Broward County HIV Health Services Planning Council

Local Policies & Procedures

Manual

2025

Amended: November 20, 2014; April 15, 2017; March 12, 2018; April 30, 2022; October 23, 2025

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PURPOSE OF THE POLICIES & PROCEDURES MANUAL

The policies and procedures of the Broward County Ryan White Part A HIV Health Services Planning Council are designed to provide a structured framework that directs the Council's operations and supports its effectiveness in fulfilling its mission. These foundational elements serve multiple critical purposes, each contributing to the overall success and integrity of the Council, as outlined in its Bylaws.

Firstly, they offer *clarity and structure,* establishing clear protocols for how the Council conducts its business. This includes everything from meeting procedures to decision-making processes, ensuring that all activities are carried out in an organized and consistent manner. With a well-defined set of rules, the Council can operate smoothly and efficiently, minimizing confusion and maximizing productivity.

Secondly, *the policies and procedures promote compliance and accountability*. They help the Council adhere to relevant laws, regulations, and ethical standards, fostering transparency in its actions. This is essential for maintaining public trust and ensuring that the Council's operations remain above reproach. Members are held responsible for their conduct, and mechanisms are in place to address any violations.

Another key purpose is to *support effective decision-making*. The established processes for setting priorities, allocating resources, and making strategic choices enable the Council to make informed decisions that align with its goals and the needs of the community. By following these procedures, the Council ensures that resources are used efficiently and that its initiatives have the greatest possible impact.

Community engagement is also a central focus. The policies and procedures provide avenues for involving community members and stakeholders in the planning and implementation of services. This ensures that diverse perspectives are considered and that the Council's work remains responsive to the needs of the community. Engaging the public helps build trust and fosters a collaborative environment where everyone feels valued and heard.

Quality and continuous improvement are emphasized throughout. Standards are established for monitoring and evaluating the Council’s activities, ensuring that services are delivered effectively and efficiently. Procedures are in place for identifying areas for enhancement and implementing changes. This commitment to excellence helps the Council maintain high standards and deliver impactful services to the community.

Finally, the policies and procedures include *mechanisms for conflict resolution*. They address potential conflicts of interest and grievances, ensuring that issues are handled fairly and transparently. This helps preserve the integrity of the Council and ensures that all members can perform their duties without undue influence or bias.

In summary, the policies and procedures of the HIVPC are essential for directing its operations, ensuring compliance and accountability, supporting sound decision-making, engaging the community, maintaining quality, and resolving conflicts. They form the foundation upon which the Council builds its efforts to improve HIV health services and outcomes in the community.

PURPOSE, MISSION, VISION, AND DUTIES

Broward County HIV Health Services Planning Council

The ***purpose*** of the Council is to provide planning to promote the development of HIV/AIDS health services, personnel, and facilities that cost-effectively meet identified health needs, reduce inefficiencies, and develop HIV-related health plans.

The Council's ***mission*** is to direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high-quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, the council: (1) fosters the substantive involvement of the HIV-affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) supports local control of planning and service delivery, and builds partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) monitors and reports progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.

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

The ***duties*** of the Council shall be those specified by the Ryan White Act.

Approved August 2025, HIVPC Bylaws

EXECUTIVE COMMITTEE

Revised and Updated: 06/18/2025 by Executive Committee
Approved by HIVPC: June 26, 2025

I. Purpose and Responsibilities

The **Executive Committee** conducts the business of the Council (excluding priority setting and allocation decisions). It serves as the central governing body, overseeing the strategic direction and operational efficiency of the Council. It ensures that all committees align with the overarching goals and policies, facilitating seamless coordination and decision-making. The Executive Committee is composed of:

A. The HIV Health Services Planning Council (HIVPC) Chair
B. The HIVPC Vice-Chair
C. The Chairs and Vice-Chairs of Standing Committees
D. The Immediate Past Council Chair (if currently serving on the Council), serving as an ex-officio member

II. Committee Functions

The Executive Committee may convene between regular Council meetings as needed, including for emergencies, to conduct Council business, excluding priority-setting and allocation decisions.
Key functions include:

A. Setting agendas for Council meetings
B. Addressing conflict of interest matters
C. Developing and monitoring committee work plans
D. Approving the annual council budget
E. Reviewing attendance reports to identify non-compliance with participation requirements
F. Evaluating committee recommendations and referring items as appropriate
G. Ratifying recommendations for member removal for cause
H. Recommending resolutions for unresolved grievances, as outlined in the Grievance Policy
I. Formulating Council policies

III. Conflict of Interest

The Committee oversees conflict of interest concerns and may make policy recommendations to the full Council as needed.

IV. Integrated Planning

The Committee leads the development and maintenance of the Integrated HIV Prevention and Treatment Plan (formerly Comprehensive Planning) for HIV services delivery, ensuring the plan:

A. Incorporates needs assessment data, quality improvement activities, and evaluation results
B. Coordinates with HIV prevention and substance abuse programs
C. Aligns with the Statewide Coordinated Statement of Need (SCSN)
D. Coordinates with other federal HIV service Recipients
E. Includes clear goals and implementation timelines

The Committee engages stakeholders and planning bodies to ensure inclusive and coordinated planning, fosters collaboration among providers, and develops committee work plans to implement the Integrated Plan.

V. Council Meeting Agenda Preparation

In the absence of the Executive Committee, the Planning Council Support (PCS) staff will prepare agendas for full Council meetings.
Agenda development guidelines include:

A. Inclusion of recommendations from committee chairs, the Recipient, and PCS staff
B. Motions passed by committees are sponsored by the committee chair and noted as such
C. Council members may submit action items in writing to PCS staff
D. Public submissions require sponsorship by a Council member and relevant documentation
E. The Committee may refer items to other committees before full Council consideration

F. All voting items must be listed in the pre-distributed agenda
G. Backup documentation is distributed at the Committee's discretion
H. Action items introduced at the Council meeting may be deferred or reassigned at the Chair's discretion

*The standard **Council agenda** includes:*

1. Call to Order
2. Welcome and Introductions
3. Moment of Silence
4. Excused Absences & Alternate Appointments
5. Adoption of Agenda
6. Approval of Minutes
7. Public Comment
8. Consent Items
9. Discussion Items
10. Old Business
11. New Business
12. Committee Reports
13. Recipient and Other Reports (e.g., Part A-D, HOPWA, Prevention)
14. Public Comment
15. Announcements
16. Next Meeting and Agenda Setting
17. Adjournment

The Committee establishes the order and timing of agenda items to ensure efficient meeting facilitation.

VI. Grievance Resolution

The Executive Committee serves as the clearinghouse for grievances, ensuring open, impartial, and inclusive processes. Pre-dispute measures include:

A. Public access to all Council and Committee meetings
B. Community engagement and feedback opportunities
C. Policies for attendance-related reimbursement
D. Dissemination of outreach materials (e.g., grievance flyers)
E. Public education on decision-making processes

Eligible grievance claims must involve deviations from established processes related to:

A. Needs assessment
B. Comprehensive planning
C. Priority setting
D. Clinical outcome and cost-effective decisions
E. Allocation/reallocation of funds

All appeals must be filed within two weeks of the incident. Remedies are prospective only, as the solutions or actions taken are intended to prevent future issues rather than to address or compensate for past problems. Grievances involving provider selection processes will be addressed in accordance with the Broward County Administrative Code to prevent conflicts of interest. For further details, refer to the ***Grievance Policy and Procedures***.

COMMUNITY EMPOWERMENT COMMITTEE (CEC)

Revised and Updated: 08/05/2025 by CEC
Approved by HIVPC: August 28, 2025

I. Purpose

The Community Empowerment Committee (CEC) informs and solicits the participation of individuals living with and affected by HIV in the planning, prioritization, and allocation of resources. This Committee serves as a bridge between the Council and people with HIV in Broward, focusing on engaging and empowering community members. It aims to foster active participation, ensuring that the community's voices are heard and integrated into the Council's initiatives. This Committee works to build strong relationships and promote inclusivity.

II. Policies

A. Community Engagement:
The CEC shall work to inform and empower community members, with a focus on individuals living with HIV, to take part in HIV policy development, planning processes, and oversight activities.

B. Recruitment and Participation:
The Committee shall actively recruit members of the public, especially people with HIV, to participate in the decision-making processes of the Broward County HIV Health Services Planning Council (HIVPC).

C. Dialogue and Understanding:
The CEC shall provide a safe and inclusive forum for community members to discuss HIVPC agenda items and other concerns, fostering better understanding and transparency.

D. Consumer Participation:
The Committee shall develop and recommend policies that promote and sustain consumer participation in all Planning Council activities.

III. Procedures

A. Outreach and Visibility:
The CEC shall use available marketing and communication resources to promote the Council’s events, services, and opportunities for involvement.

B. Community Events:
The Committee will organize and host outreach meetings and events in accordance with the approved annual work plan to enhance public engagement and visibility.

C. Partnerships:
The Committee shall collaborate with community organizations and partners to co-host outreach efforts, strengthen community ties, and extend the Council’s reach.

D. Consumer Review and Feedback:
The CEC shall review Council-related policies, documents, and procedures to provide input from a consumer perspective, ensuring that all materials reflect the community’s voice and experience.

IV. Membership

A. Application Process:
Individuals interested in serving solely as committee members must submit a standing committee application, which requires approval from the CEC Chair and the HIVPC General Body.

B. Representation and Inclusion:
Committee composition should reflect the demographics of Broward County’s HIV epidemic, including considerations of race, ethnicity, gender, and self-identified HIV-positive status.

C. Diverse Participation:
Membership shall include Ryan White consumers, stakeholders, and people living with or affected by HIV. This ensures that diverse voices and lived experiences inform the Council’s work.

PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE

Revised and Updated: 10/16/2025 by PSRA Committee
Approved by HIVPC: October 23, 2025

I. Purpose

The Priority Setting & Resource Allocation (PSRA) Committee prioritizes services and conducts funding allocations. **Priority setting** is the process of deciding which HIV/AIDS services are the most important according to the criteria your EMA/TGA has established. **Resource allocation** is the process of distributing available Ryan White Part A program funds for your EMA/TGA across the prioritized service categories.

II. Committee Responsibilities and Procedures

A. Recommendation of Funding Criteria

The Committee will propose language to the Planning Council outlining key factors the Recipient should consider when distributing grant funds to subrecipients. These factors include, but are not limited to:

1. Documented needs of people with HIV (PWH) in the local area
2. Local service priorities
3. Access to the system of care

B. Monitoring and Review of Expenditure Deviations

The Committee will evaluate any deviations from planned expenditures to determine whether reallocation or reprioritization is necessary.

C. Reallocation of Unexpended Funds:

1. The Committee may reallocate unused funds within any category during two reallocation cycles.
2. A third reallocation cycle, if needed, will be conducted by the Recipient.

D. Approval and Submission Process

1. Priority and allocation recommendations will be submitted to the Planning Council.
2. Upon Planning Council approval, recommendations will be forwarded to the Ryan White Part A Recipient.
3. The Recipient Administrator will then submit the approved recommendations to the Division Director.
4. The Division Director will forward approved recommendations to the Broward County Board of County Commissioners for final approval.

III. Prioritizing Services

The Committee prioritizes the following core and support services of the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), as outlined in *Policy Clarification Notice 16-02*:

Core Services

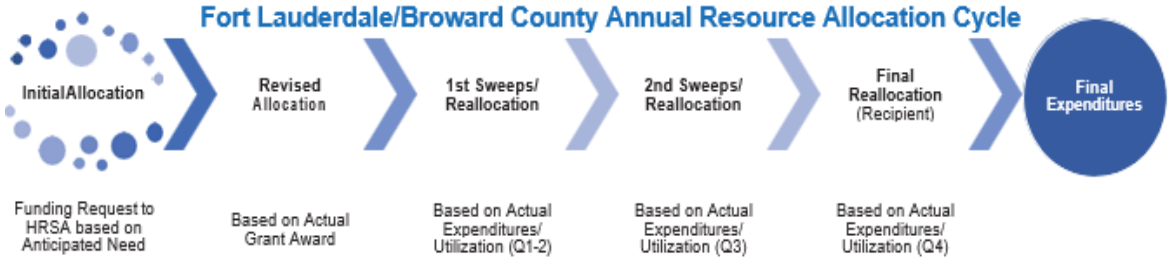
1. Outpatient/Ambulatory Health Services
2. AIDS Pharmaceutical Assistance (Local)
3. Health Insurance Premium & Cost-Sharing Assistance (HICP)
4. Medical Case Management (Disease)
5. Mental Health Services
6. Oral Health Care (Dental)
7. Substance Abuse Services – Outpatient
8. AIDS Drugs Assistance Program Treatments (ADAP)
9. Medical Nutrition Therapy
10. Early Intervention Services
11. Home and Community-Based Health Services
12. Home Health Care
13. Hospice Services

Support Services

1. Food Bank/Home-Delivered Meals
2. Emergency Financial Assistance
3. Legal Services
4. Non-Medical Case Management
5. Housing Services
6. Medical Transportation Services
7. Substance Abuse Services - Residential
8. Psychosocial Support Services
9. Outreach Services
10. Health Education/Risk Reduction
11. Referral for Health Care/Supportive Services
12. Linguistics Services (Integration and Translation)
13. Other Professional Services
14. Child Care Services
15. Rehabilitation Services
16. Permanency Planning
17. Respite Care

IV. Allocation Process

A. **Allocate Funding to Service Categories.** The Committee shall first allocate funding to the core services followed by support services.



B. **Estimate Client Need.** The Committee shall estimate the number of clients needing each service category based on current service utilization, prevention and surveillance data, unmet medical needs (both aware and not in care), and service gap estimates.
   1. This involves determining current Part A service utilization by service category.
   2. Estimating the number of new clients needing services, including
      a. Estimating the number of eligible PWHs needing but not receiving services (service gaps and unmet needs).
      b. Estimating the number of eligible newly diagnosed PWH who will need services.

C. **Assessment of Other Funding Sources.**
The Committee should evaluate the availability of alternative funding and resources for similar services, with the goal of estimating the number of clients those sources are expected to support. This process includes:
   1. Estimating service coverage: Determine the number of clients likely to be served through other funding sources offering similar services.
   2. Adjusting for increased funding: Subtract the number of people with HIV (PWH) expected to be served due to increases in other available funding.
   3. Accounting for decreased funding: Add the number of PWH projected to need services as a result of reductions in other funding sources.

V. Reallocation/Sweeps Process (Based on periodic review of service utilization)

The Committee shall review any deviations in planned expenditure exceeding 10% in any funding category at least twice yearly (biannually) for possible reallocation and/or reprioritization. The Recipient's Administrative entity may reallocate unexpended amounts less than 10% in any funding category.

A. ***Biannual reallocation:*** The following process shall be utilized for the biannual reallocation of resources:
   1. The Recipient should present the Committee with funding deviation estimates and explanations for the possible causes.
   2. Funding should be maintained within the service category. If maintaining the funding within the service category is not feasible, the funding should be moved in ranked order to the next highest-ranked category experiencing a shortfall.
   3. The Committee reserves the right to deviate from this process to address the emergent needs of underserved populations in lower or non-ranked categories.
   4. Any deviations from the planned allocation will be documented with

justifications for the changes.

B. **Final Reallocation:** To ensure complete expenditure of funds by the end of the fiscal year, the **Committee authorizes the Recipient** to move funds between categories within a service provider's contract. This authority is granted with the understanding that the reallocation process has already occurred, the amount involved is less than 10% of the funding award, and fewer than 120 days remain in the fiscal year.

VI. Data Sources

The Committee participates in data-driven decision-making. Examples of data sources include, but are not limited to:

A. PSRA Service Category Scorecards (utilization, expenditures, etc.).
B. Community input (through listening sessions, focus groups, CEC rankings, community forums, Integrated Committee forums, etc.).
C. Review the status of the Florida and Broward County Integrated HIV Prevention and Care Plans.
D. Epidemiology (including incidence, prevalence, co-morbidities, etc.).
E. HIV Needs Assessment.
F. Unmet Need / Early Identification of Individuals with HIV/AIDS (EIIHA).
G. Community Empowerment Committee's (CEC) Ranking of Part A Services.
H. Ryan White, HIV Prevention, EHE, HOPWA funders Reports.
I. HIV AIDS Bureau (HAB) Health Performance Measures.
J. Affordable Care Act Updates.
K. Ryan White Program Services Report (RSR).
L. Quality Management Ryan White Part A Client Health Outcome and Quality Improvement Projects.

VII. Integrated Planning Responsibilities

A. Aligns Ryan White Part A funding with Integrated Plan goals to ensure resources are directed to high-impact *treatment services* (e.g., Outpatient/Ambulatory Health Services, Medical Case Management, Oral Health).
B. Uses epidemiologic and utilization data to fund services that improve *linkage, retention*, and *viral suppression* outcomes across the care continuum.
C. Supports the EHE goal of making treatment rapidly accessible, especially for newly diagnosed and out-of-care individuals.

VIII. PSRA Membership: Individuals interested in serving solely as committee members must submit a standing committee application, which requires approval from the PSRA Chair and the HIVPC General Body. Membership should reflect the demographics of the HIV epidemic in Broward County, with consideration for:

A. Race and ethnicity.
B. Gender.
C. HIV status (self-acknowledged).

The ideal committee composition includes consumers, service providers, and individuals passionate about improving HIV service quality. Desired member qualifications include:

A. Willingness to collaborate and learn.
B. Basic understanding of data interpretation.
C. Familiarity with quality standards (local/state/federal).
D. Effective communication skills.

Members are not required to possess all competencies upon joining, but they must be committed to actively learning and engaging with quality management principles.

MEMBERSHIP/COUNCIL DEVELOPMENT COMMITTEE

Revised and Updated: 07/10/2025 by MCDC
Approved by HIVPC: July 24, 2025

I. Purpose

The Membership/Council Development Committee (MCDC) supports the Broward County HIV Health Services Planning Council by:

A. Soliciting and screening applications for new members and alternates.
B. Monitoring attendance and participation.
C. Recommending appointments and removals.
D. Ensuring orientation, training, and mentoring for Council engagement.

II. Meetings & Attendance

MCDC meets quarterly or as needed. Applications will be reviewed regularly. The Broward County Code of Ordinances governs attendance:

A. Members of quarterly committees are removed after 2 consecutive unexcused absences or 2 missed meetings per calendar year.
B. Members of more frequent committees are removed after 3 unexcused absences in a row or 4 in a calendar year.
C. Absences due to HIV-related illness will be excused.

III. Membership Requirements & Composition

A. Interested Parties must complete the HIVPC Membership Application.
B. The Broward County Board of County Commissioners appoints individuals to the Council.
C. Members must complete post-orientation training within 90 days of joining the Council.
D. At least ***33% of Council*** members must be unaffiliated PWHs receiving Part A services, reflecting the EMA's HIV demographics.
E. A maximum of ***three (3) employees from the same provider or government agency*** may serve at one time.
F. Members are ***required to participate in at least two (2)*** outreach activities.
G. Individuals interested in ***serving solely as committee members*** must submit a standing committee application, which requires approval from the QMC Chair and the HIVPC General Body. Membership should reflect the demographics of the HIV epidemic in Broward County, with consideration for:
    1. Race and ethnicity
    2. Gender identity
    3. HIV status (self-acknowledged)

The ideal committee composition includes consumers, service providers, and individuals passionate about improving HIV service quality. Desired member qualifications include:

1. Willingness to collaborate and learn
2. Basic understanding of data interpretation
3. Familiarity with quality standards (local/state/federal)
4. Effective communication skills

Members are not required to possess all competencies upon joining, but they must be committed to actively learning and engaging with quality management principles.

IV. Recruitment & Selection

A. Open recruitment with social media, public materials, and outreach to the community and provider agencies.
B. Emphasis on diversity, demographic reflectiveness, and unaffiliated PWH.

V. Retention of Members

Retention measures are necessary to help members stay engaged and participate fully, including post-orientation and training, mentoring, member recognition, and reimbursement support for unaffiliated members.

VI. Orientation, Training & Mentoring

A. New members and alternates must attend post-orientation and training within 3 months (90 days) of being appointed by the Board of Commissioners.
B. Post-appointment training and mentoring are available to new members.
C. Mentors educate on Council operations, reimbursement policies, and Council culture.

VII. Responsibilities of Council Members

A. Commit 4–6 hours/month (meetings and tasks).
B. Participate in at least one standing committee.
C. Attend required training sessions.
D. Represent assigned federal categories and work collaboratively (see section VII below).

VIII. HIVPC Membership Categories

PEOPLE LIVING WITH HIV & COMMUNITY • Affected communities (people living with HIV/AIDS and underserved communities) ***** • Non-elected community leaders • Representatives of recently incarcerated people living with HIV • Unaffiliated consumers **HEALTH & SOCIAL SERVICES PROVIDERS** • Health care providers, including federally qualified health centers (FQHCs) • Community-Based Organizations (CBOs) and AIDS Service Organizations (ASOs) • Social service providers (including housing and homeless service providers) • Mental health treatment providers • Substance abuse treatment providers	**PUBLIC HEALTH & HEALTH PLANNING** • Local public health agencies • Healthcare planning agencies • State agencies****** **FEDERAL HIV PROGRAMS** • Ryan White HIV/AIDS Program Part B recipients • Ryan White HIV/AIDS Program Part C recipients • Ryan White HIV/AIDS Program Part D recipients *(or representatives of organizations with a history of serving children, youth, and families living with HIV)* • Recipients under other federal HIV programs*******
****** Including people living with HIV, members of a federally recognized Indian tribe as represented in the population, individuals co-infected with hepatitis B or C, and "historically underserved groups and subpopulations"******* Including the state Medicaid agency and the agency administering the RWHAP Part B program******** Including HIV prevention services; Ryan White HIV/AIDS Program Part F recipients, Housing Opportunities for People with AIDS (HOPWA), HIV Prevention)*	

IX. Alternate Members

A. Minimum of three PWH alternates appointed by the County.
B. Serve when a member is unable to attend due to the absence policy.
C. Comply with all attendance requirements.

X. Removal Procedures

A. Attendance Violations:
   1. Automatic removal per County Code; notification sent by the HIVPC Chair/Vice Chair to the Broward Intergovernmental Office.

B. Removal for Cause:
   1. MCDC reviews and documents any violations (e.g., conflict of interest, failure to attend

training).
2. The process includes investigation, opportunity for member response, and final recommendations to the Executive Committee and Planning Council.

C. Council Vote:
1. Planning Council votes on removals for cause and forwards the final recommendation to the County Commission.

XI. Reinstatement

A. Members may apply for reinstatement.
B. <90 days: Submit a letter for Council approval.
C. 90 days: Submit a new application.
D. Reinstatement is limited to once per 12-month period.

XII. Council Development

A. Annual training plan developed and implemented.
B. Continuous evaluation of membership for compliance with federal, state, and local mandates.
C. Tracking of vacancies, demographic gaps, and changes in employment/representation.

XII. Mentoring & Buddy Systems

A. MCDC Mentoring Program

Purpose: To enhance new members' understanding of the HIV Planning Council (HIVPC) and encourage active participation.

Components:

1. Orientation and Training: Mandatory for new members, including a voluntary mentoring program.
2. Mentoring Program:
   a. Objective: Help new members feel welcome, understand Council processes, and learn member perspectives.
   b. Assignment: New members are paired with volunteer mentors by the MCDC Chair.
   c. Mentor Responsibilities:
      i. Review orientation materials.
      ii. Remind mentees of meetings.
      iii. Explain complex language and acronyms.
      iv. Educate on Robert’s Rules of Order.
      v. Ensure mentees understand the context of discussions and actions.
   d. Compliance: Follow the Florida Sunshine Law, avoiding discussions of Council business outside official meetings.

B. Buddy System for Interested Parties:

1. Purpose: Increase knowledge and participation in HIVPC Committees.
2. Assignment: Interested parties are paired with volunteer buddies by Committee Chairs.
3. Buddy Responsibilities:
   a. Review committee descriptions.
   b. Remind of meetings and events.
      i. Explain complex language.
      ii. Educate on committee policies and procedures.
      iii. Provide feedback on committee actions.

Evaluation: Mentors and buddies complete evaluations at the end of the mentorship or buddy assignment.

QUALITY MANAGEMENT COMMITTEE (QMC)

Revised and Updated: 08/05/2025 by QMC
Approved by HIVPC: August 28, 2025

I. Purpose

The **Quality Management Committee (QMC)** plays a vital role in ensuring that the Ryan White Part A system of care in Broward County maintains high standards across all operations. Through systematic monitoring, evaluation, and continuous improvement, the QMC supports the delivery of high-quality, appropriate HIV care and services to all clients receiving Ryan White Part A and MAI-funded services. The Committee ensures compliance with relevant regulations and best practices, while fostering service excellence and integrity throughout the care continuum.

II. Policy Statement

The QMC ensures the delivery of the highest quality HIV medical care and support services to eligible residents by:

A. The QMC functions as a standing committee of the Broward County HIV Planning Council.
B. The Chair must be a Planning Council member.
C. Developing client-level and system-level outcomes and indicators.
D. Overseeing the implementation and review of service delivery models.
E. Approving scopes of service for quality-related evaluation studies.
F. Evaluating client satisfaction and training needs.
G. Overseeing quality improvement (QI) activities.

III. Oversight of Service Delivery Models

The QMC is responsible for reviewing and updating service delivery models by:

A. Recommending evidence-based best practice models informed by expert presentations.
B. Reviewing and recommending updates to the standards of care to align with evolving client needs and evidence-based practices.
C. Recommending updates for service protocols based on data, Health and Human Services Guidelines, and needs assessment recommendations.

IV. Procedures

A. Assess the effectiveness of the Quality Management and Clinical Quality Management Work Plans and make necessary adjustments to improve outcomes.
B. Review and analyze performance measures, client-level outcomes, and trends to identify areas for improvement.
C. Ensure committee policies and procedures remain current, effective, and aligned with program goals.
D. Analyze results from Needs Assessments and client satisfaction surveys to inform service enhancements.
E. Identifying opportunities to improve client satisfaction.
F. Review quality improvement projects (QIP) of the Quality Provider network to shape outcome measures and indicators.
G. Contribute to relevant sections of the Integrated HIV Prevention and Care Plan to ensure alignment with quality management objectives.
H. Strategically Integrate Quality Management into the HIV Planning Process: Engage in cross-committee collaboration to ensure that quality management priorities are embedded within the

Integrated HIV Prevention and Care Plan, aligning improvement initiatives with long-term strategic goals and system-wide performance outcomes.

V. Membership

Individuals interested in serving solely as committee members must submit a standing committee application, which requires approval from the QMC Chair and the HIVPC General Body. Membership should reflect the demographics of the HIV epidemic in Broward County, with consideration for:

A. Race and ethnicity
B. Gender
C. HIV status (self-acknowledged)

The ideal committee composition includes consumers, service providers, and individuals passionate about improving HIV service quality. Desired member qualifications include:

A. Willingness to collaborate and learn
B. Basic understanding of data interpretation
C. Familiarity with quality standards (local/state/federal)
D. Effective communication skills

Members are not required to possess all competencies upon joining, but they must be committed to actively learning and engaging with quality management principles and systemic analysis.

SYSTEM OF CARE COMMITTEE (SOC)

Revised and Updated: 08/07/2025 by SOC
Approved by HIVPC: August 28, 2025

I. Purpose

The **System of Care Committee (SOC)** oversees the coordination and integration of services within the Ryan White Part A system of care. It aims to create a cohesive and efficient system that meets the community's needs. This Committee systematically monitors and evaluates the quality and appropriateness of HIV care and services provided to all clients receiving Ryan White Part A and Minority AIDS Initiative (MAI) funded services.

II. Policy Statement

The SOC Committee is responsible for the following:

A. The SOC functions as a standing committee of the Broward County HIV Planning Council.
B. The Chair must be a Planning Council member.
C. Reviewing the continuum of HIV services to identify and recommend system-level improvements.
D. Overseeing the Needs Assessment process to ensure it effectively captures community needs.
E. Advising on disparities, service delivery gaps, and barriers to access that impact affected populations.
F. Providing recommendations to other Planning Council committees regarding the service needs of specific subpopulations and offering input on service delivery standards.

III. Key Activities

To ensure a responsive and seamless continuum of care, the SOC Committee will:

A. Maintain an updated inventory of HIV-related services in Broward County.
B. Evaluate whether services are being delivered as intended and identify differences in health outcomes by subpopulation.
C. Monitor service utilization trends and identify emerging client needs.
D. Recommend improvements to address inequities, especially to people from historically underserved communities.

IV. Procedures

A. System of Care Analysis – based on presented data

1. Analyze client service utilization trends across the HIV Care Continuum (Diagnosis of HIV infection; Linkage to HIV medical care; Receipt of HIV medical care; Retention in medical care; Achievement and maintenance of viral suppression).
2. Identify disparities by geographic region, service provider, and client demographics.
3. Identify service gaps and recommend capacity-building solutions to close service gaps to the appropriate HIVPC committee.

B. Annual Work Plan Elements

1. Support the Priority Setting & Resource Allocation (PSRA) process by recommending “How Best to Meet the Need” language for Ryan White service categories.
2. Collaborate with stakeholders to assess and improve the HIV Care Continuum

3. Recommend targeted strategies and interventions for vulnerable populations who may not seek care or who may have fallen out of care, as needed/recommended based on data presentations and assessment recommendations.
4. Conduct annual review and present findings to QMC for potential updates to service delivery models (SDM) as needed.

C. Service Effectiveness Review

1. Identify tools and data needed for service assessment (e.g., outcome data, surveys, needs assessment, implementation plans, new data collection tools).
2. Analyze and provide recommendations based on needs assessment findings.
3. Recommend changes to improve the effectiveness of services and processes.

V. Membership

Individuals interested in serving solely as committee members must submit a standing committee application, which requires approval from the SOC Chair and the HIVPC General Body. Membership should reflect the demographics of the HIV epidemic in Broward County, with consideration for:

A. Race and ethnicity
B. Gender
C. HIV status (self-acknowledged)

The ideal committee composition includes consumers, service providers, and individuals passionate about improving HIV service quality. Desired member qualifications include:

A. Willingness to collaborate and learn
B. Basic understanding of data interpretation
C. Familiarity with quality standards (local/state/federal)
D. Effective communication skills

Members are not required to possess all competencies upon joining, but they must be committed to actively learning and engaging with quality management principles and systemic analysis.

ADDITIONAL POLICIES AND PROCEDURES

1) Incentives Policy for Client Engagement and Participation
2) Attendance Policy
3) Voting Abstentions and Conflicts Guidelines
4) Nominating Procedure
5) Reporting Violations of Bylaws & Policies, and Procedures
6) Member Removal Process
7) Grievance For Planning Council Actions
8) Unaffiliated Member Reimbursements Policy
9) HIVPC Code of Ethics
10) Meeting Ground Rules
11) Travel –Out of Area

INCENTIVES POLICY FOR CLIENT ENGAGEMENT AND PARTICIPATION

Approved by HIVPC: June 26, 2025

I. Purpose

The purpose of this policy is to define the criteria and procedures for the use of incentives to support and encourage the meaningful participation of people with HIV in Planning Council activities, including but not limited to surveys, focus groups, community engagement sessions, and committee participation. This policy ensures compliance with HRSA HAB Policy Clarification Notice (PCN) 16-02 and applicable federal, state, and local regulations.

II. Policy Statement

In accordance with the Ryan White HIV/AIDS Program (RWHAP) statute, the Broward County HIV Planning Council shall not provide direct cash payments to individuals with HIV. However, to support client engagement, the Planning Council may offer **non-cash incentives**, such as store gift cards or vouchers, provided they:

A. Are used solely for allowable services or goods.
B. Are not redeemable for cash or used to purchase prohibited items.
C. Are distributed based on established criteria and in support of Council-related activities.

The Executive Committee of the HIVPC authorizes the Broward County HIV Health Services Planning Council (HIVPC) to allocate up to $1,000 annually from the HIVPC budget for gift card incentives for unaffiliated consumers.

III. Allowable Incentives

Examples of allowable incentives include:

A. Store gift cards for groceries or pharmacies
B. Transportation passes or vouchers
C. Meal vouchers for participation in scheduled Planning Council engagement events
D. Store gift cards for survey completion or feedback participation

Incentives must be specifically tied to participation in approved HIVPC engagement efforts and must be pre-approved by the Executive Committee.

IV. Eligibility and Distribution Criteria

The HIVPC shall distribute incentives fairly and equitably according to the following criteria:

A. **Eligible Participants:** People with HIV who are actively engaged in a designated Council-led engagement activity (e.g., consumer listening session, needs assessment survey, or participation as a consumer on a standing committee).
B. **Incentive Value:** Incentives shall range between $25- $50 per event or engagement, and individuals may not receive more than $100 in incentives from the HIVPC within a calendar year.
C. **Frequency:** Incentives may be distributed per activity but not as compensation for ongoing participation or attendance.

All eligibility requirements shall be included in event materials and reviewed with participants.

Any incentive that falls outside of standard practice requires approval and signature from the HIVPC Chair or Vice-Chair.

IV. Tracking and Documentation
Planning Council support staff shall maintain a secure system for tracking the purchase and distribution of all incentives. This system shall include:

A. A unique tracking number or serial code for each incentive.
B. Participant sign-in sheets and verification logs.
C. Documentation of the activity, date, and purpose of distribution.
D. Authorized staff and recipient signatures for each transaction.
E. Inventory records and reconciliation logs for periodic audit review.

All records shall be securely stored and retained for a minimum of five years in accordance with County and HRSA requirements.

VI. Safeguards and Restrictions
The following safeguards shall be in place to ensure appropriate use of incentives:

A. Incentives may only be used at designated vendors for allowable items (e.g., food, hygiene products, transportation).
B. Gift cards must not be used for alcohol, tobacco, firearms, or other prohibited items.
C. Cards must be vendor-specific and not general prepaid debit cards.
D. Any misuse of incentives will be reported to the Executive Committee for review and potential corrective action.

VII. Oversight and Review
This policy shall be reviewed as required by the HIVPC Executive Committee and updated as necessary to reflect changes in federal guidance, local procedures, or Planning Council Bylaws. The Planning Council staff will conduct periodic reviews of documentation to ensure compliance.

ATTENDANCE POLICY

Approved by HIVPC: June 26, 2025

I. Purpose

To ensure consistent participation and accountability, this policy outlines attendance expectations for members of the Broward County Ryan White Part A HIV Health Services Planning Council (HIVPC) and its committees. This policy is based on the Broward County Code of Ordinances, Section 1-233, and applies to all Council and committee members.

II. **Automatic Removal for Unexcused Absences**

A. For Committees or the HIVPC Meeting More Frequently Than Quarterly:

A member shall be automatically removed if they:

1. Accumulate **three (3) consecutive unexcused absences**, regardless of calendar year, **OR**
2. Accumulate **four (4) unexcused absences** in a **single calendar year (January–December).**

B. For Committees Meeting Quarterly or Less Frequently:

A member shall be automatically removed if they:

1. Accumulate **two (2) consecutive unexcused absences**, regardless of calendar year, **OR**
2. Miss **two (2) meetings** in a **single calendar year (January–December)** due to unexcused absences.

Note: *Attendance is verified through official sign-in sheets and virtual attendance records.*

III. Notification of Attendance

A. Members must notify HIVPC Support Staff **at least two (2) business days in advance** if they **can or cannot attend** a scheduled meeting.
B. If notification is **not provided** and the absence is not excused, it will be recorded as **unexcused**.

IV. Remote Participation

A. Members may participate by telephone, mobile, or online platforms.
B. Members attending virtually will be included in the **quorum** count.
C. Members wishing to participate remotely must inform Support Staff **at least two (2) business days prior** to the meeting.

V. Excused Absences

Requests for excused absences are reviewed and approved by the HIVPC or the Committee Chair. The absence of an advisory board or other board member shall be deemed excused under the following circumstances as described in Article XII, Section 1-233 of the Broward County Ordinance:

A. When the member is performing an authorized alternative activity relating to board business that directly conflicts with the properly noticed meeting.
B. The death of an immediate family member, defined as a spouse, father, mother, stepparent, one who has stood in the place of a parent (in loco parentis), child, stepchild domiciled in the member's household, grandparent, grandchild, guardian, or custodian.
C. The death of a member's domestic partner, or the death of a child, stepchild, parent, grandparent, or grandchild of a member's domestic partner.
D. The member's hospitalization or receipt of necessary emergency medical

treatment at or around the time of a properly noticed meeting.

E. When the member is summoned for jury duty.
F. When the member is attending a deposition, hearing, trial, or other legal proceeding for which attendance is required by a subpoena or by order of a court of competent jurisdiction; or
G. During the 12 weeks after the birth of a member's or their domestic partner's child or after placement of a child with a member or their domestic partner for adoption or foster care.

VOTING ABSTENTIONS AND CONFLICTS GUIDELINES

Approved by HIVPC: August 28, 2025

I. Abstaining from Voting Due to Special Private Gain

Under **Florida state law (Section 112.3143, F.S.)**, board members must abstain from voting if the decision would result in a **special private gain** for:

A. The board members themselves
B. A relative, including a parent, child, spouse, in-law, or other immediate family member
C. A business associate, such as a partner, joint venture participant, co-owner of property, or corporate shareholder (excluding publicly traded companies)
D. A principal who retains the board member, including their employer
E. A parent organization or subsidiary of the parent organization, unless it is a state agency

II. **Abstaining from Voting on Services Categories and Funding Allocations**

According to Planning Council policies, a member must **abstain** from voting on service categories and allocations when their organization is one of **fewer than three** (<3) Ryan White-funded agencies providing the service.

Note: *Abstention is not required if three (3) or more agencies provide the service.*

III. Required Actions for Voting Conflicts

Any council member with a **voting conflict** under **state or county law** must:

A. **Declare the conflict** on the record at the meeting before the vote
B. Abstain from voting on a service category if the member's agency is one of fewer than three Ryan White-funded agencies
C. File a Memorandum of Voting Conflict (Form 8B) within 15 days of the vote

IV. Additional Restrictions Under Broward County Ordinance

Broward County expands these restrictions by **prohibiting both discussion and voting** on matters that would result in a special gain for:

A. Any private entity where the board member serves as an officer or board member, regardless of compensation
B. Any public entity where the board member is employed

All voting conflicts related to service categories are public records.

NOMINATING PROCEDURE

Approved by HIVPC: June 26, 2025

I. Purpose

This policy outlines the process for nominating and electing the Chair and Vice Chair of the Broward County HIV Health Services Planning Council (HIVPC), including procedures for regular and special elections.

V. II. REGULAR ELECTIONS

A. Formation of Nominating Committee

1. No later than July, the HIVPC Chair shall appoint a Nominating Committee composed of at least five (5) Planning Council members.
2. The Committee must include a minimum of one unaffiliated consumer currently living with HIV/AIDS.

B. Nominations Process

1. A verbal call for nominations will be made from the floor during the October HIVPC meeting, in advance of the January election.
2. Members interested in candidacy for Chair or Vice Chair must submit a formal letter of interest.
3. All prospective candidates will receive a Candidate Questionnaire designed to assess their leadership experience and motivations for seeking office.
4. A submission deadline will be communicated.

C. Candidate Review and Slate Preparation

1. Following the close of nominations, the Nominating Committee will convene to evaluate all submissions and compile a slate of candidates.
2. Candidate responses will be included in the December HIVPC meeting packet for review, along with scheduled candidate presentations.

III. ELECTION PROCEDURE

A. Candidate Presentations

1. At the HIVPC meeting scheduled for December 4, 2025, each candidate will be allotted up to 10 minutes to present their platform, followed by 2 minutes for questions or clarification.

B. Electronic Voting

1. Voting will be conducted electronically.
2. One week after the December meeting, Council members will receive an emailed ballot listing candidates for Chair and Vice Chair.
3. Members may participate in early voting, with final votes due two weeks before the next scheduled HIVPC meeting.
4. If a position has only one candidate, the ballot will include options to approve or reject the nominee.
5. Ballots will be pre-printed with member names for accurate record-keeping.

C. Voting Method

1. A double election system will be implemented in accordance with Article V, Section 2 *(Election of Officers shall utilize a majority vote double election system (primary election and a secondary run-off election).*
2. Primary Vote – to identify leading candidates.
3. Runoff Vote – if no candidate secures a majority in the primary.

D. Announcement of Results

1. Results will be publicly announced during the January 22, 2026, HIVPC meeting.
2. The Nominating Committee Chair or designated Council representative will read each vote into the official record.
3. Newly elected officers will begin their terms on March 1.

IV. SPECIAL ELECTIONS

In the event of a resignation or vacancy in the Chair or Vice Chair position:

A. A special election will be held using the same procedures outlined above.
B. Timelines may be adjusted to accommodate the vacancy, but all required steps (nominations, review, presentations, and voting) will be followed.

REPORTING VIOLATIONS OF BYLAWS & POLICIES AND PROCEDURES

Approved by HIVPC: July 24, 2025

I. Policy Purpose

The HIV Planning Council (HIVPC) is committed to accountability, transparency, and adherence to its governing documents. This policy establishes a formal process for reporting and responding to potential violations of the HIVPC Bylaws or the Policies and Procedures of its Committees.

II. Scope

This policy applies to potential violations of:

A. The HIVPC By-Laws
B. Policies and Procedures adopted by the HIVPC Standing or Ad Hoc Committees

III. Who May Report a Violation

Any of the following individuals or entities may report a potential violation:

A. People with HIV receiving Ryan White services
B. Planning Council members
C. Committee members
D. Ryan White Part A recipient (Recipient) staff
E. Planning Council support staff
F. Ryan White service providers

IV. Reporting Methods

A. Reports of violations must be submitted using one of the following methods:
    1. **Verbally** during a public meeting of the Planning Council or any of its committees. *Note: A written summary may be requested following the verbal report.*
    2. **In writing** via email or letter addressed to the Planning Council Support Staff. All written reports must clearly describe the nature of the violation and identify the date, individuals involved (if applicable), and the relevant section(s) of the By-Laws or Policies & Procedures.

V. Review and Response Process

A. The individual receiving the report (Council Chair, Committee Chair, or Council Staff) must **forward the report to the Executive Committee** for review at its next scheduled meeting.
B. The **Executive Committee** will review the report and:
    1. Determine the matter; or
    2. Defer action to request additional information.
C. If the alleged violation pertains specifically to the HIVPC **By-Laws**, the matter will be referred to the **Ad Hoc By-Laws Committee**.
    1. If the By-Laws Committee is not active at the time of the report, it will be **reconvened promptly** to address the issue.

VI. Appeal Process

A. Individuals who submit a report and are dissatisfied with the outcome may **file a formal grievance** with the Planning Council, provided the issue qualifies under the Council's established **Grievance Policy**.
B. Appeals must follow the established grievance procedures and timelines outlined in the Grievance Policy.

MEMBER REMOVAL PROCESS

Approved by HIVPC: July 24, 2025

I. Overview

This policy outlines the procedures for removing HIV Planning Council Members and Alternates due to non-compliance with attendance requirements or for cause. The process is designed to ensure fairness, transparency, and alignment with Planning Council Bylaws, ground rules, and applicable laws.

II. Removal for Attendance

A. Members and alternates who fail to meet the attendance requirements as outlined in the HIVPC Attendance Policy will be **automatically removed** from the Planning Council or committee. Planning Council Support staff will perform the following:
    1. Planning Council Support Staff monitors council and committee meeting attendance monthly.
    2. Once PCS staff identify two consecutive unexcused absences, PCS staff will send that member a warning letter on behalf of the council and/or committee chair.
    3. The warning letter contains the dates of the missed meetings, the date of the next meeting, and the Broward County Code of Ordinances for their reference.
    4. If the member has a third consecutive unexcused absence, PCS staff notifies the council and/or committee chair and sends the removal letter to the member.
    5. PCS staff notifies the Broward County Intergovernmental Affairs Office. The Intergovernmental Affairs Office coordinates with the Board of County Commissioners to formally remove the member from the council.
    6. Once the former member has been removed, the Intergovernmental Affairs Office will notify them of their removal.
B. The **Membership/Council Development Committee (MCDC)** will document all attendance-related removals and report them to the **Executive Committee**.
C. Removals of attendance violations will be publicly reported during the **Executive Committee's report at the next full Planning Council meeting**.

III. Removal for Cause

Removal for cause refers to the process of terminating a council member's position due to specific reasons that justify their removal.

A. Submission of a Request for Removal
    1. Any recommendation for the removal of a member or alternate for cause must be submitted in writing to the MCDC and include the following:
B. Full name(s) of the Council or Committee member(s) submitting the request
C. Name of the individual recommended for removal
D. Written description of the conduct or action(s) prompting the request
E. Date(s) and location(s) of the alleged incident(s)
F. Signature(s) and date of submission
G. Grounds for Removal
    1. The MCDC may recommend removal if a member or alternate:
H. Refuses to cooperate in a conflict of interest review.
I. Knowingly engages in conduct that creates or contributes to a conflict of interest, as defined in the By-Laws.
J. Violates the Planning Council's Meeting Ground Rules.
K. Commits a serious or repeated violation of the HIVPC By-Laws.
L. Violates the Florida Sunshine Law or the Broward County Code of Ethics.
M. Review and Investigation Process

N. The MCDC will review the request for removal at its next regular meeting unless the Council or Committee Chair requests a special meeting.
O. If the MCDC determines the complaint has merit, it will conduct a formal investigation within 60 days of that determination.
P. The individual being reviewed will be notified by email and certified mail and will have the opportunity to respond by:
    1. Presenting written documentation
    2. Calling witnesses
    3. Responding to the allegations in person or writing
Q. The MCDC may also call witnesses or request additional documentation relevant to the case.
R. Following the investigation, the MCDC will vote on a recommendation for action and submit its decision to the Executive Committee.
S. Notification and Reporting
T. The final recommendation and rationale will be provided to:
    1. The Executive Committee
    2. The individual submitting the complaint
    3. The individual recommended for removal
U. The outcome will also be documented in the Executive Committee Report presented to the full Planning Council.

IV. Final Removal Decision

A. A **vote of the full Planning Council must ratify the final decision** to remove a member or alternate.
B. Once ratified, the Planning Council will submit the formal **removal recommendation to the Broward County Board of County Commissioners** for official action.

GRIEVANCE FOR PLANNING COUNCIL ACTIONS

Approved by HIVPC: July 24, 2025

I. Purpose

The Executive Committee serves as a neutral body to facilitate the resolution of grievances related to the actions of the Broward County HIV Health Services Planning Council (the Council). The Committee ensures that all grievances are addressed in an open, inclusive, non-discriminatory, and impartial manner.

II. Prevention Measures

To minimize potential grievances, the Committee has implemented the following proactive measures:

A. Publicly announcing all Council and Committee meetings.
B. Encouraging community participation and feedback.
C. Establishing reimbursement policies for attendance-related expenses for individuals with HIV.
D. Distributing outreach materials, including grievance and membership flyers.
E. Offering technical assistance and educating the public on decision-making procedures.

III. Scope of Grievances

A. Eligible grievances may be submitted by individuals, community groups, Council members, or Part A providers who are adversely affected by Council actions involving:
    1. Needs assessment
    2. Comprehensive planning
    3. Priority setting (including methods for addressing priorities)
    4. Clinical outcome/cost-effectiveness determinations
    5. Allocation or reallocation of funds

A. Grievances must cite a deviation from established, written processes or policies. Appeals must be filed within two weeks of the decision or incident. Remedies apply prospectively only; the solutions or actions taken are intended to prevent future issues rather than to address or compensate for past problems. Grievances related to provider selection follow the Broward County Administrative Code to avoid conflicts of interest.

IV. Grievance Submission Policies

A. Grievances must be submitted using the official form, which includes a statement of understanding and a release of information waiver.
B. Completed forms may be submitted to the Council or staff support office and will be forwarded to the Committee Chair(s).
C. The Chair(s) will determine eligibility and whether the grievance falls within the Committee's scope.
D. For grievances involving the Council, a **third-party mediator** will be requested from the Broward County legal office of the Department of Human Services.

All complaints will be addressed within 30 days and considered at the Committee's regular monthly meeting.

III. Grievance Resolution Process

A. The Committee will direct grievances to the appropriate body and facilitate informal resolution through negotiation and compromise.
B. If mediation fails, the grievance may proceed to formal binding arbitration by a neutral third party.

IV. Procedures

A. Within 10 working days, the Committee Chair(s) will appoint a mutually agreed-upon fact finder.
B. The fact finder will inform both parties of the arbitration/mediation rules and Sunshine Law implications.
C. Fact finders must recuse themselves from cases involving any conflict of interest.
D. A summary of findings will be presented at the Committee's next scheduled meeting at the Council support office (currently: Broward Regional Health Planning Council, 200 Oakwood Lane, Suite 100, Hollywood, FL).
E. The Committee will meet within 30 days to review the findings and facilitate resolution.
F. All grievance documentation will be securely stored and accessed only on a need-to-know basis.
G. While mediation is voluntary and cost-effective, binding arbitration may incur costs. The Committee will seek pro bono services where possible. Costs related to grievances against the Council will be included in the Council support budget.

Note: *Grievances against the Recipient or its selected providers fall under the Recipient's responsibility and are handled per Broward County procedures.*

UNAFFILIATED MEMBER REIMBURSEMENTS POLICY

Approved by HIVPC: June 26, 2025

I. Purpose

The active participation of Persons Living with HIV (PWH) is essential to the Ryan White Part A planning process. To support this involvement, the Ryan White Part A Program has established a reimbursement process, subject to available funding and demonstrated need, to cover reasonable expenses incurred by eligible Planning Council members and alternates living with HIV/AIDS. This policy ensures that unaffiliated PWH members can participate fully in Council and committee meetings.

II. Eligibility and Scope

A. Reimbursements are available only to **unaffiliated** PWH Council members and alternates.
B. Reimbursements apply only to **approved meetings** of the Council or committees on which the member actively serves.
C. Expenses must not be reimbursable through any other funding source.

III. Covered Expenses

Reimbursement may be provided for the following:

A. **Transportation**: Includes mileage, bus fare, Tri-Rail, and taxicabs (pre-authorized or emergency use only).
B. **Parking and Tolls**: Reimbursable with valid receipts.
C. **Meals and Lost Wages**: As applicable and within budgetary limits.
D. **Child Care/Day Care**: Eligible for reimbursement for children under the age of 18, subject to budgetary limitations.

IV. Mileage Reimbursement

A. Mileage is reimbursed at the Broward County-approved rate.
B. Whenever possible, pre-arranged agency transportation should be used.

V. Reimbursement Limits

A. Monthly maximum: $50.00
B. Annual maximum: $600.00 per calendar year
C. Exceptions may be granted by the Recipient's Office on a case-by-case basis.

VI. Submission Requirements

To receive reimbursement:

A. Submit a completed "Reimbursement of Traveling Expenses" form.
B. Include all supporting documentation, such as:
    1. Receipts
    2. Proof of insurance (if applicable)
C. Submit the request by within 30 days of the following month in which the expenses were incurred.
D. Late submissions will not be accepted or reimbursed.
E. Sign an affidavit affirming the validity of the reimbursement request.

PUBLIC COMMENT PROCESS

Approved by HIVPC: June 26, 2025

HIV Health Services Planning Meetings

Public Comment provides an opportunity for audience members to speak on issues not included on the meeting agenda, such as personal healthcare issues, funding levels for services, or the need for additional services.

Instructions for Public Comment:

A. **Request to Speak**:
   1. Attendees wishing to speak need to sign in before public comment time in person or in the chat section if they are online.

B. **Time Allocation**:
   1. Ten minutes in total are reserved for Public Comments at the beginning and end of the meeting. The Chair is responsible for ensuring everyone who wants to speak has the opportunity within each 10-minute time allotment.

C. **Language and Translation**:
   1. Attendees requiring translation services should contact the Planning Council Support Staff three days (72 hours) before the applicable HIVPC/Committee meeting at hivpc@brhpc.org, or (954) 561-9681 Ext. 1244 or 1343.

D. **Recording and Public Record**:
   1. All Council and Committee meetings are recorded, and the meeting summary is a public record.

E. **Client Grievances**:
   1. Privacy laws and provider contract requirements limit the Planning Council's ability to discuss client grievances. If an individual asks the Planning Council to intervene in a grievance, they will be immediately referred to the Recipient's representative for assistance. They may also call the Office of the Recipient at: (954) 357-7811.

F. **Referral of Issues**:
   1. The Chair will make every attempt to refer individuals or the issues/comments they speak about to the appropriate staff or Committee for further review and action.

Public Participation during Broward County Board of Commissioners Meetings

Excerpt Taken directly from Broward County – Florida Administrative Code Chapter 18, Section 18.6.

***Opportunity for* Public Comment**. "Members of the public shall be provided a reasonable opportunity to be heard on agenda items before the County Commission, unless otherwise stated in this section or provided by law. Unless otherwise required by law or determined appropriate by the Mayor, a member of the public shall be permitted to comment on any item at only one meeting unless the item substantially and materially changes prior to the County Commission's final consideration of the item or more than thirty (30) days pass between the

date public comment occurs and the date the item is subsequently considered by the County Commission."

A. ***Registration.*** To speak on an agenda item, a member of the public must complete and submit a registration form that identifies the item on which he or she wishes to speak. The registration form must be submitted prior to the time the item is called for County Commission consideration or, for public hearing items, prior to the opening of the public hearing on the applicable item. Failure to comply with these provisions shall prohibit a person from speaking on any item for which they are not properly registered.

B. ***Supplemental Materials****.* Any person intending to speak regarding an agenda item may, *no later than three (3) business days prior to the applicable County Commission* meeting, submit to the County Administrator any written materials to which the speaker intends to refer, which materials shall identify the agenda item to which they relate. Provided such written materials address the referenced agenda item, the County Administrator shall promptly distribute such materials to the County Commission. A speaker may reference the supplemental materials when addressing the County Commission. Nothing stated herein prohibits an individual from distributing written materials in connection with the individual speaking during a County Commission meeting, provided the individual brings sufficient copies for distribution to each County Commissioner, the County Administrator, the County Attorney, and the County Auditor.

Sources: For the most current and comprehensive provisions regarding public comments information, please refer to the Broward County Code of Ordinances

HIVPC CODE OF ETHICS

Reviewed and updated by Atty Ron Honick 7/14/2025
Approved by HIVPC: August 28, 2025

HIVPC statement on Ethics: This Broward County Ryan White HIV Health Services Planning Council Code of Ethics summarizes the legal and ethical responsibilities of Broward County's Ryan White HIV Health Services Planning Council ("HIVPC") members in five key areas: **gifts, conflicts of interest, voting conflicts, lobbying, and public communications/social media**. Members of the HIVPC are considered public officers and are expected to uphold and maintain the highest ethical standards. Below is a summary of the key provisions governing HIVPC member responsibilities under federal, state, and local law, including Florida's Sunshine Law, Florida's Code of Ethics for Public Officers and Employees (Chapter 112, Part III, Florida Statutes), the Broward County Code of Ordinances, Administrative Code, and County Administrative Policies and Procedures ("CAPP"). HIVPC Members should always check with the Board Coordinator or the Board Counsel for clarity on these topics. Terms not otherwise defined have the same meaning as in the relevant law or County policy and all conflicts in definitions must be resolved in favor of the relevant law or County policy:

I. Gifts

A. HIVPC members must comply with strict gift laws in state statutes and Broward County ordinances.
B. A gift is anything of value received without equal or greater compensation being paid by the recipient within 90 days.
C. Prohibited sources of gifts include:
    1. Persons or entities doing business with the County (Contractors).
    2. Suppliers of goods or services to the County, or those that have responded to County procurements, whether currently or within the past 2 years (Vendors).
    3. Lobbyists or principals/employers of lobbyists.

A. No HIVPC members may engage in corruption or quid pro quo; gifts must not influence official actions.
B. HIVPC members who are required to file an annual financial disclosure must report gifts valued over $100 (except from relatives).

II. Conflicts of Interest

A. HIVPC members (or their families/businesses) must not do business with their own governmental entity without receiving a waiver.
    1. For advisory boards, including the HIVPC, the governmental entity is Broward County.
        a. For decision-making boards, the governmental entity is the board itself.
B. *Conflicting employment or contractual relationships are* prohibited when:
    1. They are with businesses regulated by the HIVPC, or
    2. They create ongoing conflicts between personal interest and public duty.
C. HIVPC members must disclose potential conflicts, seek a waiver, and abstain from voting when the conflict arises

III. Voting Conflicts

A. HIVPC members must not vote on a matter before the HIVPC if the HIVPC's decision would benefit:

1. Themselves;
2. Their employer, client, principal, or the principal's parent company or subsidiary;
3. Their family member; or
4. Their business associate.
    a. A benefit, as used above, means a "special private gain or loss" and refers to personal or narrow economic impacts, not issues broadly affecting the general public.

B. In the event of a conflict of interest, the HIVPC member is required to adhere to the following procedure:
    1. Disclose the conflict orally before the item is considered.
    2. Submit the appropriate voting conflict form to the Planning Council Support Staff before the meeting or within 15 days after the meeting.
    3. Abstain from voting when a conflict arises.

III. Lobbying

A. HIVPC members may not lobby Broward County Staff while serving or for two years after leaving.
B. Violations may lead to removal and fines.

IV. Public Communications and Social Media

A. **Definitions**
    1. Social media encompasses both the official HIVPC profiles on platforms like Facebook, Twitter, YouTube, LinkedIn, TikTok, Instagram, and similar channels, as well as the personal accounts of HIVPC members.
    2. *Interactive Posts* are public-facing posts that enable two-way communication (e.g., comments, replies).

B. **Public Records and Sunshine Law on Social Media**
    1. All communications (including Social Media content) with the HIVPC or about HIVPC business are a public record under Florida law and must be archived accordingly.
    2. HIVPC members should avoid two-way social media interaction about the HIVPC's subject matter.
    3. HIVPC members may not violate federal, state, or local laws, the social media platform's terms, or the HIVPC's bylaws and policies.

C. **Moderation & Public Interaction**
    1. Content inconsistent with this policy—such as attempts to negotiate procurement terms or initiate deliberations—will be removed or hidden per policy.

Ethics compliance ensures transparency, public trust, and legal integrity. When in doubt, HIVPC members are encouraged to consult--through the Planning Council Support staff—the assigned Assistant County Attorney from the Broward County Attorney's Office before taking action.

For further guidance, refer to the legal sources referenced above and the Florida Commission on Ethics Guide to the Sunshine Amendment and Code of Ethics for Public Officers and Employees.

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MEETING GROUND RULES

Approved by HIVPC: August 28, 2025

Purpose

To ensure that all Council meetings are conducted in a respectful, orderly, and productive manner that supports open dialogue and effective decision-making.

A. **Respect for the Committee Process**
The Council, its members, and the public acknowledge that in-depth discussion and analysis occur primarily at the committee level. Council meetings are not intended to revisit committee-level deliberations.

B. **Recognition by the Chair**
Members must be recognized by the Chair before making a motion or speaking. Only one person may speak at a time.

C. **Respectful Communication**
All speakers must address the Council respectfully, stay on topic, adhere to time limits, and avoid interruptions. Others must not speak over a recognized speaker.

D. **Priority in Debate**
The member who made a motion and has not yet spoken on it has the right to be recognized first in debate.

E. **Equal Opportunity to Speak**
No one may speak a second time on the same issue until all others who wish to speak have had a chance.

F. **Focused Discussion**
Comments must relate to the current motion or agenda item. Speakers must address the Chair and maintain a courteous tone. The Chair may set time limits to ensure efficient proceedings.

G. **Confidentiality and Professionalism**
Members should not name specific service providers or individuals unless they are explicitly part of the agenda item. Concerns about providers should be directed to the Recipient outside of the meeting.

H. **Public Participation**
Members of the public may speak only when recognized by the Chair and must follow the same rules of conduct as Council members.

I. **Substance Use Policy**
The use of alcohol or non-prescribed drugs is prohibited at Council meetings and in Recipient or support staff offices.

J. **Zero Tolerance for Disruptive Behavior**
Abusive language, threats, or possession of weapons are strictly prohibited in all Council-related settings.

K. **Consequences for Misconduct**
Repeated violations may result in the Chair refusing to recognize the offending individual for the remainder of the meeting. Serious disruptions may lead to removal and potential administrative or legal action.

L. **Joint Committee Participation**
Members of planning bodies who participate in joint committees are also expected to follow these ground rules.

TRAVEL – Out of Area

Approved by HIVPC: August 28, 2025

I. Purpose

A. To support the participation of HIVPC members in out-of-area conferences, workshops, and other eligible events that directly benefit the Council's work under the Ryan White Part A grant.

II. Scope

A. This policy applies to all HIVPC Members and Alternates.

III. Policy Guidelines

A. **Reimbursement Eligibility**
Only expenses not covered by other funding sources are eligible for reimbursement.

B. **Travel Restrictions**
International travel is not permitted.

C. **Local Mileage**
PWH may receive local mileage reimbursement as outlined in the Council's Reimbursement Policy.

D. **Travel Representation**
The Executive Committee will recommend representatives to attend eligible out-of-area events.

E. **Policy Alignment**
This policy aligns with applicable Federal, State, and Local travel regulations.

F. **Reimbursement Standards**
The Council follows State of Florida reimbursement rules and relevant Broward County policies.

G. **PWH Meal Allowance Exception**
For PWH, meal allowances will be calculated based on the State rate to support full participation and medication adherence.

H. **Disability Accommodations**
Individuals with disabilities (e.g., visual, hearing, or physical impairments) may request caregiver assistance for travel. Caregiver needs must be defined in advance and approved on a case-by-case basis. Reimbursement for caregivers follows State guidelines, with the same meal allowance exception as above.

I. **Traveler Responsibilities**
Travelers must agree to:
    1. Follow the Council Travel Policy and submit all required receipts/documentation.
    2. Actively participate in the event.
    3. Submit a report to the Executive Committee and the full Council.

J. **Reporting**
Reports from attended events will be included in the Executive Committee's report to the full Council.

IV. Criteria for Selecting Representatives

A. Preference is given to members who best represent the Council and the HIV/AIDS community.

B. Qualified PWH (based on interest/expertise from membership forms) are prioritized.

C. Members who have not previously attended out-of-area events are given preference.

V. Procedures

A. **Decision-Making Process**
The process is transparent and publicly documented.

B. **Information Clearinghouse**
Council support staff will collect and distribute information on relevant events.

C. **Event Submission**
Members should submit event details to support staff (ideally 60 days in advance) and indicate interest in attending.

D. **Information Dissemination**
Event details will be shared in the monthly HIVPC meeting mailing.

E. **Recipient Notification**
Upon receiving event details, support staff will notify the Part A Recipient and provide a funding availability statement.

F. **Interest Confirmation**
Members must notify support staff of their interest. A list of interested individuals will be shared with the Executive Committee and the Recipient Office.

G. **Eligibility and Recommendation**
The Executive Committee, with input from the Recipient, will assess event eligibility and recommend representatives based on the established criteria.

H. **Council Approval**
The Executive Committee will present recommended attendees to the full Council for approval.

I. **Travel Arrangements**
Support staff will assist with travel logistics (e.g., hotel, airfare, registration) and prepare the Travel Expense Estimate worksheet.

J. **Post-Travel Requirements**
Within seven business days of returning, travelers must submit all receipts/documentation and schedule a meeting with support staff to prepare their report.

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