



BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL
MEETING AGENDA

Thursday, July 24, 2014, 9:30 a.m.
Governmental Center, Room 430

Chair: Brad Gammell **Vice Chair:** Samantha Kuryla

Reminder: Meeting Attendance Confirmation Required at least 48 Hours Prior to Meeting Date

1. CALL TO ORDER

2. WELCOME AND PUBLIC RECORD REQUIREMENTS

- a. Review Meeting Ground Rules, Public Comment and Public Record Requirements
- b. Council Member and Guest Introductions
- c. Moment of Silence
- d. Excused Absences and Appointment of Alternates
- e. Approval of 7/24/14 Meeting Agenda
- f. Approval of 6/26/14 Meeting Minutes

3. FEDERAL LEGISLATIVE REPORT (Kareem Murphy) (Handout A)

4. PUBLIC COMMENT (Up to 10 minutes)

5. CONSENT ITEMS (Handouts B, C, & D)

Consent Item #1:	To approve the Executive Committee Policies & Procedures (Handout B).
Justification:	The Policies & Procedures were updated to reflect recent By-Laws changes.
Proposed By:	Executive Committee

Consent Item #2:	To approve the meeting ground rules (Handout C).
Justification:	The meeting ground rules were updated to reflect recent By-Laws changes.
Proposed By:	Executive Committee

Consent Item #3:	To approve Joanne King for Client/Community Relations Committee membership.
Justification:	Joanne King will make a great contribution to the Committee with extensive community involvement.
Proposed By:	Client/Community Relations Committee

Consent Item #4:	To approve the Membership/Council Development Committee Mentoring Program (Handout D).
Justification:	To increase new members' knowledge of the HIV Planning Council and retain membership participation in Council meetings.
Proposed by:	Membership/Council Development Committee

6. DISCUSSION ITEMS (Handouts E1, E2, & E3)

Discussion Item #1:	To approve the HIVPC By-Laws Changes
Justification:	Changes to the By-Laws were made to better meet the HIVPC's mission.
Proposed By:	ad-Hoc By-Laws Committee

7. NEW BUSINESS

8. JULY COMMITTEE REPORTS

A. CLIENT/COMMUNITY RELATIONS COMMITTEE (CCRC)

July 1, 2014

Chair: Y. Reed, Vice Chair: A. Lint

A. Work Plan Item Update / Status Summary:

Work Plan Item 1.1 – Members of the committee decided to table this item until further information can be gathered from the Committee Social Media Handbook and the County social media policy.

Work Plan Item 4.1 – HIVPC Staff provided a list of potential names from other EMAs and member submissions. Members of the Committee discussed and voted to change the committee name to “Community Empowerment Committee (CEC)” and to approve the Policies and Procedures which were updated to reflect recent By-Laws changes.

Work Plan Item 1.2 –Members of the committee discussed possible Hot Topic items for upcoming meetings. The Committee discussed the need for clarification of multiple Medicaid issues and determined they would like to receive a presentation regarding Managed Care and the enrollment process for Clear Health Alliance.

Work Plan Item 1.3 – The Committee Chair requested this item be tabled for the next meeting.

Work Plan Item 2.1 – The Committee agreed to hold their next community event at SunServe in September 2014. They planned to have a presentation, “HIV/Transgender 101,” with information provided by the transgender community from SunServe, Fusion, and Latinos Salud. This event will be open to the public in hopes of providing awareness on the emerging transgender population, the CEC, and the services and opportunities of HIVPC membership.

New Members –Joanne King was appointed to CCRC to be approved at the upcoming HIVPC meeting.

B. Rationale for Recommendations:

Joanne King will make a great contribution to the committee with extensive community involvement.

C. Data Reports / Data Review Updates:

None.

D. Data Requests:

- Social Media Handbook
- County Social Media Policies and Procedures

E. Other Business Items:

Agenda Items for Next Meeting: Hot Topic Presentation, Social Media Strategies review, review and begin development of CEC 18 month Work Plan *Next Meeting Date:* August 5, 2014. *Location:* TBD

B. MEMBERSHIP/COUNCIL DEVELOPMENT COMMITTEE (MCDC)

July 10, 2014

Chair: H.B. Katz, Vice Chair: T. Wilson

A. Work Plan Item Update / Status Summary:

Work Plan Item 1.1 – The committee reviewed standard committee items, including demographics, vacant seats, and attendance. The Council currently consists of 36% consumers, which is higher than the mandated 33%. The committee members reviewed vacant seats and current applicants; none of the applicants have fulfilled all of the requirements needed to be an HIVPC member. Attendance was also reviewed; warning letters have been sent to all parties that have attendance warnings.

HIVPC Resignations & Removals – The Committee reviewed a handout with resignations and removals from the HIVPC over the past two years. Most removals were due to moving, work commitments, or attendance. Most members were on the HIVPC for several years before resigning.

WP Item 2.1 – The Committee reviewed recommendations from the Recruitment & Retention Subcommittee for the Mentoring Plan. The subcommittee felt it would be best to create two separate mentoring efforts: one for HIVPC members and one for parties who are interested in becoming a committee or HIVPC member. MCDC approved changes to the Mentoring Plan and requested a document with guidance for committee Chairs on how to mentor interested parties.

WP Item 2.2 – A committee member noted that the FLDOH has a community calendar on its website that

lists events in Broward County. Staff will bring the list to the next meeting, and will also check that HIVPC events and meetings are on the community calendar.

WP Item 4.3 – Staff provided an orientation to two HIVPC applicants. Both applicants have a few requirements to fulfill before they can be considered for HIVPC membership.

B. Rationale for Recommendations:

None.

C. Data Reports / Data Review Updates:

The Committee reviewed the demographics of the Council as it reflects the epidemic of Broward County.

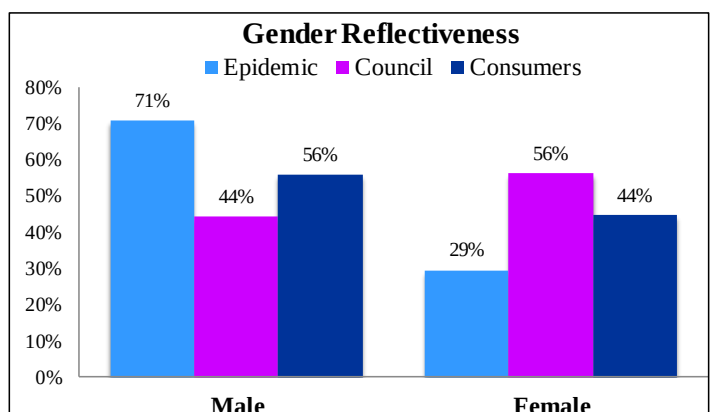
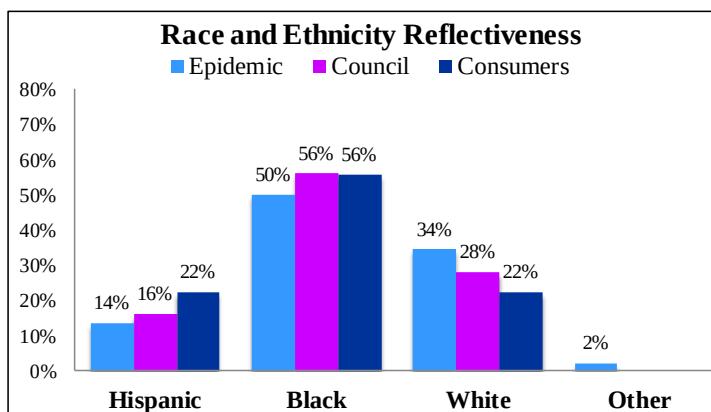
D. Data Requests:

MCDC requested a document with guidance for committee Chairs about mentoring interested parties, a list of community events, and a list of potential agencies to recruit from for vacant mandated seats.

E. Other Business Items:

Agenda Items for Next Meeting: Review & Update Recruitment/Website materials; Review Applicant & Mentoring Letters; Review & Update Policies & Procedures; Review Mentoring Guidance for Chairs
Next Meeting Date: September 4, 2014- 9:30 a.m. - Room A-335 at the Governmental Center.

HIV Planning Council Membership Report 7/24/2014



Gender	Epidemic		Council		Consumers		% Difference
Male	11,836	71%	11	44%	5	56%	-27%
Female	4,944	29%	14	56%	4	44%	27%
Transgender	-	-	0	0%	0	0%	-
Race	Epidemic		Council		Consumers		% Difference
Hispanic	2,290	14%	4	16%	2	22%	2%
Black	8,361	50%	14	56%	5	56%	6%
White	5,772	34%	7	28%	2	22%	-6%
Other	357	2%	0	0%	0	0%	-2%
Total	16,780		25		9		

Current Members	25
Minimum Required Per County Ordinance	20
Maximum Allowed Per County Ordinance	35
% of Members That Are Unaffiliated Consumers	36%

Vacant Seats
1. Grantees of Other Fed HIV Programs - Prevention
2. Hospital/Health Care Planning Agencies
3. Local Public Health Agencies
4. Rep for Former Fed/State/Local Prisoners
5. Social Services Provider

Council cannot be comprised of more than 40% of Ryan White Part A Providers

No more than 3 members employed by one governmental agency or provider shall serve on the Planning Council at one time

F. PLANNING COMMITTEE

No July Meeting

Chair: K. Tomlinson, Vice Chair: W. Spencer

G. QUALITY MANAGEMENT COMMITTEE (QMC)

July 21, 2014

Chair: C. Grant

A. Work Plan Item Update / Status Summary:

Review and update Service Delivery Models – This item was tabled until the next meeting.

Presentation of MSM Study Recommendations – The Committee was presented the findings from the MSM Study, Voices: HIV Health and Wellness Assessment Project and Exploratory Study, created by the HIVPC consultant Emily Gantz McKay. This report included topics on the emerging gay community in Broward County, the impact of HIV/AIDS on general and sexual health well-being, and its relation to mental health, substance abuse, and homeless throughout this subpopulation. The committee thoroughly discussed the recommendations provided in the study and provided feedback on how the recommendations can be implemented in the HIVPC committees and Quality Improvement (QI) Networks.

How Best to Meet the Need – CQM Staff provided an overview on the language on How Best to Meet the Need; a recommendation from the Priority Setting Resource Allocation Committee, approved by the Planning Council. The committee was provided with a list of the new language for each service category. This language helps the QM Committee to ensure the Service Delivery Models are based on the National HIV/AIDS Strategy (NHAS) and that they address access, health outcomes, and meets the treatment and linguistic needs of clients.

Follow up on Data Request – Members reviewed a Viral Load data report containing information on subpopulations with high or unsuppressed viral loads. The report included highlighted subpopulations due to noticeably high percentages. These populations included Black Non-Hispanic/Latino males and females; all females regardless of race or ethnicity; Transgender (male to female); and individuals who are 18-28 years of age. The Committee discussed the importance of further researching the services utilized amongst these groups and possibly implementing the recommendations provided by the MSM Study to the respective populations.

B. Rationale for Recommendations:

None.

C. Data Reports / Data Review Updates:

None.

D. Data Requests:

The committee requested additional data on the service utilization of the subgroups and special populations with unsuppressed viral loads.

E. Other Business Items:

None.

F. Agenda Items for Next Meeting:

Standing Agenda Items, Review of SDMs, Review of new 18 month Work Plan, Viral Load data report, Quarterly Network Update; *Next Meeting Date:* September 22, 2014 from 12:30pm-2:30pm.

H. EXECUTIVE COMMITTEE

July 17, 2014

Chair: B. Gammell, Vice Chair: S. Kuryla

A. Work Plan Item Update / Status Summary:

Committee Chair Reports CEC – The CEC Chair informed the committee of the discussion items covered during their July meeting. This includes the recommendation to By-Laws to approve the new name of the committee: Community Empowerment Committee; the request for a presentation on the transition to managed care in August; and the plan to host a “Transgender 101” community event in September at Fusion. The committee decided to table the discussion on Social Media until an upcoming meeting. Joanne King was appointed to the CEC.

Committee Chair Reports MCDC– The MCDC Vice Chair informed the committee that the meeting summary is as written.

Committee Chair Reports Planning–There was no July meeting.

Committee Chair Reports QM- The Quality Management Committee meeting is scheduled for July 21, 2014.

Committee Chair Reports SOC- The System of Care Committee meeting is scheduled for July 23, 2014.

Review August 2014 HIVPC Calendar- The Committee reviewed the upcoming August 2014 calendar. The HIVPC Chair advised committee Chairs of cancellations of meetings in preparation for the FY15-16 Grant writing process. The committee approved the cancellation of all Committee meetings with the exception of the CEC Committee (August 5, 2014) and a Part A Executive meeting (August 7, 2014-for the creation of 18 month work plans).

Work Plan Item 2.2- The HIVPC Manager gave an overview of HIVPC training topics. The list included previous and future trainings including the Comprehensive Plan, the PSRA Process, HIV Prevention Planning Council, NBTMTN Language, SOC Committee Training, NQC Consumer Training, Oral Health Implication on Retention and Care, the ACA, the 2016 Comprehensive Plan, and Self-Assessment Findings. The Grantee suggested to also include a training topic on Scientific Updates on Biomedical Intervention (December 2014). Other recommended training topics included education on PrEP and PEP and a handout regarding Ryan White Providers.

Work Plan Item 5.3- The Committee Chairs and Vice Chairs reviewed a handout regarding Committee Chair responsibilities. The HIVPC Chair informed the Chair that the overall process for the leadership role of the Vice Chair was left to the discretion of the Committee Chairs. The HIVPC Chair gave a further overview of the handout, informing members of the responsibilities for the Chair and Vice Chairs as it pertains to the recent By-Laws requirements. The HIVPC Manager also reviewed a handout regarding self-assessments/evaluations of Chairs and Vice Chairs (to be completed quarterly by committee members).

Fall Calendar-The Committee reviewed the Fall HIVPC Calendar which reflects committee meeting schedules, holidays, scheduled events and trainings, and the opportunity for planning a joint meeting to allow for the creation of the work plans. The Committee discussed how to modify the meeting schedules around holidays to ensure quorum at Planning Council and other important Committee meetings.

B. Rationale for Recommendations:

The September HIVPC Meeting was moved to September 18th to prevent conflict with Rosh Hashanah. The Part A Executive was moved to September 11th to coincide with the scheduled HIVPC September meeting. Part A Executive and HIVPC meetings will be pushed back a week in lieu of the Thanksgiving and Christmas Holiday meeting day conflicts.

C. Data Reports / Data Review Updates:

None.

D. Data Requests:

None.

E. Other Business Items:

Agenda Items for Next Meeting: Review 18 month Committee Work Plans. Next Meeting Date: August 21, 2014. Location: A337

I. SYSTEM OF CARE COMMITTEE

July Meeting Canceled

Chair: M. Schweizer. Vice Chair: D. Sabtino

J. PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRA)

No July Meeting

Chair: C. Taylor-Bennett, Vice Chair: R. Siclari

9. GRANTEE REPORTS

- a) Part A
- b) Part B
- c) Part C
- d) Part D
- e) Part F
- f) HOPWA
- g) Prevention

10. UNFINISHED BUSINESS

11. ANNOUNCEMENTS

12. PUBLIC COMMENT (Up to 10 minutes)

13. REQUEST FOR DATA

14. AGENDA ITEMS FOR NEXT MEETING: September 18, 2014, 9:30 a.m. **LOCATION:** TBD

<i>Agenda Items / Tasks for next Meeting (Work Plan Item #)</i>	<i>Party to Complete Task</i>	<i>Information requested (i.e. data, research, etc.)action to be taken, presentation, discussion, brainstorm etc.</i>
Reallocations (“Sweeps”)	<i>PSRA, Exec, HIVPC</i>	ACTION ITEM: Review and approve recommended reallocations of funds.

15. ADJOURNMENT

PLEASE COMPLETE YOUR MEETING EVALUATIONS

**THREE GUIDING IDEAS OF THE BROWARD COUNTY HIV HEALTH SERVICES
PLANNING COUNCIL**

- **Linkage to Care**
- **Viral Load Suppression**
- **Retention in Care**



BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL

June 26, 2014 Meeting Minutes

ATTENDANCE				
#	Members	Present	Absent	Guests
1	Gammell, B. <i>Chair</i>	X		Agbodzakey, J.
2	Kuryla, S. <i>Vice-Chair</i>	X		Bates, C.
3	Wilkins, D.	X		Clanu, S.
4	DeSantis, M.	X		King, Jo.
5	Grant, C.	X		King, Ja.
6	Hayes, M.	X		Majcher, B.
7	Bhrangger, R.	X		Maysonet, C.
8	Holness, Comm. D. V.C.	X		Rubertson, P.
9	Katz, H. B.	X		Runkle, D.
10	Marcoviche, W.	X		Lint, A.
11	McBain, M.	X		Rodriguez, J.
12	Moragne, Dr. T.	X		Smith, C.
13	Proulx, D.		A	Schickowski, K.
14	Schweizer, M.	X		
15	Siclari, R.		A	Grantee Staff
16	Spencer, W.		A	Copa, R. (Part A)
17	Taylor-Bennett, C.	X		Green, W.E. (Part A)
18	Tomlinson, K.	X		Jones, L. (Part A)
19	Wilson, T.	X		Vargas, J. (Part A)
20	Parker-Maysonet, P.	X		Degraffenreidt, S. (Part A)
21	Reed, Y.	X		
22	Creary, K.	X		HIVPC Staff
23	Burgess, D.	X		Johnson, B.
24	Mercer, A.	X		Mendez, M.
25	Baner, S.		A	Bente, A.
A1	Coscarelli, M. (Alt)		A	Sandler, C.
	Quorum=13			

1. CALL TO ORDER

The Chair called the meeting to order at 9:34 a.m.

2. WELCOME AND PUBLIC RECORD REQUIREMENTS

The Chair welcomed everyone and self-introductions were made. Attendees were notified of Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. In addition, it was stated that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed. A moment of silence was observed. The Chair reviewed excused absences. The following motions were made:

Motion #1: To approve today's meeting agenda, with one amendment.

Amendment: To remove Consent Item #3.

Proposed by: Reed, Y.

Seconded by: Grant, C.

Action: Passed Unanimously

Motion #2: To approve the 5/22/14 meeting minutes, with one amendment.

Amendment: To excuse Ronald Bhrangger's absence at the 5/22/14 meeting.

Proposed by: Schweizer, M.

Seconded by: Reed, Y.

Action: Passed Unanimously

3. PUBLIC COMMENT (Up to 10 minutes)

There was public comment from a consumer regarding bus passes. The Chair asked the Florida Department of Health (FLDOH) staff to speak with the consumer regarding bus passes. FLDOH has bus passes available to consumers through the Ryan White Part B program.

4. CONSENT ITEMS

All consent items are passed as one motion. The following motion was made:

Motion #3: To accept all the Consent Items.

Proposed by: Moragne, T.

Seconded by: Katz, H.B.

Action: Passed Unanimously

5. DISCUSSION ITEMS (Handouts B & C)

The Planning Committee (PC) Chair discussed new language in the How Best To Meet Need document. The new Health Insurance Continuation Program (HICP) language was discussed. The PC Chair explained that consumers will be able to purchase health insurance marketplace plans that provide comprehensive primary care and pharmacy benefits including a full range of HIV medications. HICP will fill in gaps from the AIDS Drug Assistance Program (ADAP) to ensure that clients are able to move onto health insurance marketplace plans. HICP will also ensure a mechanism for including coverage for medical and pharmaceutical co-payments.

The PC Chair explained that Mental Health Services now included language to address the socio-sexual-cultural needs of Broward County identified special populations. She stated that new language was also added to address dealing with shame and stigma. The PC Chair explained that the Men Who Have Sex With Men (MSM) Study conducted by Dr. Marsha Martin made a recommendation to have more support groups available to clients. A member stated she investigated MSM support groups throughout Broward County and discovered that there are many support groups available. She stated that she has problem with funding support groups, as many already exist. Another member stated that these support groups will not only focus on MSMs but other populations as well. The PC Chair stated that because the need for support groups was identified in the MSM study, support groups should be funded. The System of Care (SOC) Chair stated that the SOC committee is in the process of inventorying all HIV services in the County. A member asked for clarity regarding socio-sexual-cultural needs. The PC Chair explained that these needs are representative of the consumer as a whole.

The PC Chair discussed new Food Service language. A question was asked regarding the inclusion of an application for The Special Supplemental Nutrition Program for Woman, Infants, and Children (WIC) as part of the eligibility for Food Services. The Grantee stated that mechanism for eligibility has already been established and WIC does not need to be included.

The Chair proposed a friendly motion to remove WIC from the language regarding Food Services.

Motion #4: To remove WIC from Food Services language about eligibility.

Proposed by: Hayes, M.

Seconded by: Katz, H.B.

Action: Passed Unanimously

There was committee discussion regarding adding Federal Poverty Level (FPL) eligibility to Non-Medical Case Management. The Grantee recommended that the committee review previous eligibility recommendations made by the Priority Setting and Resource Allocation (PSRA) Committee and if FPL eligibility was not included that it be added to the next PSRA Committee meeting's agenda. A guest asked about Non-Medical Case Management and Project AIDS Care (PAC) waivers. The Chair stated that Non-Medical Case Management definitions have been changed to differentiate between the two types of Case Management. The Chair explained that PAC waivers are not a part of Ryan White (RW) Part A services.

The Chair proposed a motion to strike out FPL on How Best To Meet The Need document.

Motion #5: To strike out FPL on How Best To Meet The Need document.

Proposed by: Hayes, M.
Seconded by: Creary, K.
Action: Passed with one opposition.

A motion was proposed to have Non-Medical Case Management eligibility to be discussed by the SOC Committee.

Motion #6: To have Non-Medical Case Management eligibility reviewed by the System of Care (SOC) Committee.
Proposed by: Taylor-Bennett, C.
Seconded by: Reed, Y.
Action: Passed Unanimously

After discussion about How Best to Meet the Need, the following motion was made:

Motion #7: To approve the FY15/16 language on How Best to Meet the Need.
Proposed by: Tomlinson, K.
Seconded by: Katz, H.B.
Action: Passed with one opposition.

The PSRA Chair explained the priority rankings made for Fiscal Year (FY) 2015-16. The PSRA Chair explained that the committee used the rankings from FY 2014-15, the client surveys, provider surveys, and the Client/Community Relations Committee to set priority rankings. The PSRA Chair made the following motions regarding rankings:

Motion #8: To rank Outpatient Ambulatory Medical Care as #1.
Proposed by: Taylor-Bennett, C.
Seconded by: Kuryla, S.
Action: Passed Unanimously

Motion #9: To rank AIDS Pharmaceutical Assistance (Local) as #2.
Proposed by: Taylor-Bennett, C.
Seconded by: Wilson, T.
Action: Passed Unanimously

Motion #10: To rank Oral Health (Dental) Care as #3.
Proposed by: Taylor-Bennett, C.
Seconded by: Grant, C.
Action: Passed with two abstentions

Motion #11: To rank Health Insurance Premium & Cost Sharing Assistance (HICP) as #4.
Proposed by: Taylor-Bennett, C.
Seconded by: Grant, C.
Action: Passed Unanimously

There was a member question regarding who will abstain from voting as HICP is a new service category. The Grantee stated that a member must abstain only if you are sure your agency will provide HICP.

Motion #12: To rank Medical Case Management as #5.
Proposed by: Taylor-Bennett, C.
Seconded by: Grant, C.
Action: Passed with four abstentions

Motion #13: To rank Early Intervention Services as #6.
Proposed by: Taylor-Bennett, C.
Seconded by: Katz, H.B.
Action: Passed with one opposition

Motion #14: To rank Mental Health Services as #7.

Proposed by: Taylor-Bennett, C.

Seconded by: Grant, C.

Action: Passed with two abstentions

Motion #15: To rank Substance Abuse Services - Outpatient as #8.

Proposed by: Taylor-Bennett, C.

Seconded by: Hayes, M.

Action: Passed Unanimously

Motion #16: To rank Medical Nutrition Therapy as #9.

Proposed by: Taylor-Bennett, C.

Seconded by: Katz, H.B.

Action: Passed Unanimously

Motion #17: To rank Home and Community-Based Health Services as #10.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #18: To rank Hospice Services as #11.

Proposed by: Taylor-Bennett, C.

Seconded by: Tomlinson, K.

Action: Passed Unanimously

Motion #19: To rank Home Health Care as #12.

Proposed by: Taylor-Bennett, C.

Seconded by: Tomlinson, K.

Action: Passed Unanimously

Motion #20: To rank Case Management (Non-Medical) as #1.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #21: To rank Emergency Financial Assistance as #2.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #22: To rank Food Bank/Home Delivered Meals as #3.

Proposed by: Taylor-Bennett, C.

Seconded by: Tomlinson, K.

Action: Passed with one abstention

Motion #23: To rank Housing Services as #4.

Proposed by: Taylor-Bennett, C.

Seconded by: Katz, H.B.

Action: Passed Unanimously

Motion #24: To rank Medical Transportation Services as #5.

Proposed by: Taylor-Bennett, C.

Seconded by: Katz, H.B.

Action: Passed Unanimously

Motion #25: To rank Legal Services as #6.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed with two abstentions

Motion #26: To rank Outreach Services as #7.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #27: To rank Referral for Health Care/Supportive Services as #8.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #28: To rank Substance Abuse Services - Residential as #9.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #29: To rank Psychosocial Support Services as #10.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed with two oppositions

Motion #30: To rank Child Care Services as #11.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #31: To rank Health Education/Risk Reduction as #12.

Proposed by: Taylor-Bennett, C.

Seconded by: Reed, Y.

Action: Passed Unanimously

Motion #32: To rank Treatment Adherence Counseling as #13.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #33: To rank Rehabilitation Services as #14.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #34: To rank Respite Care as #15.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #35: To rank Linguistic Services as #16.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

The PC Chair asked about how service categories are funded. The PSRA Chair stated that recommended allocations were made to the bolded service categories based on utilization and other funding sources, among other data. The PSRA Chair noted that money may be swept to other service categories at a later time.

The PSRA Chair made the following motions regarding service category allocations:

Motion #36: To approve the recommended allocation of \$6,553,678 for Medical services.

Proposed by: Taylor-Bennett, C.

Seconded by: Kuryla, S.

Action: Passed Unanimously

Motion #37: To approve the recommended allocation of \$669,383 for Pharmacy services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #38: To approve the recommended allocation of \$2,608,511 for Oral Health services.

Proposed by: Taylor-Bennett, C.

Seconded by: Kuryla, S.

Action: Passed with two abstentions

Motion #39: To approve the recommended allocation of \$1,800,000 for HICP services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #40: To approve the recommended allocation of \$525,000 for Disease Management services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed with 5 abstentions

Motion #41: To approve the recommended allocation of \$367,492 for Mental Health services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed with 5 abstentions

Motion #42: To approve the recommended allocation of \$265,235 for Substance Abuse services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed with two abstentions

Motion #43: To approve the recommended allocation of \$491,916 for Centralized Intake and Eligibility Determination (CIED) services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #44: To approve the recommended allocation of \$1,156,791 for Case Management services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #45: To approve the recommended allocation of \$1,087,779 for Food Bank services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed with one abstention

Motion #46: To approve the recommended allocation of \$138,283 for Legal services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed with two abstentions

Motion #47: To approve the recommended allocation of \$261,318 for Minority AIDS Initiative (MAI) Medical services.

Proposed by: Taylor-Bennett, C.

Seconded by: Moragne, Dr. T.

Action: Passed Unanimously

Motion #48: To approve the recommended allocation of \$66,651 for MAI Mental Health services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #49: To approve the recommended allocation of \$474,868 for MAI Substance Abuse services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

Motion #50: To approve the recommended allocation of \$305,493 for MAI CIED services.

Proposed by: Taylor-Bennett, C.

Seconded by: Wilson, T.

Action: Passed Unanimously

6. JUNE COMMITTEE REPORTS

A. Membership Committee/Development Committee (MCDC)

June 5, 2014

Chair: H.B. Katz, Vice Chair: T. Wilson

MCDC has planned a welcome brunch for interested parties and potential committee and Planning Council members after the July 10, 2014 meeting. The Chair asked community members to post flyers for the event. The Committee reviewed HIVPC demographics to ensure it reflects the epidemic and at least 33% of members are unaffiliated PLWHA. There are currently 25 Council members, 36% of which are unaffiliated consumers. The Committee also reviewed several new active applicants and a list of HRSA mandated membership category vacancies.

B. Client Community Relations Committee (CCRC)

June 3, 2014

Chair: Y. Reed, Vice Chair: A. Lint

The CCRC Chair stated the July meeting will be held on July 1, 2014 at 1:30 p.m. at Poverello. The Chair also stated the committee is looking for a new name and is currently taking suggestions. The rest of the report stands.

C. Planning Committee

June 9, 2014

Chair: K. Tomlinson, Vice Chair: W. Spencer

The PC Chair noted that the report stands.

D. Ad-Hoc By-Laws Committee

June 9, 2014

Chair: M. Schweizer

The committee added language about the System of Care Committee and the Needs Assessment/Evaluation committee (formerly the Planning Committee). The committee also decided that at least two-thirds of members of MCDC must be Planning Council members. The committee voted to accept the new name of the CCRC and incorporate the name into the By-Laws

when it is chosen. The Chair stated that having finished their work on all the parking lot items, the committee has disbanded.

E. System of Care Committee (SOC)

June 23, 2014

Chair: M. Schweizer, Vice Chair: D. Sabatino

The SOC Chair stated there has only have been one committee meeting, which was an informational session. Eight members have been voted onto the committee, through a consent item earlier in the meeting. The committee work plan has not yet been executed. The Chair asked for a variety of members to join who represent various service categories, as well as other providers outside of the Ryan White (RW) Part A provider network. The Chair stated the main focus of the SOC committee will be to find gaps in the system of care and make suggestions about how to fill those gaps.

F. Executive Committee

June 19, 2014

Chair: B. Gammell, Vice Chair: S. Kuryla

The Chair stated that at the last HIVPC meeting the By-Laws were changed to add Vice Chairs for each committee. Vice Chair appointments were made based through discussions with each committee chair, taking into account leaders in the community who could bring a fresh perspective to each committee.

G. Quality Management Committee (QMC)

June 16, 2014

Chair: C. Grant

The QMC Chair stated that committee has approved the Service Delivery Model (SDM) for CIED and Legal Services. The SDMs will be sent out for HIVPC members to review before they are voted on at the July 2014 HIVPC meeting.

H. PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRA)

June 18, 2014

Chair: C. Taylor-Bennett, Vice Chair: R. Siclari

The PSRA Chair stated that a new ad-Hoc committee regarding Food Services eligibility will be chaired by Mario DeSantis. The new ad-Hoc committee will determine a long term, sustainable solution for eligibility. The committee is in need of members in order to begin working towards a solution.

7. GRANTEE REPORTS

- a. Part A: The Grantee reported that the Fort Lauderdale/Broward Emerging Metropolitan Area (EMA) received a Notice of Grant Award (NGA) for FY2014. The EMA has been awarded \$16.1 million, a \$1.1 million increase over FY2013. This increase allows for greater funding of service categories with high utilization, particularly food services. The Grantee presented the full grant award. The Grantee noted that 85% of the award is for direct services. He stated 10% is for administration services and 5% is for quality management services. The Grantee noted that the Request for Proposal (RFP) for Health Insurance Continuation Program (HICP) and Disease Management was released Monday, June 23, 2014. The Grantee stated that providers will have a minimum of 30 days to respond to the RFP. The Grantee noted that Shaundelyn Degraffenreidt received an award from the National Quality Center. The Grantee stated that the Broward County, Palm Beach County, and Miami-Dade County RW Part A program offices will be sponsoring a training to support community-based organizations (CBOs) and administrative services organizations (ASOs) in connecting to the changing health care landscape. The Grantee stated the National Quality Center training original scheduled for June 23-25, 2014 has been postponed until the fall.
- b. Part B: The Part B Grantee stated the budget has been modified and will be presented at a later meeting. The Grantee stated that utilization for all Part B service categories are in the process of being updated.

- c. Part C: The Part C Grantee reported that the Part C FY has ended. Part C served 303 patients and 1,000 patients under pharmaceutical adherence counseling.
- d. Part D: The Part D Grantee reported that Part C and D programs are in discussions about being merged. The Part D Grantee stated that framework is currently being designed to meet the needs of women and youth under the merger. She stated that to date the Part D program has served 1,226 women, children, and youth. Part D has served 76 pregnant women this year. She stated that four young adults went to leadership camp in Houston, Texas.
- e. Part E: The Part F Grantee announced the Community Based Dental Partnership Program is now underway. He stated the intake and education process will take place at West Park Community Health Center and dental services will be provided at the Nova Southeastern University (NSU) College of Dental Medicine. The Part F Grantee stated that there are no program residency requirements and bus passes are available to clients.
- f. HOPWA: The HOPWA representative stated the HOPWA formulary is currently being amended. The formulary will include HIV cases instead of AIDS cases and fair market rent values. He stated the he cannot divulge any more information regarding the new formulary as he does not have all the facts. The HOPWA representative also explained there will be a HOPWA 101 training on July 14, 2014 at 4:00 p.m. at Fort Lauderdale City Chambers. The HOPWA representative noted that a presentation on the Short-Term Rent, Mortgage, and Utility (STRMU) and Permanent Housing Placement (PHP) frequency and utilization changes will be given at the South Florida AIDS Network (SFAN) meeting on August 1, 2014.
- g. Prevention: The Prevention Grantee stated that the Broward County HIV Prevention Planning Council held a membership meeting on June 17, 2014. The Grantee stated new initiatives and programs were announced including updated guidelines for the use of Pre-Exposure Prophylaxis (PrEP). He also stated that on May 20, 2014 the Prevention program held a meeting with providers regarding implementation of High Impact Prevention. On May 21-22, 2014, the Florida Department of Health in Broward County (FLDOH-BC) hosted the Centers for Disease Control and Prevention (CDC) HIV counseling training pilot program. On June 20, 2014, Sistas Organizing to Survive (SOS) held their 6th anniversary celebration to educate African American females on HIV prevention. He announced that MSM support groups will begin on June 26, 2014 at FUSION. He announced that June 27 is National HIV Testing Day. He explained that anyone can visit www.wemakethechange.com for event information. He stated that Walgreens will be providing free HIV testing, along with other CBOs throughout Broward County. He announced the next Broward County HIV Prevention Planning Council meetings will take place on September 19, 2014 and December 19 2014.

8. UNFINISHED BUSINESS

None.

9. ANNOUNCEMENTS

An announcement was made regarding the National HIV Testing Day – A Call to Action event. The event will take place on June 27, 2014 at 2:00 p.m. at Hagen Park in Wilton Manors with Congresswoman Lois Frankel.

10. PUBLIC COMMENT (Up to 10 minutes)

None.

11. REQUEST FOR DATA

None.

12. AGENDA ITEMS FOR NEXT MEETING: **July 24, 2014 at 9:30 a.m., Gov't Center, Room 430**

<i>Agenda Items / Tasks for next Meeting (Work Plan Item #)</i>	<i>Party to Complete</i>	<i>Information requested (i.e. data, research, etc.)action to be taken, presentation, discussion, brainstorm etc.</i>
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	Task	
Recommended Changes to the By-Laws	<i>By-Laws, Exec, HIVPC</i>	ACTION ITEM: Review and approve the recommended changes to the By-Laws.

13. ADJOURNMENT

The meeting was adjourned at 12: 02 p.m.

CY14 Council Attendance	1/23	2/27	3/27	4/24	5/22	6/26
Baner, S.	<i>Appointed 4.24.14</i>				A	A
Bhrangger, R.	X	X	X	X	E	X
Burgess, D.	<i>Appointed 1.23.14</i>	X	X	E	X	X
Creary, K.	X	X	A*	X	X	X
DeSantis, M.	X	X	A	X	A	X
Gammell, B., <i>Chair</i>	X	X	X	X	X	X
Grant, C.	X	X	X	X	A	X
Hayes, M.	X	X	A	X	A	X
Holness, D.V.C. (<i>Comm.</i>)	X	X	A*	X	X	X
Katz, H.B.	X	X	X	X	X	X
Kuryla, S., <i>Vice Chair</i>	X	X	A*	X	X	X
Marcoviche, W.	X	X	X	X	X	X
McBain, M.	E	X	A	X	A	X
Mercer, A.	<i>Appointed 1.23.14</i>	X	X	X	X	X
Moragne, Dr. T.	A	X	E	X	X	X
Parker-Maysonet, P.	X	E	X	X	X	X
Proulx, D.	X	X	A*	X	X	A
Reed, Y.	A	X	E	X	X	X
Schwiezer, M.	X	A	X	X	X	X
Siclari, R.	X	X	E	X	A	A
Spencer, W.	X	X	X	A	X	A
Taylor-Bennett, C.	X	A	X	A*	X	X
Tomlinson, K.	A	X	X	A	X	X
Wilkins, D.	X	X	A	X	X	X
Wilson, T.	A	X	X	X	X	X
Quorum = 13	Yes	Yes	Yes	Yes	Yes	Yes
Coscarelli, Monica (Alt)	A	E	E	A	A	A
A* = Absence due to attending <75%						

Update for Broward County HIV Health Services Planning Council

From: Kareem Murphy

Date: July 21, 2014

Appropriations Update

The appropriations (funding) process is grinding to a halt. Senate Majority Leader Harry Reid (D-NV) has not scheduled floor time for any appropriations bills for this month and it is unclear whether he will take time out of the September schedule. Reportedly, Senate Democrats do not want to have any votes that their opponents could use against them during the fall campaign. While the Senate Appropriations HHS Subcommittee marked up its FY 2015 appropriations bill, it is not expected to go to the Senate floor until after the election, if at all. In the House, the HHS bill has not been moved out of Committee and onto the floor.

Predictions are that Congress will produce an omnibus spending bill in a post-election, lame duck session or just pass a year-long continuing resolution, depending on the outcome of the elections.

No Progress on Reauthorization

We continue to expect no meaningful work to take place this session of Congress toward the reauthorization of the Ryan White program. A handful of HIV/AIDS advocacy groups have been pushing the Ellmers bill, but the legislation continues to receive no sign of support from House leaders.



EXECUTIVE COMMITTEE Policies and Procedures



Policies

The Committee shall have responsibility for oversight of the planning activities established in the comprehensive plan and development and oversight of committee work plans to address comprehensive planning goals and objectives.

~~Periodic meetings with Consortium Executive Committee~~

~~The Committee shall meet jointly with the Consortium Executive Committee on quarterly basis to discuss mutual planning issues and to plan how the two bodies can work together to meet Approved 8/24/09, 11/18/09 (Article VII, Section 1B), 1/28/10 (Article VII, Section 1D) 12 the needs of the EMA. Any consensus recommendations from this Joint Executive Committee shall be brought to the respective planning bodies by their corresponding Chairs for discussion and/or action.~~

The membership of the Executive Committee shall consist of the Broward County HIV Health Services Planning Council (Council) Chair, the Council Vice-Chair and the Chairs and Vice Chairs of each of the Standing Committees. 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.

The Executive Committee may meet between regular Council meetings as needed, on an emergency basis, to conduct business of the Council (excluding priority-setting and allocation decisions). The Executive Committee shall:

- Set the agenda for Council meetings.
- Address Conflict of Interest issues.
- Oversee the planning activities established in the Comprehensive Plan.
- Develop and oversee committee work plans which address comprehensive planning goals and objectives.
- Review Membership/Council Development Committee Attendance report to identify Council members not in compliance with attendance requirements.
- Review Committee recommendations to determine whether the items should be referred to the appropriate Committee.
- Ratify Membership/Council Development Committee recommendations for removal for cause.

The Committee shall be authorized to formulate Council policy, review all concerns, and make recommendations to the full Council regarding unresolved grievance issues as stated in the Council's Grievance Policy.

Procedures

Conflict of Interest

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

Comprehensive Plan:

The Executive Committee shall be responsible for developing and maintaining a Comprehensive HIV/AIDS Plan.

The Committee shall have responsibility to develop and maintain a comprehensive plan for the organization and delivery of HIV health and support services that:

- Incorporates information from the needs assessment, continuous quality improvement activities, evaluation studies, etc.;

- Includes a strategy to coordinate the provision of services with programs for HIV prevention (including outreach and early intervention) and the prevention and treatment of substance abuse (including programs that provide comprehensive treatment services for substance abuse);
- establishes mechanisms to ensure participation in Statewide Coordinated Statement of Need (SCSN) activities to encourage CARE Act programs to address key HIV/AIDS care issues and enhance coordination;
- coordinates with Federal grantees that provide HIV-related services; and,
- Includes discrete goals and timetables.

The Committee will invite representatives from other planning bodies to participate in the preparation of all planning documents, coordinate and collaborate the funding available for services to HIV infected individuals.

The Committee will encourage a cooperative, non-duplicative relationship amongst all providers of HIV/AIDS services.

~~The Committee shall meet jointly with the Part B Executive Committee on a quarterly basis to discuss mutual planning issues and to plan how the two bodies can work together to meet the needs of the EMA.~~

The Committee will ensure participation in SCSN activities.

The Committee shall develop work plans for HIVPC committees to respond to the goals and objectives of the Comprehensive Plan and oversee/manage accomplishment of work plan activities.

Council Meeting Agenda:

The Committee (or in the absence of Executive Meeting action, the Council's Planner/Coordinator) shall prepare an agenda for full Council meetings.

The meeting agenda for the Council shall be based upon the following:

- Each committee chair, the grantee, and Council support staff will inform the Committee (or Council Planner/Coordinator) of committee recommendations and other actions to be presented for the Council's approval.
- 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. Individual members of the Council may also request that action items be placed upon the agenda by providing them in writing to the Council Planner/Coordinator prior to the Executive Committee meeting.
- Members of the public who wish to bring matters before the Council for consideration must obtain sponsorship of the item by a member of the Council. Requesters of all Council actions will also provide appropriate back-up documentation to explain the action being requested.
- The Executive Committee may refer proposed actions to the appropriate committee to examine and make a recommendation prior to presenting the matter to the Council for action.
- Proposed motions requiring the Council's vote shall be listed on the agenda which is sent out to members prior to the Council meeting.
- At the Executive Committee's discretion, the back-up documentation will be labeled and distributed with the Council's agenda.
- At the discretion of the Council Chair, action items requested at the Council meeting not on the published agenda may be deferred to the old business or new business portion of the agenda, or until the next Council meeting, or may be assigned to an appropriate committee for recommendation.
- The ordinary order of the Council's agenda shall be: 1, welcomes and introductions (including explanation of Government in the Sunshine Requirements for meeting attendees regarding attendees choice to disclose HIV status as disclosure in HIV Planning Council and/or Committee meetings would then become a matter of public record); 2, adoption of agenda; 3, approval of minutes; 4, moment of silence; 5, review meeting ground rules; 6, public comment; 7, action items, consent (no discussion required); 8, action items, regular (discussion required); 9, discussion items; 10, grantee report; 11, program support report; 12, committee reports; 13, legislative update; 14, old business; 15, new business; 16 public input; 17, announcements; 18, next meeting date, adjournment. The Executive Committee may re-order these items for particular meetings if necessary for the efficient

and effective administration of the Council's business.

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

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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.

Deleted: In all Joint Committees, SFAN Members will observe the HIV Health Services Planning Council Ground Rules



MEMBERSHIP/COUNCIL DEVELOPMENT COMMITTEE Mentoring Program

In order to increase new members' knowledge of the HIV Planning Council and retain membership participation in Council meetings, the MCDC Committee will institute mandatory orientation, training and voluntary mentoring programs.

An important segment of this training is the Mentoring Program, which will be offered to all new Council members and alternates. Mentoring helps new members feel welcome, learn individual member perspectives, and become comfortable with planning council processes and interaction. Mentoring also ensures that the new member understands the background and context of discussions and actions, and gets an explanation of the many acronyms used in meetings.

A letter introducing the Mentoring Program will be sent to new ~~Planning C~~council members. Council members who have volunteered their time to be Mentors will be assigned by the Chair of the Membership/Council Development Committee. ~~The Membership Council/Development Committee~~

~~Interested parties who are interested in becoming involved in a particular committee will be assigned a mentor by the Chair of the Committee the party is interested in. Chair will assign Mentors and Mentees according to HIVPC Committee involvement.~~

The new member and alternate should, when possible, sit near his/her Mentor during all meetings. (Non-voting alternates are reminded they may sit near their mentor, but not at the table.) This will allow the Mentor to easily answer any questions the new member might have.

Volunteer Mentors will receive training according to the schedule set forth in the Committee Work Plan. Mentors should strive to educate new members on the following points:

1. Review of Orientation Manual
2. Reminders of Meetings
3. Availability of Transportation
4. Day care reimbursement benefit
5. Reimbursement of lost wages
6. Explanation of complex language
7. Empowerment and respect for individual opinions and ideas.
8. A summary of Robert's Rules of Order

If needed and requested by the new member/alternate, the Mentor may also remind the new member of upcoming meetings which might be of interest to that person.

Note on the Florida Sunshine Law: Members and Mentors should be careful to follow the Sunshine Law, which forbids Members from discussing Council or Committee business outside of official meetings. The County definition is as follows:

"Except at a public meeting, there shall be no communication between any two members of the same collegial body on any matter which they may foreseeably be required to address jointly in an advisory or decision-making capacity."

1. Below are example situations prohibited by law for Members: Discussing Council or Committee business on the phone;
2. Discussing Council or Committee business at a gathering that is not an official meeting;

Approved by HIVPC on 10.24.13

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3. Discussing Council or Committee business indirectly, such as by passing information through an intermediary;
4. Meeting at a restaurant or someone's home to discuss Council or committee business;

Mentoring Components of HIV Planning Council Members:

Provides support of new members (within the guidelines of the Florida Sunshine Law) on the following:

1. Help new members, including PLWHA, feel welcome, learn individual member perspectives, and become comfortable with planning council processes and interaction
2. Provide strong and informed feedback about the effect of Planning Council actions and decisions on Ryan White clients and PLWHAs.
3. Take special responsibility for making sure the new member understands the background and context of discussions and actions.
4. Increase new members' knowledge of the HIV Planning Council and retain attendance and membership participation in Council meetings.
- 4.5. Complete the Mentor/Mentee evaluation at the conclusion of the Mentorship period.

To: Broward County HIV Health Services Planning Council
From: ad-Hoc By-Laws Committee
Date: June 26, 2014
Subject: Proposal for Recommended By-Laws Changes

Summary of Changes

The recommended changes from the committee include:

- Planning Committee name changed to Needs Assessment/Evaluation Committee.
- Client/Community Relations Committee name changed to Community Empowerment Committee.
- Language added about the new System of Care Committee, and language for the Needs Assessment/Evaluation Committee (formerly Planning Committee) updated.
- At least two-thirds of members of the Membership/Council Development Committee must also be HIV Planning Council members.
- Procedure for choosing committee Chairs clarified.
- Language added to distinguish between regular and special elections.
- Planning Council agendas must include certain items, but the order of the items may change to suit the needs of the meeting.
- Alternates must be a member of at least one standing committee.

These changes will be voted on at the next Broward County HIV Health Services Planning Council.

A meeting of the Broward County HIV Health Services Planning Council is scheduled for:

Date: Thursday, July 24, 2014
Time: 9:30 A.M.
Place: Governmental Center, Room 430
115 S. Andrews Ave.
Fort Lauderdale, FL 33301

If you have special needs such as Translation from English to Creole or Spanish, or require other auxiliary aids or services because of a disability, please call at least 48 hours in advance.

To confirm meeting information, reserve special needs services or if you have questions, please call HIVPC Staff at 954-561-9681, Ext. 1295.

Thank you.

2014 BY-LAWS PARKING LOT ITEMS

No.	Proposal	By-Laws Location	Stated Reason	By-Laws Recommendation
1	Redefine or remove the word 'joint'	Throughout By-Laws	Outdated	Remove the word 'joint' and replace 'consortium' with the term 'community stakeholder'. 'Community Stakeholder' is defined as <i>representatives from Ryan White Part B, C, D, or F, Prevention, or representatives of HIV/AIDS care in the community including consumers, providers, and regulators.</i>
2	Remove Co-Chairs process and make new process for Chairs and Vice Chairs	Art VIII, Sec 1B, Sec 1C	Outdated	Co-Chairs removed and replaced with Vice Chairs. This change keeps continuity in leadership positions between the HIVPC and its committees.
3	Develop language about the new System of Care Committee & update Planning	N/A	New Committee-Needs definition	New language added for the System of Care and language for Needs Assessment/Evaluation (renamed from Planning) updated. All language is reflective of committee policies & procedures.
4	Members of MCDC must also be HIVPC members	Art VIII, Sec 8A	Recommendation from HRSA	At least two-thirds of MCDC members must also be HIVPC members.
5	Clarify the procedure for new chairs being chosen by a new HIVPC Chair	Art. VIII, Sec 1B	Clarity	Chairs may remain in their position at the request of a new HIVPC Chair. Chairs and Vice Chairs are appointed or removed at the sole discretion of the HIVPC Chair.
6	Succession process if HIVPC Chair or Vice Chair is removed or resigns	Art V, Sec 6; Art VI, Sec 8	Clarity	Language for regular elections and special elections added.
7	Change the language regarding agenda set up	Art VI, Sec 5B	Outdated	Language for agenda set up now includes all items that must be on the agenda, but does not include a particular order.
8	Change term limits for Chairs	Art V, Sec 2	Outdated	No changes made. Chair term remains two years.
9	To require that alternates shall be a member of at least one standing committee	Art IV, Sec 9	Recommendation from MCDC	Alternates must be members of at least one standing committee.
10	Change Planning Committee name to Needs Assessment Evaluation Committee	Throughout By-Laws	Recommendation from Executive	Name changed to Needs Assessment/Evaluation Committee throughout By-Laws.
11	Change Client/Community Relations Committee name	Throughout By-Laws	Outdated	Name changed to Community Empowerment Committee throughout By-Laws.



HIV PLANNING COUNCIL

BY-LAWS

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

Adopted, January 1992

as 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

ARTICLE I

NAME, 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 resolution of the Board of County Commissioners codified at Part X of Chapter 12 of the Broward County Administrative Code as amended by the Board of County Commissioners.

ARTICLE II

PURPOSE, DUTIES

- SECTION 1:** The purpose of the Council is to provide planning, to promote development of HIV/AIDS health services, personnel, and facilities which meet identified health needs in a cost-effective manner, to reduce inefficiencies, and to develop HIV-related health plans.
- SECTION 2:** The duties of the Council shall be those specified by the Ryan White Act.

ARTICLE III

DEFINITIONS

1. *Ad-Hoc Committee* means a committee established for a limited time or limited and definite purpose.
 2. *Alternate* means a person appointed by the Board that may 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
- 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)

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. *PLWHA* means person living with HIV Disease or AIDS. (Also PWA)
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.

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)

ARTICLE IV

MEMBERSHIP

- SECTION 1:** All Members and Alternates of the Council shall be appointed by the Broward County Board of County Commissioners. The process for forwarding recommendations to the Board is outlined in the Membership/Council Development Committee Section of the Manual.
- SECTION 2:** An individual may serve on the Council only if the individual agrees that if the individual has a financial interest in an entity, if the individual is an employee of a public or private entity, or if the individual is a member of a public or private organization, and such entity or organization is seeking amounts from a grant under the Ryan White Act, the individual will not, with respect to the purpose for which the entity seeks such amounts, participate (directly or in an advisory capacity) in the process of selecting entities to receive such amounts for such purposes.
- SECTION 3:** The membership of the Council shall be as delineated in the Ryan White Act, as amended.
- SECTION 4:** 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:** As part of the Council's efforts to increase the percentage of persons living with HIV on the Council, 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:** The term of office for members and alternates shall be at the pleasure of the Broward County Board of County Commissioners.
- SECTION 7:** Attendance. Attendance of Council meetings shall be in accordance with the Broward County Code of Ordinances section 1-233. The Council may recommend the reappointment of members who were removed pursuant to Broward County Code of Ordinances section 1-233. The committee attendance policy mirrors the Council attendance policy. The Chair of the Council shall, at his or her discretion, determine whether the member's absence meets any of the criteria for an excused absence as set forth in the ordinance. Excused absences for HIVPC-related business mean for business outside the regular time and place of HIVPC business.
- SECTION 8:** 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. An Alternate may only

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)

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/or ethnic background of the individual with HIV that is absent. Thereafter, Alternates, as directed by the Chair, shall alternate their substitution for PLWHA members unable to serve due to HIV. Alternates shall comply with attendance requirements at Council meetings. Alternates may be appointed by the chair as a voting member only after Quorum has been established.

SECTION 9: Council members and Alternates shall be a member of at least one standing Committee. Failure to adhere to attendance requirements shall be grounds for removal from the Council.

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SECTION 10: All persons in attendance of a meeting of the Council and/or Committee shall comply with the meeting ground rules adopted by the Council.

SECTION 11: Removal of Members and Alternates.

- A. Procedure for removal. If a member or alternate fails to comply with Paragraphs B or C, or for reasons documented in Paragraph C, the Council shall recommend to the Broward County Board of County Commissioners the removal of that Member or Alternate, upon vote of a majority 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.
- B. The Council shall recommend that a member be removed from service on the Council for refusing to cooperate in a conflict of interest review, or when it is determined that member knowingly took action(s) intended to influence the conduct of the Council in a manner as defined in **ARTICLE IV, SECTION 2** of these By-laws. The Council shall terminate from service any committee member who is not also a Council member for refusing to cooperate in a conflict of interest review, or when it is determined that member knowingly took action(s) 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 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. A Council Member, Council Chair, or Committee Chair may recommend removal for cause 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.

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)

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: A. Elections. 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 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 meeting of the calendar year later than March 1. All Officers shall serve a two-year term and shall remain in office until a successor 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 the resignation or other reason for vacating the Chair or Vice Chair positions, a special election will be held following the procedures outlined in Section 2A above at the next Council meeting. Until the election is held, the Council will adhere to the line of succession outlined in Article VI, Section 8.

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 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: With the exception of the Executive Committee, the current Council officers may not serve as chair of any Council committee while holding office. 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 are unable to attend a properly scheduled meeting of the committee. In the event the Council Chair or Council Vice Chair are serving as acting committee chairs, they count towards quorum and have a vote.

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)

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ARTICLE VI**MEETINGS**

SECTION 1: The Council shall meet at least 9 times per fiscal year (Mar. 1 – Feb. 28). Special meetings may be called by the Chair or upon petition of one third of the membership of the Council. Written notice shall be given at least one week prior to each meeting. All HIV Planning Council meetings are open to the public. Attendance at mandatory Training Activities is also part of Council attendance requirements.

SECTION 2: Fifty percent (50%) of the members plus one shall constitute a quorum for the HIV Planning Council, and all standing and ad-Hoc Committees, but with no less than 3 members voting. A majority of those Members present and voting at any meeting at which a quorum is present shall be sufficient to take action on behalf of the Council. The number of Members needed to determine quorum shall be the total number of Members of the Council, but not including the Member representing the Broward County Board of County Commissioners.

SECTION 3: 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. Voting privileges are otherwise 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 shall be given in accordance with Florida Statutes and Broward County Ordinances. Meetings shall be open to the public. Records and data shall be made available to the public under the applicable laws. Minutes of each meeting of the Council or Committee shall be kept. 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 at least five (5) working days prior to 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: Each committee chair, the Grantee, and/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. 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. Individual Members of the Council may also request that action items be placed upon the agenda, by providing them in writing to the Council Designated Staff Member prior to the Executive Committee meeting.

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)

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. Requesters of all full Council actions will also provide appropriate back-up documentation to explain the action being requested. The Executive Committee may refer proposed actions to the appropriate committee to examine and make a recommendation prior to presenting the matter to the full Council for action. Proposed motions requiring the full Council's vote shall be listed on the agenda which is sent out to members prior to the full Council meeting. At the Executive Committee's discretion, back-up documentation will be labeled and distributed with the Council's agenda. At the discretion of the Council Chair, action items requested at the Council meeting not on the published agenda may be added to the old/new business portion of the agenda, deferred until the next Council meeting, or referred to the appropriate committee.

- B. The ordinary Council agenda shall include: Call to Order, Welcome and Self-introductions (includes 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, Grantee and Other Reports (including, but not limited to Part A, Part B, Part C, Part D, Part F, HOPWA, Prevention, etc.), 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 Executive Committee action) will determine the order of decision action items.

SECTION 6: All persons in attendance of a meeting of the Council and/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

- A. In the event the Chair and the Vice Chair do not attend the Council Meeting

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)

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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.

- B. 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 Needs Assessment/Evaluation
 4. Chair of Community Empowerment
 5. Chair of Quality Management
 6. Chair of System of Care

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Acting Vice Chair

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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.
- 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 and/or 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

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on the Council and any of its committees for refusing to cooperate in a conflict of interest review, or when it is determined that she/he 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. All Council committees shall be chaired by a Part A member of the Council. 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. 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. Committee Chairs and Vice Chairs may be appointed, removed, or replaced at the sole discretion of the Planning Council Chair,
- C. Appointment of Committee membership. Council Committee Chairs shall appoint, with the approval of the Council, the members of each committee. 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, self-acknowledged HIV-positivity, and gender.
- D. Removal of Committee membership. The removal of Committee members shall be that of Council members as provided for in Article 4, Section 11, 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." The policies and procedures of each committee must be periodically reviewed by that committee and subsequently approved by the Council.

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SECTION 2: 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:

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)

- A. Executive
- B. [Community Empowerment](#)
- C. Membership/Council Development
- D. [Needs Assessment/Evaluation](#)
- E. Priority Setting and Resource Allocation
- ~~F. Quality Management~~
- G. [System of Care](#)

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SECTION 3: An ad-Hoc committee of the Council is a committee that has a purpose which does not require a standing membership and which may meet on a periodic but not regular schedule. The continuing ad-Hoc committees are the ad-Hoc Nominating Committee, the ad-Hoc By-Laws Committee and the ad-Hoc Local Pharmacy Advisory Committee. The Council may establish other ad-Hoc committees as necessary.

A. Ad-Hoc Nominating Committee.

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

B. Ad-Hoc By-Laws Committee.

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

C. Ad-Hoc Local Pharmacy Advisory Committee (LPAC).

1. Membership. The members of the committee shall include but is not limited to members with pharmacological and medical expertise as well as consumer members.
 - a. Purpose. The Broward County HIV Health Services Planning Council's Local Pharmacy Advisory Committee (LPAC) shall be representative of

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all stakeholders in HIV/AIDS care in the community. These stakeholders include consumers, providers, and regulators in the affected community. LPAC shall be dedicated to the ongoing review of the RW Part A Pharmacy Service Category.

b. LPAC's Mission shall be:

1. To make recommendations to the appropriate committees of the HIVPC to improve the quality, cost-effectiveness and allocation of resources to pharmacy services;
2. To develop and implement a standardized mechanism for pharmacy services (i.e., policies and procedures, drug access, formulary changes and cost/impact analysis);
3. To efficiently collect and evaluate current pharmacy data (i.e., utilization, cost, eligibility) for the impact on the Part A system of care;
4. To coordinate pharmacy services in collaboration with other funding streams (i.e., ADAP, Part B, Medicaid, private payers, including private insurance providers); and
5. To review current pharmacologic therapeutic regimes and federal guidelines.

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 and 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.
- B. The Executive Committee meets to conduct business of the Council (excluding priority setting and allocation decisions). The Executive Committee shall:
 1. Set the agenda for Council meetings
 2. Address Conflict of Interest issues
 3. Review Membership/Council Development Committee Attendance report to identify Council members not in compliance with attendance requirements
 4. Oversee the planning activities established in the comprehensive plan
 5. Develop and oversee committee work plans which address comprehensive planning goals and objectives
 6. Ratify recommendations for removal for cause from the Membership/Council Development Committee
- C. The Committee shall have responsibility for oversight of the planning activities established in the comprehensive plan and development and oversight of committee work plans to address comprehensive planning goals and objectives.

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)

SECTION 5: There shall be a Community Empowerment Committee.

- A. Membership. The members of the committee shall include, but is 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 Council Committee 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.

Deleted: Client/Community Relations

SECTION 6: There shall be a Needs Assessment/Evaluation Committee.

- A. Membership. The members of the committee shall include, representatives of Part A, as well as consumers and other community stakeholders.
- B. Purpose. The Committee shall conduct activities to develop and update a Needs Assessment in accordance with the Ryan White HIV/AIDS Extension Act of 2009 and the Health Resources and Services Administration (HRSA) mandates. The Committee shall also be responsible for conducting an annual evaluation and update to the Broward County HIV Health Services Comprehensive Plan to reflect changing directions of the epidemic, as well as the results of the assessment. The Committee is responsible for ensuring the Plan is relevant to the times and the needs of People Living with HIV/AIDS (PLWHA).

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Deleted: <#>Membership. The members of the committee shall include, but is not limited to, representatives of the Council, Consumers, and community stakeholders.¶¶

Deleted: Purpose. The Committee shall have responsibility for developing and updating annual needs assessment and other planning activities to ensure quality core medical services are integrated in the Broward County EMA System of Care. The Committee shall plan and address coordinated care across diverse groups by engaging community resources in order to eliminate disparities in access to services. The Committee shall identify strategies for engaging and retaining individuals in care. The Committee shall discuss and incorporate Clinical Quality Measures in the Planning Process.

SECTION 7: There shall be a Priority Setting and Resource Allocation Committee.

- A. Membership. The Members of the Committee shall include, but is not limited to, representatives of the Council and community stakeholders.
- B. Purpose. The Committee shall recommend to the Council priorities and allocation of Ryan White Part A. 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. The Committee will facilitate the Priority Setting and Resource Allocation Process to include the review of appropriate data (service utilization, epidemiological data). The Committee will develop, review, and monitor eligibility, and service definitions.

SECTION 8: There shall be a Membership/Council Development Committee.

- A. Membership. The Members of the Committee shall include, but is not limited to, representatives of the Council and community stakeholders. At least two-thirds of committee members must be Planning Council members.

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)

- B. Purpose. The Committee shall solicit and screen applications based on objective criteria for appointment to the Council in order 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. 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 9: There shall be a Quality Management Committee.

- A. Membership. The members of the Committee shall include, but is 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 MAI funded services in Broward County.

SECTION 10: 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 health care 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 Planning Council on how these issues may impact the Broward County EMA and may recommend response strategies.

ARTICLE IX

BYLAWS: ADOPTION AND AMENDMENTS

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.

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)

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 law or these By-Laws, the latest edition of "Robert's Rules of Order" shall prevail.
- SECTION 3:** Unless otherwise provided for in the Ryan White Act or other law or regulation, the relationship between the Council and the Grantee is described in the document entitled Guiding Principles. Relations between providers and clients are the responsibility of the Grantee.
- SECTION 4:** The priority setting process and budget allocations shall be available for funds to enable Council members who are individuals with HIV and Alternates 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, child care not otherwise being regularly provided to the child, lost wages not including overtime or fringe benefits and appropriate refreshments. The Council member shall execute an affidavit attesting to the validity of the reimbursement request.

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)

**Ryan White Part B
Expenditure Report
June 2014**

Service Category	Part B 2014-15 Allocated	Part B 2014-15 (June encumbered)	Part B 2014-15 Monthly Average Left	Part B 2014-15 (YTD Spent/ Encumbered)	Part B 2014-15 (% Encumbered)	Part B 2014-15 (% Left)	Part B 2014-15 (Balance)
Home Delivered Meals	\$ 2,479	\$ 1,260.00	\$ 122	\$ 1,260.00	0%	49%	\$ 1,219
Medication Co Pay	\$ 304,000	\$ 39,838.06	\$ 24,557	\$ 58,433	6%	81%	\$ 245,567
Case Management (non-med)	\$ 245,602	\$ 21,534.61	\$ 17,734	\$ 68,265	28%	72%	\$ 177,337
Residential Substance Abuse	\$ 300,000	\$ 3,345.53	\$ 27,939	\$ 20,610	7%	93%	\$ 279,390
Home &Community Based Health	\$ 6,000	\$ -	\$ 600	\$ -			\$ 6,000
Medical Transportation	\$ 133,656	\$ -	\$ 13,366	\$ -	0%	100%	\$ 133,656
Administration	\$ 110,192	\$ 6,708.95	\$ 9,098	\$ 19,215	17%	83%	\$ 90,977
TOTALS	\$ 1,101,929	\$ 72,687.15	\$ 93,415	\$ 167,783	15%	85%	\$ 934,146

Home Delivered Meals served 4 clients

Non-Medical Case Management served 677 clients in June

Medication Co Payment served 144 clients in June

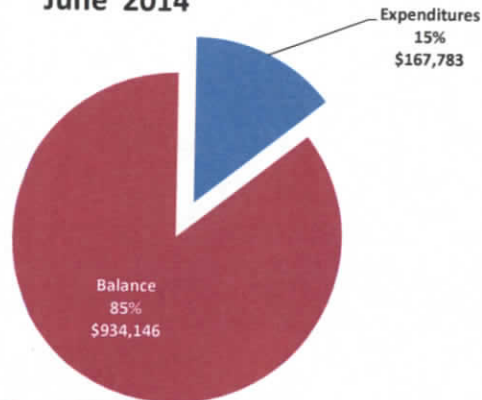
135 Clients served in Medication Co Payment

9 Clients served in Mail Order

Medical Transportation 537 (31) day passes were distributed in June

Residential Substance Abuse served 9 clients in June and a total 20 unduplicated clients to date.

**RW Part B Expenditures
June 2014**



Ann Mercer 954-467-4700 ext 5650

ADAP REPORT BROWARD

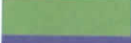
June 1 - 30, 2014

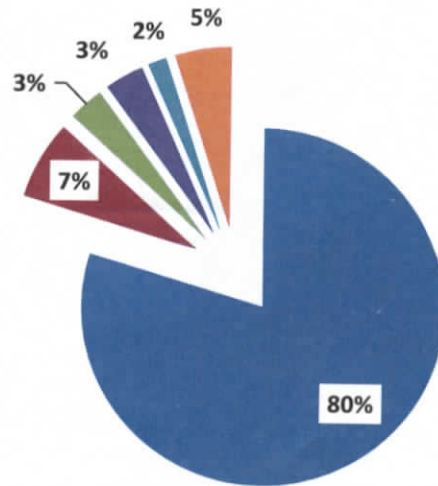
Clients Enrolled	4092
No Show FLHC	26%
No Show Paul Hughes	26%

Clients in ADAP w Ins Waiver

Medicare D	319
AICP Transition	344
No Brand Coverage	9
No Presc. Coverage	10
Prescription cap	6
Discount Plan	3
Unafford Co-Pay/Deductibles	138
Pre Existing Condition	2
Reimbursement Plan	1
Market Place Pilot	5
Open Enrollment	1

% ADAP Clients by Viral Load

	%	Viral Load
	80%	0-75
	7%	76-500
	3%	501-5000
	3%	5001-30000
	2%	30001-55000
	5%	55001



July 24, 2014

Fall 2014 Meeting Notice

Dear Member/Interested Party:

Please note the following meetings have been rescheduled due to Holidays.

HIV Planning Council meetings will occur on:

September 18, 2014

October 23, 2014*

November 20, 2014

December 18, 2014.

Executive Committee meetings will occur on:

September 11, 2014

October 16, 2014*

November 13, 2014

December 11, 2014.

*regularly scheduled meeting

Best Regards,

Adam Bente, MPH
Health Planner

Broward Regional Health Planning Council, Inc.

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Hollywood, FL 33020

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hivpc@brhpc.org

www.brhpc.org

BROWARD EMA RYAN WHITE PART A MEETING CALENDAR

HIVPC COMMITTEES

HIV PLANNING COUNCIL	Fourth Thursday of each month at 9:00 a.m.	SYSTEM OF CARE	Fourth Monday of each month at 9:30 a.m.
EXECUTIVE	Thursday one week prior to the HIVPC at 12:30 p.m.	PLANNING	Second Monday of each month at 1:00 p.m.
PRIORITY SETTING & RESOURCE ALLOCATION	Third Wednesday of each month at 12:30 p.m.	MEMBERSHIP & COUNCIL DEVELOPMENT	First Thursday of every month at 9:30 a.m.
QUALITY MANAGEMENT	Third Monday of each month at 12:30 p.m.	COMMUNITY EMPOWERMENT	First Tuesday of each month at 1:00 p.m.

SEPTEMBER

m	t	w	t	f
1	2	3	4	5
8	9	10	11	12
15	16	17	18	19
22	23	24	25	26
29	30			

OCTOBER

m	t	w	t	f
		1	2	3
6	7	8	9	10
13	14	15	16	17
20	21	22	23	24
27	28	29	30	31

NOVEMBER

m	t	w	t	f
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28

DECEMBER

m	t	w	t	f
1	2	3	4	5
8	9	10	11	12
15	16	17	18	19
22	23	24	25	26
29	30	31	1	

Slashes reflect Holidays

HOLIDAYS

Labor Day: September 1, 2014

Rosh Hashanah: September 25 & 26, 2014

Columbus Day: October 13, 2014

Veteran's Day: November 11, 2014

Thanksgiving Day: November 27, 2014

Christmas Day: December 25, 2014

New Year's Day: January 1, 2015

AUGUST 2014

Broward County HIV Health Services Planning Council Calendar

Dates and times are subject to change. Unless otherwise noted, meetings are held at: Governmental Center Annex, Ryan White Part A Program Office, 115 S. Andrews Ave.; Ft. Lauderdale, 33301. Meeting dates and times are subject to change. Please contact support staff at 954-561-9681 ext. 1250 or visit http://www.brhpc.org/RW_calendar.aspx for updates.

Monday	Tuesday	Wednesday	Thursday	Friday
				SFAN 10:00 a.m. # 1
4	5 Community Empowerment 1:00 p.m. Multi-purpose room*	6 SFAN's Re-entry Committee 2:00 p.m.+	7	8
11	12	13	14	15
18	19	20	21	22
25	26	27	28 Executive 12:30 p.m. A337	29

+Care Resource, 871 W Oakland Park Blvd, Oakland Park, 33311
 #Holy Cross Healthplex, 1000 NE 56th Street, Ft. Lauderdale, 33334
 * CDTC, 1401 S Federal Hwy, Ft. Lauderdale, 33316

Meetings in **Red** are cancelled.
 Meetings in **Blue** are for the HIV Planning Council Committees & QI Networks.
 Meetings in Black are not associated with the HIV Planning Council.

AUGUST 2014

Broward County HIV Health Services Planning Council Calendar

Dates and times are subject to change. Visit <http://www.brhpc.org/HIVPC.html> for updates. For questions about the HIV Planning Council & Committees,

TODOS ESTAN BIENVENIDOS!

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

Governmental Center
115 S. Andrews Ave.
Ft. Lauderdale, FL 33301

(Acceso de Downtown Bus Terminal y Tri-Rail/Broward County Transit)

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

ALL ARE WELCOME!

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

Governmental Center
115 S. Andrews Ave.
Ft. Lauderdale, FL 33301

(Access from Downtown Bus Terminal and Tri-Rail/
Broward County Transit)

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

BON VINI!

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

Governmental Center
115 S. Andrews Ave.
Ft. Lauderdale, FL 33301

(Access from Downtown Bus Terminal and Tri-Rail/
Broward County Transit)

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

HIVPC Committee Descriptions

Client/Community Relations Committee (CCRC) - 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.

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.

Planning Committee - Develops and updates annual needs assessment and other planning activities to ensure quality core medical services are integrated in the Broward County EMA System of Care. Plans and addresses coordinated care across diverse groups by engaging community resources to eliminate disparities in access to services.

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.

Priority Setting Resource Allocation Committee (PSRA) - 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.

Executive Committee - Conducts business of the Council (excluding priority-setting and allocation decisions). Sets agenda for Council meetings. addresses Conflict of Interest issues, reviews attendance reports, oversees the planning activities established in the Comprehensive Plan, develops and oversees committee work plans, reviews committee recommendations to determine whether the items should be referred to the appropriate committee, ratifies recommendations for removal for cause, and addresses CCRC unresolved grievance issues.

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