèy-la fè-li avèk respè, pou pèsonn pa koupe moun ke Konsèy-la bay dwa pale lapawòl, pou moun k'ap pale-a respekte kantite tan yo ba-li pou pale-a, pou li di sa l'ap di-a rapidman epi avèk presizyon, epi pou li respekte ajanda-a.
4. Si manm ki fè pwopozisyon-an mande pou li pale epi si li poko pale sou keksyon-an deja, li gen priyorite sou lòt manm-yo.
5. Pèsonn moun pa gen dwa pran lapawòl de fwa sou yon menm sijè si gen lòt moun ki poko pale epi ki vle esprime tèt-yo.
6. Deba-a dwe rete sou keksyon oswa pwopozisyon k'ap fèt-la. Moun k'ap pale-a dwe adrese sa l'ap di-a bay Prezidan Komite-a epi pale sou yon ton ki make ak respè.
7. Manm piblik-la dwe pale ak Konsèy-la sèlman si Prezidan Konsèy-la bay-yo lapawòl. Yo dwe respekte menm règleman kondwit avèk manm Konsèy-yo. Lè sa nesèsè pou zafè Konsèy-la byen mache, yo gen dwa bay-yo yon limit tan pou yo pale.
8. Manm nan piblik la sèlman pou adrese a konsèy sou rekonèsans sou chèz la. Yo ka tonbe anba menm lòd de kondwit ki te espere nan manm konsèy yo.
9. Itilizasyon alkòl ak dwòg (sòf si se yon doktè lisansye ki preskri-li), entèdi nan rankont Konsèy-la oswa nan biwo estaf sipò-a oswa Resevè-a.
10. Vye langaj, menas vyolans, oswa posesyon zam entèdi nan rankont Konsèy-la oswa nan biwo estaf-la oswa Resevè-a.
11. Vyolasyon repete règleman rankont-yo ap lakòz yon manm oswa lòt moun k'ap asiste rankont-lan pa kapab patisipe ankò. Nenpòt ki move kondwit serye ki twouble rankont-la ap lakòz yo mete moun-nan deyò.

Acronym List

ACA: The Patient Protection and Affordable Care Act 2010
ADAP: AIDS Drugs Assistance Program
AETC: AIDS Education and Training Center
AHF: AIDS Health Care Foundation
AIDS: Acquired Immuno-Deficiency Syndrome
APR: Annual Progress Report
ART: Antiretroviral Therapy
ARV: Antiretrovirals
BARC: Broward Addiction Recovery Center
BCFHC: Broward Community and Family Health Centers
BH: Behavioral Health
BISS: Benefit Insurance Support Service
BMSM: Black Men Who Have Sex with Men
BRHPC: Broward Regional Health Planning Council, Inc.
CAP: Corrective Action Plan
CARE Act: Comprehensive AIDS Resources Emergency Act
CBDPP: Community Based Dental Partnership Program
CBO: Community-Based Organization
CDC: Centers for Disease Control and Prevention
CDTC: Children's Diagnostic and Treatment Center
CEC: Community Empowerment Committee
CEO: Chief Elected Official
CHIP: Children's Health Insurance Program
CIED: Client Intake and Eligibility Determination
CLC: Consolidated List of Contractors
CLD: Client Level Data
CM: Case Management
COVID-19: Coronavirus Disease 2019
CQI: Continuous Quality Improvement
CQII: Center for Quality Improvement and Innovation
CQM: Clinical Quality Management
CSV: Comprehensive Site Visit

CTS: Counseling and Testing Site

DCHAP: Division of Community HIV/AIDS Programs

DCM: Disease Case Management

DGMO: Division of Grants Management Operations

DIR: HRSA's Division of Independent Review

DMHAP: HAB's Division of Metropolitan HIV/AIDS Programs

DOH-Broward: Florida Department of Health in Broward County

DPD: HAB's Division of Policy and Data

DRP: HIV/AIDS Dental Reimbursement Program

DSHAP: HAB's Division of State HIV/AIDS Programs

EC: Emerging Communities

eHARS: Electronic HIV/AIDS Reporting System

EHBs: Electronic Handbooks

EHE: Ending the HIV Epidemic in the U.S.

EIIHA: Early Intervention of Individuals Living with HIV/AIDS

EIS: Early Intervention Services

EFA: Emergency Financial Assistance

EMA: Eligible Metropolitan Area

ERF: ADAP Emergency Relief Fund or X09

FDA: Food and Drug Administration

FDOH: Florida Department of Health

FFR: Federal Financial Report

FPL: Federal Poverty Level

FQHC: Federally Qualified Health Center

FY: Fiscal Year

GAO: Government Accountability Office

GCMA: Grant Contract Management System

GMS: Grants Management Specialist

GMO: Grants Management Officer

GPS: HHS Grants Policy Statement

HAB: HIV/AIDS Bureau
HHS: U.S. Department of Health and Human Services
HICP: Health Insurance Continuation Program
HIT: Health Information Technology
HITEQ: Health Information Technology Training and Technical Assistance Center
HIV: Human Immunodeficiency Virus
HIVPC: Broward County HIV Planning Council
HIVQM: HIV Quality Measures
HMSM: Hispanic Men who have Sex with Men
HOPWA: Housing Opportunities for People with AIDS
HRSA: Health Resources and Service Administration
HUD: U.S Department of Housing and Urban Development
IHS: Indian Health Service
IW: Integrated Workgroup
IDU: Intravenous Drug User
JLP: Jail Linkage Program
LPAP: Local AIDS Pharmaceutical Assistance Program
MAI: Minority AIDS Initiative
MCDC: Membership/Council Development Committee
MCM: Medical Case Management
MH: Mental Health
MNT: Medical Nutrition Therapy
MOE: Maintenance of Effort
MOU: Memorandum of Understanding
MSA: Metropolitan Statistical Area
MSM: Men Who Have Sex with Men
NBHD: North Broward Hospital District (Broward Health)
NCC: Non-Competing Continuation
NGA: Notice of Grant Award
NHAS: National HIV/AIDS Strategy
NMS: RWHAP National Monitoring Standards
NoA: Notice of Award
NOFO: Notice of Funding Opportunity
nPEP: Non-Occupational Post Exposure Prophylaxis

NSU: Nova Southeastern University
OAA: HAB's Office of the Associate Administrator
OAHS: Outpatient Ambulatory Health Services
OFAM: Office of Financial Assistance Management
OHC: Oral Health Care
OIG: Office of Inspector General
OMB: Office of Management
OOM: HAB's Office of Operations and Management
OPDIVs: HHS Operating Divisions
OPS: Office of Program Support
PB: Planning Body
PC: Planning Council
PCN: Policy Clarification Notice
PDSA: Plan-Do-Study-Act
PHS: Public Health Service
PE: Provide Enterprise
PLWH: People Living with HIV
PLWHA: People Living with HIV/AIDS
PMS: Payment Management System
PO: Project Office
PrEP: Pre-Exposure Prophylaxis
PRISM: Patient Reporting Investigating Surveillance System
PROACT: *Participate, Retain, Observe, Adhere, Communicate and Teamwork is DOH- Broward's treatment adherence program.*
PSRA: Priority Setting & Resource Allocations
PTR: Program Terms Report
QI: Quality Improvement
QIP: Quality Improvement Project
QM: Quality Management
QMC: Quality Management Committee
RDR: Ryan White HIV/AIDS Program Data Report
RFI: Request for Information
RFP: Request for Proposal
RSR: Ryan White Services Report

RWHAP: Ryan White HIV/AIDS Program

RWPA: Ryan White Part A

SA: Substance Abuse

SBHD: South Broward Hospital District (Memorial Healthcare System)

SCHIP: State Children's Health Insurance Program

SCSN: Statewide Coordinated Statement of Need

SDM: Service Delivery Model

SOC: System of Care

SPNS: Special Projects of National Significance

STD/STI: Sexually Transmitted Diseases or Infection

TA: Technical Assistance

TAC: Technical Assistance Contract

TARGET: Technical Assistance Resources, Guidance, Education and Training

TB: Tuberculosis

TGA: Transitional Grant Area

UAR: Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards

UOB: Unobligated Balance

VA: United States Department of Veteran Affairs

VL: Viral Load

VLS: Viral Load Suppression

WMSM: White Men who have Sex with Men

WICY: Women, Infants, Children, and Youth

Frequently Used Terms

Recipient: Government department designated to administer Ryan white Part A funds and monitor contracts.

Planning Council Support (PCS) Staff/Staff: Provides professional staff support, meeting coordination and information to the HIVPC, its standing and ad-Hoc Committees, Chair, and Recipient.

Clinical Quality Management (CQM) Support Staff: Provides professional support, meeting coordination and technical assistance to assist the Recipient through analysis of performance measures and other data with implementation of activities designed to improve patient's care, health outcomes and patient satisfaction throughout the system of care.

Provider/Sub-Recipient: Agencies contracted to provide HIV Core and Support services to consumers.

Consumer/Client/Patient: A person who is an eligible recipient of services under the Ryan White Act.



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Broward County HIV Health Services Planning Council Meeting

Thursday, July 27, 2023 - 9:30 AM

Meeting at Broward Regional Health Planning Council and via [WebEx Videoconference](#)
Chair: Lorenzo Robertson • Vice Chair: Von Biggs

Join the meeting via phone: 1-408-418-9388 US Toll (access code: 132 007 3138)

This meeting is audio and video recorded.

Quorum for this meeting is 11

DRAFT AGENDA

ORDER OF BUSINESS

- I. CALL TO ORDER/ESTABLISHMENT OF QUORUM**
- II. WELCOME FROM THE CHAIR**
 - a. Meeting Ground Rules
 - b. Statement of Sunshine
 - c. Introductions & Abstentions
 - d. Moment of Silence
- III. PUBLIC COMMENT**
- IV. ACTION:** Approval of Agenda for July 27, 2023
- V. ACTION:** Approval of Minutes from May 25, 2023
- VI. FEDERAL LEGISLATIVE REPORT**– Attorney Marty Cassini, Broward County Intergovernmental Affairs Office (**Handout A**)
- VII. STANDARD COMMITTEE ITEMS**
- VIII. CONSENT ITEMS**
- IX. DISCUSSION ITEMS**
 - a. Motion to approve How Best to Meet the Need Language (**Handout B**)
Justification: The How Best to Meet the Need Language for FY2024-2025 was reviewed and approved by the Priority Setting & Resource Allocation Committee.
 - b. Motion to approve the PSRA Ranking of Part A and MAI Service Categories (**Handout C**).
Justification: Rankings were conducted as a part of the priority setting and resource allocation process.

c. Motion to approve the Mission and Vision statements of the revised 2023 By-Laws. **(Handout D)**.

d. Motion to approve Resource Allocations for FY 2023-2024:

Part A Core Services

1. **Motion to approve the allocation of \$ to Outpatient Ambulatory Health Services for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

2. **Motion to approve the allocation of \$ to AIDS Pharmacy Assistance (LPAP) for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

3. **Motion to approve the allocation of \$ to Oral Health Services for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

4. **Motion to approve the allocation of \$ to Health Insurance Premium & Cost Sharing FY2024-2025**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

5. **Motion to approve the allocation of \$ to Medical Case Management/ Treatment adherence for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

6. **Motion to approve the allocation of \$ to Medical Case Management (Case Management) for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

7. **Motion to approve the allocation of \$ to Mental Health for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

8. **Motion to approve the allocation of \$ to Substance Abuse (outpatient) for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

9. **Motion to approve the allocation of \$ to Medical Nutrition Therapy for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

Total Part A Core Services: \$

Part A Support Services:

1. **Motion to approve the allocation of \$ to Non-Medical Case Management Services- Centralized Intake & Eligibility Determination (CIED) (Case Management) for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

2. **Motion to approve the allocation of \$ to Emergency Financial Assistance for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

3. **Motion to approve the allocation of \$ to Food Bank/ Food Voucher for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

4. **Motion to approve the allocation of \$ to Legal Services for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

Total Part A Support Services: \$

Total Part A Core & Support Services Allocations: \$

MAI Core Services:

1. **Motion to approve the allocation of \$ to Outpatient Ambulatory Health Services (OAHS) for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

2. **Motion to approve the allocation of \$ to Mental Health FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

3. **Motion to approve the allocation of \$ to Substance Abuse (Outpatient) for FY2024-2025.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

Total MAI Core Services: \$

MAI Support Services:

1. **Motion to approve the allocation of \$ to Non-Medical Case Management - Centralized Intake & Eligibility Determination (CIED) and Case Management Services for FY2023-2024.**

FY2024 Ranking:

Factors to Consider:

Recommended percentage of FY2024 Allocation:

PROPOSED BY: Priority Setting & Resource Allocation Committee

Total MAI Support Services: \$

Total MAI Allocations: \$

Total Part A and MAI Allocations: \$

X. OLD BUSINESS

XI. NEW BUSINESS

XII. COMMITTEE REPORTS

- a. Community Empowerment Committee (CEC)
Chair: Shawn Jackson • Vice Chair: Irvin Wilson
June 6, 2023; July 2023- No Meeting Held
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** September 5, 2023, at 3:00 PM at BRHPC and via WebEx Videoconference
- b. System of Care Committee (SOC)
Chair: Andrew Ruffner • Vice Chair: Jose Castillo
July 6, 2023
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** September 7, 2023, at 9:30 AM at BRHPC and via WebEx Videoconference
- c. Membership/Council Development Committee (MCDC)
Chair: Vincent Foster • Vice Chair: Dr. Timothy Moragne
July 13, 2023
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**

- v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** October 12, 2023, at 9:30 AM at BRHPC and via WebEx Videoconference
- d. Quality Management Committee (QMC)
Chair: Bisiola Fortune-Evans • Vice Chair: Vacant
No Meeting Held
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** September 11, 2023, at 12:30 PM at BRHPC and via WebEx Videoconference
- e. Executive Committee
Chair: Lorenzo Robertson • Vice Chair: Von Biggs
July 20, 2023
Work Plan Item Update/Status Summary:
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** August 17, 2023, at 1:30 PM at BRHPC and via WebEx Videoconference
- f. Priority Setting & Resource Allocation Committee (PSRA)
Chair: Brad Barnes • Vice Chair: Vacant
June 21, 2022
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** August 17, 2023, at 9:00 AM at BRHPC and via WebEx Videoconference
- g. Ad-Hoc Term Limits
Chair: Brad Barnes • Vice Chair: Vacant
No Meeting Held
 - i. **Work Plan Item Update/Status Summary:**
 - ii. **Data Requests:**
 - iii. **Rationale for Recommendations:**
 - iv. **Data Reports/ Data Review Updates:**
 - v. **Other Business Items:**
 - vi. **Agenda Items for Next Meeting:**
 - vii. **Next Meeting date:** TBD

XIII. Recipient Reports

- a. Part A

- b. Part B
- c. Part C
- d. Part D
- e. Part F
- f. HOPWA
- g. Prevention – Quarterly Update (April, **July**, October, January)

XIV. Public Comment

XV. Agenda Items for Next Meeting

- a. Next Meeting Date: August 24, 2023, at 9:30 a.m. at BRHPC and via WebEx
- b. Agenda Items for next meeting: To Be Determined

XVI. Announcements

XVII. Adjournment

For a detailed discussion on any of the above items, please refer to the minutes available at: [HIV Planning Council Website](#)

Please complete your [meeting evaluation](#).

Three Guiding Principles of the Broward County HIV Health Services Planning Council
• Linkage to Care • Retention in Care • Viral Load Suppression •

Vision: To ensure the delivery of high-quality, comprehensive HIV/AIDS services to low-income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care.

Mission: We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high-quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, we: (1) Foster the substantive involvement of the HIV-affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.



Broward County Board of County Commissioners

Mark D. Bogen • Lamar P. Fisher • Beam Furr • Steve Geller • Torey Alston • Nan H. Rich • Tim Ryan • Jared Moskowitz • Michael Udine • Robert McKinzie • Hazelle P. Rogers


[Broward County Website](#)



August 2023 **HANDOUT B**



Broward HIV Health Services Planning Council Calendar

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<p>All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change.</p> <p>Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1244/1343. Visit http://www.brhpc.org for updates.</p>						
		1	2	3 System of Care Committee Workgroup 9:30 – 11:30 AM Location: Web-Ex	4 South Florida AIDS Network Meeting (SFAN) 9:30AM Disease Case Management Network Meeting 2:30 PM – 3:45 PM	5
6	7	8	9 Quality Network Meeting 9:00 AM – 10:15 AM	10	11	12
13	14	15	16	17 PSRA Committee Meeting 9:00 AM – 1:00 PM Location: BRHPC/WebEx Executive Committee Meeting 1:30PM – 3:30PM Location: BRHPC/WebEx	18	19
20	21	22	23	24 HIV Planning Council (HIVPC) Meeting 9:30 AM – 11:30 AM Location: BRHPC/WebEx	25	26
27	28	29	30	31		



August 2023



Broward HIV Health Services Planning Council Calendar

All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change. Unless otherwise noted, meetings will be held via WebEx. Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1292 or 1343. Visit <http://www.brhpc.org> for updates.

TODOS ESTAN BIENVENIDOS!

ALL ARE WELCOME!

BON VINI!

A menos que se anote de forma diferente en el calendario, todas las reuniones se realizarán en:

Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020

Para confirmar información acerca de la reunión de Consejo de Planeación HIV, o confirmar la reserva de servicios especiales tales como: Traducción Inglés a Español o a Criollo (Haitiano), servicios para discapacitados en visión o audición, por favor llame con 48 horas de antelación para que puedan hacerse los arreglos necesarios.

Unless otherwise noted on the calendar, all meetings are held at:

Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020

To confirm HIV Planning Council meeting information, or reserve special needs services such as Translation from English to Spanish or Creole, or are hearing or visually impaired, please call 48 hours in advance so that arrangements can be made for you.

Sòf si yo ta ekri yon lòt bagay nan almanak-la, tout rankont-yo ap fèt:

Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020

Pou konfime enfòmasyon ou resevwa sou rankont Konsèy Planifikasyon HIV-a, oswa pou rezève sèvis pou bezwen Espesyal tankou: Tradiksyon angle an panyòl oswa kreyòl; oswa, si ou gen pwoblèm wè oswa tande, rele 48 tè alavans pou yo ka fè aranjman pou ou.

HIVPC Committee Descriptions

HIV Health Services Planning Council (HIVPC) - Monitors, evaluates, and continuously improves systematically the quality and appropriateness of HIV care and services provided to all patients receiving Part A and MAI-funded services.

Executive Committee - Sets agenda for Council meetings, addresses conflict of interest issues, reviews attendance reports, oversees the planning activities established in the Comprehensive Plan, oversees committee work plans, reviews committee recommendations, ratifies recommendations for removal for cause, and addresses unresolved grievance issues.

Priority Setting Resource Allocation (PSRA) Committee - Recommends priorities and allocation of Ryan White Part A funds. Facilitates the Priority Setting and Resource Allocation Process to include the review of appropriate data (service utilization, epidemiological data). Develops, reviews, and monitors eligibility, service definitions, as well as language on 'how best to meet the need.

Quality Management Committee (QMC) - Ensures highest quality HIV medical care and support services for PLWHA by developing client and system-based outcomes and indicators. Provides oversight of standards of care, develops scopes of service for program evaluation studies, assesses client satisfaction, and provides QM staff/client training/education.

Membership/Council Development Committee (MCDC) - Recruits and screens applications based on objective criteria for appointment to the Council in order to ensure demographic requirements of the Council are maintained according to the Ryan White Treatment and Modernization Act. Presents recommendations to the Council. Institutes orientation and training programs for new and incumbent members.

Community Empowerment Committee (CEC) - Encourages the participation of individuals infected and affected with HIV/AIDS in the planning, priority-setting and resource-allocation processes. Function as a primary level of appeal for unresolved grievances relative to the Council's decisions regarding Ryan White Part A funding.

System of Care (SOC) Committee - Evaluates the system of care and analyzes the impact of local, state, and federal policy and legislative issues impacting PLWHA in the Broward County EMA. Plans and addresses coordinated care across diverse groups by engaging community resources to eliminate disparities in access to services.

Broward Regional Health Planning Council		
Planning Council Support Budget: March 1, 2023 - February 29, 2024		
	(FTE) % of Time	
PERSONNEL/FRINGE		
Personnel		\$ 139,555
M. Rosiere, Vice President of Programs	2%	
G. Berkeley Martinez, Director Planning & Quality Management	40%	
M. Patel, Health Planner	100%	
N. Del Valle, Health Planner	100%	
Fringe/Benefits		\$ 44,571
Total Personnel & Fringe		\$ 184,126
NON-PERSONNEL EXPENSES		
Travel (Staff mileage reimbursement to HIVPC meetings/activities)		\$ 1,327
Communications (Office Phone / Internet/PCS Cellphone Reimbursement)		\$ 5,279
Information Technology/Software (Data/IT Support)		\$ 4,931
Printing (Copy machine annual lease)		\$ 2,250
Office Supplies		\$ 3,750
Postage		\$ 780
Rent Office/Conference Room		\$ 8,386
Utilities/Maintenance		\$ 3,479
Advertising (Job Posting Indeed/LinkedIn)		\$ 1,552
Total Non-Personnel		\$ 31,734
(OTHER) HIVPC DIRECT SERVICES		
HIVPC PWHA Food		\$ 21,851
PLWHA Food Distribution to Council and Committee meetings, \$200*7 meetings/month=\$1400 *12 months =\$16800 Food; Food supplies [serveware, condiments,etc = \$1551; HIVPC Retreat January/February 2024, \$3500;		
HIVPC PWHA Travel Local		\$ 2,720
Unaffiliated Consumer Transportation, bus passes \$40*4 members*12months= 1920 + Taxi \$800		
Consultants		\$ 2,500
HIVPC/ (Speakers TBD) Trainers \$2500		
Printing (HIVPC Promotion, Recruitment, & Marketing)		\$ 7,097
Printed materials: New Council Handbook with updated Council By-Laws and Policies & Procedures, Recruitment Palm Cards, Outreach Banners and other Marketing Info - \$ 424.75*12m =\$5,097; HIVPC Retreat Awards for members = \$2000		
Advertising: Recruitment Activities		\$ 3,400
Recruitment Commercial \$3400		
Total HIVPC Direct Budget		\$ 37,568
Sub-Total Personnel, Fringe, Non-Personnel, and Direct Services		\$ 253,428
BRHPC Administrative Costs (10%)		\$ 25,343
IT/MIS Admin, Accounting Office/Chief Financial Officer, Human Resources, Annual Audit, Insurance-Agency annual expense for Professional Liability of Directors & Officers		
Total BRHPC Planning Council Support Budget		\$ 278,771

\$ 0

EXHIBIT C-2 - REQUIRED ACTIVITIES, DELIVERABLES, AND TIMELINE
Program #2 – PCS Services

Program 2 Deliverables – PCS Services	Frequency	Due Dates	Distribution/Format
Work Plan			
Annual Work Plan of PCS Activities	Annually	March 31	Oral presentation One hard copy to Planning Council One electronic copy
Work Plan Status Report	Monthly	15th day	One electronic copy to Grantee
Ryan White Part A Grant Application			
Grant Application Work Plan	Annually	Within 7 days after application release	One electronic copy to Grantee
Grant Application Narrative		Based on Grant Application Work Plan approved by Grantee	One electronic copy to Grantee
Planning Council Letter of Assurance		30 days prior to application due date	One electronic copy to Planning Council One electronic copy to Grantee
Grantee Annual Progress Report		Submit to Grantee 30 days prior to HRSA due date	One electronic copy to Grantee
Planning Council Letter of Endorsement		April 30	One electronic copy to Grantee
Priority Setting and Resource Allocation Process Narrative	Annually	As requested or on April 30	One electronic copy to Grantee
Grantee Administrative Mechanism Assessment			
Administrative Assessment Methodology	Annually	January 31	One electronic copy to Grantee and Planning Council
Administrative Assessment Report	Annually	September 30	One electronic copy to Grantee and Planning Council
Administrative Assessment Progress Updates	Monthly	As requested by Grantee	One electronic copy to Grantee and Planning Council
Planning Council Support			
Planning Council Annual Report	Annually	March 15 or March 31	One electronic copy to Planning Council
Marketing Plan	Annually	June 30	One electronic copy to Grantee
EMA Benchmarking Report	Annually	March 31	One electronic copy to Grantee
Communication Plan	Annually	April 15	Hard copy with March invoice

Program 2 Deliverables – PCS Services	Frequency	Due Dates	Distribution/Format
Quarterly Planning and Evaluation Report Priorities Report Outreach Report Survey Summary Training and Development Summary Community Empowerment Survey Summary Evaluation of Meetings Summary Report	Quarterly	June 30 September 30 December 31 March 31	Oral presentation to Planning Council and Grantee One hard copy to Planning Council One electronic copy to Grantee
Monthly Progress Report	Monthly	15th day	One electronic copy to Grantee

EXHIBIT C-1 - SCOPE OF SERVICES

Consultant: Broward Regional Health Planning Council, Inc.

Agreement #: 21-CP-HCS-8128-RW

FAIN, if applicable: H8900002

CFDA, if applicable: 93.914

Program #2: Planning Council Support Services (“PCS Services”)

I. Scope of Services:

A. Consultant must provide professional support to Planning Council, its standing and ad hoc committees, its chair, and Grantee. PCS Services assist Planning Council and Grantee in meeting legislative requirements and completing associated planning activities.

1. These requirements and activities include but are not limited to (i) identification of service priorities and resource allocations, (ii) Planning Council meeting facilitation, (iii) community events, (iv) research, (v) Planning Council work plan and calendar of activities, and (vi) preparation of agendas, meeting minutes, and meeting materials.

B. Consultant must perform all PCS Services by and through its employees or agents.

C. Consultant’s activities and responsibilities under this PCS Services program include the following and must be provided in the format and on or before the dates specified in Exhibit C-2:

1. Annual Work Plan of PCS Activities: Consultant must create an annual work plan of PCS activities (the “Annual Work Plan of PCS Activities”) outlining the projects, reports, presentations, research, and/or activities required to be completed to support Planning Council, its committees, chair, and Grantee for the fiscal year. Consultant must present the Annual Work Plan of PCS Activities to Grantee for approval, and subsequently to Planning Council for approval, prior to carrying out any activities listed.
 - a. Work Plan Status Report: Consultant must create a monthly report outlining the status of the Annual Work Plan of PCS Activities. Consultant must submit the Work Plan Status Report with the monthly invoice in accordance with Exhibit C-2, Program #2 – PCS Services.
2. Ryan White Part A Grant Application:
 - a. Priority Setting and Resource Allocation Process Narrative: Consultant must develop and update Grantee’s Ryan White Part A Grant Application (“Grant Application”) with language explaining Planning Council’s process for establishing priorities and allocating resources, including data elements considered and their context.
 - b. Planning Council Letter of Assurance: Consultant must prepare a letter assuring Planning Council Reflectiveness in accordance with HRSA requirements (at least 33% of the Planning Council’s members must be HIV+ and the demographics of

Planning Council must be reflective of the community); and Consultant must obtain Planning Council Chair's signature.

- c. Planning Council Letter of Endorsement: Consultant must prepare a letter of funding allocations (post-award) signed by the Planning Council Chair.
 - d. Grant Application: Consultant must conduct research and assist with writing sections of the Grant Application as directed by Grantee. This includes the report of qualitative and quantitative information derived from the research ("Ryan White Part A Grant Application Narrative").
 - e. Grant Application Work Plan: Consultant must develop and maintain a work plan for the Grant Application that must include a timeline for completion, submission, and approval of each part of the final Grant Application by Grantee.
3. Grantee Administrative Mechanism Assessment: Consultant must develop a methodology that supports Planning Council in assessing the efficiency of Grantee's administrative mechanism on an annual basis ("Administrative Assessment Methodology"), including but not limited to review of Grantee's procurement and disbursement planning processes and effectiveness of funded services in addressing priorities, allocations, and instructions.
- a. Consultant must also develop and distribute to Grantee and Planning Council a full narrative report with supporting documentation ("Administrative Assessment Report") in accordance with Exhibit C-2.
 - b. Consultant must develop, maintain, and distribute Administrative Assessment Progress updates to Grantee each month. These updates must include, at a minimum, a discussion of the planning processes and effectiveness of funded services in addressing priorities, allocations, and instructions. The updates must also include detailed information for Planning Council and Grantee regarding the Priority Setting and Resource Allocation ("PSRA") committee meeting of the previous month's meeting.
4. Planning Council: Consultant must provide staff, research, and technical support to Planning Council and all of its standing and ad hoc committees as described herein.
- a. Priority Setting and Resource Allocation: Consultant must assist Planning Council and Grantee in the PSRA process, developing and structuring a plan to estimate and respond to unmet need and to estimate the number of persons with HIV/AIDS not in care. Such assistance includes (i) attending and participating in related meetings, conferences, and/or workgroups, (ii) assisting Planning Council in defining language on "How Best to Meet Priority Service Need," and (iii) conducting research to assist Grantee and Planning Council to prioritize service categories and funding allocations.
 - (a) Such research must include a list of service categories, priorities, and funding allocations approved by Planning Council as determined by, but not limited to:

- (i) epidemiology reports;
- (ii) client and provider perceived needs surveys;
- (iii) service utilization data analyses;
- (iv) estimate of unmet needs and service gaps;
- (v) other funding stream information; and
- (vi) results from client satisfaction surveys and/or other Planning Council assessment activities.

(b) Consultant must utilize research to provide presentations of the following:

- (i) data-based assessment results,
- (ii) the cost effectiveness and outcome effectiveness of funded services, and
- (iii) priorities in communities disproportionately affected by HIV/AIDS within the Fort Lauderdale/Broward County Eligible Metropolitan Area (“EMA”) and similar eligible metropolitan areas.

b. Marketing:

- (1) Marketing Plan: Develop marketing plan for Planning Council meetings and activities with timelines for activities for approval by Planning Council and Grantee.
 - (2) Marketing Activities: Develop marketing activities that include a communication plan for dissemination as well as updates to community awareness events. These activities must include scheduled updates to provider resource directory and Ryan White service provider directory on Grantee’s and Consultant’s website (as detailed in item 11.b. further below).
- c. Outreach: Assist Planning Council with advertising and conducting outreach activities in an effort to recruit additional Planning Council members and inform the local community about Planning Council activities.
- d. Community Empowerment Survey: Consultant must survey attendees of the Community Empowerment Committee’s quarterly consumer events regarding the effectiveness of event topics, location, and hours, and prepare summary of survey results.
- e. EMA Benchmarking Report: Consultant must develop an annual report using HIV/AIDS population data from Broward County and other comparable eligible metropolitan areas to access and develop benchmarks. This report must include demographic data, service utilization, and service delivery methods.

5. Program Evaluation: Consultant must prepare the Planning Council Annual Report. The report must provide comparison analysis of all funded services utilizing the results of clinical quality management activities, outcome information, and client satisfaction survey results. Consultant must present this report to Grantee and Planning Council.
6. Grantee Annual Progress Report: Consultant must prepare a client-level data report that includes an analysis of health outcomes of clients. This report must, at a minimum:
 - a. Assess the capacity and determine the impact of the Broward County Ryan White system of care.
 - b. Identify communities disproportionately affected by HIV/AIDS.
 - c. Monitor client utilization of the Ryan White HIV/AIDS services.
 - d. Track progress toward achieving the goals identified in the HIV National Strategic Plan, located at: <https://hivgov-prod-v3.s3.amazonaws.com/s3fs-public/HIV-National-Strategic-Plan-2021-2025.pdf>.
7. Research:
 - a. Analyze the impact of policy changes made by Planning Council and its committees and report any findings to Planning Council and Grantee as identified in the Annual Work Plan of PCS Activities.
 - b. Research best practices to ensure that Planning Council's by-laws, governance policies, and procedures are amended as needed.
 - c. Conduct yearly inventory, benchmarking, and comparisons analysis of scopes of services for all funded Ryan White Part A services with at least ten (10) eligible metropolitan areas.
8. Comprehensive Planning: Facilitate Planning Council participation in development of all information that contributes to Florida's Statewide Coordinated Statement of Need and Comprehensive Plan.
9. Evaluation of Meetings: Evaluate the effectiveness of meetings through collection and tabulation of data for Planning Council using the approved meeting evaluation tool(s) and present a written summary report to Grantee and then Planning Council's Executive Committee.
10. Council Training: Schedule, publicize, and conduct trainings for Planning Council members on such topics as legislation, Planning Council's role in Ryan White Part A planning processes, use and understanding of epidemiologic data, and active participation in Planning Council assessment, priority setting, and other key processes.
11. Administrative Responsibilities:
 - a. Records: Consultant must maintain copies of all written and electronic records, including meeting notices, monthly calendars, minutes, attendance sheets, and all

documents or reports distributed to, written by, or produced on behalf of Grantee and Planning Council.

- b. Grievances: Consultant is responsible for all Planning Council activities pertaining to grievance resolution in accordance with Planning Council's grievance procedures. Consultant must track all received and processed grievances and maintain records of grievances heard by Planning Council. Consultant must notify Grantee of all grievances and assist with resolution.

12. Communication:

- a. Communication Plan: Consultant must submit a plan for timely and effective communication between Consultant, Planning Council, and Grantee in accordance with Exhibit C-2.
- b. Website: Consultant must develop and maintain Planning Council's website to make important information on HIV/AIDS services and programs easily accessible to the community, consumers, health care and social services providers, and representatives of state and local governments. Consultant must update website information on a monthly basis and must obtain and utilize feedback from website users to identify additional opportunities for website enhancement.
- c. Notices: Consultant must maintain mailing, fax, and email lists of Planning Council members and interested parties and must distribute, via U.S. Postal Service, email, or fax, meeting notices and other documents to these parties.
- d. Planning Council Correspondence: Consultant must prepare formal correspondence on behalf of Planning Council, its committees, and committee chairs as requested and in accordance with Grantee and Planning Council policies and procedures.
- e. Requests from Public: Consultant must respond to requests for information from the public pertaining to Planning Council business. Response to such requests must be made in writing within forty-eight (48) hours of receipt and must include all necessary follow-up actions required to address the request in its entirety. Consultant must maintain a log of all such requests, actions, and responses to requests and present them to Planning Council and/or its committees for consideration.
- f. Requests from Board: Consultant must assist Grantee in responding to Board requests pertaining to Planning Council activities or functions.

13. Council Membership: Assist Planning Council in recruiting and maintaining Planning Council members in compliance with the Ryan White Act and maintain roster of current and potential Planning Council members who meet HRSA's mandated membership categories and reflectiveness of Grantee's HIV/AIDS community as best as possible.

14. Monthly Progress Report: Consultant must submit a detailed monthly report of Planning Council and sub-committee meetings and activities, including:

- a. Detailed narrative of Annual Work Plan of PCS Activities status;
 - b. Brief review of each Planning Council and committee meeting action, including but not limited to:
 - (1) Meeting quorum requirements;
 - (2) Outline of motions made and approved/not approved by Planning Council and its committees;
 - (3) Pending questions, issues, or problems;
 - (4) Requests for information or Grantee action;
 - (5) Training information;
 - (6) Membership and recruitment news; and
 - (7) Copies of meeting agendas, minutes, attendance rosters, and handouts for the report each month;
 - c. Summary of information/documents presented to and reviewed by Planning Council;
 - d. Documentation of people living with HIV/AIDS (“PLWHA”) involvement in Planning Council’s planning and evaluation process in monthly reports and grant application narrative;
 - e. Documentation of Planning Council recruitment activities, including a list of candidates approved by Planning Council to fill vacancies who meet HRSA Council reflectiveness and membership criteria requirements for approval by the Board. List must include Representation, Reflectiveness, and Consumer membership;
 - f. Consultant’s participation in the work of Planning Council and its committees during the reporting period; and
 - g. Description of PCS staff activities and accomplishments.
15. Quarterly Reports: Consultant must provide a detailed update on all Planning Council meetings, the attendance, the work plan, and the data points that affect the Broward County Ryan White system of care.
- a. The quarterly reports include Quarterly Planning and Evaluation Report, Priorities Report, Outreach Report, Survey Summary, Training and Development Summary, Community Empowerment Survey Summary, and Evaluation of Meetings Summary Report. Each quarterly PCS program report includes, at a minimum, the following:
 - i. Summary of evaluation data, discussions, and activities, and how the activity accomplished PCS plan goals and objectives;
 - ii. Summary of training sessions, topics addressed, learning objectives, attendance rates, evaluation data, and intended follow-up; and

- iii. Explanation and outcome of any technical assistance provided to service providers.

16. Meeting Facilitation:

- a. Meeting Logistics: Consultant must locate and provide meeting rooms to accommodate a minimum of fifty (50) people for Planning Council, its committees, and community outreach events. Consultant must ensure that meeting locations are accessible by public transportation or must make alternate arrangements to facilitate member participation. Consultant must also ensure that facilities are Americans with Disabilities Act (ADA) compliant and that meetings are conducted in accordance with Grantee’s policies regarding ADA compliance.
- b. Meeting Support: Consultant must provide a minimum of two (2) Consultant staff at all meetings of Planning Council and its committees to assist the various groups. When deemed necessary by a committee, Consultant must arrange for a parliamentarian at the committee’s meetings to provide guidance regarding Robert’s Rules of Order and the proper conduct of all meetings.
- c. Attendance Support: Consultant must maintain Planning Council and committee attendance logs and reports. Summarized attendance reports are due to Grantee fifteen (15) days prior to scheduled meetings.

II. Unit of Service: Planning/Coordinating/Advisory Groups Services for Planning Council Support Services (TD-6500)

- A. Unit Definition: Activities as outlined in Section I above and Exhibit C-2; includes professional technical assistance conducted by a subject matter expert
- B. Cost per Unit: For the period commencing on September 1, 2020, and ending on February 28, 2021, the cost per unit must not exceed \$23,231 per month. For the period commencing on March 1, 2021, and ending on February 28, 2022, the cost per unit must not exceed \$23,230.91 per month. For the Option Period, the cost per unit must not exceed 1/12th of the Option Period maximum dollar amount per month.
- C. Required Staff Credentials/Licensure:
 - 1. PCS staff: Master’s degree in public health, evaluation and planning, or related field; or bachelor’s degree with post-graduate coursework with direct supervision by a staff member with a minimum of a master’s degree
 - 2. Administrative staff: High school diploma or equivalent with direct supervision by a staff member with a minimum of a master’s degree
- D. Maximum Dollar Amount:
 - 1. Initial Term of Agreement: \$139,386 for fiscal year 2020-2021
 \$278,771 for fiscal year 2021-2022
 - 2. Option Period 1, if exercised: TBD

III. Outcomes/Indicators: Deliverables are attached as Exhibit C-2.

IV. Other Requirements:

- A. Consultant must complete the required reports in accordance with Exhibit E, Required Reports and Submission Dates.
- B. Provider Handbook: Consultant must adhere to the standards and other requirements below and as set forth in the Contract Adjustments, as applicable, and Provider Handbook.
- C. Client Information Network: Consultant must maintain the confidentiality of client services and records in accordance with applicable federal, state, and local laws and regulations mandating such confidentiality. Consultant agrees to work with Grantee to ensure that all federal, state, and local laws regarding confidentiality are adhered to in collecting and reporting client information.
- D. Invoice Documentation: Consultant must provide a summary of monthly expenditures with each monthly invoice. For reimbursement of professional technical assistance activities, as well as any other actual expenditures billed, Consultant must provide invoices and receipts detailing the services provided.

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**BROWARD COUNTY HIV HEALTH
SERVICES PLANNING COUNCIL**

BY-LAWS

Last amended: February 23, 2023

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By-Laws of the Broward County HIV Health Services Planning Council

Adopted: January 1992

Amended: April 1995, April 1996, November 1996, June 1998, March 1999, May 1999, February 2000, January 2002, September 2004, April 2006, January 2010, January 2012, May 2013, December 2013, May 2014, July 2014, March 2015, July 2015, August 2015, December 2015, April 2017, August 2017, October 2018, February 2023

ARTICLE I

NAME AND AREA OF SERVICE

SECTION 1: The name of the Planning Council shall be “The Broward County HIV Health Services Planning Council” (Council) or such successor name as may be designated by the Broward County Board of County Commissioners.

SECTION 2: The area served by the Council shall be Broward County, Florida. The governing body of Broward County is the Broward County Board of County Commissioners.

SECTION 3: The Council is established by a resolution of the Board of County Commissioners codified in Part X of Chapter (12 of the Broward County Administrative Code as amended by the Board of County Commissioners.

ARTICLE II

PURPOSE, MISSION, VISION, AND DUTIES

SECTION 1: The purpose of the Council is to provide planning to promote the development of HIV/AIDS health services, personnel, and facilities that meet identified health needs in a cost-effective manner, reduce inefficiencies, and develop HIV-related health plans.

SECTION 2: The Council's mission is to direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high-quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, the council: (1) fosters the substantive involvement of the HIV-affected communities. in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) supports local control of planning and service.

delivery, and builds partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) monitors and reports progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.

SECTION 3: The Council's vision is to ensure the delivery of high-quality, comprehensive HIV/AIDS services to low-income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care.

SECTION 4: The duties of the Council shall be those specified by the Ryan White Act.

ARTICLE III

DEFINITIONS

1. *Ad-Hoc Committee* means a committee established for a limited time or limited and definite purpose.
2. *Alternate* means a person appointed by the Board that may be called upon to participate as a voting member of the Council upon the occurrence of certain conditions.
3. *Board* means the Broward County Board of County Commissioners.
4. *Cause* means an action determined by the Council as a basis for discipline or removal from the Council or a Committee.
5. *Committee* means a committee established by the Council in furtherance of Council business.
6. *Community Stakeholder* means representatives from Ryan White Part B, C, D, or F, Prevention, or representatives of HIV/AIDS care in the community, including but not limited to consumers, providers, and regulators.
7. *Consumer* means a person who is an eligible recipient of services under the Ryan White Act.
8. *Council* means the Broward HIV Health Service Planning Council created in Chapter 21, Part X, Broward County Administrative Code, and mandated by the Ryan White Act, Part A.

9. *EMA* means Eligible Metropolitan Area.
10. *Ex officio* means a committee member who does not have a vote on that committee and does not count as quorum.
11. *Manual* means the Council's Local Policies and Procedures Manual.
12. *Member* means a person appointed to the Council by the Board.
13. *Non-Elected Community Leader* means someone active in the community not elected in formal governmental elections.
14. *PWH/PWHA* means a person with HIV Disease or AIDS.
15. *Part A* means the Ryan White Act, Part A, administered by the County with advice from the Council.
16. *Ryan White Act* means the Ryan White HIV/AIDS Treatment Extension Act of 2009.
17. *Unaffiliated Consumer* means individuals who are receiving HIV-related services from Ryan White-funded service providers and not compensated by, representative of, or employed by a provider funded under the Ryan White Act.
18. *Work Group* means a group that has a specific task and makes recommendations but does not follow attendance, membership, or quorum requirements.

ARTICLE IV

MEMBERSHIP

SECTION 1: Appointment to the Council

- a) All Members and Alternates of the Council shall be appointed by the Broward County Board of County Commissioners.
- b) The Council shall consist of not less than twenty (20) members nor more than thirty-five (35) members.
- c) The process for forwarding recommendations to the Board is outlined in the Membership/Council Development Committee Section of the COUNCIL Local Policies and Procedure Manual.

SECTION 2: An individual may serve on the Council only if the individual agrees that the individual has a financial interest in an entity if the individual is an employee of a public or private entity, or if the individual is a member of a public or private organization, and such entity or organization is seeking amounts from a grant under the Ryan White Act, the individual will not, with respect to the purpose for which the entity seeks such amounts, participate (directly or in an advisory capacity) in the process of selecting entities to receive such amounts for such purposes.

SECTION 3: The membership of the Council shall be as delineated in the Ryan White Act, as amended.

SECTION 4: Recruitment Efforts

Affirmative recruitment efforts shall be made to attract eligible candidates for membership on the Council and the committees with particular attention to gender balance and adequate representation from racial and ethnic minorities that is reflective of the EMA.

SECTION 5: HIV Representation

As part of the Council's efforts to increase the percentage of persons with HIV, it is recommended that the Council strive, whenever possible, to nominate persons living with HIV disease to vacancies in all other categories as appropriate.

SECTION 6: Office Term.

The term of office for members and alternates shall be at the pleasure of the Broward County Board of County Commissioners.

SECTION 7: Term Limits.

The Council will follow any Broward County direction regarding term limits.

SECTION 8: Attendance: Council and Committee.

Attendance of Council meetings shall be in accordance with the Broward County Code of Ordinances section 1-233. The Council may recommend reappointing members who were removed pursuant to the Broward County Code of Ordinances section 1-233. The committee attendance policy mirrors the Council attendance policy. The Chair of the Council shall, at their discretion, determine whether the member's absence meets any of the criteria for an excused absence as set forth in Broward County Code of Ordinance section 1-233. Excused absences for COUNCIL-related business mean business outside the regular time and place of COUNCIL business.

Failure to adhere to attendance requirements shall be grounds for removal from the Council or committees.

SECTION 9: Designation of Alternates.

There shall be a minimum of at least three persons living with HIV that reflect the demographics of the epidemic in the County who shall serve as Alternates, appointed and approved by the Broward County Board of County Commissioners.

- a) An Alternate may only serve as a voting member of the Council when a member with HIV is unable to serve due to HIV-related illness. In such case, the Chair shall appoint an alternate who, to the greatest extent possible, matches the gender, race, and ethnic background of the individual with HIV that is absent. Thereafter, alternates, as directed by the Chair, shall alternate their substitution for PWH members unable to serve due to HIV-related illness.
- b) Alternates may be appointed by the chair as voting members only after Quorum has been established. Alternates may be removed from their seats as described in Section 11 below.

SECTION 10: Membership on a Standing Committee.

Council members and Alternates shall be a member of at least one standing committee. Failure to participate on a standing committee within thirty (30) days shall be grounds for removal from the Council.

SECTION 11: Meeting Ground Rules.

All persons in attendance at a meeting of the Council and Committees shall comply with the meeting ground rules adopted by the Council.

SECTION 12: Removal of Members and Alternates

- A. Removal of Council members and alternates shall be in accordance with the Broward County Code of Ordinances section 1-233:
 - 1. Board meetings on a quarterly or less frequent basis:** Members will be removed after two (2) consecutive unexcused absences or missing two (2) properly noticed meetings in one (1) calendar year.
 - 2. Board meetings more frequently than quarterly:** Members will be removed after three (3) consecutive unexcused absences or missing four (4) properly noticed meetings in one (1) calendar year. If the committee has a joint meeting same attendance policy applies.
- B. **Procedure for removal.** If a member or alternate fails to comply with

Paragraphs B or C, or for reasons documented in Paragraph D, the Council shall recommend to the Broward County Board of County Commissioners the removal of that Member or Alternate. A recommendation of removal is based upon a majority vote of the Council members in attendance at a meeting at which Staff has provided written notification to the member or alternate recommended for removal that such item will be on the meeting's agenda. Unaffiliated members and alternates may also be automatically removed for reasons outlined in Paragraph E.

C. Recommendation for Removal by Council.

- a) The Council shall recommend that a member or alternate be removed from service on the Council for refusing to cooperate in a conflict-of-interest review, or when it is determined that the member or alternate knowingly acted intended to influence the conduct of the Council in a manner as defined in ARTICLE IV, SECTION 2 of these By-laws.
- b) The Council shall terminate from service any committee member who is not also a Council member for refusing to cooperate in a conflict-of-interest review, or when it is determined that the member knowingly acted intended to influence the conduct of the Council in a manner as defined in ARTICLE IV, SECTION 2 of these By-laws.
- c) The Council shall recommend that a member or alternate be removed from the Council for, but not limited to, failure to comply with County regulations or the Council Local Procedures Manual, failure to comply with meeting ground rules, or failure to maintain committee membership.

D. Recommendation for Removal by Individual Council Members. A Council Member, Council Chair, or Committee Chair may recommend removal for cause of a member or alternate by forwarding to the Membership Committee said recommendation, documenting the reasons for requesting removal. The Membership Committee will review the evidence and make recommendations to the Executive Committee. The Executive Committee will review the recommendation and forward the recommendation to the Council. The final decision to remove a member or alternate must be ratified by the Council. Once ratified, the Council will forward all recommendations for removal to the Board of County Commissioners.

- E. **Automatic Removal.** A member or alternate shall be automatically removed from the Council for failure to comply with attendance policies as outlined in ARTICLE IV, SECTION 8 of these By-laws. A member or alternate shall be automatically removed from the Council in accordance with the Broward County Administrative Code Section 12.108c.
- F. **Affiliated to Unaffiliated Status.** Members changing from affiliated status to unaffiliated status can be appointed by majority vote from one seat to the other without resigning from the Council. An official letter stating that the Council has voted to appoint the member in the new position with an updated application must be secured and submitted to the Intergovernmental Affairs/Board Section of the Broward County Board of Commission within ten (10) business days.
- G. **Seat Change.** MCDC and the Council shall be notified of changes to representation involving members of the Council holding a mandated seat due to their employment. Such changes shall be informational and immediately forwarded to the Broward County Board of County Commissioners.
- H. **Member participation in outreach and training activities.** Members are expected to participate in a minimum of two (2) Council outreach and training activities per calendar year.

ARTICLE V

OFFICERS

SECTION 1: The officers of the Council shall be members of the Council and shall be a Chair and a Vice Chair.

SECTION 2: ELECTIONS

- A. **Election of Officers** shall utilize a majority vote double election system (primary election and a secondary run-off election). Officers shall be elected by the majority vote of those members or alternates serving as members of the Council present and voting at the meeting during which the election is held.
- B. **Regular Biannual Elections.** Regular biannual elections will take place every two years. The ad-Hoc Nominating Committee shall present a slate of candidates for consideration as described in the ad-Hoc Nominating procedure. The Officers shall

take office on March 1 or at the first Council meeting of the calendar year. All Officers shall serve a two-year term and shall remain in office until a successor is selected. No officers shall serve more than two consecutive terms in one office.

- C. **Special Elections.** Special Elections will take place as needed. In the event of resignation or other reason for vacating the Chair or Vice Chair positions, a special election will be held following the procedures outlined in Nominating Procedure (Article VIII, Section 3, Part A). Until the election is held, the Council will adhere to the line of succession outlined in Article VI, Section 8. Individuals elected by virtue of special election will not be considered to have served a full term, and this service will not impact the individual's ability to run for two additional terms.

SECTION 3: The Duties of the Officers are those which usually apply to such officers and in addition thereto, such other duties as may be designated from time to time by the Council.

SECTION 4: The Official Liaison. The Chair of the Council will serve as the official liaison of the Council with the Broward County Board of County Commissioners and its designated administrative entity. No other Member of the Council or its committees may speak for the Council.

SECTION 5: Council Officers. Except for the Executive Committee, the current Council officers may not serve as Chair or Vice Chair of any Council committee while holding office.

SECTION 6: Acting Committee Chair. Upon proper notice to the committee, the Council Chair or Vice Chair may sit as acting chair of the committee when the Committee Chair or Vice Chair is unable to attend a properly scheduled meeting of the committee. In the event the Council Chair or Council Vice Chair is serving as acting committee chairs, they count towards quorum and have a vote. If the Council Chair or Vice-Chair attends as a guest for a committee meeting, the Chair or Vice-Chair can count toward quorum if needed.

ARTICLE VI

MEETINGS

SECTION 1: Meeting Protocol

- a) The Council shall meet at least nine (9) times per fiscal year (March 1 – February 28).
- b) Special meetings may be called by the Chair or upon petition of one-

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third of the membership of the Council.

- c) Written notice shall be given at least one week prior to each meeting.
- d) All HIV Council meetings are open to the public.
- e) Attendance at mandatory Training Activities is also part of Council attendance requirements.

SECTION 2: Quorum

- a) Fifty percent (50%) of the members plus one shall constitute a quorum for the HIV Council, and all standing and ad-Hoc Committees, but with no less than 3 members voting.
- b) Once a quorum has been established by members physically present at a meeting, members who are not physically present may attend and participate in such meetings by telephone or video. Quorum should be established within fifteen minutes of the meeting time.
- c) A majority of Members present and voting at any meeting at which a quorum is present shall be sufficient to act on behalf of the Council.
- d) The number of Members needed to determine quorum shall be the total number of Members of the Council, not including the Member representing the Broward County Board of County Commissioners.

SECTION 3: Voting Privileges

- a) Only duly appointed Members of the Council and/or committee (or the appointed Alternate in their absence) may vote, and each Member (or Alternate) shall have one vote.
- b) Voting privileges are non-transferable. In the event of a tie vote, there shall be a roll call vote and the Chair shall vote last.

SECTION 4: Public Notice of Council Meetings

- a) Public notice of Council meetings shall be given in accordance with Florida Statutes and Broward County Ordinances.
- b) Meetings shall be open to the public.
- c) Records and data shall be made available to the public under the applicable laws.
- d) Minutes of each meeting of the Council or Committee shall be kept.
- e) The accuracy of all minutes shall be certified by the Chair of the Council and/or committees.

SECTION 5: COUNCIL AGENDAS

- A. The Executive Committee shall meet five (5) working days before the

regularly scheduled full Council meeting. The Executive Committee (or in the absence of Executive Meeting action), the Council's Designated Staff Member shall prepare an agenda for full Council meetings based upon the following:

- a) Each committee chair, the Recipient, or the Council Support Staff will inform the Executive Committee (or Council Designated Staff Member) of committee recommendations and other actions to be presented for the full Council's approval.
- b) Motions passed by Committees may be sponsored by the Chair of the Committee on behalf of the Committee and annotated on the Council Agenda as sponsored by the Committee.
- c) Individual Members of the Council may request action items be placed on the agenda by providing them in writing to the Council Designated Staff Member before the Executive Committee meeting.
- d) Members of the public who wish to bring matters before the full Council for consideration must obtain sponsorship of the item by a Member of the Council.
- e) Requesters of Council actions must provide appropriate backup documentation to explain the requested action.
- f) The Executive Committee may refer proposed actions to the appropriate committee to examine and make a recommendation before presenting the matter to the full Council for action.
- g) Proposed motions requiring the full Council's vote shall be listed on the agenda and sent to members 48 hours before the full Council meeting.
- h) At the Executive Committee's discretion, backup documentation will be labeled and distributed with the Council's agenda.
- i) At the discretion of the Council Chair, action items requested at the Council meeting, not on the published agenda, may be added to the agenda's old/new business portion of the agenda, deferred until the next Council meeting, or referred to the appropriate committee.

- B. The Council agenda shall include:** Call to Order, Welcome, and Self-introductions (includes an explanation of Ground Rules, Sunshine Law, and HIV self-disclosure), Moment of Silence, Excused Absences and Appointment of Alternates, Adoption of Agenda, Approval of Minutes, Consent Items, (no discussion required), Discussion Items (discussion required), Committee Reports, Recipient and Other Reports (including, but not limited to Part A, Par B, Part C, Part D, Part F, HOPWA, Prevention), Old/New Business, Public Comment, Announcements, Next Meeting Date, Agenda Items for the Next Meeting, Adjournment. The

Executive Committee may order agenda items for the efficient and effective administration of the Council's business.

- C. The Executive Committee (or Council Chair in the absence of the Executive Committee) will determine the order of discussion action items in the agenda.

SECTION 6: All persons in attendance of a meeting of the Council or Committee shall comply with the meeting ground rules adopted by the Council.

SECTION 7: TIME LIMITS

The Executive Committee will establish time limits for each agenda item for each meeting. The Chair may use discretion to impose time limits on each speaker, to be consistently applied. Upon expiration of the time for discussion of a particular action item, the Chair shall close the debate and call for a vote. A person who has spoken once on a pending matter may not speak again on that matter until all others requesting the floor have been recognized.

SECTION 8: LINE OF SUCCESSION

In the event, the Chair and the Vice Chair do not attend the Council Meeting and neither the Chair nor the Vice Chair has notified the Council that they are not attending the Council Meeting, the immediate past chair, if present and a member of the Council, shall chair the meeting.

- A. In the absence of the immediate past chair the Council meeting may be chaired by Committee Chairs, in the following order:

1. Chair of Priority Setting and Resource Allocation
2. Chair of Membership/Council Development
3. Chair of Community Empowerment
4. Chair of Quality Management
5. Chair of System of Care

- B. In the event of a vacancy of the Council Chair or Vice Chair position, the duties of the Chair or Vice Chair will be assumed by the immediate past chair. If the immediate past chair is no longer a member of the Council, duties will be assumed in the following order:

1. A past Council Chair
2. Chair of Community Empowerment
3. Chair of Priority Setting and Resource Allocation
4. Chair of Quality Management
5. Chair of System of Care

6. Chair of Membership/Council Development

Pursuant to the revised paragraph C, the order of assumption of duties is prescribed for the following reason: a third party oversees the special election process, during which the current Chair or Vice Chair may participate. Duties will be assumed upon the Chair or Vice Chair vacancy until the vacancy is filled by a special election as outlined in Article V, Section 2C.

ARTICLE VII

CONFLICT OF INTEREST

SECTION 1: Members and Alternates of the Council and all committees established by the Council shall abide by the Florida Statutes, Broward County Ordinances, and Administrative Code, as may be amended from time to time, regarding conflicts of interest for public officials and the Government in the Sunshine Law. Copies of these documents shall be furnished to all Council Members and Alternates. Each member must submit the conflict of interest form at the beginning of the fiscal year and declare their conflict at each Council and PSRA committee meeting.

SECTION 2: The Executive Committee of the Council shall be authorized to formulate Council policy, review all concerns, and make recommendations to the full Council regarding conflict-of-interest issues.

SECTION 3: All Council members and alternates must identify conflicts of interest and are encouraged to request a review of a potential conflict of interest for themselves or of another Member or Alternate.

SECTION 4: All concerns regarding conflict of interest shall be recorded in the Council's meeting minutes and referred to the Executive Committee for review. The full Council shall take, based on the recommendations of the Executive Committee, whatever actions it deems appropriate and are in compliance with standing Council policies.

SECTION 5: In the event of a conflict of interest during the period of review of said conflict of interest, Member(s) or Alternate(s) under review may participate in the discussion of the matter in conflict/question but shall abstain from voting on the matter.

SECTION 6: A Member or Alternate shall be recommended for termination from

service on the Council and any of its committees for refusing to cooperate in a conflict of interest review, or when it is determined that they knowingly took action(s) intended to influence the conduct of the Council in a manner prohibited by the By-Laws or federal, state or local laws.

ARTICLE VIII

COMMITTEES

SECTION 1:

- A. The Council shall establish standing and Ad-Hoc committees necessary to fulfill the requirements of the Ryan White Act.
- B. **Committee Chairs and Vice Chairs.**
1. All Council committees shall be chaired by a Part A member of the Council.
 2. The Council Chair shall appoint the Committee Chairs and Vice Chairs of each Committee beginning with the date of the Council Chair's term of office.
 3. The current Committee Chairs and Vice Chairs shall continue to serve until the new Committee Chairs and Vice Chairs are appointed; the Council Chair may ask current Committee Chairs and Vice Chairs to remain in their positions.
 4. Committee Chairs and Vice Chairs may be appointed, removed, or replaced at the sole discretion of the Council Chair.
- C. **Appointment of Committee membership.**
1. Committee Chairs shall appoint, with the approval of the Council, the members of each committee.
 2. Except as otherwise provided by the By-Laws, a standing or ad-Hoc Committee may include members of the Council and community stakeholders.
 3. Committee membership should all be based on the demographics of the epidemic and consideration shall be given to race, ethnicity, self-acknowledged HIV positivity, and gender.
- D. **Removal of Committee membership.** The removal of Committee members shall be that of Council members as provided for in Article 4, Section 12, where applicable.

- E. **Committee Policies and Procedures.**
 1. The Council will approve written policies and procedures for all Committees which will be published in the “Local Procedures Manual.”
 2. The policies and procedures of each committee must be periodically reviewed by that committee and subsequently approved by the council.

SECTION 2: Standing Committees

A standing committee of the Council is a committee, which has a purpose that requires a standing membership and a regular meeting schedule. The standing committees of the Council are:

- A. Executive
- B. Community Empowerment
- C. Membership/Council Development
- D. Priority Setting and Resource Allocation
- E. Quality Management
- F. System of Care

SECTION 3: Ad-Hoc Committees

An Ad-Hoc committee of the Council does not require a standing membership and may meet on a periodic but not regular schedule. The continuing ad-Hoc committees are the ad-Hoc Nominating Committee and the ad-Hoc By-Laws / Memorandum of Understanding (MOU) Committee. The Council may establish other ad-Hoc committees as necessary.

- A. **Ad-Hoc Nominating Committee.**
 1. Membership. The Nominating Committee shall be composed of not less than five (5) Council members who shall be appointed by the Chair. At least one member shall be a person living with HIV/AIDS.
 2. Purpose. The Nominating Committee shall provide a slate of nominations for Members for Chair and Vice Chair of the Council from among current Council Members. The process utilized by the Nominating Committee to prepare and present the slate of officers for consideration for office is identified in that committee’s written policies and procedures.
- B. **Ad-Hoc By-Laws/ MOU Committee.**

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1. Membership. The members of the committee shall only include Council members and alternates.
2. Purpose. The ad-Hoc By-Laws/MOU Committee shall have the responsibility of periodically reviewing, updating, and maintaining the Council's By-Laws.

SECTION 4: There shall be an Executive Committee.

- A. Membership. The Executive Committee shall consist of the Council Chair, the Council Vice Chair, and the Chair or Vice-Chair of each of the standing committees. The immediate past Council Chair (if the past Chair is currently a member of the Council) will serve as an ex officio member of the Committee. In the absence of the Standing Committee Chair, the Standing Committee Vice Chair may serve and count towards quorum.
- B. A Vice-Chair of a committee does not need to be a member of the Council.
- C. The Executive Committee meets to conduct the business of the Council (excluding priority setting and allocation decisions). The Executive Committee shall:
 1. Set the agenda for Council meetings.
 2. Address Conflict of Interest issues.
 3. Review Membership/Council Development Committee Attendance report to identify Council members, not in compliance with attendance requirements.
 4. Oversee the planning activities established in the integrated HIV prevention and care plan.
 5. Develop and oversee committee work plans that address comprehensive planning goals and objectives.
 6. Ratify recommendations for removal for cause from the Membership/Council Development Committee.
- D. The Committee shall have responsibility for oversight of the planning activities established in the integrated HIV prevention and care plan and development and oversight of committee work plans to address integrated planning goals and objectives.

SECTION 5: There shall be a Community Empowerment Committee.

- A. Membership. The members of the committee shall include but are not limited to, representatives of the Council and community stakeholders. No less than 51% of the Council committee members shall be unaffiliated individuals living with HIV.

- B. Chair. The Committee Chair or Vice Chair shall be an unaffiliated individual with HIV.
- C. Purpose. The Committee shall inform and solicit the participation of individuals infected and affected with HIV/AIDS in the planning, priority setting, and resource allocation processes. This Committee serves as a bridge between the Council and people with HIV in Broward. It encourages the involvement of individuals living with and affected by HIV/AIDS in the Council process.

SECTION 6: There shall be a Priority Setting and Resource Allocation Committee.

- A. Membership. The Members of the Committee shall include but are not limited to, representatives of the Council and community stakeholders.
- B. Purpose.
 1. The Committee shall recommend to the Council priorities and allocation of Ryan White Part A funds.
 2. The Committee shall review, at least quarterly, any deviations in planned expenditures exceeding 10% in any given funding category for reallocation and/or possible reprioritization.
 3. The Committee will facilitate the Priority Setting and Resource Allocation Process to include the review of appropriate data (service utilization, epidemiological data).
 4. The Committee shall develop, review, and monitor eligibility, and service definitions, including improving the quality, cost-effectiveness, and allocation of resources to pharmacy services.
 5. When recommended, the Committee shall develop and implement a standardized mechanism for pharmacy services (i.e., drug access, formulary changes, and cost/impact analysis) and coordinate pharmacy services in collaboration with other funding streams (i.e., ADAP, Part B, Medicaid, private payers, including private insurance providers).
 6. The Committee shall determine eligibility for Part A services and Federal Poverty Level.

SECTION 7: There shall be a Membership/Council Development Committee.

- A. Membership.
 1. The Members of the Committee shall include but are not limited to,

Approved 8/24/09, 11/18/09 (Article VII, Section 1B), 1/28/10 (Article VII, Section 1D), 1/26/12 (Article V, Section 2), 5/23/13 (Article III, Section 15, 18; Article IV, Section 7, 8, 11A,B; Article VI, Section 1, 2, 5A, 8B; Article VIII, Section 1B, 1C, 4A), 12/12/13 (Article IV, Section 11; Article VI, Section 5; Article VIII, Section 4, 5, 7), 5/22/14 (Article III; Article VI, Section 8; Article VIII, Section 1,2,4,5,6,7,8,9), 7/24/14 (Article IV, Section 9; Article V, Section 2; Article VI, Section 5, 8; Article VIII, Section 1,2,5,6,8,10), 3/26/15 (Article IV, Section 9, 11; Article VIII, Section 4; Article X, Section 4), 4/17/17 (Article VIII, Section 2; Article VIII, Section 3, C; Article VIII, Section 6; Article VIII, Section 7, B), 8/31/17 (Article VIII, Section 11); 10/25/18 (Article IV, Section 1; Article X, Section 4); 2/23/2023 (Article II, Sections 2 and 3); Article IV Section 7&8, 12A,D,F,G,&H; Article V Section 6; Article VI Section 2(c), Article VII Section 1; Article VIII Section 3B, Section 4 A&B, Section 5B, Section 10A, Section 11; Article X Sections 2,3,5, and 6.

- representatives of the Council and community stakeholders.
- 2. At least two-thirds of the committee members must be Council members.

- B. Purpose.
 - 1. The Committee shall solicit, and screen applications based on objective criteria for appointment to the Council to ensure that the demographic requirements of the Council are maintained according to the Ryan White Treatment and Modernization Act and present its recommendations to the full Council.
 - 2. The Committee shall institute orientation and training programs for new and incumbent members.
 - 3. The Committee shall continue to educate the Council and committee members about their respective duties, and the Council’s functions and roles in the organization and delivery of HIV/AIDS health and support services.

SECTION 8: There shall be a Quality Management Committee.

- A. Membership. The members of the Committee shall include but are not limited to, representatives of the Council and community stakeholders.
- B. Purpose. The purpose of the Quality Management Program for Ryan White Part A in the Broward County EMA is to systematically monitor, evaluate, and continuously improve the quality and appropriateness of HIV care and services provided to all clients receiving Ryan White Part A and Minority AIDS Initiative (MAI) funded services in Broward County.

SECTION 9: There shall be a System of Care Committee

- A. Membership. The members of the Committee shall include representatives of Part A, consumers, community stakeholders, and health policy or healthcare system experts.
- B. Purpose. The purpose of the System of Care Committee is to evaluate the system of care in Broward County and analyze the impact of local, state, and federal policy and legislative issues impacting people living with HIV in the Broward County EMA. The Committee will be responsible for advising the Council on how these issues may impact the Broward County EMA and may recommend response strategies.

SECTION 10: There shall be an Integrated Work Group

A. Membership.

The workgroup will be composed of the Ryan White Part A HIV Health Services Planning Council, South Florida AIDS Network (SFAN), and the Broward County HIV Prevention Planning Council (BCHPPC) with three members and one alternate representing their respective planning or advisory body, as applicable.

1. Members from the Part A program may include Council members, committee members, or other appropriate community stakeholders, such as Housing Opportunities for People with AIDS (HOPWA) /housing; Federally Qualified Health Centers (FQHC)/Hospital districts; Broward County Public Schools; Funded community-based service providers; Behavioral health provider; Client engagement systems, including linkage and re-linkage to care and retention in care; Community leaders.
2. Part A members will be selected for recommendation by the Executive Committee but must be approved by the Council.
3. The desired membership of the workgroup should be reflective of the demographics of the epidemic in Broward County, and consideration shall be given to race, ethnicity, self-acknowledged HIV- positivity, and gender.

B. Purpose.

1. The workgroup will be responsible for monitoring and providing recommendations for the completion of the activities outlined in the Broward County Integrated HIV Prevention and Care Plan.
2. The workgroup will conduct a comprehensive analysis and review of data from community stakeholders to provide robust recommendations to the Prevention and Care planning bodies and to the Recipients.
3. The workgroup will serve as the feedback loop for the collaborative implementation of the Plan and make appropriate recommendations to the respective planning bodies and HIV funders.

C. Flow of Information.

1. The work group is expected to interact with numerous Prevention, Part A, and Part B teams, work groups, and committees.
2. The workgroup's main point of contact and coordination will be the Executive Committees of the Council, BCHPPC, and SFAN.

D. Ratification. The work of the workgroup is provided to the Council, the

BCHPPC, and SFAN in the form of recommendations, and is subject to the approval of the respective planning body.

Section 11: Joint Planning Body Meeting.
A joint planning body meeting does not require a standing membership and may meet on a periodic but not regular schedule. The joint planning bodies are the Ryan White Part A HIV Health Services Planning Council, South Florida AIDS Network, and the Broward County HIV Prevention Planning Council.

ARTICLE IX

ADOPTION AND AMENDMENTS OF BY-LAWS

SECTION 1: These By-Laws may be adopted, amended, or repealed by a majority vote of the Council.

SECTION 2: Notice of all proposed amendments, with amendments enclosed, shall be mailed or transmitted electronically to each Council member and Alternates at least ten (10) days prior to the meeting at which time such amendments are to be considered for adoption.

SECTION 3: DATE OF EFFECTIVENESS

Unless otherwise provided, these By-Laws and any amendments shall be effective immediately upon approval by the Council.

ARTICLE X

GENERAL PROVISIONS

SECTION 1: The fiscal year for the Council shall begin on March first and end on the last day of February.

SECTION 2: When procedures are not covered by Broward County Ordinance or these By-Laws, the latest version of the Council's Policies and Procedures shall prevail. The Chair of the Council and committees shall follow Robert's Rules of Order.

- SECTION 3:** Unless otherwise provided for in the Ryan White Act or other law or regulation, the relationship between the Council and the Recipient is described in the Ryan White Part A Manual and the Ryan White Part A Planning Council Primer. Relations between providers and clients are the responsibility of the Recipient.
- SECTION 4:** Member Reimbursement. Funds from the Planning Council Support (PCS) budget shall be available to enable unaffiliated: Council members, alternates, and Committee members with HIV, to be reimbursed for their reasonable expenses for attending Council or Committee meetings which shall include, but not be limited to, the following: transportation, parking, mileage, childcare wise being regularly provided to the child, and appropriate refreshments. The Council member or alternate shall execute an affidavit attesting to the validity of the reimbursement request.
- SECTION 5:** Review of By-Laws: The Executive Committee shall ensure that the By-Laws are reviewed every two years or as needed based on new County ordinance or legislation.
- SECTION 6:** Virtual meetings: The Council shall conduct virtual meetings based on County Ordinance or Executive Order.