

## Consumer Caucus Policy and Procedures Guide

### Introduction:

The Consumer Caucus (CC) aims to empower individuals living with HIV/AIDS by providing a platform for advocacy, support, and community engagement for those living in the Austin Transitional Grant Area. This Policy and Procedures Manual outlines the guidelines and protocols for the effective operation of the CC, ensuring transparency, inclusivity, and adherence to our mission.

### Mission Statement:

The mission of the Consumer Caucus (CC) is to advocate for the rights and well-being of individuals living with HIV/AIDS, promote education and awareness, and foster a supportive community environment to improve the impact and access of resources guided by the Austin Area HIV Planning Council, Fast Track Cities, and the Ending the Epidemic program.

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**Commented [DN2R1]:** Townhall?

**Commented [DN3]:** Can the group advocate for policy changes?

### Policy:

#### 1. Membership

- 1.1. Membership in the CC is open to individuals who are living with HIV/AIDS or those who identify with the Austin Area HIV Planning Council's hard to reach communities, which include: Queer Men of Color, Black Women, and Transgender Persons of Color.
- 1.2. Members must adhere to the principles of respect, confidentiality, and inclusivity.
- 1.3. Membership is voluntary, and the term length has a maximum of \_ to ensure diversity of perspectives captured.
- 1.4. The CC shall have a leadership structure consisting of a chairperson, vice-chairperson, and secretary.
- 1.5. Leadership positions shall be elected by members of the CC through a democratic process.
- 1.6. Leaders must be persons with lived experience, or their caregivers. The leadership terms expire at the end of the RWHA Program Part A fiscal year, regardless of term start date.

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#### 2. Meetings:

- 2.1. Regular meetings shall be held at least once a month, with additional meetings scheduled as needed.
- 2.2. Meeting times, locations, and agendas shall be communicated to members in advance.
- 2.3. Meetings may be conducted in-person, virtually, or through other accessible means.
- 2.4. Minutes shall be recorded for all meeting and made available to members upon request.
- 2.5. The integrity of the minutes is the responsibility of the Secretary.

**Commented [DN5]:** Change to quarterly

#### 3. Decision Making

- 3.1. Decisions within the CC shall be made through a consensus-based process.
- 3.2. In the event consensus cannot be reached, decisions may be made by a simple majority vote.
- 3.3. All decisions shall prioritize the best interests of individuals living with HIV/AIDS.

#### 4. Advocacy

- 4.1. The leadership team shall identify priority advocacy issues in consultation with members at each meeting.
- 4.2. Members may ONLY participate in advocacy efforts to inform the development of Austin Public Health HIV-related programs and deliverables. Members must not lobby policymakers as a group.

#### 5. Confidentiality:

- 5.1. All members must respect the confidentiality of fellow members and refrain from disclosing personal information shared within the caucus.
- 5.2. Confidentiality shall be maintained in all internal and external communications.

Procedures:

1. Membership Application
  - 1.1. Individuals interested in joining the CC must submit a member application, which will be reviewed by the leadership team.
2. Election of Leadership
  - 2.1. Nominations for leadership positions shall be solicited from members a month prior to annual election, or at the following meeting in the announcement of a leadership position vacancy.
  - 2.2. Elections shall be conducted through a ballot, with results announced immediately after the vote.
3. Meeting Protocol
  - 3.1. Meetings shall be facilitated by the chairperson. Should the chairperson be absent, the vice chairperson shall facilitate. If no leadership member is present, any member may facilitate.
  - 3.2. Respectful communication and active listening are encouraged during all meetings.
4. Agenda Setting
  - 4.1. The CC is to annually review (as per the Ryan White calendar year) the following items: Austin Area Integrated Care and Prevention Plan, available Priority Setting and Resource Allocation results, Austin Transitional Grant Area Needs Assessment Items, Fast Track Cities programming, and Ending the Epidemic programming.
  - 4.2. The CC is to discuss at least one non-mandated agenda item each meeting.
  - 4.3. CC members can submit an item to be placed on the following agenda at least 5 business days in advance.
5. Decision making process
  - 5.1. Discussion shall precede any decision-making; all members are allowed an opportunity to voice their opinions and concerns.
  - 5.2. In the event of a vote, a clear statement of the proposal and options are to be provided followed by a vote tally.
6. Conflict Resolution:
  - 6.1. Conflicts or disagreements shall be addressed promptly and respectfully, with the goal of finding a mutually acceptable resolution.
  - 6.2. Mediation may be sought from neutral parties if conflicts cannot be resolved internally.

# Work Plan Calendar

	Planning Council Items for Input	Requested	Partners
April	<ul style="list-style-type: none"> <li>- Introduction to Caucus, Purpose, and Partners/RW Overview</li> <li>- Review of Y1 Rankings for NA services and Y2 Selection</li> <li>- Integrated Plan: Introduction</li> <li>- Example Discussion of Service Standard: HIPSCA and MCM               <ul style="list-style-type: none"> <li>- Review Service Standard definition</li> <li>- Question and Answer on definition</li> <li>- Review Service Limitations</li> <li>- Review ranking and allocation for FY24</li> <li>- discussion and proposed solutions regarding use/access of funds</li> </ul> </li> </ul>	<p>Discussion of Desired Topic Calendar.</p> <p>Safe Sex Discussion ?</p>	Have EHE and FTC present on their deliverables for community input
May	<ul style="list-style-type: none"> <li>- Discussion of Service Standard: EIS, Housing</li> <li>- Review Y3 Needs Assessment Focus Group Plan</li> </ul>	Desired Topic 2	
June	<ul style="list-style-type: none"> <li>- Discussion of Service Standard: ADAP, AIDS Pharm Assistance, Substance-Outpatient</li> <li>- Discussion and Approval of Integrated Plan: Section II: Community Engagement and Input</li> <li>- Discussion of Integrated Plan: Section V: Goals and Objectives</li> </ul>	Desired Topic 3	
July	<ul style="list-style-type: none"> <li>- Discussion of Service Standards: Medical Transportation, Non-MCM, EFA</li> <li>- Review of Quarterly Input to Partners</li> <li>- Rank Service Categories w/ reasoning</li> </ul>	Desired Topic 4	