Palm Beach County

HIV CARE Council

CARE Council Policy



Revised 05/23/2022

Council Policy



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Amended: February 23, 2015

Issue: CARE Council Member Leave of Absence

Any member of the CARE Council may request a Leave of Absence due to medical reasons, for up to three (3) consecutive months in duration in a twelve-month period. The member must submit the request in writing and include a date of anticipated return.

The request must be voted upon and approved by the CARE Council, with the date of anticipated return recorded in the minutes of the meeting.

Upon three (3) consecutive months of absences in a twelve-month period, the member may request one (1) additional month. This request must be approved by the CARE Council. In the event the member is not able to return after a total of four (4) months of absences, he or she will be asked to discuss continued membership. Decisions will be made in accordance with the *Bylaws* and applicable *Policies and Procedures*.

Those on Leave of Absence shall not be included in the total membership count for purposes of determining a quorum.

A CARE Council member granted a Leave of Absence shall be considered to be on Leave of Absence from all committees on which they are a member.

Resignation from the CARE Council shall not preclude an individual from future application for membership or current participation on a committee.

CARE Council Policy

Policy Number: 2

Amended: **June 25, 2018**

Issue: Request for Excused Absences from CARE Council Meetings

This policy determines the process for requesting excused absences from CARE Council meetings. The policy does not apply to committee meetings.

It is the member's responsibility to request from CARE Council staff that an absence be excused.

A written request is the preferred method of notification; however, a telephone request is permissible. Advanced notice of an absence from a CARE Council meeting is preferred if practical.

All requests for excused absences will be in accordance with the CARE Council Bylaws and Palm Beach County Board of County Commissioners Resolution R-2002-1606 and per special exception approved in February 2003 pertinent to the CARE Council. No other reason will be considered by the CARE Council as an excused absence.

The only acceptable reason for an excused absence is a medical reason.

A member should be prepared to make a request for an excused absence at the next regularly scheduled CARE Council meeting unless the request has been previously given to the appropriate staff.

Failure to request excused absences within two (2) regularly scheduled meetings of the CARE Council shall result in the absences being classified as unexcused. In special circumstances, the member may request reconsideration by application to the Membership Committee, which will make a recommendation to the CARE Council.

This policy, in no case, shall conflict with the CARE Council Bylaws or related Policies and Procedures.

Approved 04/30/01; Amended 01/26/04, 02/23/15.

3

Amended:

June 25, 2018

Issue:

Committee Member

It is a policy of the CARE Council that a "Committee Member" shall be defined as: Any interested individual, whether or not a member of the CARE Council who meets the following criteria, may qualify for membership on a committee:

Membership Request by Individual:

- Announce your intention to become a member and be voted in by the committee.
- Priorities and Allocations Committee membership is also subject to Policy 21, hereinafter.
- Membership on the Membership Committee shall be limited to full CARE Council members

Membership Request by CARE Council:

 CARE Council members and Affiliate members may be asked to serve by the Committee Chair or the Chair of the CARE Council:

Membership is determined by:

- Approval through committee vote; or
- Appointment by the CARE Council Chair or Committee Chair with ratification by the committee.

CARE Council Policy

Policy Number: 4

Amended: November 27, 2017

Issue: Committee Attendance and Participation

This policy applies to all Standing, Program Support, and Ad hoc Committees unless exception is made in another policy of the CARE Council.

It is the policy of the CARE Council to recognize each seat on a committee as an important and meaningful position of public trust. In order to fully support the commitment of individual members of committees, the following activities will be employed to support member participation.

Feedback to individual members about how their active participation benefits the CARE Council is a responsibility of each Committee Chair. In order to support active members and a fully functioning Committee, the committee may evaluate the following member activities:

- Participation at committee meetings, attendance at committee meetings, special events and workshop
- Attendance at meetings in compliance with applicable policy
- Making a vote on CARE Council and committee issues
- Completing agreed tasks
- Sharing of skills, time, and other resources appropriate to the committee or CARE Council

Attendance and participation at committee meetings is the responsibility of the committee member. Upon accumulation of three (3) consecutive excused absences or any excused absences from more than fifty percent (50%) of committee meetings during the calendar year, inclusive of the month of the last absence, members will be asked to discuss their future committee participation with the committee. The committee will vote for removal or continued membership on the committee. If the committee member is not available to discuss the issue with the committee, the committee may proceed to vote for removal or continued membership.

Attendance and participation records are maintained for each committee member to assist in providing appropriate support to ensure members maintain necessary levels of participation.

Approved 04/30/01; Amended 02/25/02.

October 26, 2015

Amended:

Issue: **CARE Council Quorum Requirements**

It is the policy of the CARE Council that a quorum for CARE Council meetings be defined as follows:

- Unless otherwise herein accepted, a quorum shall consist of twenty fivepercent(25%) of CARE Council members.
- At least one HIV positive CARE Council member must be present at any meeting of the CARE Council.
- A majority of those CARE Council members present and voting at any quorum meeting shall be sufficient to enable taking action.

Total membership count shall consist of members in good standing, excluding those on officially sanctioned Leave of Absence.

Palm Beach County HIV CARE Council CARE Council Policy

Approved 04/30/01, Amended 02/23/15. Amended 04/23/2021

:

Policy Number 6

Amended: November 27, 2017

Issue: Standing Committee Quorum Requirements

The CARE Council's Standing Committees, in accordance with the Bylaws, include the Executive Committee, Planning Committee, Priorities and Allocations Committee, Membership Committee, Community Awareness Committee, Local Pharmaceutical Assistance Program Committee, Quality Management and Evaluation Committee and LGBTQ Health Equity Committee.

It is the policy of the CARE Council that a quorum for each Standing Committee be defined as follows:

Executive

The CARE Council Chair or Vice Chair and three other CARE Council members. One of those committee members present shall be a person living with HIV (PLWH)

Planning

The Committee Chair or Vice Chair and two other Committee members. One of those committee members present shall be a person living with HIV (PLWH)

Priorities and Allocations

The Committee Chair or Vice Chair and two other Committee members. One of those committee members present shall be a person living with HIV (PLWH).

Membership

The Committee Chair or Vice Chair and two other Committee members. One of those committee members present shall be a person living withHIV (PLWH).

CARE Council Policy

: Community Awareness Committee

The Committee Chair or Vice Chair and two other Committee members.

One of those committee members present shall be a person living with HIV (PLWH).

Local Pharmaceutical Assistance Program Committee

The Committee Chair or Vice Chair and two other Committee members. One of those committee members present shall be a person living with HIV (PLWH).

Quality Management and Evaluation Committee

The Committee Chair or Vice Chair and two other Committee members. One of those committee members present shall be a person living with HIV (PLWH).

LGBTQ Health Equity Committee

The Committee Chair or Vice Chair and two other Committee members. One of those committee members present shall be HIV positive.(PLWH)

CARE Council Policy

Policy Number: 7

Amended: February 23, 2014

Issue: Ad hoc Committee Quorum Requirements

It is the policy of the CARE Council that a quorum for any Ad hoc Committee shall be defined as the Committee Chair or Vice Chair and two other Committee members' one of those committee members present shall be HIV positive. (PLWH)

Deleted: November 27, 2017

Issue: Program Support Committee Quorum Requirements

It is the policy of the CARE Council that a quorum for any Program Support Committee shall be defined as the Committee Chair or Vice Chair and two other Committeemembers. One of those committee members present should be HIV positive.

CARE Council Policy

Policy Number: 9

Approved: April 30, 2001

Issue: Grievance Policy

Purpose

The purpose of this policy is to provide a mechanism for individuals and or organizations to bring forth grievances relative to the allocation or prioritization of HIV and AIDS medical and support services provided in Palm Beach County, Florida under Part A of the Ryan White Act.

Authority

This policy is required by the Ryan White CARE Act Amendments of 1996, Public Law 104-146, as amended, hereinafter referred to as the Ryan White Act.

Section A: Persons Eligible to File a Grievance

Only individuals or entities directly affected by the outcome of a decision related to the prioritization or allocating of funding under Part A of the Ryan White Act may file a grievance under this policy. Such individuals include, but are not limited to, providers eligible to receive Ryan White Part A funding and consumer groups, persons living with HIV or AIDS (PLWH/A) coalitions or caucuses.

Section B: Actions Which May Be Grieved

These procedures relate to the process of establishing priorities of service categories and allocating funds to those categories and any subsequent process to change the priorities and allocations. Persons wishing to file a grievance relating to the process of selecting contractors, making awards, and any subsequent process to change contractors or awards must follow the grievance procedures established by the Palm Beach County Board of County Commissioners.

At least one of the following basic criteria must be the form and basis of the grievance which is being filed:

- 1. Alleged deviations from the established, written priority setting or resource setting process (such as failure to follow established conflict-of-interest rules).
- 2. Alleged deviations from an established, written process for any subsequent changes to priorities or allocations.

 Inconsistency with the findings of the locally published Needs Assessment or Comprehensive Plan for HIV/AIDS Services in Palm Beach County, Florida. Grievances filed merely on the basis of dissatisfaction with the outcome of the prioritization or allocation process will not be accepted unless one of the above deviations is alleged.

Section C: Internal Non-Binding Procedures

The grievance must be filed with the CARE Council within five (5) working days¹ of the date of action by the Planning Council which is being grieved. Grievances must be filed on the form entitled "Palm Beach County HIV CARE Council Grievance Form", a copy of which is attached hereto as Exhibit "A". All grievances will initially be handled through the internal non-binding grievance process.

The CARE Council Chair will review the grievance within five (5) working days of filing to determine if the basis for a grievance exists. If such a determination is made, the Chair will appoint a grievance committee within three (3) working days of a determination to initiate the non-binding process.

The non-binding process will be handled by the grievance committee appointed by the Council Chair. A hearing will be scheduled before the committee within five (5) working days of appointment. The committee shall have five (5) working days to render a decision on the grievance and notify the parties. The grievant shall have five (5) workingdays from receipt of the final decision of the grievance committee to make a request for third party mediation.

Section D: Third Party Mediation

If a grievant does not accept the decision of the grievance committee, the grievant may request that the grievance be submitted to a third party mediator. A request for third party mediation shall be made within five (5) working days from receipt of the final decision of the grievance committee as described in section C above. A request for third party mediation shall be filed with the CARE Council on a "Request for Third Party Mediation" form, a copy of which is attached as Exhibit "B".

Upon receipt of a request for third party mediation, the HIV CARE Council Chair will establish a date and time within twenty-one (21) working days of receipt of the request for mediation through the Palm Beach County Alternative Dispute Resolution Office. The Chair shall inform the grievant within five (5) working days of receipt of the request for third party mediation as to the date, time, and location of the requested mediation hearing. The grievant must agree that all mediation will be handled through the Palm Beach County Alternative Dispute Resolution Office and must agree to pay at the timeof mediation one-half of the cost of all mediation which extends beyond two billable hours. The CARE Council shall be responsible for the other half of the cost of

¹ Working days excluding holidays and weekends.

Mediation. Mediators will be selected by mutual consent of the parties, from a list of certified mediators maintained by the Alternative Dispute Resolution Office. A copy of the current list will be made available to the parties within five (5) working days of the request for mediation. Mediators will only seek to resolve the dispute between the parties, but will not make any findings. Grievant must agree that a maximum of eight (8) hours shall be expended in attempting to resolve the dispute through the third party mediator.

Confidential information disclosed to a mediator by the parties or witnesses in the course of the mediation shall not be divulged by the mediator. All records, reports, or other documents received by a mediator while serving in that capacity shall be confidential. The mediator shall not be compelled to divulge such records or to testify in regard to mediation in any adversary proceedings or judicial forum.

If the grievance is not resolved through mediation, the grievant shall have five (5) working days from the conclusion of the mediation to make a request for binding arbitration.

Section E: Binding Arbitration

If the question is not resolved through mediation, the grievant may request binding arbitration. Such requests must be submitted to the CARE Council on "Palm Beach County HIV CARE Council Request for Binding Arbitration Form", a copy of which is attached as Exhibit "C". The hourly rate shall be determined by the Alternate Dispute Resolution Office. The check shall be made payable to the Alternate Dispute Resolution Office. Such fee shall cover one-half of two-hour arbitration. The grievant must also agree to pay one-half of the total cost of arbitration at the time of arbitration. The CARE Council will be responsible for the other half of the cost of arbitration. Grievant must identify their list of anticipated witnesses and exhibits to be admitted during arbitration. The CARE Council shall have five (5) working days from receipt of the arbitration request form to identify its anticipated witnesses and exhibits and must provide a copyto the grievant. Arbitrators will be selected by mutual consent of the parties, from an approved list maintained by the Office of Alternative Dispute Resolution, based upon availability. Hearings shall be held within ten (10) working days of the appointment of anarbitrator at the Palm Beach County Alternate Dispute Resolution Office. The arbitrator shall have fifteen (15) working days to render a decision after the hearing is concluded. Grievant shall have no further remedies after rendition of the arbitrator's order.

Section F: Remedies

It should be noted that due to the stringent time frames associated with administration of grant funds, remedies sought through this grievance procedure are limited to future actions and are not applied retroactively.

Section G: Dissemination of Grievance Procedure Process

Copies of this grievance procedure will be available at the offices of the CARE Council and the Palm Beach County Department of Community Services.

Exhibit A

RYAN WHITE ACT

Palm Beach County

Submission of Part A Funding Grievance to Dispute Resolution

Grievance No. (To be filled in by receiving authority)	Date:
The undersigned party (ies) subm grievance procedures of the CARI	its the following dispute for resolution under the E Council.
,	include date questioned decision was taken, by what se grievance; use back of form if necessary)
Statement of previous action tal previous attempts at resolution)	ken (if arbitration is sought, indicate results of
	evant would like (the remedy sought by the grievant; te that remedies may be limited to future action and ons retroactively.
If the procedure to be used is binding arbitra arbitrator.	tion, signature constitutes agreement to be bound by the decision of th
Name of grievant Mail this form to:	
If grievant is an organization,	Palm Beach County HIV CARE Council
Name of authorized individual	Attention: COUNCIL Chair
Address	
City/state/zip code	at its current address
Telephone number	
Fax number	•

STATEMENT OF UNDERSTANDING

Signature

I understand that the Palm Beach County HIV CARE Council and its representatives have no legal authority over any agency, but can act as an advocate and make recommendations to service agencies inmy behalf. I understand a representative from the CARE Council will contact me for assistance and I authorize that any of my records or knowledge of me and my health, including HIV/AIDS related information as it pertains to my grievance be released to parties related to the Council. All information will be held in strictest confidence. Grievance will be registered by the staff of Palm Beach County HIV CARE Council, who will notify you of any decisions or determinations made within six weeks. There is no cost to you for voluntary mediation.

RYAN WHITE ACT Palm Beach County Part A Request for Third Party Mediation

Grievance No	Date
(To be filled in by receiving authority)	
The undersigned party(ies) requests the follomediation under the grievance procedures of	• •
STATEMENT OF GRIEVANCE:	
Date of questioned decision/action: Description of questioned decision/action:	
Description of why grievant believes question	ed decision/action was in error:
Description of remedy sought by grievant:	
Description of previous action taken:	
Name of grievant: Organization represented, if any: Address: Telephone Number: Fax Number: Signature:	
Title:	

Note: The hourly rate shall be determined by the Alternate Dispute Resolution Office made payable to the Alternative Dispute Resolution Office. This amount will cover onehalf of the cost of one hour of mediation. By signing this request for third party mediation, the grievant agrees to pay one-half of the full cost of the mediation at the time of mediation. Palm Beach County will pay the hieith aining half of the cost of mediation.

Exhibit C

RYAN WHITE ACT Palm Beach County Part A Binding Arbitration Request Form

Grievance No. (To be filled in by receiving authority)	Date:
The undersigned party(ies) requests the following dispute be mediation under the grievance procedures of Palm Beach Co	
STATEMENT OF GRIEVANCE:	
Date of questioned decision/action: Description of questioned decision/action:	
Description of why grievant believes questioned decision/acti	on was in error:
Description of remedy sought by grievant:	
Description of previous action taken:	
List of witnesses anticipated to testify during arbitration (ir telephone number along with a description of their anticipate	
List of exhibits anticipated to be introduced during arbitration exhibits):	(please attach copies of all

CARE Council Policy

Policy Number: 10

Amended: **June 24, 2019**

Issue: Nominations Process for CARE Council Membership

This policy is adopted by the CARE Council (CARE Council), for the purpose of ensuring there is an open and fair nomination process which will provide for a CARE Council membership which is reflective of the AIDS epidemic in Palm Beach County, Florida. In addition, it is the intention of the CARE Council to maintain a nomination policy which complies with directives of the Division of HIV Services (DHS) and HRSAas those directives relate to the Ryan White Act.

I. Legislative Background

Section 2602(b) of the reauthorized Ryan White Act states: "Nominations to the planning council (CARE Council) shall be identified through an open process and candidates shall be selected based upon locally delineated and published criteria. Such criteria shall include a conflict of interest standard for each nominee."

II. Expectations

An open nominations process, in combination with other legislative requirements and existing DHS policy on PLWH participation, shall result in broad and diverse community inclusion and culturally competent deliberations in CARE Council processes. TheCARE Council will only approve and/or appoint members who have gone through the nominations process and shall appoint members on a timely basis to ensure minimum disruption to CARE Council activities.

Nominations to the CARE Council shall be sought from a wide spectrum of potential members. Recruitment shall be made through existing CARE Council committees and through ongoing solicitation through existing CARE Council members, serviceproviders, outreach through advertising, and staff working with consumers of HIV/AIDS services. Particular consideration shall be given to disproportionately affected and historically underserved groups and sub-populations.

Every member of the CARE Council is encouraged to actively recruit members to fill gaps in CARE Council membership. Recruitment is not just the Membership Committee's responsibility. CARE Council members should use their own network and seek key contacts in other communities to help identify potential members to fill gaps and to provide individuals to participate in CARE Council committee activities.

III. Steps in the Nominations Process:

- 1. When necessary advertising may be placed in various publications countywide notifying the public of the need for participation through membership on the CARE Council. Included in the advertising shall be notification of the need to fill membership positions based upon the demographics of the epidemic in Palm Beach County, and to ensure legislatively mandated positions are filled. A timelimit for return of applications shall be included in the notification.
- 2. Potential applicants shall be invited to attend membership orientation offered quarterly and provided a nominations packet containing a letter describing roles and responsibilities of the CARE Council, duties of membership, time expectations, gaps in representations, conflict of interest standards, HIV disclosure requirements, and an overview of the selection process and timeline; within three (3) business days of request. There shall also be an application form used to gather information about: relevant experience, expertise, skills, the person's interest in serving, the perspective he or she might bring to the CARE Council, how his or her peer group might relate to groups affected by HIV, and other related information.
- 3. Each returned application will be issued a document number, and receipt shall be logged in for tracking purposes.
- 4. CARE Council staff will review all application forms and will recommend a list of persons for the Membership Committee to interview per "Procedure for Applicant Interviews". Interviews shall be conducted by at least two committee members- one of which must be the Chair or Vice Chair and a staff member, according to structured interview format. Open ended questions about past experience on boards, ideas about significant HIV/AIDS issues and professional or affected community linkages shall be incorporated into the interview.
 - 5. After the interviews are completed, the results of each interview are discussed at the next regularly scheduled Membership Committee meeting. When reviewing candidates for membership the committee will consider the following factors: attendance at CARE Council meetings, involvement at Membership Development Sessions and involvement on committees. The Membership Committee may also consider activities as involvement in Membership Development Sessions. In addition, seat availability, the demographics of the board and candidate qualification will be taken into consideration. The final committee recommendations will be forwarded to the CARE Council. If the

Recommendation is accepted by the CARE Council, the individual's name will then be forwarded to the Palm Beach County Board of County Commissioners for appointment. The candidate must document completion of the Palm Beach County ethics training prior to submission of their name to the Palm Beach County Board of County Commissioners. In the event a recommended candidate is not acceptable to the Palm Beach County Board of County Commissioners, a request for a replacement candidate, if available, will be forwarded to the Membership Committee and the Membership Committee will provide the name of another candidate to the CARE Council. If the recommendation is accepted by the CARE Council, the individuals name will then be forwarded to the Palm Beach County Board of County Commissioners for appointment.

- A. Candidates must fulfill the following requirements prior to being forwarded for CARE Council Membership. candidates must join one
 (1) Committee and attend a CARE Council meeting or CARE Council sponsored training inclusive of annual retreat.
- B. Documented exceptions to these requirements may be made, based upon the need of the CARE Council or in an extenuating circumstance, at the discretion of the Membership Committee Chair with the approval of the CARE Council.

CARE Council Policy

Policy Number: 11

Amended: September 17, 2018

Issue: Travel and Reimbursement for CARE Council Members, Affiliate

Members, and Prospective Committee Members

<u>l.</u> <u>PURPOSE</u>

Ryan White funds cannot be used to reimburse expenses of non-members to attend planning council meetings as observers. However, the planning council can reimburse actual meeting expenses for consumers who serve on committees or task forces or make requested presentations to the planning council.¹

Allowable reimbursement expenses include CARE Council and committee meetings. All reimbursements are subject to available funding.

This policy does not apply to individuals receiving travel reimbursements from other parties or organizations.

<u>II.</u> <u>AUTHORITY</u>

All travel reimb ursements shall be made pursuant to policies and regulations established by the Palm Beach County Board of County Commissioners.

Approved 04/30/01; Amended 01/26/04, 12/05/11, 06/25/18.

¹ Ryan White HIV/AIDS Program Part A Manual – Revised 2013, page 132.

Council Policy

Policy Number: 12

Deleted: January 26, 2004

Issue: Needs Assessment Sub-Committee Member

It is a policy of the Palm Beach County HIV CARE Council that a Needs Assessment Sub-Committee member may perform tasks related to committee business on a voluntary basis only. Committee members may not be compensated other than for what is stated in the *Palm Beach County HIV CARE Council Bylaws* (mileage, childcare,etc.).

Approved 04/30/01.

Deleted: **June 26, 2017**

Issue: Quality Assurance and Evaluation Committee Responsibilities

The Quality Assurance and Evaluation Committee (QAEC) is responsible for ensuring that HIV funded agencies participating in the Coordinated Services Network (CSN) comply with standards of care established by the CARE Council in the delivery of services to their clients with HIV/AIDS.

Committee responsibilities will include:

- 1. Overseeing the CARE Council's Quality Assurance Program.
- 2. Developing written Quality Assurance and Evaluation Plans.
- 3. Establishing quality assurance and evaluation activities including cost effectiveness analyses, monitoring medical and support service standards of care outcome indicators (specific information that tracks a program's success) and client-level outcomes (benefits or changes for clients during or after receiving services).
- 4. Assisting Ryan White Part A, Ryan White, Ryan White Part B and State of Florida 4B General Revenue and Patient Care Network Grantees in ensuring funded service providers are implementing their own continuous quality improvement activities that are consistent with the CARE Council's Standards of Care.
- Working collaboratively with other quality assurance and evaluation entities in Palm Beach County including persons living with HIV/AIDS.
- 6. Any non-compliance found by the Quality Assurance Coordinator or Quality Assurance and Evaluation Committee must be reported to the funder.
- 7. Coordinating Management Information Services (MIS) responsibilities with the Part A Grantee.

Approved 04/30/01; Amended 02/23/15; Accepted as Amended 06/26/17.

CARE Council Policy

Policy Number: 13

Deleted: **June 26, 2017**

Issue: Quality Management and Evaluation Committee

Responsibilities

The Quality Management and Evaluation Committee (QMEC) is responsible for ensuring that HIV funded agencies participating in the Coordinated Services Network (CSN) comply with standards of care established by the CARE Council in the delivery ofservices to their clients with HIV/AIDS. The QMEC is responsible for detailed planning and oversight of all services relating to the general health of persons living with HIV/AIDS who receive services funded through the collaborative funding sources of the CARE Council.

Committee responsibilities will include:

- 1. Overseeing the CARE Council's Quality Management Program.
 - 2. Developing written Quality Management and Evaluation Plans.
 - 3. Establishing quality management and evaluation activities including cost effectiveness analyses, monitoring medical and support services standards of care, outcome indicators (specific information that tracks a program's success), and client-level outcomes (benefits or changes for clients during or after receiving services).
 - 4. Assisting HIV funded agencies participating in the CSN in implementing continuous quality improvement activities that are consistent with the CARE Council's Standards of Care.
 - 5. Working collaboratively with other quality management and evaluation entities in Palm Beach County including persons living with HIV/AIDS.
 - 6. Working with the Planning Committee to develop services definitions relating to each of the funded services
 - 7. Working with the Planning Committee on development of the CARE Council's Integrated Plan.

Approved 04/30/01.

Approved: April 30, 2001

Issue: Grievance Committee Responsibilities

The Grievance Committee is an Ad hoc Committee called together by the CARECouncil Chair to review grievance requests as defined in the *Grievance Policy*. The purpose of this review is to provide a broader consideration of a filing of a grievance to ensure that decisions are consistent with the purposes and spirit of the grievance procedure as called for in the reauthorization of the Ryan White Act.

Palm Beach County HIV CARE Council Council Policy

Policy Number: 15

Deleted: May 24, 2004

Issue: Elections Committee (Nominating Committee) Responsibilities

The Elections Committee is an Ad hoc Committee called together by the Council Chair. The responsibilities of the committee shall be to coordinate the Annual Election of Officers. Specifically, the Elections Committee shall:

Amended: **June 25, 2018**

Issue: Bylaws Committee Responsibilities

The Bylaws Committee is an Ad hoc Committee convened by the CARE Council Chair to address issues relating to the CARE Council Bylaws and Policies and Procedures.

The Bylaws Committee shall be convened at least triennial, or as needed, to review Bylaws and Policies.

CARE Council Policy

Policy Number: 17

Amended: February 23, 2015

Issue: Removal of CARE Council Members

It is a policy of the CARE Council, that a Council Member shall be removed from membership on the CARE Council for any of the following:

- Legal residence changes and member moves out of Palm Beach County;
- Lack of attendance as described in the CARE Council Bylaws and applicable Policies and Procedures;
- Violation of the Sunshine Law;
- Violation of the Ryan White Care Act, Florida Statute 112.3143 and Palm Beach County Code of Ethics R-94-693 (as may be amended) regarding voting conflicts;
- Non-compliance with the training mandates of Policy 25.
- Serious breaches of conduct and procedures as determined by the body according to the procedures of *Roberts Rules of Order*.

Unless the Palm Beach County Board of County Commissioners removes a member, a member may only be removed after a vote of the Membership Committee and approval by the CARE Council.

Amended: February 23, 2015

Issue: Removal of Committee Members

- It is a policy of the CARE Council, that a Committee Member shall be removed from membership on a committee for any of the following: Lack of attendance as described in the CARE Council Committee Attendance Policy;
- Violation of the Sunshine Law;
- Violation of the Ryan White Care Act, Florida Statute 112.3143 and Palm Beach County Code of Ethics R-94-693 (as may be amended) regarding voting conflicts;
- Serious breaches of conduct and procedures as determined by the committee according to the procedures of *Roberts Rules of Order*.
 A member may be removed after a vote of the committee.

Palm Beach County HIV CARE Council CARE Council Policy

Policy Number: 19

Amended: February 23, 2015

Issue: Occupancy of CARE Council Designated Seats

It is a policy of the CARE Council, that an individual occupying a specific seat on the CARE Council who becomes ineligible to hold that seat shall relate this to the Membership Committee. The Membership Committee shall determine if another seat is available that the individual can occupy. If so, that seat shall be offered to the member. If not, the individual will no longer be a member of the CARE Council.

This policy shall not preclude the individual's participation on committees as a committee member.

Amended: February 23, 2015

Issue: Maximum Provider Representation

Provider (Service Provider):

Any agency receiving Coordinated Services Network (CSN) Funding (Ryan White Part A, Ryan White Part B, State of Florida 4B General Revenue and Patient Care Network, or any future funders).

Rule:

It is a policy of the CARE Council that no more than two (2) individuals (employees or Board Members) from a service provider may be a member of the CARE Council. This policy shall not preclude the individual's participation on committees.

Exceptions:

- Maximum of one (1) part time employee (20 hours or less per week) or temporary employee (average of 20 hours or less per week);
- Individual represents a federally legislated partner such as Part D or a State Agency;
- Non-paid volunteers;
- Independent contractors.

Note:

This policy applies to all individuals no matter what designated seat they may occupy.

PALM BEACH COUNTY HIV CARE COUNCIL CARE COUNCIL POLICY

Policy Number: 21

Amended: **July 24, 2017**

Issue: Priorities and Allocation Committee Policy Regarding

Recipients/Sub recipients

Recipient/Sub recipient:

Any agency receiving Coordinated Services Network (CSN) Funding (CSN Funding includes but is not limited to Ryan White Part A, MAI, Ryan White Part B, State of Florida 4B General Revenue, and Patient Care Network.).

Rule:

It is a policy of the CARE Council that the Priorities and Allocations Committee shall consist of a maximum of fifteen (15) members, none of whom shall be affiliated with a Recipient/Sub recipient.

Approved 04/30/01; Amended 01/26/04, 08/29/05, 02/23/15, 07/31/20.

CARE Council Policy

Policy Number: 22

Amended: November 27, 2017

Issue: Committee Chairmanship

The following is a policy of the CARE Council regarding Committee Chairmanship:

Standing Committees:

The Chair of any standing committee must be a member of the CARE Council.

The Vice Chair of any standing committee should be, but is not required to be a member of the CARE Council.

Program Support, Ad hoc, and Sub-Committees:

The Chair of any Program Support, Ad hoc, or Sub-Committee should be, but is not required to be a member of the CARE Council with the exception of the By-laws Ad hoc committee and Ad hoc Grievance committee which shall be chaired by the CARE Council Chair or Vice Chair.

Term of Office:

The term for a committee chair will be for a period of up to twelve (12) months. Following election of officers at the annual meeting, the newly elected Chair of the CARE Council will then appoint committee chairs. The selection of committee chair/swill be presented for ratification by the CARE Council. If the CARE Council does not ratify a chosen committee chair; the existing committee chair will remain until such atime an acceptable replacement is found. The newly elected Chair of the CARE Council will appoint committee chairs within one (1) meeting of being elected.

When a committee chair resigns during his/her term, a replacement will be appointed by the existing chair of the CARE Council and ratified by the CARE Council. The new chair will serve until committee chairs are appointed or reappointed following the elections.

When in conflict, the CARE Council Bylaws supersede this policy.

Approved 04/30/01; Amended 02/25/02, 02/23/15.

Amended: April 29, 2013

Issue: Election Process for Annual Election

It is a policy of the CARE Council that:

- The CARE Council will elect the Chair, Vice Chair, Treasurer and Secretary
 from the CARE Council membership by a majority vote of the quorum of the
 members present at the Annual Meeting (as per the CARE Council Bylaws).
 Candidate search forms will be distributed at the meeting prior to the Annual
 Election and mailed to those not in attendance. The candidate search forms
 must be submitted to the designated staff.
- 2. The designated staff will compile all names nominated on the Candidate Search Form(s), reflecting whether they are eligible to serve and if they have accepted the nomination for the distribution at the Annual Election.
- At the meeting prior to the Annual Election and at the Annual Election, nominations will be open from the floor after the designated staff presents the list of those nominated.
- 4. A brief introduction of each nominee will take place, and if necessary, will be repeated at the Annual Election.
- 5. Ballots will include all persons nominated and must be signed by the member, and will be open to public inspection.
- 6. Ballots will be counted by staff.
- In the event that there is not a majority vote for any one official, themembers shall vote again choosing between the candidates with the two highest vote totals.
- 8. Results are announced prior to adjournment of the Annual meeting.

CARE Council Policy

Policy Number: 25

Amended: February 23, 2015

Issue: CARE Council Training Requirement

This policy applies to all CARE Council members.

HRSA requires that all CARE Council members have competencies in the following areas:

- the CARE Act legislation, roles and responsibilities in planning, conflict of interest, and how it can affect their deliberations, how to control its impact grievance procedures and way to minimize grievances related to funding,
- meeting procedures such as Robert's Rules of Order or other procedures used locally,
- cultural sensitivity to viewpoints of all members and culturally competency about the needs of underserved communities in their jurisdictions,
- technical issues, like how to interpret and use data as tools for decision-making, and
- treatment requirements of HIV disease and how they affect the cost of ambulatory outpatient care, especially primary care.

After being appointed to the CARE Council members must attend at least one training per year. CARE Council members must maintain a high level of competency in all of the areas listed above.

Within the first two months of being appointed to the CARE Council, the member must attend the CARE Council Orientation which includes information on the roles and responsibilities in planning, conflict of interest, ethics, grievance procedures, and a brief summary of *Roberts Rules of Order*.

All committee chairs and CARE Council officers should attend the Chair Workshop.

It is the policy of the CARE Council to recognize each seat on a committee as an important and meaningful position of public trust and fully support the commitment of individual members of committees.

Records of attendance and participation in Membership Development Session are maintained for each CARE Council member to assist in providing appropriate support to ensure members maintain necessary levels of proficiency.

Approved 05/24/04; Amended 06/25/12.

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Policy Number 26

Amended: **June 25, 2018**

Issue: CARE Council Member, Affiliate Member, and Prospective

Member Day Care Reimbursement Policy

It is the policy of the CARE Council that members who request and receive reimbursement for childcare must fulfill the requirements below and submit the following to CARE Council staff prior to reimbursement:

- Birth certificates for children who need childcare. A child is considered to be an individual under 13 years of age at the time of care (IRS, Publication 503, "Child and Dependent Care Expenses"); or
- Legal document recognized by state law as giving the member legal responsibility for the child; and
- Proof of the caregiver's receipt of payment.

The childcare reimbursement is only to be used for hours when a CARE Council member, affiliate member, or prospective member is attending a meeting and commuting to and from the meeting, subject to available funding. Reimbursement shall be hourly, not to exceed current federal minimum wage guidelines, paid in half hour increments.

In special circumstances reimbursement for care giving shall be with the approval of the grantee. Such circumstances may include care of an individual who does not meet age requirements to be considered a child but is unable to care for him or herself (IRS, Publication 503, "Child and Dependent Care Expenses").

CARE Council Policy

Policy Number: 27

Approved: January 27, 2014

Issue: Process for Notification of

Changes to CARE Council Membership

This policy is adopted by the CARE Council for the purpose of ensuring that the process for system-wide notification of CARE Council membership changes is followed. In addition, it is the intention of the CARE Council to ensure policies regarding changes to CARE Council membership comply with directives and policies of Palm Beach County and HRSA as those directives relate to the CARE Council.

I. Authority

Per the grant year 2012 Notice of Grant Award, HRSA requires the Grantee to notify the Division of Grants Management Operations (DGMO) and the Project Officer, within 30 days, of any changes in Planning Council Composition that impact legislative compliance with "reflectiveness" of the mandated membership categories. Additionally, the Grantee must ensure accurate documentation of advisory board memberappointments in the County Advisory Board Appointment Database.

II. Expectations

The parties that must be made aware of changes to CARE Council membership are multifaceted. To ensure solid communication across all parties this policy is being implemented.

III. Steps in the Process for Notification of Changes to CARE Council Membership:

- 1. Staff who receive official notification of changes to CARE Council membership (e.g. member resignation letter, Membership Committee/CARE Council removal of member, etc.) must ensure the following parties are noticed of the change: Ryan White Program Manager, Financial Analyst I, Member Liaison, CARE Council Secretary, Membership Committee and CARE Council Chair, or appropriate staff assigned to complete the duties of the staff titles listed above.
- 2. Ryan White Program Manager notices the County Agenda Coordinator who manages the Advisory Board Appointment Database.

- 3. Ryan White Program Manager notices the HRSA Project Officer.
- 4. Financial Analyst I notices Grant Management.

CARE Council Policy

Policy Number: 28

Approved: **June 24, 2019**

Issue: Confidentiality Regarding CARE Council Members

It is a policy of the CARE Council that we recognize the privacy of all members of the CARE Council. Whenever possible, CARE Council members and prospective members will be identified in Palm Beach County Board Appointment Applications and accompanying materials by the title "Palm Beach County resident," and no reference will be made to a particular seat on the CARE Council that the prospective member or current member is proposed to fill.

Proposed New Policy 7.31.2020

PALM BEACH COUNTY HIV CARE COUNCIL CARE COUNCIL POLICY

Policy Number: 29

Issue: Election Process for Annual Election during Communications Media
Technology (CMT) Meeting

It is a policy of the CARE Council that:

- 1. When the CARE Council is conducting meetings via Communications Media Technology (CMT), the CARE Council will elect the Chair, Vice Chair, Treasurer and Secretary from the CARE Council membership by a majority vote of the quorum of the members present at the CMT meeting that is conducted at the same time as the Annual Meeting (as per the CARE Council Bylaws), or as close in time to the Annual Meeting as reasonably possible.
- 2. CARE Council Members may submit nominations for CARE Council Officers for a period of thirty days prior to the CMT meeting when the Annual Election is scheduled to be conducted, by transmitting those nominations to the CARE Council Coordinator.
- 3. At the CMT meeting when the Annual Election is conducted, each nominee who otherwise qualifies to hold the Office for which they have been nominated will be asked to confirm whether they are willing to serve in the position for which they have been nominated, and will be given an opportunity to make a brief introduction.
- 4. For each Office where only one individual has been nominated, votes shall be cast by a voice vote of CARE Council members.
- For each Office where more than one individual has been nominated, votes shall be case by roll call of CARE Council members participating in the CMT meeting.
- 6. In the event that there is not a majority vote for any one official, the members shall vote again choosing between the candidates with the two highest vote totals.
- 7. Results shall be announced following the vote for each Office.

CARE Council Policy

Policy Number: 30

Created: April 23^{rd.} 2021

Issue: CARE Council Member Travel Outside of Palm Beach County

<u>l.</u> PURPOSE

Member request for travel outside of Palm Beach County to a meeting or conference directly related to the work of the HIV CARE Council shall be submitted, in writing, to CARE Council staff at least 90 days prior to travel dates. Either the Executive Committee or the full CARE Council must approve such requests.

- Travel expenses shall be limited to \$1000 per request.
- There shall be two travel expense allowances permitted per grant year for the CARE Council.
- The Executive Committee or full CARE Council may make exceptions to the above upon request and approval.
- All travel approvals are contingent on availability of funds in the member travel line item of the CARE Council budget.

Approved 04/23/21

¹ Ryan White HIV/AIDS Program Part A. Manual, Revised 07/09/21

CARE Council Policy

Policy Number: 31

Created: May 11th 2022

Issue: Resource Allocation and Reallocation Process for RWHAP Part A/MAI Funding

This policy determines the process for the CARE Council to allocate and reallocate RWHAP Part A/MAI funding. The policy works to ensure the National HIV/AIDS Fiscal Monitoring Standards are followed; specifically the standards for the EMA. Demonstrate the ability to expend fund efficiently by expending 95% of its formula funds in any grant year, have an annual unobligated balance for formula dollars of no more than 5% reported to HRSA/HAB and recognize the consequences of unobligated balances and evidence of plans to avoid a reduction of services. Penalties include: Future year award offset by the amount of the unobligated balance less any approved carry over. Future year award reduced by amount of unobligated balance less the amount of approved carry over. Not eligible for a future year supplemental award.

The CARE Council shall approve the budget for the RWHAP grant application using the process below:

- Recipient shall prepare and present data from prior grant year at annual data presentation. Data presented should include: prior grant year expenditures, utilization, cost analysis by service category, needs assessment (including unmet need), quality management metrics and indicators, epidemiological profile, resource inventory, and any other relevant data as requested. Data relevant to MAI populations shall be presented separately from Part A. (Target completion date: May)
- Recipient shall determine the amount of funding available for allocations for Part A and MAI based on the funding ceiling established by grant guidance. (Target completion date: Upon release of grant guidance)
- Recipient shall determine the maximum funding amount: Part A and MAI Administration 10%, CQM 5%, Part A and MAI Services 85% (core 75% and support services 25%). (Target completion date: Upon release of grant guidance)
- The Recipient prepares and presents all of the above and an allocation spreadsheet to Priorities and Allocations Committee for priority setting and resource allocation process. (Target completion date: June)
- Recipient shall prepare and present allocation proposal from Priorities and Allocations Committee to CARE Council. (Target completion date: June)

The CARE Council shall approve carryover request for Unobligated Balance Allocation using the process below:

- Recipient shall determine the amount of the unobligated balance available for allocations for Part A and MAI based on the final expenditure report for prior grant year. (Target completion date: July)
- Recipient shall prepare and present unobligated balance amount in reallocation worksheet to Priorities and Allocations Committee. (Target completion date: July/August)
- Recipient shall prepare and present allocation proposal from Priorities and Allocations Committee to CARE Council. (Target completion date: August)

The CARE Council shall approve a reallocation plan using the process below:

- Recipient, within the first 6 months of the grant year, shall evaluate and project the expenditures and service utilization.
- Recipient shall provide the reallocation recommendations to the Priorities & Allocations (P&A) Committee, for review. Their final recommendation shall be submitted to the CARE Council for review.
- The CARE Council shall review the reallocation plan and approve it or amend it as necessary

This policy, in no case, shall conflict with the CARE Council Bylaws or related Policies and Procedures

Approved: 05/23/22