

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, August 17, 2023 - 11:30 AM Meeting location: Broward Regional Health Planning Council

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.
- 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 August 17, 2023
- 5. **ACTION:** Approval of Minutes from July 20, 2023 (Handout A)
- 6. Standard Committee Items
 - a. Review and Approve August 24, 2023, HIVPC Agenda, Meeting Materials and Motions (Handout B)
 - b. Review September 2023 HIVPC Calendar (Handout C)
- 7. Unfinished Business
 - a. None.

- 8. New Business
 - a. Action Item: FY2023 HIVPC & Committee Work Plan Progress Update (Handout D)
 - b. Vote on the HIVPC Mission and Vision Statements (Handout E)
- 9. Public Comment
- 10. Agenda Items for Next Meeting
 - a. Next Meeting Date: September 21, 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:

<u>HIV Planning Council Website</u>

Please complete your <u>meeting evaluation</u>.

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

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Executive Committee

Thursday, July 20, 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), B. Fortune-Evans (QMC Chair), A. Ruffner (SOC Chair)

Members Excused: None.

Members Absent: B. Barnes (PSRA & Ad-Hoc Chair), T. Moragne (MCDC Vice-Chair)

Ryan White Part A Recipient Staff Present: B. Miller, G. James

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

Guests Present: D. Shamer

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

The Executive Committee Chair called the meeting to order at 11:34 A.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.

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.

Meeting Approvals

The approval of the July 20, 2023, Executive Committee agenda with amendments to include committee updates was proposed by V. Biggs, seconded by A. Ruffner, and passed unanimously. The approval for the minutes of the May 18, 2023, meeting was proposed by S. Tinsley-Jackson, seconded by V. Biggs, and approved with no further corrections.

Motion #1: V. Biggs, on behalf of the Executive Committee, made a motion to approve the July 20, 2023, Executive Committee agenda. The motion was seconded by A. Ruffner and adopted unanimously.

Motion #2: S. Tinsley-Jackson, on behalf of the Executive Committee, made a motion to approve the May 18, 2023, Executive Committee meeting minutes as presented. The motion was seconded by V. Biggs and adopted unanimously.

Standard Committee Items

Motion #3: A. Ruffner, on behalf of the Executive Committee, made a motion to approve the agenda and meeting materials for the July 27, 2023, HIVPC meeting. The motion was seconded by B. Fortune-Evans and adopted unanimously.

Motion #4: V. Biggs, on behalf of the Executive Committee, motioned an amendment to discuss Food Service Categories during July's HIVPC Meeting. The motion was seconded by A. Ruffner and adopted unanimously.

Unfinished Business

None.

New Business

<u>Discuss and Review the Planning Council Budget and Planning Council Support Scope</u> of Work for FY 2023-2024

Committee members reviewed the Planning Council Budget and Planning Council Support guided by G. Martinez. The idea of a monthly/quarterly report on the budget was briefly discussed.

<u>Discussion on the status of developing Term Limits policies and procedures: Ad Hoc</u> Committee Chair

PCS Staff provided committee members with a brief update on the development of Term Limits Policies and Procedures. The Term Limits draft has been reviewed and edited by R. Honick and will need to be revisited by Ad-Hoc Committee.

Review and discuss the HIVPC Mission and Vision Statements

Executive members discussed the HIVPC Mission and Vision Statements and agreed to leave the statements as is. Members will vote on the HIVPC Mission and Vision Statement during the next Executive Meeting.

<u>Discussion on appointing the Ad-Hoc Nomination Committee for elections for the FY2024-2026 Term</u>

Committee members agreed to open an item discussion for the July HIVPC Meeting, appointing five council members for the Ad-Hoc Nomination Committee.

Recipient's Report

There was no Recipient's report for this meeting.

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.

Agenda Items for Next Meeting

• The next Executive Committee meeting will be held on August 17, 2023, at 11:30am. LOCATION: BRHPC and via WebEx Videoconference.

Announcements

- L. Robertson: announced that the Ujima Men's Collective Noir Diamond Awards nominations are opened and are seeking for nominations for their Living in the Light Conference on October 13-15, 2023.
- V. Biggs: announced and informed that July 21, 2023 is the Zero HIV Stigma Day.
- V. Biggs: announced the Holy Cross will be providing vaccinations at the Eagle Wilton Manors on July 27, 2023.

There being no further business, the meeting was adjourned at 12:35 pm.

Executive Committee For CY 2023

Consumer	PLWHA	Absences	Count		Meeting Month								Aug	Sep	Oct	Nov	Dec	Attendance Letters
				ŀ	Meeting Date	19	16	16	20	18	15	20						
1	1	C			Jackson, S	Χ	Х	X	Х	Х	С	Χ						
0	1	C) ;	2	Biggs, V., V. Chair	X	X	X	X	X	С	X						
0	0	0) ;	3	Fortune-Evans, B.	X	Х	X	Е	Х	С	Х						
0	0	1	4	4	Foster, V.	Х	Α	X	X	Х	С	Х						
0	0	3		5	Moragne, T.	Α	Х	Α	Х	Х	С	Α						
0	1	0) (6	Robertson, L., Chair	Х	Х	Χ	X	X	С	X						
0	0	2	2	7	Ruffner, A.	Χ	Α	X	X	Α	O	X						
0	1	1		В	Barnes, B.	Χ	X	X	Ε	X	O	Α						
		0) (9	Castillo, J	Χ	Х	X	Χ	Х	С	Χ						·
					Quorum = 5	8	7	8	7	8		7						

Legend	d:
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 – July 21, 2023

Minutes prepared by PCS Staff



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Broward County HIV Health Services Planning Council Meeting

Thursday, August 24, 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 August 24, 2023
- V. ACTION: Approval of Minutes from July 27, 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. Reallocations/Sweeps from Core & Support Services
 - 1. Motion to reallocate \$ from Outpatient Ambulatory Health Services for FY2023-2024.

Justification: Provider Voluntary Return and/or Underutilization Proposed by: Priority Setting & Resource Allocation Committee

2. Motion to reallocate \$ from Oral Health Care for FY 2023-2024. Justification: Provider Voluntary Return and/or Underutilization

Proposed by: Priority Setting & Resource Allocation Committee

- 3. Motion to reallocate \$ from Disease Case Management for FY2023-2024.

 Justification: Provider Voluntary Return and/or Underutilization

 Proposed by: Priority Setting & Resource Allocation Committee
- 4. Motion to reallocate \$ from Mental Health for FY2023-2024.

 Justification: Provider Voluntary Return and/or Underutilization
 Proposed by: Priority Setting & Resource Allocation Committee
- 5. Motion to reallocate \$ from Substance Abuse for FY2023-2024.

 Justification: Provider Voluntary Return and/or Underutilization
 Proposed by: Priority Setting & Resource Allocation Committee
- 6. Motion to reallocate \$ from Centralized Intake and Eligibility Determination for FY2023-2024.

Justification: Provider Voluntary Return and/or Underutilization Proposed by: Priority Setting & Resource Allocation Committee

Total Reallocation/Sweeps from Core & Support Services =

Reallocation/Sweeps to Core & Support Services

- 7. Motion to reallocate \$ to Outpatient Ambulatory Health Services for FY2023-2024.
 - Justification: Underfunding among providers in this Category Proposed by: Priority Setting & Resource Allocation Committee
- 8. Motion to reallocate \$ to AIDS Pharmaceutical Assistance for FY2023-2024.

 Justification: Underfunding among providers in this Category

 Proposed by: Priority Setting & Resource Allocation Committee
- Motion to reallocate \$ to Oral Health Care for FY2023-2024.
 Justification: Underfunding among providers in this Category Proposed by: Priority Setting & Resource Allocation Committee
- 10. Motion to reallocate \$ to Medical Case Management for FY2023-2024.

 Justification: Underfunding among providers in this Category

 Proposed by: Priority Setting & Resource Allocation Committee
- 11. Motion to reallocate \$ to Disease Case Management for FY2023-2024.

 Justification: Underfunding among providers in this Category

 Proposed by: Priority Setting & Resource Allocation Committee
- 12. Motion to reallocate \$ to Mental Health for FY2023-2024.

 Justification: Underfunding among providers in this Category Proposed by: Priority Setting & Resource Allocation Committee
- 13. Motion to reallocate \$ to Food Bank Services for FY2023-2024.

 Justification: Underfunding among providers in this Category
 Proposed by: Priority Setting & Resource Allocation Committee
- 14. Motion to reallocate \$ to Food Voucher for FY2023-2024.

 Justification: Underfunding among providers in this Category Proposed by: Priority Setting & Resource Allocation Committee

 Total Reallocation/Sweeps to Core & Support Services = \$

Reallocation/Sweeps <u>from</u> Minority AIDS Initiative (MAI) Core & Support Services

15. Motion to reallocate \$ from MAI-Mental Health for FY2023-2024.

Justification: Provider Voluntary Return and/or Underutilization

Proposed by: Priority Setting & Resource Allocation Committee

Total Reallocation/Sweeps <u>from</u> MAI Core & Support Services = Reallocation/Sweeps <u>to</u> Minority AIDS Initiative (MAI)* Core & Support Services

- 16. Motion to reallocate \$ to MAI Medical Case Management for FY2023-2024.

 Justification: Underfunding among providers in this Category

 Proposed by: Priority Setting & Resource Allocation Committee
- 17. Motion to reallocate \$ to MAI Substance Abuse-Outpatient FY2023-2024.

 Justification: Underfunding among providers in this Category

 Proposed by: Priority Setting & Resource Allocation Committee
- 18. Motion to reallocate \$ to MAI Centralized Intake and Eligibility Determination FY2023-2024.

Justification: Underfunding among providers in this Category Proposed by: Priority Setting & Resource Allocation Committee

Total Reallocation/Sweeps <u>to</u> MAI Core & Support Services = \$

- X. OLD BUSINESS
- XI. NEW BUSINESS
- XII. COMMITTEE REPORTS
 - a. Community Empowerment Committee (CEC)
 Chair: Shawn Jackson Vice Chair: Irvin Wilson

August 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 August 3, 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 August 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:** 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

August 21, 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 11, 2023, at 12:30 PM at BRHPC and via WebEx Videoconference
- e. Executive Committee

Chair: Lorenzo Robertson • Vice Chair: Von Biggs

August 17, 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:** September 21, 2023, at 11:30 AM at BRHPC and via WebEx Videoconference
- f. Priority Setting & Resource Allocation Committee (PSRA)

Chair: Brad Barnes • Vice Chair: Vacant

August 17, 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 19, 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: September 28, 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 <u>meeting evaluation</u>.

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• 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.

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Broward County Website







September 2023

HANDOUT C





Broward HIV Health Services Planning Council Calendar

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				lates and times are subject to change		
	Please contact	support staff at hivpc@brhpc.o	rg or (954) 561-9681 ext. 1244/	1343. Visit http://www.brhpc.org	or updates.	
					1 South Florida AIDS Network Meeting (SFAN) 9:30AM	2
3	Labor Day	5 Support Services Network Meeting 9:00AM – 10:15 AM Community Empowerment Committee Meeting (CEC) 3:00PM–5:00PM Location: BRHPC/WebEx	6	System of Care Committee Workgroup 9:30 - 11:30 AM Location: Web-Ex	8	9
10	11	12	13	14	15	16
17	Quality Management Committee Meeting 12:30PM-2:30PM Location: BRHPC/WebEx	19	Quality Network Meeting 9:00 AM – 10:15 AM	Executive Committee Meeting 11:30AM – 1:30PM Location: BRHPC/WebEx	22	23
24	25	26	27	HIV Planning Council (HIVPC) Meeting 9:30 AM – 11:30 AM Location: BRHPC/WebEx	29	GET CARE BROWARD TREAT HIV BEAT HIV RYAN WHITE IPART A







September 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 https://www.brhpc.org or (954) 561-9681 ext. 1292 or 1343. Visit https://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:	Unless otherwise noted on the calendar, all meetings are held at:	Sòf si yo ta ekri yon lòt bagay nan almanak-la, tout rankont-yo ap fét:
Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020	Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020	Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020
discapacitados en visión o audición, por favor llame con 48 horas de	To confirm HIV Planning Council meeting information, or reserve	Pou konfime enfòmasyon ou resevwa sou rankont Konsèy Planifikasyon HIV-a, oswa pou rezève sèvis pou bezwen Espesyal tankou: Tradiksyon angle an panyòl oswa kreyol; 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 ser- vices 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.

Priority Setting/Resource Allocations Committee Work Plan FY2023-2024

The work plan is intended to help guide the work of the committee and to assist the Priority Setting/Resource Allocations Committee in achieving its objectives in the coming year. For each activity, the time period of activity is highlighted in blue and the completion date is noted with an "X".

GOAL: Develop integrated PSRA process using data with input from stakeholders and consumer forums.

Objective 1: Plan, prioritize, allocate and monitor available resources and expenditures.															
Activities	Responsible Party	Outcomes	Action Steps	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb
1.1 Review data relevant to the PSRA process (including recommendations from QMC, SOC, and CEC) on an ongoing basis.	Staff/ PSRA	Data driven PSRA process	a. PSRA Service Category Scorecards (utilization, expenditures, etc.) b. Community input (through focus groups, CEC rankings and community forums, Integrated Committee forums, etc.) c. Epidemiology (including incidence, prevalence, co-morbidities, etc.) d. Unmet Need e. EIIHA f. Implementation Plan g. Cost data (other funders) h. QM Care Continuum measures i. NHAS j. Anticipated changes due to the ACA			x	x								
1.2 Review How Best to Meet the Need language recommendations from SOC committee annually.	PSRA/ SOC	Data driven PSRA process	Review and update How Best to Meet the Need language recommendations from the SOC committee.				х								
1.3 Priority rank Part A and MAI service categories annually.	PSRA/ CEC	· ·	Use data elements to inform priority ranking process.				X								
1.4 Allocate Part A and MAI funds by service category annually.	PSRA		Allocate Part A and MAI funds based on priority ranking process.				x								
1.5 Monitor expenditures and allocations bi-annually.	PSRA/ Recipient	Appropriate funding	Recommend reallocations ("Sweeps") to ensure sufficient core funding and the distribution of additional funds.												
1.6 Review and approve PSRA Work Plan annually.	PSRA	Process Planning	Create a schedule of PSRA activities												
Objective 2: Assess the Administrative Mechanism.															
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
2.1 Assessment of the Administrative Mechanism survey results annual presentation.	Staff/ PSRA		Receive a presentation on the results of surveys, with the required components and purpose of the assessment.												
2.2 Assessment of the Administrative Mechanism recommendations annually.	PSRA	compliance	If required, make recommendations to include questions for the assessment of the Administrative Mechanism.												

			Community Empowerment Committee (CEC) Work Plan FY2023-2024												
		• •	tee in achieving its objectives in the coming year. For each activity, the time period of activity is highlighted in blue	and th	ie comp	oletion d			th an "X 1	<u>".</u> Q	2	Q:	3	Q	4
			e & information sharing by participating in at least 4 community events.		j	4 Ev	ents		3						
Objective 1: Increase CEC member knowledge of the Com Activities	Responsible Party	VPC and amplify Consumer vo	Action Steps	Mar	April	May	June	luly	Aug	Sont	Oct	Nov	Dec	lan	Fob
1.1 Engage consumers in townhalls/listening sessions at minimum, biannually.	CEC/Staff/Facilitator	Consumer Involvement	Host events to receive feedback from audiences made up of interested parties (general public, consumers, service providers, etc.) regarding HIV-related topics. Utilize that information to inform CEC's priority rankings and the HIVPC as a whole.	Х	Х	IVIAY	X	July	Aug	Зері	OCI	NOV	Dec	Jan	reb
1.2 Priority rank Part A and MAI Service Categories and send recommendations to PSRA annually.	CEC/Staff	Data driven PSRA process	Receive presentation on Part A utilization and historical trends. Data: Part A Scorecards; Historical epi data.			х									
1.3 Educate CEC members on HIVPC & Ryan White Part A.	Recipient/Staff	Increased knowledge of HIVPC & Ryan White Program among CEC members	Provide presentations or links to HRSA Ryan White Part A Webinars regarding topics of interest about the HIV Planning Council, Community Outreach, and Involvement.		x										
1.4 Host focus groups to receive feedback from populations of focus and/or selected audiences at minimum, biannually.	Staff/Facilitator	Utilize feedback in PSRA process and future CEC and MCDC event planning efforts	Determine populations to include in focus group and what kind of information would be of use. Populations are not limited to consumers; they may include other community members as applicapble. Provide any relevant recommendations to PSRA that may inform the PSRA process. Provide any relevant recommendations to MCDC that may inform recruitment and retention strategies. Utilize any relevant recommendations that may inform the work of CEC.	x	x		x								
Objective 2: Promote education and awareness to affirm s	support for PWHA														
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
2.1 Recommend creation or revision of promotional literature to MCDC as needed.	CEC	Collaboration with MCDC to inform the community about HIVPC	Determine information useful to the community in understanding the role of the HIVPC and revise language and visuals of marketing materials surrounding stigma. Provide this information to MCDC to update or create promotional literature.												
2.2 Distribute promotional literature - physically and electronically - to the community on an ongoing basis.	CEC/Staff	Increased consumer awareness of HIVPC	CEC will distribute promotional literature at community events, talkback sessions and listening sessions. PCS Staff Team will distribute HIVPC and HIV-related information to its community listserv.	х	х	x	х								
2.3 Analyze survey results for each community event, including outreach, trainings and community forums on an ongoing basis.	Staff/CEC	Measure event outcomes	Determine successes and failures of each event. Provide any relevant recommendations to PSRA that may inform the PSRA process. Data: survey results based on demographics, client self identified needs, and learning objectives.		x	x									
2.4 Partner with HIV stakeholders to engage in community events on an ongoing basis.	CEC	Develop consistent presence at community events	Coordinate with HIV stakeholders (those living with or otherwise affected by HIV) to hold Community Forums during significant HIV awareness days (e.g. National HIV Testing Day, Latino HIV Awareness Day, National Black HIV/AIDS Awareness Day) (Examples of Stakeholder Organizations: BCHPPC, Latinos En Accion, SFAN).	х	х		х								
Objective 3: Support communities in efforts to address m	isconceptions and re	duce HIV-related stigma and o	ther stigmas that negatively affect HIV outcomes.Strategy 3.1.4 (2022-2026 Integrated Plan)											,	
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
3.1 Develop and implement education and awareness strategies that incorporate results from feedback mechanisms to increase HIV literacy	CEC	Increased awareness and utilization of services for PHW and Reduce HIV-related health disparities and health inequities	Partner with community organizations to institute a countywide summit for stakeholder collaborations to address various HIV-related issues including misconceptions and HIV-related Stigma.		х	x									
Objective 4: Create and promote public leadership opport	unities for PWH. Strat	egy 3.3.1 (Integrated Plan 2022	2-2026)												
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
4.1 Build the capacity of PWH to be meaningfully involved in the planning, delivering, and improvement of RWHAP services.	CEC	Increased PWH on advisory boards, consumer boards, and employed as Peers	Incorporate programs from the organization, Meaningful Involvement of People with HIV/AIDS (MIPA) in Broward; Partner with the National Minority AIDS Council's (NMAC) ELEVATE or ESCALATE Programs, or other community partners to address HIV stigma reduction, workforce recruitment, development, and advancement needs for PWH in populations 50+, Young Black Men, T/GNC, and Latinx.	x		x									

		Memb	ership/Council Development Committee Work Plan FY2023-2024												
The work plan is intended to help guide the work of the committee and to assist	the Membership/Counc		objectives in the coming year. For each activity, the time period of activity is highlighted in blue and the con	npletion	date is no	ted with an	"X".								
GOAL: Ensure HIVPC membership reflects the HIV demographics of the B	roward EMA including	33% representation of unaffiliated PLW	HA. Passionately engage 100 Community Members and recruit 7 members to the HIVPC.		Baseline	Target	(21	Q	2	Q	3	O	14	
Objective 1: Ensure HIVPC is representative and reflective.															
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
1.1 Review Council demographics to ensure it reflects the Broward epidemic, including at least 33% of members are unaffiliated PLWHA quarterly.	Staff/MCDC	Ensure HIVPC reflects epidemic	Review council demographics at each MCDC meeting. Review changes to council demographics according to each applicant, prior to committee approval for HIVPC membership. Prioritize unaffiliated consumer demographics in order to maintain minimum of 33% PLWHA representation.		х			х							I
1.2 Review seat status and ensure mandated seats are filled quarterly.	Staff/MCDC	Ensure compliance	Monitor current member affiliations; ask members to update their contact information annually. Actively recruit members for vacant federally mandated seats.		х			х							
1.3 Announce vacant positions at each Executive/HIVPC meeting as necessary.	MCDC Chair	Public awareness	Announce vacant positions and mandated seats during committee reports at each Executive and HIVPC meeting.		х			х							
1.4 Share information regarding vacant positions with Case Managers, gatekeepers, and other HIV stakeholders as necessary.	Staff/MCDC	Increased community awareness	Provide information on vacant positions and mandated seats to Case Managers, gatekeepers, and other HIV stakeholders via correspondence and distribution of marketing materials.	х	х									1	ı
Objective 2: Member selection process and application procedure develop	ment.				•		•	-	•		•				
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
2.1 Review and update Recruitment & Retention Plan annually.	MCDC/Staff	Recruitment & Retention of new HIVPC and Committee members	Review previous year's Recruitment & Retention Plan and revise based on outcomes and new intitiatives/strategies.												
2.2 Complete tasks outlined in Recruitment & Retention Plan on an ongoing basis.	MCDC	Recruitment & Retention of new HIVPC and Committee members	Complete tasks outlined in Recruitment & Retention Plan.												
2.3 Develop recruitment and website materials as needed.	Staff	Strategic recruitment of new members	Develop marketing materials as needed.					х							
2.4 Revise /Review HIVPC and Committee applications as needed.	MCDC/Staff	Ensure up-to-date language and current information is provided to Interested Parties	Review HIVPC and Committee applications to ensure the most current information is available, that language is inclusive, and that HIVPC receives necessary information for its review of applications.					Х							
Objective 3: Recruitment & Engagement Efforts.															
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
3.1 Hold Membership Drive annually.	MCDC/Staff	Increased community awareness	Conduct outreach at multiple provider agencies or other HIV stakeholders via tabling, games, and other engagement activities.												
3.2 Collaborate with HIV stakeholders to create engagement opportunities on an ongoing basis.	MCDC/HIVPC	Increased community awareness	Provide brief overviews of the HIVPC at HIV stakeholder events.		Х										I
3.3 Develop engagement opportunities for the HIVPC in the community on an ongoing basis.	MCDC	Increased community awareness	Create opportunities for HIVPC to engage and recruit community members.												
3.4 Host ongoing Orientations for prospective members on the scope of committees and expectations of new members as needed.	MCDC	Strategic recruitment of new members	Train prospective members on topics relevant to HIVPC membership. Topics include education about the 3 guiding principles, the Ryan White Program, and the functions of the HIVPC Standing Committees.												
Objective 4: Planning Council Development and Committee Collaboration.							-	-							
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
4.1 Collaborate with other Committees of the HIVPC to participate in activities on an ongoing basis.	MCDC	Cross-Committee Collaboration	Discuss upcoming HIVPC events with host committees and determine opportunities for collaboration.		Х										
4.2 Recognize Member of the Year annually.	MCDC/HIVPC	Acknowledgement of Member Achievement	Develop a system by which to recognize a member for his/her/their contributions to the work of the HIVPC.												L
4.3 Conduct ongoing member training quarterly or as needed.	MCDC/Executive Committee/Staff	Capacity building	Conduct member trainings based on MCDC Training Plan to further educate HIVPC members.												I
4.4 Conduct post-appointment training to educate newly appointed members on the HIVPC member roles and responsibilities as needed.	MCDC & HIVPC Chair/Vice Chair	Educated HIVPC	Train new members on topics including attendance policies, sunshine laws, grievance policies, service descriptions, mentor program, reimbursement policies, etc.		х										
4.5 Offer mentorship program as necessary on an ongoing basis.	MCDC	Capacity building	Develop a mentorship program to assist new members in the onboarding process of joining HIVPC and/or Committees. This program should be in accordance with Sunshine Law.												
4.6 Utilize feedback from CEC, collaborative events, and engagement events to update recruitment and engagement strategies on an ongoing basis.	MCDC/Staff	Cross-Committee Collaboration/ Recruitment & Retention of new HIVPC and Committee members	Revise recruitment and engagement strategies to ensure MCDC uses its most effective strategies and activities.												

System of Care Committee Work Plan FY2023-2024

The work plan is intended to help quide the work of the committee and to assist the System of Care Committee in achieving its objectives in the coming year. For each activity, the time period of activity is highlighted in blue and the completion date

is noted with an "X". GOAL: By February 2024, Identify the inventory of resources available for service delivery for PWHA in Broward County to increase retention in care for Part A Q1 Q2 Q3 Q4 Baseline Target eliaible clients. Objective 1: Determine if Part A services are delivered as designed by identifying client needs, service gaps, barriers, and outcomes of populations. Responsible May July Aua Sept Oct Nov Feb **Activities** Outcomes **Action Steps** Mar April June Dec Jan Party Increase understanding Develop Committee knowledge of Needs Assessment purpose and **PCS Team** Χ 1.1 Receive Needs Assessment training. of needs assesment process. process Conduct utilization focused evaluation of the HIV Care Continuum to 1.2 Analyze utilization trends for the HIV Increase knowledge of PCS/CQM identify and address the drop-offs along the stages specific to service population in the Ryan White Part A system of Broward County's Ryan Χ Геат provider, geographic location and individual characteristics care on an ongoing basis. White system of care (Integrated Plan 2017-2021 Strategy 2.2.a). 1.3 Develop How Best to Meet the Need Develop strategies specific to the needs, attitudes and behaviors of Data driven PSRA SOC (HBTMTN) language based on findings the identified priority/MAI populations (Integrated Plan 2017-2021 Χ process annually. Strategy 3.1.a). Objective 2: Ensure that retention in care issues pertaining to specific populations are addressed and make recommendations to appropriate HIVPC standing committees. Responsible Feb May Oct Nov **Activities** Outcomes **Action Steps** Mar April June July | Aug Sept Dec Jan Partv 2.1 Develop targeted strategies and Identify ways to engage/ reengage PWH who are not in care or are Increase access to care interventions for vulnerable populations who SOC. QMC. not virally suppressed and provided recommendations to the QMC Χ and improve health may not seek care or who may have fallen out PCS Team and the Ryan White Part A Office. (Integrated Plan 2022-2026, outcomes of care as needed/recommended. Strategy 2.1.3) 2.2 Identify barriers and faciliators to retention Increase knowledge of SOC/PCS in care for HIV-related services on an ongoing Broward County's Ryan Utilize data to identify areas of need relative to retention in care. Х Геат White system of care basis Determine information useful to the community in decreasing the 2.3 Collaborate with community partners to Collaboration with CEC SOC/PCS identified disparity. Information will be disseminated during events address issues with retention in care on an and/or HIV-facing Х and/or via other mediums. Ensure the receipt and integration of Team organizations ongoing basis. information from community partners. 2.4 Receive presentations on Quality Increase knowledge of Ryan White Part A's Improvement Projects (QIPs) taking place SOC/QMC Receive presentations regarding current QIPs. among service providers as needed. system of care Collaboration with QMC 2.5 Recommend areas of inequities to the Recommend identified areas of inequities for QMC to conduct Quality Management Committee (QMC) for SOC to lessen disparities in systemwide quality improvement activities and strategies to improve Χ Χ Χ further review as needed. retention in care retention in care. 2.6 Conduct annual review and present Utilize findings to Review service delivery models and provide recommendations for SOC findings to QMC for potential updates to improve RWPA retention updates to QMC as needed. service delivery models (SDM) as needed. lin care 2.7 Present findings & HBTMTN language to Data driven PSRA Present HBTMTN recommendations to the PSRA Committee during the Priority Setting & Resource Allocation SOC Χ the Priority Setting & Resource Allocation Process. process (PSRA) Committee annually.

Executive Committee Work Plan FY2023-2024

The work plan is intended to help guide the work of the committee and to assist the Executive Committee in achieving its objectives in the coming year. For each activity, the time period of activity is highlighted in blue and the completion date is noted with an "x"

GOAL: Increase community engagemen	it and participation	n by adding 10 new Co	ommittee and HIVPC members by the end of FY2023.			Baseline	Target		Q1	Q	2		Q3	Q	4
Objective 1: Oversee Planning Council (Operations.														
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
1.1 Conduct annual evaluation of HIVPC Self-Assessment Survey annually.	Executive	Improved Process	Review Committee activities, challenges, and completion of work plan achievements.												
1.2 Review the need for reinstating the ad- Hoc By-Laws Committee annually.	Executive/By- Laws	Improved By-Laws	Reinstate the ad-Hoc By-Laws Committee based on pending parking lot items. Identify and appoint ad-Hoc By-Laws Chair.			х		х							
1.3 Review and approve work plans for upcoming FY annually.	Executive	Identify goals and objectives for upcoming year	Review Committee activities, challenges, and achievement of goals to plan and prepare for upcoming work plan activities for FY starting March 1.												
Monitor committee activities to ensure goals and objectives of work plans are met quarterly.	Executive	HIVPC and Committee goals are met	Conduct quarterly review of Committee work plan status to be presented by committee chair. Determine Committee progress and make recommendations to Chairs to address unmet goals.						x						
1.5 Monitor HIVPC membership and discuss strategies to improve reflectiveness quarterly.	MCDC Chair/Vice Chair	HIVPC and Committee goals are met	Conduct quarterly review of HIVPC and Committee reflectiveness. Determine any needed interventions to address Council and Committee membership needs.												
1.6 Develop a recruitment tool annually.	Executive	HIVPC and Committee goals are met	At each meeting, Executive members will discuss potential new strategies for the HIVPC and develop a recruitment tool to be utilized by the Fort Lauderdale jurisdiction.												
Objective 2: Establish and oversee plan	ning activities and	d committee work pla	ns to address integrated planning goals and objective	s.											
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
2.1 Maintain collaborative relationships with community partners through the Integrated Workgroup to monitor the 2022-2026 Prevention and Care Integrated Plan quarterly.	Executive/Integra	t EMA Goals are addressed	Receive updates from the IW membership regarding the progress of implementing the Integrated Plan. Hold meetings with the Executive Committee of the SFAN and BCHPPC as needed.		х			х							
2.2 Monitor Ending the HIV Epidemic Plan progress quarterly.	Part A Recipient/Part B Representative	EMA Goals are addressed	Receive updates from the responsible parties regarding the progress of implementing the Ending the HIV Epidemic Plan.												
Objective 3: Implement capacity/leaders		for Planning Council	members and applicants.							1					
Activities	Responsible Party	Outcomes	Action Steps	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
3.1 Plan annual Planning Council Retreat or Development training annually.	Executive	HIVPC training/leadership	Schedule a retreat for all HIVPC members. Educate members on new/emerging Planning Council/RW Part A issues, HIVPC policies and procedures, leadership development, Integrated Comprehensive Plan.												
3.2 Leadership Training per Training Plan. Executive HIVPC Leadership Conduct training for HIVPC Committee Chairs with topics addressing leadership, teambuilding, etc.															

Browai	rd EMA	CQM Ar	nual W	ork Pla	n FY 20	23-2024								
Goals and Objectives	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Responsible Party	Comment
Goal 1: Use client-level demographic, clinical, and utilization data to assess quality of	of care, id	entify he	alth disp	arities, g	aps in ca	re, and ir	ntegratio	n of serv	ices.				I	
Analyze and report on performance measures including client demographic and utilization data, HHS/HAB measures, and locally adopted outcomes and indicators.	х			х			х			x		х	CQM Staff, QMC, Quality Network	
Review and analyze findings from the annual needs assessment including focus groups, client and provider surveys, and network member evaluations and recommendations.				x			х			х			CQM Staff, QMC, Quality Network	
Identify and analyze health disparities and gaps among stages of the HIV Care Continuum and make recommendations to HIVPC Committees and Networks to address findings.	х			x			х			х		x	CQM Staff, QMC, Networks	
Goal 2: Implement quality improvement activities that enhance systemwide service of	lelivery a	nd impro	ve client	treatmer	nt, care, I	nealth ou	tcomes,	and satis	faction.					
Review Service Delivery Models as part of the system-wide Quality Improvement Project (QIP) and ensure standards of care are consistent with current HIV clinical practice standards and PHS guidelines.												x	CQM Staff, QMC, Networks	
2. Determine annual CQM Program goals and identify and leverage strategies to achieve goals.										х	x		CQM Staff, QMC	
Identify and conduct systemwide quality improvement activities and operationalize strategies to evaluate outcomes.	x			х			х			x		х	CQM Staff, QMC	
Ensure the development, implementation, and evaluation of at least one QIP per agency during the fiscal year.		х	х	х				х	х		х	х	CQM Staff, Quality Network	
5. Organize and conduct evidence-based trainings for providers, staff, the QMC, and the SOC to enhance knowledge on health disparities, HIV treatment and care, personcentered care, client access to eligible services, and quality improvement strategies.			x			х		х			x		CQM Staff	
Provide technical assistance to providers as needed.	х	Х	Х	Х	Х	х	х	Х	х	Х	Х	Х	CQM Staff	
Goal 3: Communicate CQM Program updates, data, and activities to the QMC, Netwo	rks, and	communi	ity stakel	nolders.									ı	
Distribute the annual CQM Program Report.		X											CQM Staff	
Disseminate Ryan White Part A Program data and activities to the HIVPC and Committees, providers, and community stakeholders.	х				х			х			x		CQM Staff	
3. Provide Network updates to the QMC and gather feedback/suggestions for the Quality Network.	x			x			х			х			CQM Staff	
Provide routine CQM Program updates to the HIVPC.	х			х			х			х			CQM Staff	
Plan and implement an annual Network Member Education and Appreciation Week focused on virtual learning and celebration of agency accomplishments.											х		CQM Staff	
Goal 4: Routinely evaluate the CQM Program and identify areas for improvement.														
Review progress made on completing the CQM Annual Work Plan and achieving annual CQM Program goals.	х			X			х			X		х	CQM Staff, QMC	
Review CQM Program performance measures for efficacy and relevance and make changes as needed.				х			x			x		x	CQM Staff, QMC, Networks	
Conduct surveys of all meetings and make suggested improvements.				х			х			х		х	CQM Staff	
Collaborate with the Recipient following their review of the agency-specific quality management plans for compliance with HRSA COM Program guidelines and provide TA when indicated to agencies that require assistance in developing a compliant quality management plan.	x			x									CQM Staff	
5. Survey efficacy of CQM Program communication methods.						х						x	CQM Staff	
Goal 5: Examine current patient satisfaction strategies and initiate a new evaluation	system t	nat will a	llow for c	onsister	nt review	of the pa	tient exp	erience i	n receivii	ng Ryan I	White Pa	rt A servi	ices.	
Review consumer feedback data from 2019-present looking for strengths and weaknesses of current evaluation system.	х			х			х			X		х	CQM Staff, Recipient Staff	
Incorporate client satisfaction survey feedback data into CQM activities to better practices in the Broward Ryan White EMA.	x											x	CQM Staff, Recipient Staff	
Goal 6: Develop a CQM Quality Improvement Project 1. Identify and conduct an annual CQM QIP to address systemwide HIV Care Continuum issues and develop strategies to evaluate outcomes.	X			X			Х			Х		X	CQM Staff	
Review progress made and report findings on the CQM QIP to Recipient staff to review agency retention rates.		х		х		х		х		x		х	CQM Staff, Recipient Staff	
Conduct process and impact evaluation to determine the efficacy of the CQM QIP				X			х			Х		Х	CQM Staff	
4. Analyze FY 21-22 data from CQM QIP and report findings to Recipient staff and QMC				X			х			Х		x	CQM Staff, Recipient Staff, QMC	
X = goal for objective completion = in progress														
= completed														
= planned														



BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL

BY-LAWS

Last amended: February 23, 2023

Table of Contents

ARTICLE I	
NAME AND AREA OF SERVICE	
ARTICLE II	
PURPOSE, MISSION, VISION, AND DUTIES	
ARTICLE III	
DEFINITIONS	
ARTICLE IV	
MEMBERSHIP	
ARTICLE V	
OFFICERS	
ARTICLE VI	
MEETINGS	
ARTICLE VII	14
CONFLICT OF INTEREST	
ARTICLE VIII	15
COMMITTEES	
ARTICLE IX	
ADOPTION AND AMENDMENTS OF BY-LAWS	
ARTICLE X	
GENERAL PROVISIONS	

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

- 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.
- 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.
- 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.

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

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

entities to receive such amounts for such purposes.

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-ofinterest 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-ofinterest 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-

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.
- Committee membership should all be based on the demographics of the epidemic and consideration shall be given to race, ethnicity, selfacknowledged 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.

- 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.
 - 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.

- 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.
 - 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,

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

B. Purpose.

- 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.
- 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.

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 1); 2/23/2023 (Article II, Sections 2 and 3); Article IV Section 5B, Section 10A, Section 11; Article X Sections 2,3,5, and 6.

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.

- 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

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 2); Article VI Section 2(c), Article VI Section 1; Article VIII Section 3B, Section 4 A&B, Section 5B, Section 10A, Section 11; Article X Sections 2,3,5, and 6.

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.

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 1); 2/23/2023 (Article II, Sections 2 and 3); Article IV Section 5B, Section 10A, Section 11; Article X Sections 2,3,5, and 6.

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.

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.

CONSEJO DE PLANEACIÓN 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 SÈVESANTE 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-adwe rete sou keksyon oswa pwopozisyon k'ap fèt-la. Moun k'ap pale-adwe 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 respektè menm règleman kondwit avèk manm Konsèy-yo. Lè sa nesesè 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

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.

CBO: Community-Based Organization

CDC: Centers for Disease Control and Prevention

CDTC: Children's Diagnostic and Treatment Center

CEC: Community Empowerment Committee

CIED: Client Intake and Eligibility Determination

CLD: Client Level Data

CM: Case Management

CQI: Continuous Quality Improvement

CQM: Clinical Quality Management

CTS: Counseling and Testing Site

DCM: Disease Case Management

DOH-Broward: Florida Department of Health in Broward County

eHARS: Electronic HIV/AIDS Reporting System

EIIHA: Early Intervention of Individuals Living with HIV/AIDS

EFA: Emergency Financial Assistance

EMA: Eligible Metropolitan Area

FDOH: Florida Department of Health

FPL: Federal Poverty Level

FQHC: Federally Qualified Health Center

HAB: HIV/AIDS Bureau

HHS: U.S. Department of Health and Human Services

HICP: Health Insurance Continuation Program

HIV: Human Immunodeficiency Virus

HIVPC: Broward County HIV Planning Council

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

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

MOU: Memorandum of Understanding

MSM: Men Who Have Sex with Men

NBHD: North Broward Hospital District (Broward Health)

NGA: Notice of Grant Award

NHAS: National HIV/AIDS Strategy

NOFO: Notice of Funding Opportunity

nPEP: Non-Occupational Post Exposure Prophylaxis

NSU: Nova Southeastern University

OAHS: Outpatient Ambulatory Health Services

OHC: Oral Health Care PE: Provide Enterprise

PLWH: People Living with HIV

PLWHA: People Living with HIV/AIDS

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

QI: Quality Improvement

QIP: Quality Improvement Project

QM: Quality Management

QMC: Quality Management Committee

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

SDM: Service Delivery Model

SOC: System of Care

SPNS: Special Projects of National Significance

STD/STI: Sexually Transmitted Diseases or Infection

TA: Technical Assistance

TB: Tuberculosis

TGA: Transitional Grant Area

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 the implementation of activities designed to improve patient 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.

