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

Membership/Council Development Committee Meeting

Thursday, January 8, 2026 - 9:30 AM
LOCATION: Broward Regional Health Planning Council and via Microsoft Teams

Join the meeting now
https://teams.microsoft.com/l/meetup-join/19%3ameeting_MDU2NzM4MGMtZTRkMy00N2Q2LTkzMjUtNjhiY2I0MTU5YTI2%40thread.v2/0?context=%7b%22Tid%22%3a%220dd42165-bf27-4e00-9f50-1f4dff8a73f8%22%2c%22Oid%22%3a%22df400b73-e09f-4638-a7b6-0750be4ecb25%22%7d

Meeting ID: 293 797 982 727

Passcode: Ra2CV7WH

Chair: Dr. Timothy Morange • Vice Chair: Karen Creary
This meeting is audio and video recorded.

Purpose

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

Quorum for this meeting is 4

DRAFT AGENDA

ORDER OF BUSINESS

1. Call to Order/Establishment of Quorum
2. Welcome from the Chair
   a. Meeting Ground Rules
   b. Statement of Sunshine
   c. Introductions & Abstentions
   d. Moment of Silence
3. Public Comment

4. Approvals

   ACTION: Approval of Agenda for January 8, 2026
   ACTION: Approval of Minutes from October 9, 2025 **(Handout A)**

5. Standard Committee Items
   a. **Action Item:** MCDC Membership Strategy – Review the HIVPC membership strategy and determine the best action to address vacancies. **(Handout B)**
      Work Plan Activity 1.1: Review Council demographics to ensure it reflects the Broward epidemic, including at least 33% of members are unaffiliated PLWHA quarterly.
   b. **Action Item:** Reflectiveness: HIVPC Demographics- Review demographics and identify populations that are over- or underrepresented. **(Handout C)**

      Work Plan Activity 1.2: Review seat status and ensure mandated seats are filled quarterly.

6. Discussion Items
   a. **Action Item:** Review results of Member of the Quarter 3 FY2025-2026 **(Handout D)**
      Work Plan Activity 5.2: Recognize Member of the Quarter quarterly and Member of the Year annually.
   b. **Action Item:** Review and Update Recruitment & Retention Plan Annual **(Handout E)**
      Work Plan Activity 3.1: Review and update Recruitment & Retention Plan annually.
   c. **Action Item:** Review MCDC Work Plan for FY 2026-2027 **(Handout F)**
   d. **Discussion:** Member Recognition Program **(Handout G1, G2, G3)**
7. Old Business:
   a. None.
8. New Business:
   a. **Update:** Results of Annual Membership Drive
      Work Plan Activity 4.1 Hold Membership Drive annually.
      Work Plan Activity 4.2 Collaborate with HIV stakeholders to create engagement opportunities with the HIVPC.
   b. **Update:** Member Correspondence during Quarter 3 of FY 2025-2026 **(Handout H)**
9. Recipient's Report
10. Public Comment
11. Agenda Items for Next Meeting
    a. Next Meeting Date: April 9, 2026, at 9:30 a.m. Location: BRHPC and via Microsoft Teams Videoconference
12. Announcements
13. Adjournment

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

Please complete your meeting evaluation.

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

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

January 2026

Broward HIV Health Services Planning Council Calendar

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change. Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1244/1343. Visit HIV Health Service Planning Council for updates.					
				1  **BRHPC Office Closed**	2	3
4	5	6 System of Care Committee Meeting (SOC) **9:30AM – 11:30AM Location: BRHPC/MS Teams**	7 Oral Health Network **3:00PM-4:15PM**	8 Membership/Council Development Committee Meeting (MCDC) **9:30AM – 11:30AM Location: BRHPC/MS Teams** Medical Provider Network **2:30PM-3:45PM**	9	10
11	12 Quality Management Meeting (QMC) **12:30PM– 2:30PM Location: BRHPC/MS Teams**	13 Behavioral Network **2:00PM-3:15PM**	14	15 Priority Setting and Resource Allocation Committee Meeting **9:30AM – 11:30AM Location: BRHPC/MS Teams** Executive Committee Meeting **12:45PM – 2:45PM Location: BRHPC/MS Teams** Executive Committee Meeting **Election Certification 2:45PM Location: BRHPC/MS Teams**	16	17
18	19  **BRHPC Office Closed**	20	21 Quality Network Meeting (CQM) **9:00AM-10:15AM**	22 HIV Planning Council Meeting **9:30AM – 11:30AM Locations: BRHPC/MS Teams**	23	24
25	26	27 Integrated Planning Workgroup **1:00PM – 4:00PM Location: BRHPC/MS Teams**	28	29	30	31

Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020
Links are active and lead to meetings or Awareness Day Information. **Information is subject to change.**

Meetings in RED are canceled. Meetings in BLUE are for the HIV Planning Council Committees. Meetings in GREEN are for the Provider Network.
Holidays and meetings outside of the HIV Planning Council are in BLACK.

January 2026

Broward HIV Health Services Planning Council Calendar

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

TODOS ESTAN BIENVENIDOS!	ALL ARE WELCOME!	BON VINI!
A menos que se anote de forma diferente en el calendario, todas las reuniones se realizarán en: Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020 Para confirmar información acerca de la reunión de Consejo de Planeación HIV, o confirmar la reserva de servicios especiales tales como: Traducción Inglés a Español o a Criollo (Haitiano), servicios para discapacitados en visión o audición, por favor llame con 48 horas de antelación para que puedan hacerse los arreglos necesarios.	Unless otherwise noted on the calendar, all meetings are held at: Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020 To confirm HIV Planning Council meeting information, or reserve special needs services such as Translation from English to Spanish or Creole, or are hearing or visually impaired, please call 48 hours in advance so that arrangements can be made for you.	Sòf si yo ta ekri yon lòt bagay nan almanak-la, tout rankont-yo ap fét: Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020 Pou konfime enfòmasyon ou resevwa sou rankont Konsèy Planifikasyon HIV-a, oswa pou rezève sèvis pou bezwen Espesyal tankou: Tradiksyon angle an panyòl oswa kreyol; oswa, si ou gen pwoblèm wè oswa tande, rele 48 tè alavans pou yo ka fè aranjman pou ou.

HIVPC Committee Descriptions

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

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

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

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

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

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

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

Handout A

FORT LAUDERDALE/BROWARD EMA
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200 OAKWOOD LANE, SUITE 100, HOLLYWOOD, FL 33020
(954) 561-9681 • FAX (954) 561-9685

Membership/Council Development Committee

Thursday, October 9, 2025 - 9:30 AM
LOCATION: Broward Regional Health Planning Council Meeting via Microsoft Teams
Chair: Dr. Timothy Moragne • Vice-Chair: Vacant
Join the meeting via phone: Meeting ID: 293 797 982 727 Passcode: Ra2CV7WH

This meeting is audio and video recorded.

DRAFT MINUTES

MCDC Members Present: L. Robertson, R. Hadley, K. Creary, O. Davy

Members Absent: T. Moragne, S. McLeod

Ryan White Part A Recipient Staff Present: R. Pena,

Planning Council & CQM Support Staff Present: G. Berkley-Martinez, M. Lacroix, S. Isidore, M. Rosiere

Guests Present: H. Bahi, H. Singh, J. Rodriguez, M. DiMaria

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

   The MCDC Chair called the meeting to order at **9:35 A.M.** The MCDC Chair welcomed all meeting attendees who were present. Attendees were notified that the MCDC meeting is based on Florida's "Government-in-the-Sunshine Law and meeting reporting requirements, including recording minutes. In addition, it was stated that the acknowledgment of HIV status is not required but is subject to public record if it is disclosed. Introductions were made by the MCDC Chair, Committee members, Recipient staff, PCS & CQM staff, and guests by roll call, and a moment of silence was observed.

2. Public Comment

   The Public Comment portion of the meeting is intended to allow the public to express opinions about items on the meeting agenda or to discuss other matters about HIV/AIDS services in Broward County.

   There were no public comments.

3. Meeting Approvals

   The approval of October 9, 2025, Membership/Council Development Committee agenda was moved by L. Roberson. The motion was seconded by O. Davy and passed unanimously.

   The approval of the minutes of the July 10, 2025, meeting was proposed by L. Roberston seconded by O. Davy and approved with no further corrections.

   Motion #1: L. Robertson, on behalf of MCDC, made a motion to approve October 9, 2025, Membership/Council Development Committee agenda. The motion was seconded by O. Davy and adopted unanimously.

   Motion #2: L. Robertson, on behalf of MCDC, made a motion to approve July 10, 2025, Membership/Council Development Committee meeting minutes as presented. The motion

was seconded by O. Davy and adopted unanimously.

4. Standard Committee Item:

   a. Action Item: MCDC Membership Strategy – Review the HIVPC membership strategy and determine the best action to address vacancies.
   Work Plan Activity 1.2: Review seat status to ensure mandated seats are filled.

   M. Lacroix, PCS staff, provided a review of the MCDC Membership Strategy. Following the review, the committee engaged in a brief discussion. The MCDC Vice-Chair, K. Creary, inquired about the requirements for filling the "formerly incarcerated" member seat. PCS clarified that the position is designated for a person living with HIV (PWH) who has been formerly incarcerated. K. Creary shared that she was incarcerated over 30 years ago. PCS staff noted that she may be eligible to fill the seat and will look into the matter further.

   b. Action Item: Reflectiveness: HIVPC Demographics- Review demographics and identify populations that are over or underrepresented.
   Work Plan Objective 1: Ensure HIVPC is representative and reflective.

   M. Lacroix reviewed the Reflectiveness HIVPC Demographics. Following the review, the committee had no further questions or discussion.

5. Discussion Items

   a. **Action Item:** Review results of Member of the Quarter 2 FY2025-2026
   Work Plan Activity 5.2: Recognize Member of the Quarter quarterly and Member of the Year annually.

   M. Lacroix presented the Member of the Quarter for FY2025–2026, Quarter 2. Following the review, Franchesca D'Amore was announced as the recipient of the award. Following this, a motion was made.

   Motion #3: L. Robertson, on behalf of MCDC, moved to approve the FY2025–2026 Quarter 2 Member of the Quarter results, recognizing F. D'Amore as the winner, and to forward the results to the Executive Committee. The motion was seconded by O. Davy and passed unanimously.

   b. **Action Item:** Review Application of Lenny Carroll
   The committee began reviewing Mr. Carroll's application. S. Isidore, PCS staff, noted that Mr. Carroll was referred by C. Williams, a Planning Council member, to join. It was also mentioned that Mr. Carroll has not yet met the three-meeting attendance requirement; therefore, any approval would be preliminary. G. Martinez, PCS staff, explained that personal information was redacted from the version shared with the committee because meeting materials are part of the public record and such information is protected. However, the full application will be submitted to the Board of County Commissioners. Following this, the committee proceeded to make a motion.

   Motion #4: L. Robertson, on behalf of MCDC, moved to approve Mr. Lenny Carroll's application on a preliminary basis. The motion was seconded by O. Davy and carried unanimously.

   c. **Action Item:** Annual Membership Drive (World AIDS Day)

   M. Lacroix opened the discussion on the Annual Membership Drive, a component of the MCDC Work Plan. PCS staff shared that the Part A/EHE Office will host a World AIDS Day Proclamation at the Governmental Center, which will include a tabling opportunity. PCS recommended that MCDC use this event as their membership drive, as it presents an excellent opportunity to recruit new members. Following this, the committee held a brief discussion and proceeded to make a motion.

Motion #5: L. Robertson, on behalf of MCDC, moved to approve utilizing the World AIDS Day Proclamation event at the Governmental Center as MCDC's Annual Membership Drive. The motion was seconded by O. Davy and passed unanimously.

d. **Action Item:** Update Promotional Materials
Work Plan Activity 4.4: Develop recruitment and website materials as needed.

M. Lacroix opened the discussion by noting that the Community Empowerment Committee (CEC) previously reviewed the promotional materials in June. However, MCDC postponed their review in July due to other priority agenda items. S. Isidore added that CEC made several updates, including replacing the 2021 HIVPC video link with QR codes directing to the current HIVPC website, updating statistics, and adding references. Following this, the committee proceeded to make a motion.

Motion #6: R. Hadley, on behalf of MCDC, moved to approve the updated promotional materials previously reviewed by the Community Empowerment Committee (CEC). The motion was seconded by O. Davy and carried unanimously.

6. Old Business:
None.

7. New Business:

a. **Update**: Priority Setting and Resource Allocation and System of Care Committee Listening Tour Session #2 & Evaluation Surveys
Work Plan Activity 3.3: Utilize feedback from CEC, collaborative events, and engagement events to update recruitment and engagement strategies on an ongoing basis.

M. Lacroix presented the evaluation surveys from Listening Tour Session #2. Following the presentation, the committee engaged in a brief discussion. K. Creary asked whether the survey included a question such as, "How can Ryan White do better?" M. Lacroix responded that it did not but stated that this suggestion would be considered for future surveys. G. Martinez added that a comprehensive presentation will be shared at the HIVPC Retreat in February and noted that recommendations will be incorporated into future Needs Assessments and Integrated Plans.

b. **Update:** Community Empowerment Committee "Aging Gracefully" Feedback
Work Plan Activity 3.3: Utilize feedback from CEC, collaborative events, and engagement events to update recruitment and engagement strategies on an ongoing basis.

S. Isidore presented the Aging Gracefully event feedback, providing context for the committee where appropriate. Following the presentation, the MCDC Chair commended the CEC, noting that the event looked excellent.

c. **Update:** Member Correspondence during Quarter 3 of FY 2025-2026

M. Lacroix reminded the committee that the purpose of including correspondence is to maintain transparency and keep members informed of all membership-related documents. These documents are not intended to single anyone out but rather to ensure the committee remains up to date. Following the review, the committee engaged in a brief discussion. K. Creary asked whether the demographics had been updated, and PCS confirmed that the reflectiveness data and strategy reviewed earlier were current and included all recent updates.

8. Recipient's Report

None.

9. Public Comment

The Public Comment portion of the meeting is intended to allow the public to express opinions about items on the meeting agenda or to raise other matters about HIV/AIDS services in Broward County.

There were no public comments.

10. Agenda Items for Next Meeting

- To be determined.
- Next Meeting Date: January 8, 2025, at 9:30 a.m. Location: BRHPC and via Microsoft Teams Videoconference

11. Announcements

- **Voices of the Community: Listening Tour Session #3** – Monday, October 20, 2025, from 4:30 PM to 7:30 PM at Gilda's Club (4850 W. Prospect Road, Fort Lauderdale, FL 33309).
  This session provides clients with an opportunity to share their experiences, concerns, and recommendations related to the Ryan White system. Click here to register!

12. Adjournment

There being no further business, the meeting was adjourned at **10:20AM.**

MCDC Attendance for CY 2025

Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
	Meeting Date	9		13	10			10			9			
1	Robertson, L.	X		X	X			X			X			
2	K. Creary, **V. Chair**	X		A	A			X			X			
3	Moragne, T., **Chair**	X		X	X			X			E			
4	McLeod, S.	X		A	X			X			E			
5	Hadley, R.	N		A	A			X			X			
6	Davy, O.						N	X			X			
Alt.	V. Biggs			X										
	Wilson, I.													R
	V. Foster													Z
	Cutright, A.	X		E	X			X						R
	Quorum = 4	5		4	4			6			4			

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

MCDC Membership Strategy
HIVPC Member Budget

Key Terms

Epidemic – refers to the information in the table above. This is how HIV is distributed throughout Broward County.

Consumers – Council and Committee members who access Ryan White Part A services.

Unaffiliated Consumers – Council and Committee members who access Ryan White Part A services and have no relationship to an agency that provides these services. This means the consumer does not work for a provider agency or otherwise benefits financially from the agency's success.

Mandated Seats – HIVPC positions (seats) required by the Health Resources & Services Administration (HRSA).

Member Distribution	As of 10/08/2025	As of 01/07/2026	Goal
Unaffiliated Consumer	6	9	12
Job-based Seat	14	13	14
NECL Seat**	6	3	9
Total Membership	25	25	35
Unaffiliated Consumers (%)	**24%**	**36%**	**33%**
Alternates	0	0	3

**Job-based seats are those seats filled based on employment*
***NECL is the Non-Elected Community Leader seat and here only represents those members who are not unaffiliated consumers and do not occupy the Job-Based Seats*
Member Roster as of January 7, 2026

MANDATED SEATS FILLED

People Living with HIV and Community

- ✓ Members of Affected Communities
- ✓ Unaffiliated Consumers
- ✓ Non-Elected Community Leader (NECL)
- ✓ Representatives of/or formerly incarcerated PWH

Federal HIV Programs

- ✓ Part B
- ✓ Part C
- ✓ Part D
- ✓ Part F
- HOPWA

Public Health & Health Planning

- ✓ Hospital or Health Care Planning Agency
- ✓ Local Public Health Agency

Health & Social Services Providers

- ✓ Health Care Providers/FQHCs
- ✓ CBO/ASO – Community-based organization or AIDS Service Organization
- ✓ Mental Health
- ✓ Substance Abuse Provider

Broward County Ordinance 12.108.b

- ✓ Board of County Commissioners member

OPEN SEATS:

Job-Based

- State agencies (Medicaid agency)

Unaffiliated Consumers

- Affected Communities (3 additional Unaffiliated RWPA Consumers)
- Alternates (3)

MEMBERS APPOINTED BY BOARD OF COMMISSION

No newly appointed members for the quarter.

Handout C

HIVPC Membership Reflectiveness

HIV Planning Council & Committee Demographics Report

Member Reflectiveness

The Membership/Council Development Committee ensures that the HIVPC represents the HIV epidemic in Broward County. MCDC accomplishes this task by reviewing the Council and Committees' demographics and identifying over and underrepresented populations.

HIV in Broward County and HIVPC Reflectiveness

The following table shows 1) HIV in Broward by Race/Ethnicity and by Sex; and 2) the current demographics of the HIVPC in comparison to the HIV epidemic data.

Race	Population*	Percentage*	HIVPC Membership**	HIVPC Percentage
White, not Hispanic	6,565	30.53%	5	20%
Black, not Hispanic	9,764	45.40%	10	40%
Hispanic	4,655	21.65%	9	36%
Multi-Race (Other)	521	2.42%	1	4%
Total	**21,505**	**100%**	**25**	**100%**
Sex	**Population**	**Percentage**		
Male	16,277	75.69%	19	76%
Female	5,228	24.31%	6	24%
Total	**21,505**	**100%**	**25**	**100%**

**Data Provided by the Florida Department of Health's HIV Surveillance Office as of June 30, 2022.*
***HIVPC membership as of January 7, 2026*

How This Information is Compared to the Epidemic

The Council is compared to the epidemic to determine where representation can be improved.

Key Points for Reflectiveness through January 7, 2026

- *The HIVPC comprises 25 members, including nine unaffiliated consumer members. The percentage of unaffiliated consumers is 36%, above the HRSA-mandated 33%.*
- *Compared to the HIV epidemic demographic, where 45.40% are Black and not Hispanic, the HIVPC is underrepresented at 40%. This is an improvement from 38% during the last quarter, though there is still progress to be made.*
- *The HIVPC almost perfectly represents the epidemic demographic in regard to sex.*

Handout D

Member of the Quarter Vote Results -- Third Quarter FY2025-2026

First Round			Second Round		
Barristentos, Yahaira	1	11.11%			
Mester, Brad	1	11.11%			
Robertson, Lorenzo	4	44.44%	Robertson, Lorenzo	0	0.00%
Schweizer, Mark	3	33.33%	Schweizer, Mark	2	100.00%
	9			2	

Ryan White Part A HIV Health Services Planning Council
Recruitment and Retention Plan
FY2026-2027

PURPOSE

This Recruitment and Retention Plan is designed to ensure that the Broward County HIV Health Services Planning Council has a strong representation of people living with HIV/AIDS (PWHA), vulnerable populations throughout our Eligible Metropolitan Area, experts in the field of HIV Disease, and HRSA-required categories of representation.

POLICY

This Recruitment and Retention Plan shall be reviewed by the Membership/Council Development Committee on an annual basis. All amendments or revisions shall be discussed by the MCDC and approved by the full HIV Planning Council.

REPRESENTATION

The extent to which the planning council includes individuals from the legislatively defined membership categories. The planning council must include at least one member to separately represent each of the designated membership categories (unless no entity from that category exists in the EMA/TGA). ***Consumers*** are Individuals "receiving HIV-related services" from Ryan White Part A providers include PWHA receiving services themselves and the parents and caregivers of minor children who are receiving such services. Consumer representatives count towards the 33 percent PWHA. Consumer representatives must be unaligned (not employed by a Ryan White Part A provider). Consumers who are employed by a Ryan White Part A provider may join the planning council, but they will not be counted toward consumer representation[1].

HRSA- required membership categories:

HRSA-Required Planning Council Membership Categories

- At least 33% are People with HIV/AIDS (PWH) who receive Part A-funded services and are not employed by a Ryan White Part A provider.
- Health-care providers, including federally qualified health centers.
- Community-based organizations serving affected populations and AIDS service organizations.
- Social service providers (including housing and homeless service providers).
- Mental health providers.
- Substance abuse providers.
- Local public health agencies.
- Hospital planning agencies or health-care planning agencies.
- Affected communities, including individuals with HIV or AIDS, members of a federally recognized Indian tribe as represented in the population, individuals

[1] Article IV, Section 13, Subsection I of the HIVPC ByLaws states: "Number of providers on the HIVPC General Body. There shall be a maximum of three members from the same provider agency."

co-infected with hepatitis B or C, and historically underserved groups and subpopulations.

- Non-elected community leaders.
- State Medicaid agency.
- State agency administering the Part B program.
- Ryan White grantees under Part C, Part D, and Part F.
- Grantees under other Federal HIV/AIDS programs (including HOPWA and HIV prevention programs).
- Formerly incarcerated PWH or their representatives.

MANDATED SEAT VACANCIES

The PCS staff will draft letters to leaders of organizations requesting a representative for the vacant HIVPC seat. PCS staff will contact the Ryan White Part A Office for assistance from the Broward County Chief Financial Officer (Mayor's Office).

REFLECTIVENESS

The extent to which the demographics of the planning council's membership look like the epidemic of HIV/AIDS in Broward County.

RECRUITMENT STRATEGY

Recruitment measures use a variety of outreach techniques to identify clients prepared to serve actively on the Planning Council. The MCDC Recruitment and Retention Plan is in line with the FY2026 -2027 HIVPC Marketing Plan, which focuses on achieving the following goals outlined in the table below.

Goal 1 Recruitment: Continue to increase the diversity and representation of council members.

Strategy	Resources	Responsible Parties
1.1. Recruit individuals who are PWH reflective of the epidemic, stakeholders, or affected by HIV or AIDS.	Community events, Agency outreach	Planning Council Members PCS Staff
1.2 Develop a recruitment page on the website, which includes a listing of seats that need to be filled.	Social Media Accounts	PCS Staff Membership/Council Development Committee
1.3 Assess the design and content of existing materials and recruitment efforts and provide recommendations to improve readability, accessibility, and engagement	Annual Review of Marketing Materials	PCS Staff Membership/Council Development Committee Community Empowerment

1.4 Maintain a current recruitment packet that includes: • HIV Statistics. • Membership applications. • Planning Council brochure. • Contact information. • A description of the roles and responsibilities of the Council and its members.	HIVPC Marketing Folder	PCS Staff Membership/Council Development Committee Community Empowerment Committee
1.5 Select Alternate times, venues, or virtual platforms for conducting planning council meetings	PC leadership and PC support staff will work together to create alternate dates, times, and virtual options for conducting PC and PC committee meetings to create opportunities for potential new PC members to attend and participate. Alternative meeting dates and virtual options will be broadly advertised to individuals with HIV who reside in the EMA.	PCS Staff Executive Committee
1.6 Encourage the involvement of PWH who are not planning council members[2].	Incorporate input from people with HIV who are not members, as only a small number of individuals with HIV are appointed members, and they cannot fully represent the entire client community. The HIVPC can more	PCS Staff HIVPC Members

[2] https://targethiv.org/sites/default/files/media/documents/2023-05/RWHAP_Part_A_Manual_2023.pdf

	effectively enhance community and public input and recruitment opportunities. *(See page 30 of the HRSA HAB RWHAP Part A Manual)*	
1.7 Conduct outreach to Case Managers and youth-oriented organizations with an emphasis on recruiting individuals in the 20-30 age range and non-aligned consumer members under 50.	HIVPC Marketing Folder Community Outreach Event Network Meetings	PCS Staff PCS Staff Membership/Council Development Committee Community Empowerment Committee

RETENTION STRATEGY

Retention measures are needed to help members stay engaged and participate fully, such as orientation and training, mentoring, and financial support for the costs of PC participation.

Goal 2: Retention- Increase the engagement of existing and potential planning council members.

Strategy	Resources/Outcomes	Responsible Parties
2.1 Provide a new member orientation.	New Member Orientation Presentation PC Bylaws Part A Manual PC Policy and Procedures New Member Handbook Information on other Ryan White Programs	PCS Staff. Membership/Council Development Committee. Executive Committee.
2.2 On-going member training	PCS Coordination	PCS Staff.

		Membership/Council Development Committee.
2.3 Develop professional development to train volunteers to participate in community events.	PCS Coordination	PCS Staff Membership/Council Development Committee
2.4 Provide membership appreciation.	Certificates or Plaques	PCS Staff Membership/Council Development Committee
2.5 Implement the HIVPC Mentorship Program to increase new members' knowledge of the HIV Planning Council and retain membership, the MCDC Committee will institute a mentoring program that established members may voluntarily participate in.	HIVPC MCDC Mentorship Policies and Procedures The Mentorship Program will: • Help new members feel welcome, learn individual member perspectives, and become comfortable with Planning Council processes and interactions. • Provide strong and informed feedback about the effect of Planning Council actions and decisions on Ryan White clients and people with HIV. • Ensure new members understand the background and context of discussions and actions. • Increase new members' knowledge of HIVPC. • Retain attendance and membership participation in Council meetings.	PCS Staff Membership/Council Development Committee Executive Committee
2.6 Provide financial support to unaffiliated consumers for the cost of PC participation	Documentation from unaffiliated consumers for reimbursement of actual allowable expenses: • Transportation mileage (state	PCS Staff

	mileage rate allowance) • Broward County Transit expenses (Bus Passes) • Taxi Services • Childcare service fees - reasonable costs associated with childcare services	

Goal 3: Increase Community Awareness/Education

Strategy	Resources	Responsible Parties
3.1Increase participation at external events	Community events	Planning Council members
3.2 Ensure meetings are operated under the Sunshine Laws.	County Ordinance	PCS Staff
3.3 Implement a capacity/leadership development for HIVPC members, applicants, and interested parties	PCS Coordination	PCS Staff Membership/Council Development Committee
3.4 Build a strong base for community involvement.	HIVPC flyers, PWH, Planning Council members, and providers. Community events Community Conversations Media Provider agencies HIV Prevention, Care, and Treatment Funders, Community Stakeholders, and other HIV Planning Bodies	Planning Council members PCS Staff
3.5 Increase education and public awareness about available services for consumers in the Broward/Fort Lauderdale EMA.	HIV Planning Council Website and social media Community events Incorporate virtual access for members and guests unable to attend in person.	PCS Staff Planning Council members

End of Document

Membership/Council Development Committee (MCDC) Workplan FY2026-2027

Meeting Time & Frequency: Every second Thursday quarterly (April, July, October, January), from 9:30am to 11:30am
Committee Purpose: The Committee shall solicit, and screen applications based on objective criteria for appointment to the Council to ensure that the demographic requirements of the Council are maintained according to the Ryan White Treatment and Modernization Act and present its recommendations to the full Council. 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.

T =On Target B = Behind Target C = Completed

Activity	Description	Action Steps/Deliverable	Responsible Party	Projected Month	Progress	Notes
Objective 1: Ensure HIVPC is representative and reflective.						
1.1	Review Council demographics to ensure it reflects the Broward epidemic, including at least 33% of members who are unaffiliated PWH quarterly.	1. Review Council demographics at each MCDC meeting, with a focus on ensuring that at least 33% of members are unaffiliated consumers living with HIV (PWHA). 2. Regularly assess Council composition to confirm it reflects the demographics of Broward County's population of people with HIV.	MCDC/PCS Staff	Quarterly.		
1.2	Review seat status and ensure mandated seats are filled quarterly.	Monitor current member affiliations. Actively recruit to fill vacant mandated seats.	MCDC/PCS Staff	Quarterly.		
1.3	Announce vacant positions at each Executive/HIVPC meeting as necessary.	Promote and explore avenues for recruiting new members.	MCDC/PCS Staff	Quarterly.		
Objective 2: Term Limits - Review and Certify Council Members' term limits schedule						
2.1	The MCDC will recommend prospective members to the Council six months before the	1. Certify members whose terms are set to expire and submit their	MCDC/PCS Staff	April 2026		

	conclusion of each three-year term	names to the Executive Committee for review, then submission to the Council. 2. Once approved by the Council, PCS staff will notify the affected members and inform the Intergovernmental Office of each member's decision to either remain on the Council or step down.				
Objective 3: Member selection process and application procedure development.						
3.1	Review and revise HIVPC and Committee applications as needed.	Review HIVPC and Committee applications to ensure that MCDC receives necessary information for its review of applications.	MCDC/PCS Staff	January 2027		
Objective 4: Ensure Compliance with the HIVPC Recruitment and Retention Plan						
4.1	Review and update Recruitment & Retention Plan annually.	Review the previous year's Recruitment & Retention Plan and revise based on outcomes and new initiatives/strategies.	MCDC	January 2027		
4.2	Conduct a quarterly review of the objectives and activities outlined in the MCDC Work Plan.	Complete the tasks outlined in the Recruitment & Retention MCDC Work Plan on a quarterly basis.	MCDC	Quarterly.		
4.3	Utilize feedback from CEC and collaborative events to update recruitment and engagement strategies on an ongoing basis.	Revise recruitment and engagement strategies to ensure MCDC uses its most effective strategies and activities.	MCDC	Ongoing.		
Objective 5: Recruitment & Engagement Efforts.						
5.1	Hold Membership Drive annually.	1. Conduct outreach with provider agencies or other HIV stakeholders via tabling and other engagement activities. 2. Educate HIV stakeholders to create recruitment opportunities for the HIVPC	MCDC/PCS Staff	Annually.		

5.2	Develop recruitment and website materials as needed.	Review and update existing marketing materials for distribution.	MCDC/PCS Staff	Annually		
5.3	Collaborate with other Committees of the HIVPC to participate in activities on an ongoing basis.	Partner with HIVPC committees to participate in outreach activities.	MCDC/PCS Staff	As needed.		
Objective 6: Planning Council Development and Member Retention						
6.1	Conduct Member recognition: Member of the Quarter and Member of the Year.	Develop a system by which to recognize a member for their contributions to the work of the HIVPC.	MCDC/PCS Staff	Quarterly/Annually		
6.2	Conduct orientation to educate newly appointed members on the HIVPC member roles and responsibilities as needed, with the option to include current members.	Train new members on topics including attendance policies, sunshine laws, grievance policies, service descriptions, mentor program, reimbursement policies, etc.	PCS Staff	As needed.		
6.3	Offer mentorship program as necessary on an ongoing basis.	Implement a mentorship program to assist new members in the onboarding process of joining HIVPC and/or Committees. This program should be in accordance with Sunshine Law.	MCDC	Ongoing.		

Handout G1
Option A

HIVPC Member Recognition Program

Purpose: The purpose of the HIVPC Member Recognition Program is to recognize members and increase retention among those who have exceptionally served the HIVPC by exemplifying outstanding service through their work and exhibiting a positive and supportive attitude.

Criteria: The voters and candidates must be HIVPC members. Any member of the Planning Council or one its committees is eligible to be a candidate for the Quarterly Elections. The winners of the Quarterly Elections for that fiscal year will be the candidates for the Annual Election. Voters should keep in mind the judging criteria and vote accordingly. Members selected as **Member of the Quarter/Year** are not eligible in the following fiscal year's voting cycle, allowing other members the opportunity for recognition.
(Note: This update was approved by the Executive Committee on 06.18.2025 with the following motion: Motion #11: On behalf of the Executive Committee, B. Barnes moved that individuals who were selected as Member of the Quarter in the previous fiscal year be ineligible for selection in the following fiscal year. Past recipients will become eligible again after one full fiscal year has passed. The motion was seconded by S. Tinsley and approved unanimously).

Attitude and Commitment

- Professional demeanor
- Conscientious, honest, hard-working
- Growth (knowledge of HIVPC workings, mentorship Buddy system)
- Serves as a role model to others.
- Length of Service
- Leadership History
- Significant Impact (shining star)

Communication

- Displays a helpful, cooperative, and positive attitude toward co-members.
- Consistently friendly and available to others
- Uses effective listening skills.
- Has a team player attitude?

Dedication

- Dedicated to fulfilling member responsibilities.
- Committee activities (number of committees involved)
- Consistently dependable and punctual in reporting to meetings
- Active involvement in committees, fund-raisers, fairs, trainings, and other activities
- Goes above and beyond the requirements of being a member.

Nominations Process (Revised & Approved by MCDC XX/XX/XXXX)

- Members will vote for which candidates best fit the criteria listed in this document. ~~Members will have to rank the top three candidates they prefer.~~ Members will choose their top candidate.
- PCS staff will calculate the votes to determine the winner through ~~ranked choice voting system~~ majority rules voting system.
- ~~If approved by MCDC, the results will then be sent the Executive Committee for final approval.~~ The results will be certified by the MCDC committee.
- MCDC will notify the Executive Committee that the voting process has been completed and a winner has been selected.
- The winner of Member of the Quarter/Year will be presented at the following HIVPC General Body meeting.

HIVPC Member Recognition Program

- There will be three quarterly elections and one annual election. The winners of the quarterly elections will be the candidates for the annual election.
- If MCDC does not meet following an election, the initial approval will be postponed until the next MCDC meeting.
- If HIVPC does not meet following an election, the final approval will be postponed until the next HIVPC meeting.

Recognition will include:

- Certificate (quarterly) and Plaque (annual)
- Photo and biography on the HIVPC website and Quarterly Newsletter (if desired)
- Announcement at HIVPC General Body meeting

Member Recognition Election Timeline		
April	**April**	**April**
PCS staff distributes the election link via Alchemer by email for **Member of the Year** two weeks prior to scheduled MCDC meeting.	MCDC certifies the **Member of the Year** results and notifies the Executive Committee that the process is complete.	MCDC Chair and HIVPC Chair present the **Member of the Year** award to the recipient at the HIVPC General Body Meeting.
July	**July**	**July**
PCS staff distributes the election link via Alchemer by email for **Member of the Quarter 1** (March 1 – May 31st) two weeks prior to scheduled MCDC meeting	MCDC certifies the **Member of Quarter (Q1)** results and notifies the Executive Committee that the process is complete.	MCDC Chair and HIVPC Chair present the **Member of Quarter (Q1)** award to the recipient at the HIVPC General Body Meeting.
October	**October**	**October**
PCS staff distributes the election link via Alchemer by email for **Member of the Quarter 2** (June 1 – August 31st) two weeks prior to scheduled MCDC meeting	MCDC certifies the **Member of Quarter (Q2)** results and notifies the Executive Committee that the process is complete.	MCDC Chair and HIVPC Chair present the **Member of Quarter (Q2)** award to the recipient at the HIVPC General Body Meeting.
January	**January**	**January**
PCS staff distributes the election link via Alchemer by email for **Member of the Quarter 3** (September 1 – November 30) two weeks prior to scheduled MCDC meeting	MCDC certifies the **Member of Quarter (Q3)** results and notifies the Executive Committee that the process is complete.	MCDC Chair and HIVPC Chair present the **Member of Quarter (Q3)** award to the recipient at the HIVPC General Body Meeting.

Handout G2
Option B

HIVPC Member Recognition Program

Purpose: The purpose of the HIVPC Member Recognition Program is to recognize members and increase retention among those who have exceptionally served the HIVPC by exemplifying outstanding service through their work and exhibiting a positive and supportive attitude.

Criteria: The voters and candidates must be HIVPC members. Any member of the Planning Council or one its committees is eligible to be a candidate for **Member of the Year**. Members selected as **Member of the Year** are not eligible in the following fiscal year's voting cycle, allowing other members the opportunity for recognition. *(Note: This update was approved by the Executive Committee on 06.18.2025 with the following motion: Motion #11: On behalf of the Executive Committee, B. Barnes moved that individuals who were selected as Member of the Quarter in the previous fiscal year be ineligible for selection in the following fiscal year. Past recipients will become eligible again after one full fiscal year has passed. The motion was seconded by S. Tinsley and approved unanimously).*

Attitude and Commitment

- Professional demeanor
- Conscientious, honest, hard-working
- Growth (knowledge of HIVPC workings, mentorship Buddy system)
- Serves as a role model to others.
- Length of Service
- Leadership History
- Significant Impact (shining star)

Communication

- Displays a helpful, cooperative, and positive attitude toward co-members.
- Consistently friendly and available to others
- Uses effective listening skills.
- Has a team player attitude?

Dedication

- Dedicated to fulfilling member responsibilities.
- Committee activities (number of committees involved)
- Consistently dependable and punctual in reporting to meetings
- Active involvement in committees, fund-raisers, fairs, trainings, and other activities
- Goes above and beyond the requirements of being a member.

Nominations Process (Revised & Approved by MCDC XX/XX/XXXX)

- Members will vote for which candidates best fit the criteria listed in this document. ~~Members will have to rank the top three candidates they prefer.~~ Members will choose their top candidate.
- PCS staff will calculate the votes to determine the winner through ~~ranked choice voting system~~ majority rules voting system.
- ~~If approved by MCDC, the results will then be sent the Executive Committee for final approval.~~ The results will be certified by the MCDC committee.
- MCDC will notify the Executive Committee that the voting process has been completed and a winner has been selected.
- The winner of **Member of the Year** will be presented at the following HIVPC General Body meeting.
- ~~There will be three quarterly elections and one annual election. The winners of the quarterly elections will be the candidates for the annual election.~~
- If MCDC does not meet following an election, the initial approval will be postponed until the next MCDC meeting.
- If HIVPC does not meet following an election, the final approval will be postponed until the next HIVPC meeting.

Recognition will include:

- ~~Certificate (quarterly) and~~ Plaque (annual)
- Photo and biography on the HIVPC website and Quarterly Newsletter (if desired)

Revised January 2026

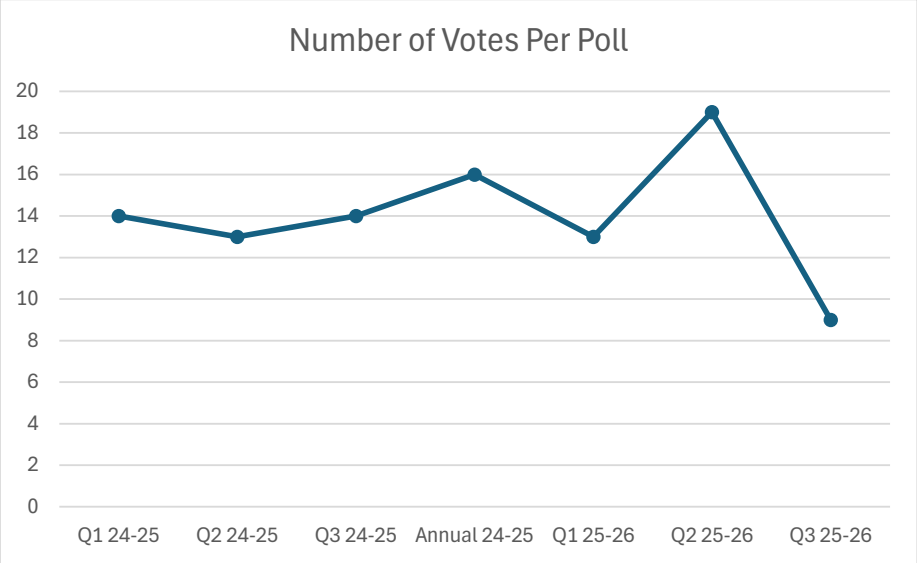
HIVPC Member Recognition Program

- Announcement at HIVPC General Body meeting

Member of the Year Recognition Election Timeline		
April	**April**	**April**
PCS staff distributes the election link via Alchemer by email for **Member of the Year** two weeks prior to scheduled MCDC meeting.	MCDC certifies the **Member of the Year** results and notifies the Executive Committee that the process is complete.	MCDC Chair and HIVPC Chair present the **Member of the Year** award to the recipient at the HIVPC General Body Meeting.

Member Recognition Program Voting Participation

Quarter	# of Votes
Q1 24-25	14
Q2 24-25	13
Q3 24-25	14
Annual 24-25	16
Q1 25-26	13
Q2 25-26	19
Q3 25-26	9



Handout H

BROWARD COUNTY FLORIDA

OFFICE OF INTERGOVERNMENTAL AFFAIRS

100 S. Andrews Avenue, 8th Floor • Fort Lauderdale, Florida 33301 • 954-357-7575

October 08, 2025

Elizabeth Davis

[redacted]

Dear Ms. Davis:

We have been notified of your resignation from the HIV Health Services Planning Council. On behalf of the Broward County Board of County Commissioners, please accept my sincere appreciation for the time and effort you have given to improve the quality of life in Broward County by serving on this board.

The entire Board of County Commissioners thanks you for your service and looks forward to your continued participation in our community. A Certificate of Appreciation will be sent to you, under separate cover.

Sincerely,

Naomie Labaty
Boards Administrator

C: C. Marty Cassini, Director, Office of Intergovernmental Affairs
Rosiere Michele, Board Coordinator, HIV Health Services Planning Council

Outlook

Fw: Jonathan Rogers

From HIVPC <hivpc@BRHPC.ORG>
Date Tue 12/30/2025 4:49 PM
To Gritell Martinez

From: Rachel Williams <RadWilliams@fortlauderdale.gov>
Sent: Tuesday, December 30, 2025 4:48 PM
To: Rachel Williams
Cc: Olivette Carter ; Jason Adams
Subject: Jonathan Rogers

Dear Providers and Stakeholders,

This email is formal notification that Jonathan Rogers is no longer an employee of the City of Fort Lauderdale.

Effectively immediately, please direct all communications to Rachel Williams, Jason Adams, and Olivette Carter .

The contact information for each person is as follows:

Jason Adams
Email:
Phone:

Olivette Carter
Email:
Phone:

Rachel Williams
Email:
Phone:

Thank you for your patience and understanding as we move through the transition process.

Sincerely,

Outlook

Commissioner Appointments - HIVPC

From Labaty, Naomie <NLABATY@broward.org>
Date Wed 12/10/2025 10:45 AM
To HIVPC <hivpc@BRHPC.ORG>
Cc Cassini, C. Marty ; St Preux, Kilishi ; Boards <boards@broward.org>

Good morning,
This is to inform you that Commissioner Hazelle Rogers was appointed to the HIV Health Planning Council.
If you need anything further, please let me know.
Thank you and have a lovely day.

Naomie Labaty
Intergovernmental Affairs/Boards Section
Boards Administrator
100 South Andrews Avenue
Main Library, 8th Floor
Fort Lauderdale, FL 33301
(954) 357-5934 (office)

HIV HEALTH SERVICES PLANNING COUNCIL MEETING GROUND RULES

1. The Council, its members, and the public recognize and respect the committee process adopted by this Council. The Council, its members, and the public recognize that full discussion and analysis of issues occurs at the committee level rather than at Council meetings.

2. Before a member can make a motion or speak in debate, the member must be recognized by the Chair as having the exclusive right to be heard at that time.

3. All speakers are expected to address the Council in a respectful manner to respect time limits, to speak briefly and to the point, and to stay on agenda. All other persons in attendance should not interrupt the speaker who is recognized by the Chair as having the floor.

4. If the member who made the motion claims the floor and has not already spoken on the question, that member is entitled to be recognized in preference to other members.

5. No person is entitled to the floor a second time in debate on the same item as long as any other person who desires the floor has not spoken on the item.

6. Speakers should restrict comments and debate to the pending question or motion. Speakers must address their remarks to the Chair and maintain a courteous tone. The Chair may impose time limits on debate or discussion to ensure efficient conduct of Council business.

7. Members should not name service providers and/or persons during any discussion unless the service provider or person is identified in the subject of the motion or agenda item. Specific concerns regarding service providers should be directed towards the Grantee, outside of the meeting.

8. Members of the public may only address the Council upon recognition by the Chair. They are subject to the same rules of conduct expected of Council members.

9. No alcohol or drug use (unless prescribed by a licensed physician), is permitted at Council meetings, grantee or support staff offices.

10. No abusive language, threats of violence, or possession of weapons are permitted in Council meetings, grantee or staff offices.

11. Repeated violation of these meeting rules may result in no further recognition of the offending member or attendee by the Chair at that meeting. Any serious breach of conduct which disrupts the Council's meeting may subject the offender to removal from the meeting, administrative or legal process.

Revised 7/24/14

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

1. Los miembros deberán aceptar y respetar el proceso de comité adoptado por este Consejo. Las discusiones y el análisis en pleno de los temas tendrán lugar a nivel de comité y no en las reuniones plenarias del Consejo.

2. Antes de que un miembro pueda iniciar una moción o de que una persona pueda hablar en un debate, el Presidente de la reunión deberá reconocer que él o ella tienen el derecho exclusivo de hablar en ese momento dado.

3. Se espera que todos los ponentes se dirijan al Consejo de una manera respetuosa, que no se interrumpa al ponente con derecho al habla en el momento, que cuando se hable se haga de forma clara y concisa, y que se mantenga la agenda.

4. Si el miembro que inicia una moción no ha hablado todavía y reclama su derecho a hablar sobre un asunto, él/ella tendrán el derecho a que con preferencia se les reconozca.

5. Nadie tendrá derecho a reclamar el habla por una segunda vez, en un debate sobre el mismo tema, cuando otra persona que no ha hablado todavía, desea hacerlo.

6. Los debates deben ceñirse a los asuntos o mociones que estén pendientes. Al hablar, los ponentes deben referirse al Presidente, y mantener un tono cortés.

7. Los miembros del público solo podrán dirigirse al Consejo cuando hayan sido reconocidos por el Presidente de la reunión. Estarán sujetos a las mismas reglas de conducta que se esperan de los miembros del Consejo. Se establecerán límites de tiempo según sea necesario para garantizar que los asuntos del Consejo cursen de manera eficiente.

8. Miembros del público sólo podrán dirigir el Consejo a partir del reconocimiento por el Presidente. Están sujetos a las mismas reglas de conducta que se espera de los miembros del Consejo.

9. No estará permitido el uso de bebidas alcohólicas o de drogas en las reuniones del Consejo y tampoco en las oficinas del personal de soporte y donatarios.

10. No está permitido el uso de lenguaje abusivo, amenazas de violencia y posesión de armas en las reuniones del Consejo ni en las oficinas del personal de soporte y donatarios.

11. La repetida violación de estas reglas básicas dará como resultado que el Presidente de la reunión deje de reconocer al derecho a participación del ofensor o miembro de la audiencia. Cualquier violación de conducta grave, que perturbe la reunión de Consejo, terminará en la remoción del ofensor, de la reunión.

KONSÈY PLANIFIKASYON SÈVIS SANTE POU HIV RÈGLEMAN RANKONT-YO

1. Manm-yo dwe rekonèt epi respekte pwosesis komite-a ke Konsèy-la adopte. Diskisyon ak analiz total pwoblèm-yo fèt nan nivo komite-a; li pa fèt pandan rankont tout Konsèy-la.

2. Anvan yon manm ka fè yon pwopozisyon oswa nenpòt ki moun gen dwa pale pandan yon deba, fòk Prezidan Komite-a bali dwa esklizif pou fè moun tande-li nan moman sa-a.

3. Yo atann-yo aske tout moun k'ap pale ak Konsèy-la fè-li avèk respè, pou pèsonn pa koupe moun ke Konsèy-la bay dwa pale lapawòl, pou moun k'ap pale-a respekte kantite tan yo ba-li pou pale-a, pou li di sa l'ap di-a rapidman epi avèk presizyon, epi pou li respekte ajanda-a.

4. Si manm ki fè pwopozisyon-an mande pou li pale epi si li poko pale sou keksyon-an deja, li gen priyorite sou lòt manm-yo.

5. Pèsonn moun pa gen dwa pran lapawòl de fwa sou yon menm sijè si gen lòt moun ki poko pale epi ki vle esprime tèt-yo.

6. Deba-a dwe rete sou keksyon oswa pwopozisyon k'ap fèt-la. Moun k'ap pale-a dwe adrese sa l'ap di-a bay Prezidan Komite-a epi pale sou yon ton ki make ak respè.

7. Manm piblik-la dwe pale ak Konsèy-la sèlman si Prezidan Konsèy-la bay-yo lapawòl. Yo dwe respektè menm règleman kondwit avèk manm Konsèy-yo. Lè sa nesesè pou zafè Konsèy-la byen mache, yo gen dwa bay-yo yon limit tan pou yo pale.

8. Manm nan piblik la sèlman pou adrese a konsèy sou rekonèsans sou chèz la. Yo ka tonbe anba menm lòd de kondwit ki te espere nan manm konsèy yo.

9. Itilizasyon alkòl ak dwòg (sòf si se yon doktè lisansye ki preskri-li), entèdi nan rankont Konsèy-la oswa nan biwo estaf sipò-a oswa Resevè-a.

10. Vye langaj, menas vyolans, oswa posesyon zam entèdi nan rankont Konsèy-la oswa nan biwo estaf-la oswa Resevè-a.

11. Vyolasyon repete règleman rankont-yo ap lakòz yon manm oswa lòt moun k'ap asiste rankont-lan pa kapab patisipe ankò. Nenpòt ki move kondwit serye ki twouble rankont-la ap lakòz yo mete moun-nan deyò.

Acronym List

ACA: The Patient Protection and Affordable Care Act

ADAP: AIDS Drugs Assistance Program

Administration HUD: U.S Department of Housing and Urban Development

IW: Integrated Workgroup

AETC: AIDS Education and Training Center

AHF: AIDS Health Care Foundation

AIDS: Acquired Immuno-Deficiency Syndrome

ART: Antiretroviral Therapy

ARV: Antiretrovirals

BARC: Broward Addiction Recovery Center

BCFHC: Broward Community and Family Health Centers

BH: Behavioral Health

BRHPC: Broward Regional Health Planning Council, Inc.

CBO: Community-Based Organization

CDC: Centers for Disease Control and Prevention

CDTC: Children's Diagnostic and Treatment Center

CEC: Community Empowerment Committee

CIED: Client Intake and Eligibility Determination

CLD: Client Level Data

CQI: Continuous Quality Improvement

CQM: Clinical Quality Management

CTS: Counseling and Testing Site

eHARS: Electronic HIV/AIDS Reporting System

EIIHA: Early Intervention of Individuals Living with HIV/AIDS

EFA: Emergency Financial Assistance

EMA: Eligible Metropolitan Area

FDOH: Florida Department of Health

FPL: Federal Poverty Level

FQHC: Federally Qualified Health Center

HAB: HIV/AIDS Bureau

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

HICP: Health Insurance Continuation Program

HIV: Human Immunodeficiency Virus

HIV HSSS: HIV Human Services Software System

HIVPC: Broward County HIV Health Services Planning Council

HOPWA: Housing Opportunities for People with AIDS

HRSA: Health Resources Services Administration

IDU: Intravenous Drug User

JLP: Jail Linkage Program

LPAP: Local AIDS Pharmaceutical Assistance Program

MAI: Minority AIDS Initiative

MCDC: Membership/Council Development Committee

MCM: Medical Case Management

MH: Mental Health

MNT: Medical Nutrition Therapy

MOU: Memorandum of Understanding

NBHD: North Broward Hospital District (Broward Health)

NGA: Notice of Grant Award

NHAS: National HIV/AIDS Strategy

NMCM: Non-Medical Case Management

NOFO: Notice of Funding Opportunity

nPEP: Non-Occupational Post Exposure Prophylaxis

NSU: Nova Southeastern University

nPEP: Non-occupational Post-Exposure Prophylaxis

OAHS: Outpatient Ambulatory Health Services

OHC: Oral Health Care

PCN: Policy Clarification Notic

PE: Provide Enterprise

PLWH: People Living with HIV

PLWHA: People Living with HIV/AIDS

PrEP: Pre-Exposure Prophylaxis

PRISM: Patient Reporting Investigating Surveillance System

PROACT: Participate, Retain, Observe, Adhere, Communicate and Teamwork is DOH- Broward's treatment adherence program.

PSRA: Priority Setting & Resource Allocations

QI: Quality Improvement

QIP: Quality Improvement Project

QM: Quality Management

QMC: Quality Management Committee

RSR: Ryan White Services Report

RWHAP: Ryan White HIV/AIDS Program

RWPA: Ryan White Part A

SBHD: South Broward Hospital District (Memorial Healthcare System)

SCHIP: State Children's Health Insurance Program

SDM: Service Delivery Model

SOC: System of Care

SPNS: Special Projects of National Significance

STD/STI: Sexually Transmitted Diseases or Infection

TA: Technical Assistance

TB: Tuberculosis

TGA: Transitional Grant Area

VA: United States Department of Veteran Affairs

VL: Viral Load

VLS: Viral Load Suppression

WICY: Women, Infants, Children, and Youth

Frequently Used Terms

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

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

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

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

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

Health Insurance Premium Assistance Program

ACA Insurance Open Enrollment

November 1st – December 15th

for Coverage beginning 1/1

December 16th – January 15th

for Coverage beginning 2/1

Step #1: Enroll In an APPROVED Health Insurance Plan (required)

For assistance with enrolling in Insurance: call 1-844-441-4422 or visit: https://enroll.brhpc.org

Step #2: Enroll In Premium Assistance @ Enroll.BRHPC.org (required)

- Clients MUST directly enroll in the premium assistance program every year at https://enroll.brhpc.org or by calling 1-844-441-4422. Anyone who has not directly enrolled in the program will be disenrolled for 2026 and NO future payments will be made.
- If you are enrolled in BlueOptions Platinum (24J01-05, -08, or -21S) or Silver (24J01-03 or -19S), you MUST choose a NEW PLAN for 2026 to continue receiving premium assistance.

Step #3: Use *CVS Copay Card When You Fill A Prescription (required)*

For medication copayment assistance, the call Pharmacy Help Desk at 1-800-364-6331

Step #4: *Recertify Eligibility Annually & Don't Let It Expire (required)*

If your eligibility expires, your premium payments will no longer be made by the program.
For State of Florida Drug Assistance Program eligibility assistance, call 1-844-381-2327.

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For premium assistance program enrollment or payment questions, contact: Broward Regional Health Planning Council or our enrollment partner, American Exchange at **1-844-441-4422.**