#### **CUYAHOGA COUNTY BOARD OF HEALTH**

#### **REQUEST FOR PROPOSALS**

RFP # 2016-09

ISSUED November 21, 2016

RFP TITLE: RYAN WHITE HIV/AIDS TREATMENT EXTENSION ACT

PART A PROGRAM AND MINORITY AIDS INITIATIVE

**Issuing Department**: Administration

Cuyahoga County Board of Health

5550 Venture Drive Parma, Ohio 44130 (216)201-2000

**Sealed proposals will be received until**: December 19, 2016 at 11:00 a.m.

**All inquiries should be directed to:** Judy V. Wirsching, CFO

Cuyahoga County Board of Health

5550 Venture Drive Parma, Ohio 44130

(216) 201-2001 ext. 1103 (216) 676-1311 (fax) jwirsching@ccbh.net

#### ALL RESPONSES SHALL BE MARKED AS

"SEALED BID"

"REQUEST FOR PROPOSALS"
RYAN WHITE PART A – ADMINISTRATIVE SERVICES
FOR THE CUYAHOGA COUNTY BOARD OF HEALTH

PROPOSALS ARE TO BE MAILED OR HAND-DELIVERED <u>DIRECTLY TO THE</u>
<u>ISSUING DEPARTMENT</u> SHOWN ABOVE. ANY PROPOSAL RECEIVED AFTER THE
TIME AND DATE SPECIFIED ABOVE WILL BE RETURNED UNOPENED.

## PUBLIC NOTICE REQUEST FOR PROPOSALS FOR

# RYAN WHITE HIV/AIDS TREATMENT EXTENSION ACT PART A PROGRAM & MINORITY AIDS INITIATIVE

#### RFP# 2016-09

The Cuyahoga County Board of Health is now soliciting sealed proposals for Ryan White HIV/AIDS Treatment Extension Act Part A and Minority AIDS Initiative Programs for Administrative Services from vendors. Completed proposals must be submitted to the Cuyahoga County Board of Health, 5550 Venture Drive, Parma, Ohio 44130 no later than 11:00 A.M. local time on December 19, 2016.

A pre-proposal conference is scheduled for November 28, 2016 at 2:00 P.M. at the Cuyahoga County Board of Health at the address set forth above. Attendance is strongly recommended but not mandatory.

This notice and proposal may be viewed at the following Board website: <a href="www.ccbh.net">www.ccbh.net</a> by clicking on the "Business" tab on the home page. Questions prior to the pre-proposal conference must be emailed to <a href="mailto:bidquestions@ccbh.net">bidquestions@ccbh.net</a>.

Judy V. Wirsching, CFO

Published in the Cleveland Plain Dealer on Monday, November 21, 2016.

#### PROPOSAL INFORMATION

#### A. Background Statement

The Ryan White Program is the largest federal program dedicated exclusively to the provision of services uninsured and underinsured people living with HIV/AIDS. The program is for individuals living with HIV/AIDS who have no health insurance (public or private), have insufficient health care coverage, or lack financial resources to get the care they need for their HIV disease. As such, the Ryan White HIV/AIDS Program fills gaps in care not covered by other funding sources.

Congress first authorized the Ryan White Comprehensive AIDS Resources Emergency Act in 1990 and re-authorized the legislation in 1996, 2000 and 2006. The legislation was most recently reauthorized in October 2009, as the Ryan White HIV/AIDS Treatment Extension Act of 2009 (RW Act). At the federal level, the program is administered by the U.S. Department of Health and Human Services (HHS), Health Resources Services Administration (HRSA). The Ryan White legislation has been adjusted with each reauthorization to accommodate new and emerging needs, such as an increased emphasis on funding of core medical services and changes in funding formulas. The legislation can be found at the below links.

link: <a href="http://www.gpo.gov/fdsys/pkg/PLAW-111publ87/html/PLAW-111publ87.htm">http://www.gpo.gov/fdsys/pkg/PLAW-111publ87/html/PLAW-111publ87.htm</a> reference: <a href="http://hab.hrsa.gov/abouthab/legislation.html">http://hab.hrsa.gov/abouthab/legislation.html</a>

Part A of the Act provides grant funding directly to Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs) with large numbers of reported cases of AIDS, to meet service needs of people living HIV/AIDS. The Cleveland TGA, our services area, includes six counties: Ashtabula, Cuyahoga, Geauga, Lake, Lorain, and Medina.

The Cuyahoga County Board of Health (CCBH) is the designated grant administrator, assigned by the Cuyahoga County Executive. As the grant administrator, the Board is seeking proposals for the Facilitation and Management of the Cuyahoga Regional HIV Health Services Ryan White Planning Council. The contractor will facilitate the meetings identified in Exhibit A along with implement the legislative responsibilities in coordination with the Planning Council identified in the bylaws included as Exhibit B. In addition the Cuyahoga County Board of Health has included a Memoranda of Understanding outlining the relationship between the grantee and the Planning Council which is included as Exhibit C.

In accordance with requirements of the federal legislation, the Cuyahoga County Executive appoints a thirty-five member community planning body to work with the Part A program. The Cuyahoga Regional HIV Health Services Ryan White Planning Council (Planning Council) meets ten times a year to assess community needs, determine service priorities and allocate grant dollars to service categories based on community needs assessment, service usage and the comprehensive plan for the area. In addition, the various committees of the Planning Council also meet roughly ten times a year. Planning Council meetings are open to the public and minutes of the meetings are available to interested parties through CCBH and on the website (www.ccbh.net).

Part A and MAI (Minority AIDS Initiative) funding is used to create and maintain an accessible comprehensive continuum of quality care. The Planning Council has identified a continuum of care for the Cleveland TGA based on needs assessment surveys and available funding. The core of the continuum consists of both primary medical care and the supportive services that help Persons Living with HIV/AIDS (PLWH/A) to access and remain in care. This core is surrounded by services that facilitate optimal access to and full utilization of medical and supportive services.

According to the Centers for Disease Control and Prevention and the Ohio Department of Health as of 2014 reports 5,086 persons living with HIV/AIDS in the Part A service area. The table below illustrates the 2014 Persons Living with HIV/AIDS (PLWHA) incidence and prevalence rates compared to the general population.

2014 PLWHA Summary compared to general population by county					
Cleveland TGA County	2014 Incidences	2014 Prevalence	General Population		
Ashtabula	3	99	99,175		
Cuyahoga	210	4,381	1,259,828		
Geauga	2	34	94,295		
Lake	6	150	229,230		
Lorain	8	346	304,216		
Medina	2	76	176,029		
Totals:	231	5,086	2,162,773		

<sup>\*</sup>Ohio Department of Health for Incidence and prevalence rates

Federal and local priorities include emphasis on:

- Disproportionately affected populations such as Black/African American, men who have sex with men (MSM)
- Disproportionately affected populations such as Black/African American and Hispanic youth ages 13-24
- Persons who know their HIV/AIDS status and are not receiving care
- Persons who have been recently diagnosed with HIV/AIDS
- People with HIV/AIDS who are out of care
- Identifying PLWH/A and providers in outlying areas of the TGA: Ashtabula, Geauga, Lake, Lorain and Medina Counties.
- Traditionally underserved populations including minorities, women, infants, children and youth.

Planning Councils are responsible for the smooth and fair operations; and, carrying out mandated duties under the Ryan White legislation. Operations include bylaws, open meetings, grievance procedures, and conflict of interest standards. Planning council duties include planning, priority setting and resource allocation processes as well as assessment of administrative mechanisms and effectiveness.

The Ryan White legislation requires planning councils to have members from various groups and organizations. At least one third (33 percent) of the planning council members must be PLWHA who receive Ryan White Part A services and are "unaffiliated." This refers to consumers who do

<sup>\*2014</sup> U.S. Census data for the general population data

not have a conflict of interest, meaning they are not staff, consultants, or Board members of Ryan White Part A funded agencies.

The Planning Council must find out what Ryan White services are needed and what populations need care (needs assessment). Next, it decides what services to fund in the EMA/TGA (priority setting) and decides how much Ryan White Part A money should be used for each of these services (resource allocation). The planning council also looks for ways that Ryan White Part A services work to fill gaps in-care with other Ryan White programs and develop a plan for local service delivery (through the Statewide Integrated Prevention and Care Plan) as well as other services like Medicaid and Medicare (coordination). The planning council also evaluates how efficiently providers are selected and paid and how well their contracts are monitored (assessment of the efficiency of the administrative mechanism).

The Facilitation & Management Contractor must have at least three (3) years of experience in facilitating and/or managing a community governing body and a full understanding of the current legislative requirements and HRSA directives of the RW Act or the experience and skills necessary to learn the requirements in an efficient manner. The Contractor will be required to coordinate with Ryan White staff (Grantee) and other contracted consultants to interpret evaluation studies, needs assessments and topical research and prepare reports and presentations to inform, guide, and consult the Council.

The following categories provide the minimum responsibilities the applicant must perform. These activities should not serve as a complete list of expected activities. Further negotiations with the Grantee regarding additional activities can be expected during the contract negotiation.

#### Planning Council Facilitation & Management:

- 1. Ensure Planning Council compliance with legislative requirements and HRSA directives;
- 2. Facilitate the development or update of meeting policies, procedures, expectations, and/or ground rules that reinforce open, respectful communication among members;
- 3. In collaboration with co-chairs, develop meeting agendas and facilitate Planning Council and sub-committee meetings that foster balanced participation among members resulting in fair, efficient decision-making and the approval of all necessary votes required by HRSA/HAB and the Grantee;
- 4. Facilitate work of standing committees to include ensuring the planned activities are accomplished timely and ensure work plans are developed to complete tasks assigned to each respective committee if required;
- 5. Provide the education necessary to Planning Council to ensure understanding of legislatively mandated roles, responsibilities, and deliverables, such as an scheduling monthly trainings and an annual training on how to make data-driven decisions;
- 6. Facilitate communication between Planning Council and Grantee;
- 7. Participate in monthly conference calls with Federal HRSA Project Officer, if requested;
- 8. Develop and/or oversee development of meeting minutes, handouts, visuals, and reports;
- 9. Ensure Planning Council familiarity and understanding of relevant documents, such as the Cleveland TGA application for Ryan White Part A and MAI grant funding, the State of Ohio Integrated Prevention and Care Plan, Planning Council Bylaws, Roberts Rules of Order, and the Part A Manual (Planning Council section);
- 10. Manage Planning Council membership process and provide orientation to new members;

- 11. Participate in conference calls as needed to ensure Planning Council business is completed timely;
- 12. Facilitate the Priority Setting and Resource Allocation process;
- 13. Facilitate the Assessment of the Administrative Mechanism;
- 14. Submit to the Grantee monthly invoices based on actual deliverables for previous month;

<u>Ad Hoc Committees</u>: Ad Hoc Committees will be created as deemed necessary by the Executive Committee and will meet on an as needed basis and report on their recommendations at regular meetings of the Planning Council.

The Planning Council Facilitation and Management Contractor will receive support from a Cuyahoga County Board of Health employee in regards to completing the following tasks:

- 1. Arrange meeting site/s and refreshments;
- 2. Serve as primary contact for meeting site representatives and food vendors;
- 3. Prepare and copy materials for meetings, including (but not limited to): meeting minutes, hand-outs, sign-in sheets, table tents;
- 4. Record and prepare meeting minutes;
- 5. Maintain Planning Council membership list including: term, and contact information.
- 6. Maintain Planning Council and sub-committee email groups;
- 7. Maintain Planning Council meeting calendar;
- 8. Distribute meeting notices/reminders/changes, documents, and announcements to Planning Council;
- 9. Manage membership transportation reimbursement;
- 10. Coordinate updates to the Planning Council's section of the Ryan White Part A website.
- 11. Provide other administrative support to Planning Council projects and activities as directed.

#### **B.** Proposal Format

The Board discourages overly lengthy and costly proposals. In order for the Board to evaluate proposals fairly and completely, vendors should follow the format set forth herein and provide all of the information requested.

Proposals that do not adhere to these formatting requirements may be considered non-responsive. Proposals should be submitted in a sealed envelope with the name of the vendor and the relevant RFP name and number on the front.

Responses must be submitted with one (1) original and six (6) copies in addition to one (1) electronic document of the proposal with all required information. All proposals submitted will become the property of the Board and will not be returned.

Proposals must remain open and valid for one hundred and eighty (180) days from the opening date, unless the time for awarding the contract is extended by mutual consent of the Board and the

vendor.

#### C. Need Statement

The Cuyahoga County Board of Health is accepting proposals for a one-year period with the option to extend the service for two additional one year renewals for administrative services.

The funded grant year and service year for provider contracts with federal Part A and Minority AIDS Initiative (MAI) funding run from March 1, 2017 through February 28, 2018 with an option to extend to March 1, 2018 through February 28, 2019 and March 1, 2019 through February 29, 2020. The program, services and all contracts are contingent upon funding from the U.S. Department of Health and Human Services. Funding for FY2017 does not guarantee funding for FY2018 or FY2019.

#### **SECTION I – INTRODUCTION (Requirement- 5 points)**

#### A. Cover Page

This must include the RFP title, RFP number, complete vendor name and mailing address as shown in Appendix 1 Attachment E.

#### **B.** Cover Letter

Proposal Cover Letters should include a brief overview of the service being proposed and the total funding request. Cover letters must include the telephone number of the person the Board should contact regarding the proposal.

Proposals must confirm that the vendor will comply with all the provisions of this RFP. Any exceptions to the Board contract general terms and conditions should be discussed here.

The vendor must provide a brief description of the organization including history; number of years your organization has been in business; type of services you provide; legal status of vendor organization, ie. corporation, partnership, sole proprietor; Federal Tax ID and DUNS number.

The vendor must submit a copy of its most recent audited or compiled financial statements, with the name, address and telephone number of a contact in the company's principal financing or banking organization. The financial statements must have been completed by a Certified Public Accountant.

A vendor representative authorized to make contractual obligations  $\underline{must}$  sign the cover letter.

#### C. Table of Contents

Provide sufficient detail so reviewers can locate all the important elements of your document readily. Identify each section of your response as outlined in the proposal package.

#### **D.** Executive Summary

Provide a high level overview of your approach, the distinguishing characteristics of your proposal, and the importance of this project to your overall operation.

#### **SECTION II - PROJECT UNDERSTANDING (20 points)**

Provide a detailed program description outlining the understanding of the project.

#### **SECTION III - METHODOLOGY (20 points)**

Provide a detailed program methodology for the implementation of the project including:

- A. A timeline documenting the products or services to be delivered;
- B. A description of the work plan;
- C. A description of protocols to assure confidentiality when necessary; and
- D. A description of how work will be coordinated effectively and efficiently to ensure federal

legislative mandates are met.

#### **SECTION IV - PROJECT MANAGEMENT (15 points)**

- A. Describe ability to comply with current and potential future, requirements of HRSA and the Ryan White Part A tenets under the Ryan White HIV/AIDS Treatment Modernization Act specific to the administrative function(s) that the consultant is proposing to provide.
- B. Describe access to the Ryan White Office (opportunities for a representative from the contractor to attend various meetings and present process, objectives and ultimately, findings and recommendations.)
- C. Describe agency's ability to track proposal deliverables to ensure completion of required tasks.
- D. Discuss structure in place to ensure ethics are maintained for each service in which a proposal is submitted. In addition, cite experience in objectively performing this activity while functioning as the consultant for this entity. If currently performing other consultant activities for this entity, please detail how the functions will be carried out without a conflict of interest or without performing duplicated services.

#### **SECTION V - QUALIFICATIONS & EXPERIENCE (25 points)**

- A. Agency Description
  - 1. Describe your agency's unique qualifications that make you the preferred applicant.
  - 2. Identify staff to participate in project, including the principal staff name, business address, phone numbers and email.
- B. Describe staff qualifications including prior experience. Attach Resume(s) of staff included in proposal.
  - 1. Demonstrated experience.
  - 2. Note historical experience with Ryan White Part A entities and/or note any historical experience or involvement performing related research activities within the six-county Cleveland TGA.
  - 3. Include three references related to your experience.
  - 4. Identify staff to participate in project, including the principal investigator name, business address, phone numbers and email.
  - 5. Describe staff qualifications in quantitative and qualitative data and analysis.

#### **SECTION VI - PRICING (15 Points)**

- A. Prepare a budget and narrative to conduct the activities identified in the proposal. A budget and narrative should be prepared to coincide with phased periods identified in this proposal, if applicable. The budget and narrative must include the following categories at minimum:
  - 1. Direct costs including personnel, travel, out-of-pocket expenses, hourly rates please differentiate if there are multiple staff supporting the proposal.
  - 2. Administrative costs including office supplies and materials.

Costs should NOT include meeting locations, food for meetings or consumer transportation reimbursement. These costs will be funded directly through the RW office. All other costs should be factored into proposal.

B. Describe fiscal capacity of applicant organization. Describe previous experience using federal funding.

#### <u>SECTION VII – REPORTING REQUIREMENTS</u>

- A. The contractor shall submit monthly progress reports to the grantee. The reports shall describe progress to date, significant achievements, and any problems that may have the potential to affect the schedule or budgets. The progress reports should be sufficiently detailed to assure that actions being pursued are in compliance with the contractual scope of work.
- B. The Planning Council Facilitation & Management contractor shall present findings and the final report to the Planning Council; date to be mutually agreed upon with grantee.

#### **SECTION VIII - REQUIRED ATTACHMENTS**

The vendor must complete and submit all required forms outlined in Appendix 1. Wet signatures and notarization are only required on original proposal documents.

#### **SECTION IX - ADMINISTRATIVE INFORMATION**

#### A. RFP Contact

All vendor communications concerning the RFP must be directed to the contact person listed below. Any oral communication will be considered unofficial and non-binding on the agency. Vendors should only rely on written statements issued by the Board.

Name: Judy Wirsching, CFO

Department: Administration

Address: 5550 Venture Drive, Parma, OH 44130

Phone: 216.201.2001 x 1103

Fax: 216.676.1311

Email: JWirsching@ccbh.net

#### B. Location of work

Work to be performed, completed and managed at vendor's place of business and/or service area.

#### C. Pre-proposal conference

The pre-proposal conference for all participating vendors scheduled as indicated below.

Date: November 28, 2016

Time: 2:00 P.M.

Location: Cuyahoga County Board of Health, TEH Room, 5550 Venture Dr., Parma, OH

44130

The purpose of the conference is to discuss the work to be performed with prospective vendors and allow them the opportunity to ask questions concerning the RFP. **It is encouraged that interested vendors attend.** Questions prior to the pre-proposal conference must be emailed to bidquestions1@ccbh.net. No questions will be accepted or answered after the pre-proposal conference. Questions and answers will be posted and may be viewed on the Board's website: <a href="https://www.ccbh.net">www.ccbh.net</a> under the "Business" tab found on the Home page.

Vendors with a disability needing accommodation should Judy V. Wirsching at (216) 201-2001 ext. 1103 prior to the date set for the pre-proposal conference so that reasonable accommodations can be made.

#### D. RFP Addenda

The Board reserves the right to issue addenda to the RFP at any time. The Board also reserves the right to cancel or reissue the RFP. If an addendum is issued less than seventy-two hours prior to the proposal due date, the closing date will be modified accordingly.

#### E. Proposal Response Date and Location

The vendor's proposal, in its entirety, must be received at the location, by the date and time specified on the cover page of this RFP. Proposals arriving after the deadline will be returned unopened, to the vendor. The official closing time will be determined by the time clock located in Board Administrative offices. All proposals and accompanying documents will become the property of the Board and will not be returned. Proposals should be submitted in a sealed envelope with the name of the vendor and the relevant RFP name and number on the front.

Vendors assume the risk of the method of dispatch chosen. The Board assumes no responsibility for delays caused by any delivery service. Postmarking by the due date will not substitute for actual proposal receipt. Late proposals will not be accepted nor will additional time be granted to any vendor. Proposals may not be delivered by facsimile transmission or other telecommunication or electronic means.

Hand-delivered proposals may be delivered ONLY between the hours of 8:30 a.m. and 4:30 p.m., Mondays through Fridays, excluding holidays observed by the Board.

#### F. Proposal Opening

Proposals will be publicly opened at the Administration Office, Cuyahoga County Board of Health, 5550 Venture Dr., Parma, OH 44130. At this time, all proposals will be opened, the vendor name read from the proposal cover page, and logged. **No dollar amounts or other details of the proposal will be disclosed at this time.** The submittal of a proposal will be considered by the Board as constituting an offer to perform the required services at the stated costs.

#### G. Required Review

Vendors should carefully review this RFP for defects and questionable or objectionable matter. Comments concerning defects and objectionable material should be made in writing and received by the RFP contact at least ten days before proposal opening. This will allow for issuance of any necessary addenda. Protests based on any omission or error, or on the content of the solicitation, will be disallowed if these faults have not been brought to the attention of the RFP contact before the time set for opening.

#### **H.** Multiple Proposals

The submission of multiple proposals for the same service will be considered noncompliant and those proposals will be disqualified. We are relying on the vendor as expert, to identify in its proposal the approach which the vendor believes will be the most effective to produce the required services on time and within budget. A potential vendor submitting a proposal for direct services cannot submit a proposal for administrative and quality management support for the grantee.

#### I. Proposal Rejection

The Board reserves the right to reject any or all proposals at any time without penalty. Vendors may withdraw a proposal that has been submitted at any time up to the proposal closing date and time, by submitting a written request to the RFP contact.

#### J. Response Property of the Board

All materials submitted in response to this request become the property of the Board. Selection or rejection of a response does not affect this right.

#### K. No Obligation to Buy

The Board reserves the right to refrain from contracting with any vendor. The release of this RFP does not compel the Board to purchase. The Board is not bound to accept the lowest priced proposal or any of the proposals submitted.

#### L. Cost of Preparing Proposals

The Board is not liable for any costs incurred by vendors in the preparation and presentation of proposals submitted in response to this RFP.

#### M. Acceptance of Terms

All the terms and conditions of this RFP are deemed to be accepted by the vendor and incorporated in its proposal except those conditions and provisions that are expressly excluded by the vendor in the proposal.

#### N. Disclosure of Proposal Contents

All documents submitted to the Board as part of the proposal become public information after the contract is awarded, and available for review and inspection by anyone requesting to do so. The Board does not encourage the submission of confidential/proprietary information in response to this proposal. However, written requests for confidentiality can be submitted to the RFP contact. Neither a proposal in its entirety, nor proposal price information will be considered confidential or proprietary. Under Ohio Revised Code Section 149.43, the BOARD will make a determination of application for disclosure on an ad hoc basis.

#### O. Equal Opportunity

Prospective vendors must comply with the applicable contract compliance procedures for equal employment opportunity as stipulated by the Board. It is the policy of the Board, to assure equal employment opportunity. Discrimination against any person in the recruitment, training, examination, appointment, promotion, retention, discipline or any other aspect of personnel administration because of race, religion, national origin, sex, ancestry, age, disability, sexual orientation, or veteran status is prohibited.

Words of the masculine gender used in proposals shall be deemed and construed to include correlative words of the feminine gender.

#### P. Evaluation Process

All proposals will be reviewed to determine if they are responsive. They will then be evaluated by an Evaluation team. The team will evaluate and numerically score each proposal in accordance with the following evaluation criteria:

- Introduction (5 points)
- Project Understanding (20 points)
- Methodology (20 points)
- Project Management (15 points)
- Qualifications and Experience (25 points)
- Pricing (15 points)

The evaluation process is designed to award the contract to the vendor with the best combination of attributes based upon the evaluation criteria, not necessarily to the vendor with the lowest cost.

The evaluation team will rank proposals, and negotiations may be undertaken with the top ranked vendor/vendors. The Cuyahoga County Board of Health reserves the right to recommend qualified funding proposals out of rank in order to ensure adequate geographic distribution. If an insufficient number of qualified proposals are submitted in any particular service category, the Board reserves the right to directly solicit and select appropriate community-based providers to fill the gaps. Past contractual performance may also be considered for applicants that have previously received Ryan White Part A funding.

#### Q. Contract Negotiations

The option of whether or not to initiate contract negotiations rests solely with the Board. If the Board elects to initiate contract negotiations, these negotiations cannot involve changes in the Board's requirements or the vendor's proposal which would, by their nature, affect the basis of the source selection and the competition previously conducted. The terms of the proposed contract will be negotiated based upon the merit of the application, availability of funding, and conditions of award. Failure of a selected applicant to satisfactorily negotiate a contract within a reasonable time may result in the applicant forfeiting its award.

The vendor is responsible for their travel and per diem expenses during contract negotiations.

#### R. Failure to Negotiate

If any contract cannot be negotiated within fifteen (15) days of notification to the designated vendor, the Board may terminate negotiations with the vendor and negotiate a contract with the next highest ranked vendor.

#### S. Recommendation of Award

Once the Board evaluation team has made its selection, a Notice of Recommendation of Award letter will be issued to the recommended vendor(s), advising of the expected award date.

#### T. Notice of Intent to Award

Prior to approval of the award by the Board, the Administration will issue a written Notice of Intent to Award and send copies to all unsuccessful vendors. The scores and placement of vendors will not be part of the notice. A tabulation of all vendors' names and addresses submitting proposals will be available upon request from the RFP contact person.

#### **U.** Debriefing

Vendors who submitted an unsuccessful proposal may request a meeting for debriefing and discussion of their proposals after receiving a Notice of Intent to Award letter. The request must be in writing addressed to the RFP contact. The debriefing is not to be seen as an opportunity to challenge the decision, nor will it include any comparisons of the vendor's unsuccessful proposal with any other vendor's proposals. The Board will attempt to respond to questions and concerns in this debriefing.

#### V. Protests

A vendor may protest the recommendation of award of a contract by filing in writing to the RFP contact person, as outlined in the Notice of Intent to Award letter. The protest letter shall include the following information:

- 1. Name, address and telephone number of the protester;
- 2. The signature of the protester;
- 3. Identification of the contract at issue;
- 4. A detailed statement of the legal and factual grounds of the protest;
- 5. The form of relief requested.

#### W. Contracting Requirements

The successful vendor shall, upon notification of award, be required to enter into a contract with the Board and must comply with the contract terms and conditions defined herein. If the vendor is unwilling to agree to a proposed clause or term, then your cover letter must reference an appendix which identifies these clauses in dispute and should:

a. Suggest a specific alternative term, clause or approach;

b. Provide an explanation of your reasons.

#### X. Contract Processing

The Board's Administrative Counsel shall prepare the contract required by this RFP specification. This contract shall be fully responsive to the requirements defined in these RFP specifications.

#### Y. Proposal as Part of the Contract

Part or the entire successful proposal may be incorporated into the contract.

#### **Z.** Commencement of Contract Performance

In order to protect the interests of the Board, a contract must be approved by the Board at a regularly scheduled Board meeting after which it must be executed by the Health Commissioner and approved by Administrative Counsel before the goods or services as set forth in this RFP specification can be provided.

#### **SECTION X - CONTRACT INFORMATION**

#### A. Terms and Conditions

The following terms and conditions shall apply to the contract between the contractor and the Board:

- 1. The contract shall be subject to interpretation under the laws of the State of Ohio, and subject to the review of the Board's Administrative Counsel as to legal form and correctness.
- 2. The successful contractor shall agree to indemnify and save the Board harmless from suits or actions of every nature and description brought against it, for or on account of any injuries or damages received or sustained by a party or parties or from any act of the contractor, his servants or agents.
- 3. The Board shall not assume responsibility for the payment of any personal property taxes for any materials not owned by the Board, nor shall the Board pay any insurance premiums for any coverage of any property not owned by the Board. No conditions shall alter this statement.
- 4. The Board is a tax-exempt No. 29 political subdivision of the State of Ohio (Federal Tax ID No. 34-6000817). Necessary tax exemption blanks will be furnished to the contractor when the contract is signed.
- 5. Acceptance of performance is a condition of the contract. It shall be understood and agreed that an agent for the Board shall determine finally the satisfactory quality of the services and/or materials furnished under the contract. Failure to meet performance requirements is a reason for termination of the contract, and the contractor shall be liable to the Board for any excess cost and/or expenses incurred by the Board thereafter.

- 6. In the event that the contract is terminated by the Board, thirty (30) calendar days advance written notice shall be given to the contractor. The contractor shall provide all services and/or materials required by the contract and the specifications to the date of termination. Under no circumstances shall the Board be responsible for any type of penalty payment upon the cancellation of the contact. The contractor, however, shall be paid for all services and/or materials provided to the date of termination.
- 7. Anti-discrimination: The contractor agrees that in the employment of labor, skilled or unskilled, under this contract, there shall be no discrimination exercised against any person because of race, religion, national origin, sex, ancestry, age, disability, sexual orientation, or veteran status, and that violation thereof shall be deemed a material breach of said contract.
- 8. Social Security Act: The contractor shall be and remain an independent contractor with respect to all services performed hereunder and agrees to and does hereby accept full and exclusive liability for payment of any and all contributions or taxes for social security, unemployment insurance, or old age retirement benefits, pensions, or annuities now or hereafter imposed under any Local, State or Federal Law which are measured by the wages, salaries, or other remuneration paid to persons employed by the contractor for work performed under the terms of this contract and further agrees to obey all lawful rules and regulations and to meet all lawful requirements which are now or hereafter may be issued or promulgated under said respective laws by and duly authorized State or Federal officials; and said contractor also agrees to indemnify and save harmless the Board from such contributions or taxes or liability.
- 9. Labor and Material: The contractor shall well, truly and promptly pay or satisfy the just and equitable claims of all persons who have performed labor or furnished materials or equipment for said contractor in the execution of this contract, and all bills, costs or claims of whatever kind which might in law or equity become a lien upon said work.
- 10. Assignment: The contractor shall not assign, transfer, convey or otherwise dispose of this contract, or his right to execute it, or his right, title or interest in or to it or any part thereof, or assign, by power of attorney or otherwise, any of the monies due or to become due under this contract without approval of the Board.
- 11. Ownership of Contract Products: All products produced in response to the contract will be the sole property of the Board.
- 12. If applicable, the successful Respondent will comply with the provisions of the Ohio Revised Code (4115.03 through 4115.16) requiring the payment of prevailing wage. Information on prevailing wage may be obtained from the Prevailing Wage Coordinator of Cuyahoga County, 1642 Lakeside Ave., Cleveland, Ohio 44113, (216) 443-5530.
- 13. Respondent's Warranty against an Unresolved Finding for Recovery: Ohio Revised Code Section 9.24 prohibits the award of a contract to any Respondent against whom the Auditor of State has issued a finding for recovery, if the finding for recovery is "unresolved" at the time of the award. By submitting a bid, the bidder warrants that it is not now, and will not become subject to

an "unresolved" finding for recovery under Ohio Revised Code Section 9.24, prior to the award of any contract arising out of this RFP, without notifying the Board of such finding.

- 14. Suspension and Debarments: The Board will not award a contracts for services funded in whole or part with Federal funds, to an entity who has been suspended or debarred from doing business or who appears on the Federal Excluded Parties Listing System <a href="https://www.sam.gov/">www.sam.gov/</a>.
- 15. Criminal Background Checks (If applicable): Prior to entering into a contract with the Board the successful Respondent shall conduct background checks on all applicants for employment in direct service positions in accordance with applicable requirements so as to not knowingly employ staff who have been convicted or plead guilty to any of the crimes specified in ORC 3319.39(B) or other section of the ORC applicable to the Agency. Failure to conduct such background checks may result in termination of this contract.
- 16. Disbursement of Funds: The Board shall make payments to the contractor on a reimbursement basis for providing the work or services described in the bid. The contractor shall submit invoices supported by such documentation as requested by the Board. The contractor may be required to provide the Board with copies of time sheets, receipts or contracts as validation of expenditures when submitting requests for payment.
- 17. Confidential Information: During the term of this contract, confidential information shall be held by the contractor in the strictest confidence and shall not, without the prior written consent of the Board, be disclosed to any person other than in connection with contractor's assigned projects and activities hereunder. All of the documents and information transmitted and communicated to the contractor shall be considered as sensitive material and shall be held in the strictest confidence by the contractor. Upon termination of contractor's engagement or at any time at the request of Board, or its designees, the contractor shall promptly return or destroy all confidential information in the possession or under the control of contractor and shall not retain any copies or other reproductions or extracts thereof. Nothing contained herein shall be construed as granting or conferring any rights by license or otherwise in any confidential information.
- 18. Books and Records: Funded agencies will be expected to keep records of their activities related to the RW Act funded projects and services to permit the Board, the federal funding source, or their agents access to those records, including fiscal, medical and client records, where appropriate and with respect for client rights to privacy and confidentiality.
- 19. Payment: Payment for contracted services will be made on a line-item reimbursement and performance basis based on monthly invoices and compliance with reporting requirements. This is a cost reimbursement grant.
- 20. Projections and Revisions: Funded agencies will be held accountable for meeting their programmatic projections or, when fitting, for revising projections with the Board. Failure to make progress as projected or to revise projections in conjunction with the Board staff will jeopardize the funded agency's current and/or future RW funding. Corrective action may include contract amendment or termination of contract.

- 21. Amendments: The Board has the option of amending contracts throughout the funding cycle based on program performance, and other contracted requirements.
- 22. Service Funding: All funding must be used exclusively for the allowable costs associated with a Part A service. In addition, agencies are prohibited from receiving or using any additional funding for any costs directly associated with the same services funded by any Part A contract.
- 23. Change in Services: Any change of staffing, service location, or service protocols is not permitted without the written consent of the Board. Any such change in service delivery is not eligible for reimbursement and may result in termination of the service contract.
- 24. Reporting: All funded providers and programs will be required to collect and report data reports to the grantee. This report may include program, quality, and fiscal data. The format in which these reports will be submitted will be determined by the grantee and/or HRSA. Completion and submission of these reports must be incompliance with the guidance of the reports.

#### **B.** Required Contract Documents

In addition to the contract agreement furnished by the Board, the successful contractor shall provide the following documents within fourteen (14) calendar days of the RFP award date. Failure to provide these documents within this time frame may result in a rescission of the award.

- 1. Signature Authorization
- 2. Worker's Compensation Certificate (if required)
- 3. Certificates of Insurance (if required)
- 4. Letter of Indemnification in Lieu of Worker's Compensation Certificate and/or Certificate of Insurance
- 5. IRS Form W-9: Request for Taxpayer ID and Certification
- 6. Certification of Personal Property Tax
- 7. Declaration Regarding Material Assistance/Non-assistance To A Terrorist Organization
- 8. Suspension and Debarment
- 9. Warranty against Unresolved Finding for Recovery

These documents are described in the following paragraphs.

#### C. Signature Authorization

The contractor shall provide one of the following signature authorizations:

- a. For a corporation, including but not limited to non-profit organizations, a notarized certificate of power of attorney authorizing the individual's signature to bind the entity or a notarized certificate of corporate resolution authorizing the signature of the document.
- b. For the sole owner, a notarized statement indicating that the individual is the sole owner and is authorized to sign for and bind the company.
- c. For a partnership, a certificate of partnership agreement showing the names and address of all partners and authorizing the signatures to bind the partnership.

#### D. Worker's Compensation Certificate

A Worker's Compensation Certificate is required from corporations and partnerships with employees. Sole proprietors and individual contractors are not required to submit this document.

The contractor shall provide a Certificate of Premium Payment for Ohio State Worker's Compensation Insurance, or equivalent Worker's Compensation Insurance or letter of indemnification in lieu thereof. This document shall be current for the entire period of the contract.

#### E. Certificate of Insurance

The contractor shall have in effect during the term of the contractual agreement, comprehensive auto and general liability insurance wherein the Board and its employees are named as co-insured or additional insured.

This insurance shall protect the contractor, the Board and its employees, and any subcontractor performing work covered by the contract against claims for damage for personal injury including accidental death, as well as for property damages which may arise from operations under the contract whether such operations be by contractor or by any subcontractor or by anyone directly or indirectly employed by either of them.

An exact copy of such insurance policy or policies shall be made available to the Board for review upon request. A Certificate of Insurance with the following minimum levels of such insurance shall be submitted as follows:

- a. Bodily Injury Liability: \$250,000 per person, \$500,000 per accident.
- b. Property Damage Liability: \$50,000 per accident, \$100,000 per aggregate.
- c. Comprehensive Automobile Liability: \$250,000 per person, \$500,000 per accident.

Subcontractor's Public Liability and Property Damage Insurance and Vehicle Liability Insurance

The Contractor shall either (1) require each of his subcontractors to procure and to maintain during the life of the subcontract, Subcontractor's Public Liability, Property Damage and Vehicle Liability Insurance of type and in the amounts specified above, or (2) the Contractor shall insure the activities of the subcontractor in his own policy as specified above.

The policy or policies shall contain the following, special provisions:

"The contractor agrees that ten (10) days prior to cancellation or reduction of the insurance afforded by this policy with respect to the contract involved, written notice shall be mailed to the Chief Fiscal Officer of the Board."

Any and all expense incident to the furnishing of all insurance required of the contractor, as well as the legally required performance bond (if applicable), shall be borne by the contractor and shall be included in his unit price bid in the contract.

## F. Letter of Indemnification in Lieu of Worker's Compensation Certificate and/or Certificate of Insurance (if either document is required above)

If the contractor cannot provide a workers compensation certificate and/or certificate of insurance as requested, the contractor must, at the time of submission of the RFP, substitute a letter of indemnification for a worker's compensation certificate and/or certificate of insurance.

Only in those circumstances where the contractor verifies being self-insured by means of documentation will the Board consider the substitution of a letter of indemnification for a worker's compensation certificate and/or certificate of insurance. Such documentation, together with the letter of indemnification, must be submitted with the RFP proposal. Such a request will not be considered after the contract has been awarded.

#### G. Performance bond

If applicable, a Performance Bond or certified check, made payable to the Board, in a sum equal to 100% of the total contractual award shall be provided by the contractor should the total amount of the contractual award be in excess of \$25,000.

Such bond or check shall be conditional on the faithful performance of the work in accordance with the specifications, and shall remain in the possession of the Board for the term of the contract and material warranties, whichever is concluded last. Such bond or check shall also indemnify the Board, Ohio, against such damages as may be suffered by failure to perform such contract according to the provisions thereof and in accordance with the specifications. If a bond is submitted, it shall be executed by a surety company authorized to do business in the State of Ohio. The bond shall be notarized with the corporate seal and the bonding company seal. Accompanying the bond shall be:

- A. A certified power of attorney for the agent to sign the bond.
- B. A certificate of compliance for the bonding company for the State of Ohio, Department of Insurance.

If the contractor fails to satisfactorily perform the contract, the bonding company which provided the performance bond will be required to obtain timely performance of the contract.

#### H. Liquidated Damages

If applicable, liquidated damages shall be assessed in the amount of \$800.00 per calendar day for each and every day that the Contractor fails to meet the agreed upon deadline requirements for deliverables under the negotiated contract.

#### I. Letter of Credit in Lieu of Performance Bond/Certified Check

If a performance bond is required, the following will be in effect:

If the contractor cannot provide a performance bond or a certified check in the amount requested, the contractor must, at the time of entering into a contract, substitute a letter of credit for a performance bond or certified check.

Only in those circumstances where the contractor verifies by documentation from insurance and/or bonding companies that a performance bond is not available because of the new, unusual or unique nature of the product or the service being purchased will the County consider the substitution of a letter of credit for the performance bond or certified check requirement. Such documentation, together with the letter of credit in the amount requested for the performance bond, must be submitted during the writing of the contract with the successful contractor.

#### J. IRS Form W-9: Request for Taxpayer Identification Number and Certification

An Internal Revenue Service Form W-9 (Request for Taxpayer Identification Number and Certification) is required to be completed by the contractor, prior to the execution of the contract with the Board.

#### K. Certification of Personal Property Tax

A Certificate of Compliance with Section 5719.042 of the Ohio Revised Code, which requires a certification of delinquent personal property tax by the contractor prior to the execution of the contract of a political subdivision, must be completed.

#### L. Suspension and Debarment

The Board will not award a contract for services funded in whole or part with Federal funds, to an entity who has been suspended or debarred from doing business or who appears on the Federal Excluded Parties Listing System <a href="https://www.sam.gov/">www.sam.gov/</a>.

#### M. Warranty against Unresolved Finding for Recovery

Ohio Revised Code Section 9.24 prohibits the award of a contract to any Respondent against whom the Auditor of State has issued a finding for recovery, if the finding for recovery is "unresolved" at the time of the award. By submitting a bid, the bidder warrants that it is not now, and will not become subject to an "unresolved" finding for recovery under Ohio Revised Code Section 9.24, prior to the award of any contract arising out of this RFP, without notifying the Board of such finding.

#### APPENDIX 1 – PROPOSAL ATTACHMENTS

#### **PROPOSAL ATTACHMENTS:**

- Attachment A Proposal Submission Requirement Checklist
- Attachment B Vendors Reference Sheet
- Attachment C Non-Collusion Affidavit (must be notarized)
- Attachment D Certification of Compliance with Section 3517.13 of the O.R.C.
- Attachment E Sample Proposal Cover Page
- Attachment F Budget Narrative (sample included)
- Attachment G Itemized Budget (sample included)
- Attachment H Comprehensive Budget Request
- Attachment I Disclosure of Agency Funding
- Attachment J HIV/AIDS & Public Funds Disclosure
- Attachment K RFP Evaluation Form

#### **REQUIRED VENDOR ATTACHMENTS:**

- 1. Mission Statement
- 2. Articles of Incorporation
- 3. Proof of 501(c)(3) not-for-profit status from IRS or Secretary of State (if applicable)
- 4. W-9
- 5. Audited Financial Statements (A133, Management Letter, and 990 if applicable)
- 6. List of the Board of Trustees/Directors and senior staff
- 7. Organizational Chart/Table of Organization showing where proposed program/services and staffing fit in
- 8. Job descriptions of all program personnel and supervisors
- 9. Resumes/bios and current licensure of all proposed program staff
- 10. Current accreditation or certification for services. Examples include: JCAHO, COA, CARF, CCCMHB, ODADAS
- 11. Most recent Annual Report

## ATTACHMENT A

## PROPOSAL SUBMISSION REQUIREMENT CHECKLIST

Vendor:	
Vendor Signature:	Date:
Proposal should include the following comp	onents submitted in the following order:
<ul> <li>A. INTRODUCTORY PAGES</li> <li>1. Cover Page (see Attachment E - S</li> <li>2. Table of Contents</li> <li>3. Proposal Submission Requirement</li> </ul>	
B. SCORED NARRATIVE SECTION  4. Cover Letter 5. Introduction - Executive Summary 6. Project Understanding (20 points) 7. Methodology (20 points) 8. Project Management (15 points) 9. Qualifications & Experience (25) 10. Pricing (15 points)	
<ul> <li>15. Attachment F - Budget Narrative</li> <li>16. Attachment G - Itemized Budget</li> <li>17. Attachment H - Comprehensive F</li> <li>18. Attachment I - Disclosure of Age</li> <li>19. Attachment J - HIV/AIDS &amp; Pub</li> <li>21. Additional supporting attachment</li> <li>22. Mission Statement</li> <li>23. Articles of Incorporation</li> <li>24. Proof of 501(c)(3) not-for-profit</li> </ul>	ffidavit (must be notarized) Compliance with Section 3517.13 of the O.R.C. (one for each proposed service) (one for each proposed service) Budget Request ency Funding blic Funds Disclosure
27. List of the Board of Trustees/Dir 28. Organizational Chart/Table of O and staffing fit in to include fit 29. Job descriptions of all program p 30. Resumes/bios and current licenses	rganization - showing where proposed program/services scal support personnel, supervisors and fiscal support.

## **ATTACHMENT B**

## **VENDOR'S REFERENCE SHEET**

INSTRUCTIONS: List a minimum of three (3) organizations to whom requested in the specification. Provide all data requestes if desired.	you have provided like services to that being uested below for each reference listed. Use additional
ORGANIZATION'S NAME:	CONTACT PERSON'S NAME:
ORGANIZATION'S FULL ADDRESS:	CONTACT PERSON'S TELEPHONE NUMBER:
	DATE SERVICE(S) PROVIDED:
SPECIFY THE SERVICES PROVIDED:	
ORGANIZATION'S NAME:	CONTACT PERSON'S NAME:
ORGANIZATION'S FULL ADDRESS:	CONTACT PERSON'S TELEPHONE NUMBER:
	DATE SERVICE(S) PROVIDED:
SPECIFY THE SERVICES PROVIDED:	
ORGANIZATION'S NAME:	CONTACT PERSON'S NAME:
ORGANIZATION'S FULL ADDRESS:	CONTACT PERSON'S TELEPHONE NUMBER:
	DATE SERVICE(S) PROVIDED:
SPECIFY THE SERVICES PROVIDED:	

## **ATTACHMENT C**

## NON-COLLUSION AFFIDAVIT

\* THIS AFFIDAVIT MUST BE EXECUTED FOR THIS BID TO BE CONSIDERED

STATE OF OHIO )	CC		
COUNTY OF CUYAHOGA )	SS.		
	be	ing first duly sworn, deposes and	
says that he/she is	of the p	arty making the foregoing	
proposal: that such proposal is genuine	and not collusive or sham:	that said Respondent has not	
colluded, conspired, connived or agreed	l, directly or indirectly, wit	h any contractor or person to put	in
a sham proposal, or that such other pers	on shall refrain from biddi	ng and has not in any manner,	
directly or indirectly, sought by agreem	ent or collusion, or commu	inication or conference, with any	
person, to fix the price of affiant or any	other contractor, or to fix a	any overhead, profit or cost	
element of said price, or of that of any of	other contractor, or to secur	re any advantage against the	
Cuyahoga County Board of Health or a	ny other persons interested	in the proposed contract; and tha	t
all statements contained in said proposa	al are true; and further that	all statements contained in said	
proposal are true; and further that such	contractor has not, directly	or indirectly submitted this	
proposal, or contents thereof, or divulge	ed information relative ther	reto to any association or to any	
member or agent thereof.			
-	AFFIANT		_
Sworn to and subscribed before me this	day of	2016.	
<del>-</del>	NOTARY PUBLIC		_

#### **ATTACHMENT D**

#### CERTIFICATION OF COMPLIANCE WITH SECTION 3517.13 OF THE O.R.C.

#### RFP #2016-09

CONTRACTS AWARDED TO INDIVIDUAL, PARTNERSHIP, OTHER UNINCORPORATED BUSINESS, ASSOCIATION (INCLUDING A PROFESSIONAL ASSOCIATION ORGANIZED UNDER CHAPTER 1785), ESTATE, OR TRUST MUST CONTAIN THE FOLLOWING CERTIFICATION:

Any contract for goods or services costing more than five hundred dollars must contain a certification by the contracting entity (vendor) that all of the following persons are in compliance with 3517.13(1)(1), limiting campaign contributions to the holder of the public office having the ultimate responsibility for the award of the contract:

- THE INDIVIDUAL
- EACH PARTNER OR OWNER OF THE PARTNERSHIP OR UNINCORPORATED BUSINESS
- EACH SHAREHOLDER OF THE ASSOCIATION
- EACH ADMINISTRATOR OF THE ESTATE
- EACH EXECUTOR OF THE ESTATE
- EACH TRUSTEE OF THE TRUST
- EACH SPOUSE OF ANY OF THE PRECEEDING PERSONS
- EACH CHILD SEVEN YEARS TO SEVENTEEN YEARS OF AGE OF ANY OF THE PRECEDING PERSONS
- ANY COMBINATION OF THE PERSONS LISTED ABOVE

CONTRACTS A WARDED TO A CORPORATION OR BUSINESS TRUST (EXCEPT A PROFESSIONAL ASSOCIATION ORGANIZED UNDER CHAPTER 1785) MUST CONTAIN THE FOLLOWING CERTIFICATION:

Any contract for goods or services costing more than five hundred dollars must contain a certification by the contracting entity (vendor) that all of the following persons are in compliance with 3517. 13(J)(1), limiting campaign contributions to the holder of the public office having the ultimate responsibility for the award of the contract:

- EACH OWNER OF MORE THAN TWENTY PER CENT OF THE CORPORATION OR BUSINESS TRUST
- EACH SPOUSE OF AN OWNER OF MORE THAN TWENTY PER CENT OF THE CORPORATION OR BUSINESS TRUST
- EACH CHILD SEVEN YEARS TO SEVENTEEN YEARS OF AGE OF AN OWNER OF MORE THAN TWENTY PER CENT OF THE CORPORATION OR BUSINESS TRUST
- ANY COMBINATION OF THE PERSONS LISTED ABOVE

It is hereby certified that all of the persons listed above are in compliance with section 3517.13(1)(1) or 3517.13(1)(1) of the Ohio Revised Code.

IF CONTRACTING ENTITY IS A NONPROFIT CORPORATION ESTABLISHED UNDER ORC CHAPTER 1702, THE UNDERSIGNED CERTIFIES THAT SECTIONS 3517.13(1)(1) AND 3517.13(J)(1) ARE NOT APPLICABLE TO THE CONTRACTING ENTITY.

PRINTED NAME	TITLE
SIGNATURE	DATE

## **ATTACHMENT E**

#### SAMPLE PROPOSAL COVER PAGE

(Use this as the format for preparing the proposal Cover Page)

## RYAN WHITE HIV/AIDS TREATMENT EXTENSION ACT PART A PROGRAM AND MINORITY AIDS INITIATIVE

#### RFP # 2016-09

## PROPOSAL FOR ADMINISTRATIVE SUPPORT SERVICES

Plann	ing	Council	Facil	itation	and	Mana	gement
 		~~~~	_ ~~				

## Vendor Name Vendor Street Address Vendor City, State, Zip Code

CEO/Executive Director:	
Board President:	
Individual who will sign contract:	
Proposal Contact:	
Phone Number:	
Fax Number:	
E-Mail Address:	

## **ATTACHMENT F - BUDGET NARRATIVE**

A Budget Narrative (Attachment H) and Itemized Budget (Attachment I) must be completed for each proposed service area separately.

Use this form as guidance and format for preparing and submitting your Attachment H.

A categorical budget (rounded to the nearest dollar) must be submitted separately for each proposed service. All costs must be listed under one of the following categories. **Do not use categories other than those listed below.** The following categories must be defined in terms of dollars and must be justified through the budget narrative. Administrative costs must be identified as such within the budget. Each unit of service cost must reflect all charges associated with it. **Budgets must be submitted in the approved formats - no exceptions. Budgets submitted in formats other than the approved format will not be considered for funding.** 

The budget narrative must accompany the itemized budget for each service category in which you are requesting funds and must include, at a minimum, a description of the following:

**Personnel:** Titles of positions, a brief description of the duties and responsibilities; annual salary and

the percentage of time (FTE) to be devoted to and paid for by this grant; the last name of the employee (if the position is vacant, indicate such and provide an estimated date when the position will be filled). Identify those positions that will account for administration

(e.g. accounting, payroll).

**Fringe:** The amount of fringe benefit attributed to each position (specify percentage).

**Travel:** Describe anticipated travel during the budget/contract period; who is traveling (name and

position); purpose of travel; where; how are travel costs (mileage reimbursement) determined. Be specific. Travel reimbursement is allowable only for services provided off site and must be directly be reficiel in accomplishing the phicatives of the contract

off site and must be directly beneficial in accomplishing the objectives of the contract.

**Equipment:** List specific items of equipment and purchase price, purpose, and person who will use

said equipment. A purchase versus lease analysis should be done for large dollar items. Computer purchases are not allowable. All equipment costs should be included as

administrative costs and are capped at 10%.

**Supplies:** A general description of the types of item classified as supplies. Computer software

should be included in this category. All supplies not directly related to the services

provided to the clients are considered administrative costs and are capped at 10%.

Other: This category should include items such as rent, printing of brochures, telephone, postage,

and utilities (items that are not supplies or equipment). A description and cost must be provided for each item identified in this category. All items listed in this category are

considered administrative costs and are capped at 10%.

<u>Contractual:</u> Describe contractual services with the same level of detail listed above. For each contract

and each sub-contract provide a brief description of the purpose of the contract and a

description of the service organization and its goals and objectives.

## ATTACHMENT G - ITEMIZED BUDGET

A Budget Narrative (Attachment H) and Itemized Budget (Attachment I) must be completed for each proposed service area separately.

Agency:		_ Proposed Service Category:				
<b>Budget Category</b>	Direct Cost	<b>Administrative Cost</b>	<b>Total Request</b>			
Personnel						
Fringe						
Travel						
Equipment						
Supplies						
Other						
Contractual						
Total						
Percentage of Total						

## SAMPLE ATTACHMENT G - ITEMIZED BUDGET -

A Budget Narrative (Attachment H) and Itemized Budget (Attachment I) must be completed for each proposed service area separately.

Agency: <u>Cleveland TGA Sample</u> Proposed Service Category: <u>Mental Health Services Sample</u>

<b>Budget Category</b>	Direct Cost	<b>Administrative Cost</b>	<b>Total Request</b>
Personnel			
John Sample @ .55 FTE	\$33,200		
Jane Sample @ .25 FTE	\$10,500		\$44,800
Jack Sample @ .08		\$1,100	
Fringe			
John Sample @ .55 FTE	\$6,640		
Jane Sample @ .25 FTE	\$2,100		\$8,960
Jack Sample @ .08		\$220	
Travel			
120 miles @ .55/mile	\$66		\$66
Equipment			
Supplies			
General office supplies @	\$200	\$500	\$700
\$300, Copy paper @ \$200,			
and client resource			
pamphlets @ \$200			
Other			
Printing brochures @ \$200,			
Telephone charges at		\$500	\$500
@\$300			
Contractual			
Total	\$52,706	\$2,320	\$55,026
Percentage of Total	96%	4%	

## ATTACHMENT H

## COMPRHENSIVE BUDGET REQUEST

A Comprehensive Budget Request Form must be completed by all applicants.

Vendor:			
Administrative Service Area	Total Request		
A. Planning Council Facilitation and Management			
Total	\$		

## **ATTACHMENT I**

## DISCLOSURE OF VENDOR FUNDING SOURCES

Vendor:	
Vendor Fiscal Year:	
A: Total Vendor Budget- (current fiscal year please insert \$0 if dollars not received):	\$

	PART A	PART B	HOPWA	CITY COUNTY, STATE /FED	ALL OTHER	TOTAL BUDGET
Personnel						
Fringe						
Administration						
Equipment						
Supplies						
Contractual						
Other						
Total Costs						

## **ATTACHMENT J**

## HIV/AIDS SERVICES & PUBLIC FUNDING DISCLOSURE

Program	Services	FTE's	# Persons Served	<b>Funding Source</b>	Service Period	Total Funding Amoun
	202 1200			z unung z uz uz	2 0220 0	
C: Public Funds/Co	ontroots with City	County State	Endard Ca			

• Please insert NA or \$0 if no other funding is received.

## **ATTACHMENT K**

## RFP EVALUATION FORM - ADMINISTRATIVE SUPPORT SERVICES

Agency:	Service:				
Reviewer:	Tota	Total Score:			
CRITERIA	POINT VALUE	SCORE		COMMENTS	
<ul> <li>1. Cover Letter and Introduction-Executive Summary (Attachment E)</li> <li>Is there a concise description of the vendor?</li> <li>Is there a concise description of the proposed service?</li> <li>Does the agency have experience with this service and/or population?</li> </ul>	5				
<ul> <li>2. Project Understanding</li> <li>Does the proposed program description meet, in full or in part, the service requests of the Part A RFP?</li> <li>Does the program narrative address all areas illustrated in background statement?</li> </ul>	20				
<ul> <li>3. Methodology</li> <li>Are proposed services consistent with Part A service requirement?</li> <li>Is there a plan for the service being proposed?</li> <li>Are service protocols consistent?</li> <li>Does program coordinate with/fit into the required tasks?</li> <li>Did proposal outline an acceptable plan for achieving</li> </ul>	20				

deliverables?

<ul> <li>4. Project Management</li> <li>Does the proposal provide an overview of how the vendor will assure requirements are followed?</li> <li>Does the vendor provide an overview of how current legislation is followed to assure compliance with Federal requirements?</li> <li>Does the proposal provide a clear understanding of how tasks will be tracked?</li> <li>Does the provider a structure to ensure ethical standards are kept?</li> <li>Can agency demonstrate appropriate record keeping, reporting, invoicing and well maintained client files?</li> </ul>	15	
<ul> <li>5. Qualifications and Experience (Including Vendor attachments)</li> <li> Has agency provided independent fiscal documents?</li> <li> Can agency demonstrate experience with and proven effectiveness with service(s) or population proposed?</li> <li> Is there evidence of proven success?</li> <li> Does the agency have historical experience with HIV/AIDS services and legislation?</li> <li> Does agency have written policies on customer service, client rights, grievance procedures, quality management and outcomes?</li> <li> Does agency demonstrate multi-cultural capacity or specific cultural competencies?</li> <li> Is staff training and skill development addressed?</li> </ul>	25	
<ul> <li>6. Pricing (ensure submission of Attachments F through J)</li> <li>Is budget data complete and accurate?</li> <li>Is cost fair and reasonable? (cost per client/cost per units of service)</li> <li>Are services to be completed realistic?</li> <li>Do staffing patterns seem appropriate?</li> <li>Does agency have fiscal capacity to invoice accurately and timely?</li> </ul>	15	

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#### Planning Council 2017-18 Meeting Schedule

Cleveland TGA Planning Council Meeting Schedule 2017-18
St. Augustine Manor Health/Ursuline Piazza Campus 7801 Detroit Ave, Cleve. OH 44102

# 2nd Wednesday of Month Consumer Liaison Committee

12:00 – 1:00 PM
March 8, 2017
April 5, 2017
May 10, 2017
June 14, 2017
August 9, 2017
September 13, 2017
October 11, 2017
November 8, 2017
January 10, 2018
February 14, 2018

#### **Strategy and Finance**

1:00 PM – 2:30 PM March 8, 2017 April 5, 2017 May 10, 2017 June 14, 2017 August 9, 2017 September 13, 2017 October 11, 2017 November 8, 2017 January 10, 2018 February 14, 2018

#### Membership, Retention & Marketing

2:30 PM – 3:30 PM
March 8, 2017
April 5, 2017
May 10, 2017
June 14, 2017
August 9, 2017
September 13, 2017
October 11, 2017
November 8, 2017
January 10, 2018
February 14, 2018

#### July is set aside for PSRA

#### 3 rd Wednesday of Month Quality Improvement

3:00 PM - 4:00 PM
March 15, 2017
April 12, 2017
May 17, 2017
June 21, 2017
August 16, 2017
September 20, 2017
October 18, 2017
November 15, 2017
January 17, 2018
February 21, 2018

#### **Executive Committee**

4:00 PM - 5:30 PM March 15, 2017 April 12, 2017 May 17, 2017 June 21, 2017 August 16, 2017 September 20, 2017 October 18, 2017 November 15, 2017 January 17, 2018 February 21, 2018

#### **Planning Council**

5:30 PM – 7:00 PM March 15, 2017 April 12, 2017 May 17, 2017 June 21, 2017 August 16, 2017 September 20, 2017 October 18, 2017 November 15, 2017 January 17, 2018 February 21, 2018

# **Bylaws**

## Of the

# Cuyahoga Regional HIV Health Services Ryan White Planning Council

Planning Council Chairs:

Terry Allan, Kimberlin Dennis and Merle Gordon

**Interim Approval May 18, 2016** 

#### **Address Correspondence to:**

Planning Council Co-Chairs c/o Cuyahoga County Board of Health Ryan White Part A Program 5550 Venture Drive Cleveland, OH 44130 Telephone: 216-201-2000

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#### Article I - NAME AND SERVICE AREA

#### **Section 1.1 Name**

The Name of the Council shall be known as the Cuyahoga Regional HIV Health Services Ryan White Planning Council. As used in these Bylaws and hereinafter, the words "Planning Council" and "Council" shall mean and refer to the full Ryan White Planning Council. The term "committees" or "standing committees" used in these bylaws shall refer to the committees of the Planning Council.

#### Section 1.2 Service Area

The areas served by the Council shall be the same as those established by the Transitional Grant Area (TGA) as defined in Section 1.3, below. The six county TGA includes: Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina counties, representing an area of over 2,300 square miles.

#### **Section 1.3 Definitions**

The definitions listed below are used throughout this Policy.

- a) "TGA" is defined as a geographic area highly-impacted by HIV/AIDS that is eligible to receive Ryan White HIV/AIDS Program Part A funds. To be an eligible TGA an area must have reported at least 1,000 but fewer than 2,000 new AIDS cases in the most recent 5 years.
- b) "Consumer" as referred to in these Bylaws is an HIV positive individual.
- c) "IGA" is defined as and refers to an agreement that involves or is made between two or more government entities to cooperate in some specific way.
- d) "Member" or "Members," as used in these Bylaws, refers to those individuals who have been reviewed through the Planning Council's open nominations process (which may also be referred to as the membership application process), recommended to the Cuyahoga County Executive by the Planning Council, and duly and lawfully appointed to the Planning Council by the Cuyahoga County Council.
- e) "Affiliated" is defined as being or having a family member who is an employee, paid consultant, contractor or officer or board member, or a volunteer (20 or more hours per week) for an agency receiving or competing for Part A funds in a specific service category.

- f) "Family Member" is defined as spouse, partner, mother, father, child, or sibling.
- g) A person who is a client of a Part A funded provider is <u>not</u> considered affiliated.
- h) The "affiliation" limitation does not apply to individuals affiliated with entities that receive funding under other sections of the Ryan White legislation but do not receive funding under Part A.

#### Article II – LEGAL AUTHORITY

#### **Section 2.1 Statutory Authority**

The Council was created by and functions in accordance with section 2602(b)(1) of the Public Health Services Act, as amended by the Ryan White Comprehensive AIDS Resources Emergency Act of 1990, Public Law 101-381, 104 Stat. 576 (August 18, 1990) as amended (Ryan White Legislation). The Chief Elected Official (CEO) in the Cleveland TGA appoints the Council.

#### **Article III – MISSION STATEMENT; DUTIES**

#### Section 3.1 Mission

The mission of the Cuyahoga Regional HIV Health Services Planning Council is to plan for the comprehensive delivery of HIV/AIDS services and allocation of resources for the TGA, as mandated by the Ryan White Part A legislation. The Planning Council will make decisions on how to use funds, working to ensure a system of care that effectively serves all eligible people living with HIV/AIDS in the Cleveland TGA.

#### Section 3.2 – Duties

The duties of the Planning Council, pursuant to section 2602 (b) (4) of the Ryan White legislation, are as follows:

a) Determine the size and demographics of the population of individuals with HIV/AIDS, and determine the needs of this population, with special attention to individuals with HIV/AIDS who know their HIV status and are not receiving HIV-related services, individuals with HIV/AIDS who do not know their HIV status, and disparities in access and services among affected subpopulations and historically underserved communities. This includes establishing methods for obtaining consumer input on community needs and priorities.

- b) Establishing priorities for the allocation of Ryan White Part A funds, including how best to meet such priorities, and additional factors that should be considered in allocating funds. This includes approving reallocation of funds by the Grantee as required during the grant year, based on policies established by the Planning Council.
- c) Develop a comprehensive plan for the organization and delivery of eligible health services, as described in section 2604 of the Ryan White legislation, that is compatible with any existing state or local plan.
- d) Assess the efficiency of the administrative mechanism in rapidly allocating Ryan White Part A funds to the areas of greatest need within the TGA including, but not limited to, the assessment and evaluation of the quality, appropriateness, and documentation of services being provided, length of time between receipt of funds by the grantee and disbursement to providers, and the efficiency and effectiveness of the process overall.
- e) Coordinate with other federal grantees that provide HIV-related services within the TGA.

#### Article IV – MEMBERSHIP

#### **Section 4.1 Membership Definition**

As used in these Bylaws, "member" or "members" refers to those individuals who have been reviewed through the Planning Council's open nominations process (which may also be referred to as the membership application process), recommended to the Cuyahoga County Executive by the Planning Council and duly and lawfully appointed as a member of the Planning Council by the Cuyahoga County Council.

#### **Section 4.2 Open Nominations Process**

a) All potential members of the Planning Council must go through the Planning Council's open nominations process, which is managed by the Membership Marketing and Retention (MRM) Committee, through a Membership Interview and Recommendation Panel. The process will comply with the Health Resources Services Administration (HRSA) guidance, federal rules and regulations, and terms of the Intergovernmental Agreement (IGA). This process shall include broad recruitment for potential members, use of an approved application form, interviews and assessment using clearly established criteria, and Membership Committee recommendation of a slate of nominees for membership (one per available slot) to the Grantee for coordination with the City of Cleveland and the County Executive in accordance with the Intergovernmental Agreement. The County Executive and County Council shall make the final decisions and appointments while complying with applicable federal law. The "Open Nominations Process" is incorporated into these Bylaws and included as Appendix D.

- b) All appointed members of the Planning Council shall have voting privileges; however, no individual may vote at Planning Council meetings until he or she has been officially appointed by the County Executive and County Council.
- c) Planning Council members with recently expired terms of service and an application for reappointment that has been submitted to the County Executive and is pending approval may continue to serve and vote until reappointed or replaced.

#### Section 4.3 Representation and Reflectiveness

- a) A minimum of 33% of the Planning Council shall be individuals who are receiving HIV-related services funded under Part A of the Ryan White legislation and who are not affiliated with a Part A-funded provider.
  - "Affiliated" is defined as being or having a family member who is an employee, paid consultant, contractor or officer or board member, or a volunteer (20 or more hours per week) for an agency receiving or competing for Part A funds in a specific service category.
  - 2. "Family Member" is defined as spouse, partner, mother, father, child, or sibling.
  - 3. A person who is a client of a funded provider is <u>not</u> considered affiliated.
  - 4. A person who is the parent of a minor child or the caregiver for a person receiving services shall be considered to fulfill this reflectiveness requirement.
  - 5. This "affiliation" limitation does not apply to individuals affiliated with entities that receive funding under other sections of the Ryan White legislation but do not receive funding through Part A.
- b) At a minimum, Planning Council membership should include representation of the following groups as specified in the Ryan White legislation:
  - 1. Healthcare providers, including Federally Qualified Health Centers (FQHCs);
  - 2. Community-Based Organizations serving affected populations and AIDS service organizations;

- 3. Social Service providers, including providers of housing and homeless services;
- 4. Mental health and substance abuse providers;
- 5. Local public health agencies;
- 6. Hospital planning agencies or health care planning agencies;
- 7. Affected communities, including people with HIV/AIDS, members of a federally recognized Indian Tribe as represented in the population, individuals co-infected with hepatitis B or C, and historically underserved groups and subpopulations;
- 8. Non-elected community leaders (especially representatives from communities or populations most impacted by HIV/AIDS, based on social and geographic distribution).
- 9. Representatives of State government, including at least one representative of a State Medicaid agency and one representative of an agency administering the program under Part B;
- 10. Part C grantees;
- 11. Part D grantees or organizations with a history of serving children, youth, women, and families living with HIV and operating in the area.
- 12. Grantees under other Federal HIV programs, including but not limited to providers of HIV prevention services. Planning Council membership by a representative from each of the following, if present in the TGA, is expected:
  - i. A representative of each of the following types of grantees funded under Part F: Special Projects of National Significance (SPNS); AIDS Education and Training Centers (AETCs); and HIV/AIDS Dental Reimbursement Program,
  - ii. The Housing Opportunities for Persons With AIDS (HOPWA) program of the U.S. Department of Housing and Urban Development (HUD), and
  - iii. Other Federal programs if they provide treatment for HIV disease, such as the Veterans Health Administration.
- 13. Individuals or representatives of individuals who formerly were Federal, State, or local prisoners, were released from the custody of the penal system during the preceding 3-years, and had HIV/AIDS as of the date on which the individuals were so released.
- c) As specified in the Ryan White legislation, Section 2602(b)(1) and Section 2602(b)(5)(C), both the Planning Council as a whole and the 33% or more of members who are unaffiliated consumers of Part A services as described in subsection (a) above shall reflect in their composition the demographics of the population of individuals with HIV and AIDS in the TGA, with particular consideration given to disproportionately affected and historically underserved groups and subpopulations.

- d) To be eligible to serve on the Planning Council as an individual, not an agency representative (such as a non-elected community leader, member of the affected community, or a recently incarcerated person), a person must live within the TGA. An individual who serves as the representative of a nonprofit organization or a local public agency must work for an agency that has offices within the TGA and must spend the majority of his/her time working in the TGA. A representative of a State Agency (such as Medicaid or the Part B program) serves based on his/her position with the State Agency, and need not live or work in the TGA.
- e) The Planning Council will attempt to obtain representation from each of the counties in the TGA proportionate to the number of living HIV and AIDS cases, as included in the annual Part A program application. The Council will work to ensure that, to the extent possible, unaffiliated consumer membership will be reflective of the gender, age, sexual orientation, racial and ethnic demographics of the infected populations within each county.
- f) The Planning Council Membership, Retention and Marketing committee shall conduct a review of the Membership reflectiveness semi-annually and recruit and maintain a list of potential candidates for referral to the County Executive's office should a vacancy occur in a federally mandated category. For vacancies that occur in federally mandated categories, the Membership committee shall provide notice to the Cuyahoga County Executive and Part A Grantee along with approved application(s) for a candidate(s) to fill the vacancy(ies) within 90-days.

#### Section 4.4 Terms of Service

- a) Each member of the Planning Council shall be appointed as specified in Title XXVI of the Public Health Service Act, Section 2602(b)(1), Section 2602(b)(2) and Section 2602(b)(5)(C).
- b) The term of office shall be for an initial period of two (2) years for newly appointed members, followed by a three (3) year second term and subsequent terms thereafter. Upon completion of the three-year term, an individual is eligible to immediately reapply for Planning Council membership for one (1) additional three-year term. Membership will begin upon appointment by the County Executive in conjunction with the Mayor of the City of Cleveland. Terms will officially begin the first day of August and will end on July 31 following the appointed term. Planning Council membership shall not exceed three (3) consecutive terms without a minimum of one-year off before the individual can re-apply, with allowance for extension of the last term as a voting member until a suitable candidate is found and appointed.

#### **Section 4.5 Duties and Responsibilities**

Planning Council members are expected to carry out the following duties and responsibilities:

- a) Uphold the goals, objectives, policies and procedures of the Planning Council.
- b) Attend and actively participate in Planning Council monthly, special, ad hoc, and emergency meetings and community events.
- c) Immediately following appointment, to serve on the Planning Council, choose a Subcommittee of Record and actively participate in all scheduled meetings.
- d) For all members, participate in Council sponsored annual refresher training and planning sessions.
- e) For all new members, participate in new member orientation and training and review orientation materials within thirty days after appointment.
- f) Participate in all aspects of the annual priority setting and resource allocations process, including: 1). Training and orientation; 2). Data presentation; 3). Priority setting; and 4). Resource allocation; as well as directive formulation that may be undertaken.
- g) Review materials of Council and/or subcommittees as required prior to scheduled meetings.
- h) Comply with the Bylaws as well as all policies and procedures adopted by the Planning Council. To ensure understanding and commitment to doing so, each member will be required annually to sign certain forms including but not limited to those related to: (1) Conflict of Interest; (2) Code of Conduct; (3) Confidentiality; (4) Grievance; and (5) Attendance. Existing documents shall remain in effect and be binding upon the behavior of members until such time as new ones are executed.

#### Section 4.6 Attendance

The aim of the Planning Council is for each Planning Council member to attend, in person, regular meetings of the full Planning Council and to participate actively in at least one Subcommittee. Attendance at a meeting means the Planning

Council member arrives within thirty (30) minutes of the meeting start time and remains for the duration of the meeting.

- a) Each member of the Planning Council is expected to attend 100% of the regularly scheduled meetings of the Planning Council during each program year. The attendance policy is outlined in these Bylaws as Addendum F.
- b) Council members are also expected to attend a subcommittee meeting (other than Executive Committee) according to the subcommittee meeting schedule. Additionally, committee co-chairs are expected to attend 100% of Executive Committee meetings and their subcommittee meetings. Any Council member who fails to comply with the attendance requirement is subject to removal without further cause. For specific attendance requirements, see Addendum F.
- c) A member will receive a warning letter if the member fails to comply with the attendance policy as identified in **Addendum F**.

#### Section 4.6.1 Participation in Meetings by Conference Call

- a) Planning Council Meetings: Members are expected to attend Planning Council meeting in person, except in unusual circumstances (such as very bad weather). The MRM co-chairs, in concurrence with at least one Planning Council Co-chair, may approve participation by telephone at their discretion provided a good reason for the request is given, the request is made at least 3-days prior to the meeting, and capability for such participation is available at the meeting site. However, in accordance with the "Ohio Open Meetings Act (ORC 121.22(c))," a member participating by conference call cannot be counted toward calculation of a quorum for purposes of conducting official Planning Council business and is not permitted to vote.
- b) "Committee of Record" meetings: Members are expected to attend meetings for their "Committee of Record" in person, except in unusual circumstances as described above; however, participation by telephone may be approved provided a good reason for the request is given, the request is made at least 3-days prior to the meeting and capability for such participation is available at the meeting site. The Committee co-chairs, with concurrence by at least one Planning Council Co-chair, may choose to hold a small number of meetings by conference call, particularly if the committee or work group is small or a meeting is held on short notice.

#### Section 4.6.2 Leave of Absence

A Planning Council member may request from the MRM Committee approval of a leave of absence of not less than two and no more than six months. A member seeking approval of a request for leave of absence shall submit the request as soon as possible or at least two weeks prior to the start date of the requested leave, or in the event of an emergency, not later than two weeks following the start of the requested leave. A leave of absence may be granted by a majority vote of the MRM committee at its discretion, for reasons including serious illness of the member or a close family member in his/her care, professional responsibilities that make it impossible to attend Planning Council and subcommittee meetings for a limited period of time, or other pressing personal reasons. A member may request a leave of absence not more than twice within a three-year term and may not request a second leave of absence before returning to service and meeting attendance requirements for a period at least equal to the previous leave of absence. If unable to return by the date originally anticipated, a member may request extension of his/her leave of absence to the maximum duration of six (6) months. If an extension is requested and granted, the total period will be considered a single leave of absence.

#### **Section 4.6.3 Resignation**

Any member of the Planning Council may resign at any time by written notice that bears a valid signature. A Planning Council member that gives verbal notice of intent to resign must provide written notice within 30-days of verbal notice. However, if the individual fails to provide written notice after 30-days have passed, the Membership, Retention and Marketing Committee shall notify the member in writing within 45-days following the verbal notice to confirm the member's intent to resign and/or initiate formal removal from the Planning Council.

A member who has resigned may submit his/her written resignation in person, via e-mail or regular postal mail to the attention of a Planning Council Co-chair. If sent via e-mail, it must contain a statement to attest that the e-mail shall serve as official notice of resignation and include the individual's full name. If sent via postal mail, it must be sent to the following:

Planning Council Chairs c/o Cuyahoga County Board of Health Ryan White Part A Program 5550 Venture Drive Cleveland, OH 44130

Email: ClevelandTGA@ccbh.gov

#### Section 4.6.4 Removal for Non-Attendance

A member's failure to comply with the attendance requirements may result in loss of membership on the Planning Council. The Planning Council shall first attempt to improve attendance and, if this fails, shall recommend to the Cuyahoga County Executive that the non-attending member be removed in accordance with these Bylaws, subject to the following process and conditions:

- a) Warning letter: If a member is in danger of failing to comply with the meeting attendance requirement after she/he has had two sequential absences or three total absences during a single program year the MRM committee shall work with the Planning Council staff to send a warning letter to notify the non-attending member in writing that unless attendance immediately improves, the Planning Council will recommend to the Cuyahoga County Executive that the non-attending member be removed for failure to comply with attendance requirements.
- b) **Response period:** The Planning Council shall allow the non-attending member 30 calendar days from the date of the letter to respond in writing. The response must indicate that going forward the member will attend meetings regularly and provide an explanation for the record as to why the member has failed to attend according to attendance requirements.
- c) Letter to the Chief Elected Official/County Executive: If the member does not begin regularly attending Planning Council and Subcommittee meetings or provide a response that adequately explains special circumstances that caused the non-compliance, the MRM Committee shall suspend the member and recommend the member's removal via a written transmittal to the Cuyahoga County Executive with a copy sent to the Cochairs of Planning Council. If the member's removal creates a vacancy in a federally mandated category, the MRM committee must also include in the County Executive's transmittal a nominee for consideration to fill the vacancy within 90-days of the effective request for termination of the non-compliant member.
- c) Suspension: At the same time the letter is sent to the Cuyahoga County Executive, a letter will be sent to the non-compliant member informing him/her of the Planning Council's action, and suspending the member from the Planning Council while the County Executive is acting on the request for removal. A member under suspension shall not be allowed to participate as a member or vote at Council meetings and is not counted as an active member in the quorum requirements.
- d) Change in status: Members are appointed to fill specific membership categories. When a member of the Planning Council changes his or her affiliation so that he/she no longer represents the membership category

she/he was appointed to fill, that member must inform the MRM Committee of this situation within thirty (30) days.

If the member fits another membership category and the Council is not at maximum capacity, MRM may assign the member to the other membership category to represent that membership category for the remainder of his/her existing term and notify the Planning Council Cochairs, in writing, of the change.

If there is no other position available, the member shall submit his/her letter of resignation from the Planning Council and his/her seat shall be filled in accordance with the Open Nominations Process and the policy to fill federally mandated categories within 90-days of a vacancy.

If the member cannot fit into another available membership category and does not resign, MRM may recommend his/her removal to the Cuyahoga County Executive as no longer eligible for service and immediately suspend the member from meeting participation and voting. If the vacant position is a federally mandated category, the MRM committee must include in its notice to the County Executive a nominee to fill the vacancy within 90-days.

#### Section 4.6.5 Removal for Cause

- a) The Planning Council may recommend to the Cuyahoga County Executive that any member, including a Planning Council Co-Chair, be removed from membership for cause. Conduct or behavior constituting cause for removal may include:
  - 1. Violations of the Code of Conduct or conduct/behavior that interferes with the business of the Planning Council and/or conduct that would have a negative impact on the community's confidence in the Planning Council.
  - 2. Physical attacks on other Planning Council meeting attendees.
  - 3. Verbal abuse of other attendees.
  - 4. Conflict of Interest violations.
- b) If a Planning Council member has concerns regarding the conduct and/or behavior of another Planning Council member, the member shall bring the concerns/issues to the Planning Council Co-Chairs for resolution. If the concerns/issues are still not resolved, the Council Co-chairs will bring the concerns/issues to the Executive Committee for corrective action, which may include termination.
- c) The Executive Committee shall submit a recommendation to the full Planning Council for any proposed recommendation of termination. A

majority vote of the Planning Council shall be required for approval of a recommendation of termination.

d) For all recommendations for termination the MRM Committee, in coordination with the Planning Council Support Staff, shall forward a letter to the Cuyahoga County Executive recommending the member's removal from the Planning Council. A copy of the letter is also sent to the member and he/she is immediately suspended from meeting participation and voting pending the action of the County Executive.

#### Section 4.7 Code of Conduct

The Planning Council has adopted and implemented a Code of Conduct for Planning Council Members and interested individuals, including Consumers/PLWHAs who attend and participate in Planning Council meetings and other activities. The **Code of Conduct** is incorporated into these Bylaws and included as **Appendix A**.

#### Section 4.8 Confidentiality Policy & Pledge

The Planning Council has adopted and implemented a Confidentiality Policy and Pledge for Planning Council members and interested community members, including Consumers/PLWHAs who attend and participate in Planning Council meetings and other activities. The **Confidentiality Policy and Pledge** is incorporated into these Bylaws and included as **Appendix B**.

#### Section 4.9 Officers

#### **Section 4.9.1 Planning Council Co-Chairs**

The Cleveland TGA Planning Council shall be led by three (3) Co-Chairs. The Cuyahoga County Executive appoints one Co-Chair and the Mayor of the City of Cleveland appoints one Co-Chair. For the third Co-Chair, the Planning Council elects a representative from the membership of the Planning Council to represent HIV positive consumers. The Co-Chair representing HIV positive consumers shall be an individual who openly self-identifies as a person living with HIV. The eligibility requirements for the Consumer Co-Chair shall be:

- 1. A person living with HIV/AIDS (PLWHA).
- 2. A current Planning Council member who has served as such for at least 12 consecutive months.

- 3. In good standing related to meeting attendance (i.e. have attended at least 75% of Council and assigned committee meetings within the last 12 months)
- 4. A current resident of the TGA.

The Cuyahoga County Council, in accordance with applicable local laws and Ryan White legislative requirements, shall ratify the appointment of the Planning Council Co-Chairs. The term of office shall be for three years.

Co-Chair terms shall end in rotating years so as to maintain stability and consistency in the leadership roles. In the event that Co-Chair terms cannot end in rotating years, the Council will request that the Co-Chair with the latest term ending date have his/her term extended by one year.

In the event a Co-Chair resigns prior to completion of his/her term, the entity that originally appointed the Co-Chair shall put forth a candidate for ratification by County Council to replace the resigning Co-Chair within 90-days of the official notice of resignation. In the event the resigning Co-Chair is the HIV positive Consumer Co-Chair, the Membership, Retention and Marketing Committee, shall be responsible for identifying and vetting a candidate for Executive Committee and Planning Council approval prior to submission of the candidate to the County Executive for appointment.

#### **Section 4.9.2 Planning Council Consumer Co-Chair Selection Process**

During the meeting in which nominations for Consumer Co-Chair are being considered the following process shall occur:

- The Membership, Retention & Marketing Committee shall distribute information about the nominee(s). Nominees have the opportunity to address the Council and then leave the room during Council decision-making.
- 2. A motion is entertained to consider the nominations. After the motion is seconded, discussion occurs.
- 3. Once discussion concludes, members shall be given a blank ballot and instructed to vote via written ballot for the candidate of their choice.
- 4. Planning Council Support Staff and/or the Contracted Facilitator shall administer the ballots, tally results, and report the results to ensure the integrity of the process.
- 5. At any time during the Consumer Co-Chair balloting process, the Council may go into Executive Session to discuss confidential information. The vote to go into and out of Executive Session shall follow Roberts Rule of Order.

 The Membership, Marketing & Retention Committee prepares an official motion to recommend the nominee with the most votes to the County Executive and Mayor of the City of Cleveland for official appointment.

#### Section 4.9.3 Planning Council Co-Chair Responsibilities

#### Co-Chairs shall:

- 1. Preside at all meetings of the full Planning Council.
- 2. Appoint any Standing and/or Special Committees.
- 3. Serve as liaison, or designate a liaison for/to the County Executive, Mayor of Cleveland and the Ryan White Grantee Office.
- 4. Serve as liaison, or designate a liaison for communication as appropriate with the Ryan White Grantee Office and the Health Resources Services Administration (HRSA). Attend or appoint a representative to attend HRSA meetings/conferences.
- 5. Coordinate, or cause to be coordinated, interaction among stakeholders such as representatives from other Ryan White Parts (B, C, D, others), local and statewide HIV/AIDS planning groups, and state and local health and human services departments.
- 6. Serve as spokesperson for the Planning Council. Issue, or cause to be issued, correspondence that represents the position of the Planning Council on policy/operational/other matters.
- 7. Appoint Committee Co-Chairs.
- 8. Keep, or cause to be kept, the minutes of all meetings of the Planning Council consistent with Ryan White legislative requirements.
- 9. Give, or cause to be given, all notices of meetings of the Planning Council consistent with Planning Council Bylaws.
- 10. Call, or cause to be called, Special Meetings of the Planning Council consistent with Planning Council Bylaws.
- 11. Perform all other duties necessary or incidental to the position.
- 12. Ensure that one Planning Council Co-Chair attends each standing committee meeting.
- 13. Serve as Co-Chair of a standing committee in the absence of both standing committee co-chairs.

#### Section 4.9.4 Planning Council Co-Chair Removal

Only the Cuyahoga County Executive can remove a Planning Council Co-Chair from his/her position. The Planning Council may recommend a Co-Chair's removal from this position in accordance with HRSA guidelines, by a two-third's vote of members present at any regularly scheduled or special meeting that provides required prior notice.

#### **Section 4.10 Standing Committee Co-Chairs**

Each Planning Council Standing Committee shall have two Committee Co-Chairs appointed by the PC Co-Chairs. This Council shall make all attempts to secure at least one Committee Co-Chair who is HIV positive to ensure adequate representation of PLWHA in Council leadership positions. Terms of Standing Committee Co-Chairs shall be for three (3) years, in accordance with Bylaws Articles IV, Section 4.4(a)(b).

#### Section 4.10.1 Standing Committee Co-Chairs Eligibility

Eligibility is limited to committee members. Preferably, an eligible candidate will have been a member of the committee for which he/she is being asked to serve as Co-Chair for the prior six months. The Committee Co-Chairs shall be responsible for the work products of their committee; establishing and managing any task forces and/or working groups of their standing committee, and shall perform all other duties necessary to the position.

#### **Section 4.10.2 Standing Committee Co-Chair Responsibilities**

#### **Standing Committee Co-Chairs shall:**

- 1. Develop the committee's Annual Work Plan.
- 2. Monitor and report during Executive Committee his/her committee's progress toward accomplishing the committee's goals and objectives.
- 3. Develop, or cause to be developed, Standing Committee Meeting Agenda.
- 4. Preside over and facilitate all meetings of their Committee.
- 5. Keep, or cause to be kept, minutes of all Committee meetings.
- 6. Keep, or cause to be kept, attendance at all Committee meetings for Committee records.
- 7. Review all Committee meeting minutes for approval prior to distribution.
- 8. Give, or cause to be given, all notices of Committee meetings (consistent with requirements as outlined in the Bylaws).
- 9. Coordinate with MRM Committee to assist in managing the attendance of members serving on his/her standing committee.
- 10. Support members of the Committee by (a) being available for Committee members who have questions, and (b) contacting members of his/her Committee who fail to complete Committee work assignments, have poor attendance and/or poor participation in the work of the Committee.
- 11. Attend Executive Committee and Standing Committee meetings in accordance with Bylaw requirements as outlined in Section 4.6(b).

12. Perform all other duties necessary or incidental to the position.

#### **Section 4.10.3 Standing Committee Co-Chair Removal**

Any Standing Committee Co-Chair who fails to perform his/her duties as stated in Section 4.9(c) is subject to removal by the Executive Committee.

If a Standing Committee member has concerns regarding the performance/duties of the Committee Co-Chair, the members should first attempt to resolve the issue with the Co-Chair of said Committee. If the issue/concern is still not resolved, the member shall bring the issue/concern to the Planning Council Co-Chairs for investigation and resolution. Finally, if the issue/concern is still not resolved, the Planning Council Co-Chairs shall bring the issues/concerns to the full Executive Committee for resolution.

If the Executive Committee concludes that concerns justify the Standing Committee Co-Chair's removal from his/her position as Committee Co-Chair, the Executive Committee votes to administratively dismiss the Committee Co-Chair for failure to perform his/her duties. The vote is conducted according to parliamentary procedures and requires a simple majority of the Executive Committee members. The dismissed Committee Co-Chair's Planning Council membership term is not affected by the removal as a Standing Committee Co-Chair.

#### Article V – MEETINGS

#### Section 5.1 Regular Meetings

- A. Open Meetings: All meetings of the Planning Council shall be open to the public for the purpose of observing Planning Council deliberations. The Planning Council shall reserve time for public comment on the Agenda of any meeting of the Full Planning Council. Meetings must be compliant with Ohio's Open Meetings Act (ORC 121.22) and in accordance with Ryan White regulations. The most recent edition of Robert's Rules of Order, as amended from time to time, shall govern the meetings of the Planning Council.
- **B. Meeting Frequency:** The Planning Council shall meet monthly on a day and at such time as determined in the discretion of the Planning Council, except in December when the Planning Council will be on recess. The July monthly meeting shall be an annual meeting for the purpose of conducting Priority Setting and Resource Allocations (PSRA). The regular meeting schedule shall be established by the

Planning Council Co-Chairs, in consultation with the Executive Committee, and can be amended at any time by the Co-Chairs by giving the necessary advance notice.

- C. Notice of Meeting: A yearly schedule of meetings will be posted to the Planning Council website (<u>www.ccbh.net/ryan-white</u>) and sent to all Planning Council members by January 31<sup>st</sup>, annually. In addition, the Planning Council's Support Staff shall send a monthly e-mail reminder notice to each Planning Council member at his/her last known e-mail address not less than seven (7) business days prior to the scheduled meeting date.
- **D. Quorum:** A quorum must be present at any regular or special meeting of the Planning Council in order to conduct official Planning Council business. A quorum for official Planning Council meetings is defined as fifty (50) percent of the membership plus one. In computing a quorum, vacant seats on the Council <u>shall not</u> be counted. If a quorum is not present Planning Council members in attendance may conduct the meeting and hold discussions, but no action requiring a vote shall be taken and any item requiring a vote shall be "pending" until a proper vote can be taken involving a quorum at a subsequent meeting.
- **E. Order of Business:** The business agenda of any official meeting of the full Planning Council shall include the following topics:
  - 1. Call to Order
  - 2. Moment of Silence
  - 3. Introductions [Name, Jurisdiction of Residence, Membership Category, Committee of Record, and Affiliation with any Part A funded Provider, (if any)].
  - 4. Review & Approval of Meeting Agenda
  - 5. Review and Approval of Prior Month's Meeting Minutes
  - 6. Public Comment Opportunity (agenda items only)
  - 7. Grantee Report
  - 8. Education/Training
  - 9. Planning Council Business
  - 10. Committee Reports
  - 11. Other Business
  - 12. Announcements and Public Comment
  - 13. Planning Council Feedback
  - 14. Adjournment

The Public has two opportunities to address the Planning Council directly during the public comment and the announcements portion of the meeting. Public Comment is reserved for public participants only. Input from Public Comment will be recorded in the official meeting

minutes and addressed by the Planning Council either during the meeting or at a later meeting date, as needed and/or appropriate. Planning Council members reserve the right to entertain public comment during the business section of the meeting, if sufficient time permits. If the Council Co-chairs agree to hear public comment during a discussion on business, the Co-Chairs will set time limits and manage the time so as to complete the Council's official business.

Planning Council members who wish to add topics to the Agenda may do so during review and approval of the agenda at the start of the meeting, or may do so during other business as time permits.

- **F. Discussion:** Robert's Rules of Order will govern all Planning Council meetings. The presiding Co-Chair shall manage the meeting and agenda and call on Council members at their request to speak in the order requested. In order to allow time for participation from all meeting participants, a member may not speak for more than two (2) minutes on any subject or more than twice on the same subject. Every member who wishes to speak will be called upon once before a member is called upon for a second time.
- **G. Agendas:** An Agenda for all Planning Council and Standing Committee meetings shall be prepared and available to Council members at least 3-business days in advance of the current month's meetings.
- H. Minutes: The Planning Council Co-Chairs shall cause the production of Planning Council meeting minutes. The Planning Council Support Staff shall prepare draft minutes of all official Council meetings within seven (7) business days following the meeting and distribute the draft minutes to the Council Co-Chairs and Subcommittee Co-Chairs for their respective committee. Co-Chairs shall review the draft minutes and acknowledge receipt and approval if there are no changes, or return any modifications within 3-business days of receipt. During the following month's meeting, the respective committees shall vote to ratify the prior month's minutes along with any corrections proposed. Once approved, ratified meeting minutes shall be posted to the Planning Council's website (<a href="www.ccbh.net/ryan-white">www.ccbh.net/ryan-white</a>) by the 3<sup>rd</sup> business day following the month in which the meeting was held.

In accordance with legislative requirements and HRSA expectations, Planning Council meeting minutes shall include the following items: information on the date, time and location of the meeting; the meeting agenda; a detailed summary of discussion points and outcomes according to each agenda item; an attendance record of Planning

Council members; and a listing of staff and non-member/guest participants.

In producing the minutes, Planning Council Support Staff, Co-Chairs and any designee shall take appropriate measures to guard against disclosure of protected health information or other personal information that might violate privacy laws including but not limited to HIPAA, medical or other personal matters that should not be disclosed.

H. Voting: At official meetings of the Council and the Standing Committees (except the Executive Committee), each appointed Planning Council member is entitled to one vote on any question before the Planning Council. Voting shall take place by voice vote, or by show of hands of the members present. Alternatively, any vote may be taken orally with the Council member raising his/her appropriate placard and count off in succession until conclusion. A quorum shall be present in order to conduct official Council business. Proxy votes **shall not** be permitted. All votes shall be recorded by action in the minutes of the meeting. No secret ballot shall be permitted, except in the case of election of the Council's Consumer Co-Chair position. In determining the outcome of a vote, members abstaining will be counted as "not voting." The same will hold true for any member absent from the room at the time of the vote. Passage of a measure will be based upon the "number of members present and voting" so long as a quorum of members are participating.

#### **Section 5.2 Special Meetings**

Special or Emergency Meetings of the full Planning Council may be held on the call of the Planning Council Co-Chairs, or set by the Co-Chairs after written request of any of the four Standing Committee Co-Chairs. Should such a meeting be called, all members shall be notified via e-mail and the meeting notice shall be published on the Planning Council's website (<a href="www.ccbh.net/ryan-white">www.ccbh.net/ryan-white</a>). The notice of special meeting must state the specific subject matter of the meeting and comply with Ohio's Open Meetings Act and Ryan White federal regulations.

#### Section 5.3 Executive Session

During any duly-called meeting, a motion to adjourn to Executive Session may be made by a Planning Council Co-Chair or by two-thirds (2/3) of the Planning Council members present and voting. Issues and topics that

warrant adjournment to Executive Session include, but are not limited to, 1) discussions of appointments, performance, evaluations, health, or dismissal of a planning council support staffer or Council member; 2) strategy & negotiations with respect to pending claims or litigation; 3) security matters; and 4) discussions that would disclose records that are exempt from disclosure. Executive sessions shall be closed to all but Planning Council members and invited persons designated by the Planning Council (e.g., legal counsel, Planning Council support staff or technical consultant). There shall be no official record and no votes taken in Executive Session.

#### **Article VI – COMMITTEES**

#### Section 6.1 General

1. Standing Committees: Standing Committees may be established or eliminated by the Planning Council through Bylaws amendment. An existing Standing Committee may be made inactive by majority vote of the Planning Council. Standing Committees will meet regularly and report on their progress at each regular meeting of the Planning Council. Standing Committees may be composed of both Planning Council Members and non-Planning Council members; however, the Co-Chairs and not less than a majority of the Committee(s) members must also be members of the Planning Council. It is mandatory that each member of the Council serve on at least one Standing Committee.

The Standing Committees of the Council shall be the Community Liaison Committee (CLC); Strategy and Finance (S&F); Membership, Retention & Marketing (MRM); and Quality Improvement (QI).

- 2. Ad hoc committees and task forces of the Planning Council: Ad hoc committees or task forces may be created at any time to meet the operational needs of the Planning Council. The Planning Council, or a Co-Chair with the approval of the full Planning Council, may establish such entities as necessary.
- 3. Subcommittees and task forces of Standing Committees: The Co-Chairs of each Standing Committee may appoint time-limited subcommittees or task forces as necessary to carry out the work of the Standing Committee. Establishment of a subcommittee or task force that is expected to last more than 1-year requires approval by the full Planning Council.

- **4. Decision-Making:** Any action, proposal, or decision made by a Standing Committee shall be submitted for discussion, modification, and/or ratification to the Executive Committee and, in turn, to the full Planning Council at the next meeting following such Standing Committee action, proposal, or decision.
- 5. Expected participation: Every Planning Council member is expected to participate actively on at least one Standing Committee, with attendance requirements as stated in *Article IV, Membership, Section* 4.6.
- **6. Membership:** The majority of the members of Standing Committees, with the exception of the Community Liaison Committee, must be Planning Council members. The Committee that deals with Planning Council membership and governance issues (MRM) may include only Planning Council members as voting committee members.
- 7. Leadership: Two (2) Co-Chairs shall govern each Standing Committee other than the Executive Committee. The Co-Chairs must be Planning Council members and will serve on the Executive Committee as provided in Section 6.2.1. Co-Chairs are appointed by the Planning Council Co-Chairs.
- 8. Voting Rights: When Standing Committees allow non-Planning Council members to serve on their committees, these individuals shall have the same attendance requirements, member expectations, and voting rights in Standing Committees as appointed Planning Council members; however, ONLY Planning Council members appointed by the Cuyahoga County Executive shall have voting privileges at MRM and full Planning Council meetings.
- 9. Contracted Facilitator & Support Staff: The Planning Council Contracted Facilitator & Support Staff shall provide technical assistance and advice to the Standing Committees and help ensure ongoing Grantee participation in committee meetings so that committees have the information, expertise, and resources to carry out their legislative responsibilities. The Planning Council Support Staff shall provide meeting coordination and support to the committees.

#### **Section 6.2 Executive Committee**

 Membership: The Executive Committee shall be comprised of the Planning Council Co-Chairs and the Co-Chairs of each of the Standing Committees. The make-up of the Executive Committee shall include four (4) PLWH/A. If the four PLWH/A are not reflected in the Standing Committee chairs, then at-large PC members will be appointed by the Executive Committee to meet the PLWH/A composition requirement set forth by these Bylaws. The Ryan White Part A Project Director and Program Supervisor are non-voting *ex officio* members of the Executive Committee.

- 2. **Duties:** The Executive Committee shall coordinate the work of the Planning Council, ensuring that all legislative responsibilities are being met. The responsibilities shall include:
  - **a.** Providing leadership in establishing the Planning Council's priorities annually and its overall agenda and work products.
  - **b.** Setting and approving the agenda for each monthly PC meeting.
  - **c.** Providing leadership and oversight of the Planning Council consolidated work plan on a monthly basis and ensuring completion of all Planning Council work products.
  - **d.** Reviewing all Standing Committee work products before they go to the full Planning Council for approval and requesting revisions or additional work as needed.
  - e. Problem solving and integrating work plans across Committees.
  - **f.** Serving as a conduit for information sharing.
  - **g.** Ensuring the integrity of the PSRA process.
  - h. Managing the overall operations of the Planning Council.
  - i. Removing Co-Chairs of Standing & Special Committees (as recommended in accordance with Planning Council Co-chairs)
  - **i.** Reviewing and making decisions on filed grievances.

The Executive Committee shall reserve the right to go into Executive Session to discuss sensitive or confidential information in accordance with Section 5.3 of these Bylaws.

#### Section 6.3 Other Standing & Management Committees

- 1. The Planning Council shall have three (3) Standing Committees, one (1) Governance Committee and an Executive Committee:
  - a. *Three Standing Committees:* Community Liaison Committee; Strategy & Finance and Quality Improvement.
  - b. One Governance Committee: Membership, Retention and Marketing.
- 2. The Standing and Governance Committees shall meet regularly and shall report their work and recommendations first to the Executive Committee and, following approval Executive Committee approval, to the full Planning Council.

#### **Section 6.4 Responsibilities and Membership of Standing Committees**

#### Section 6.4.1 Consumer Liaison Committee (CLC)

- 1. **Membership:** Committee members shall be individuals living with or affected by HIV and AIDS. The membership size shall be unlimited and may include non-Planning Council members. The Committee may choose to have open membership to encourage greater consumer participation.
- 2. Duties: The Community Liaison Committee (CLC) leads and coordinates links between the Planning Council and the PLWH/A community, especially consumers of Ryan White services. The CLC also seeks to improve Ryan White services by informing the Planning Council with their ideas, experiences and vision in order to improve the coordination of Ryan White services within the TGA to increase the health outcomes of PLWH/A.

CLC members shall sponsor Community Forums across the TGA and provide assistance and review in the creation of collateral pieces (PR materials) for release in the community (including English/Spanish versions).

#### Section 6.4.2 Strategy & Finance (S&F)

- Membership: Because of its responsibility for overseeing the PSRA process, the majority of members of the S&F committee must be appointed Planning Council members. A majority of members shall be individuals who do not represent Part A-funded providers.
- **2. Duties:** Members shall be responsible for monitoring Part A expenditures and service utilization by service category and overseeing the PSRA process. Additional responsibilities:
  - a. Create and publish annually by March a PSRA work plan and schedule of activities with timelines to successfully carry-out PSRA, including:
    - i. Making sure there is a written process for conducting PSRA and ensuring the Planning Council follows the process annually.
    - *ii.* Leading the development of the annual data request to the Grantee in preparation for PSRA.
    - *iii.* Developing and regularly reviewing policies and procedures that guide PSRA activities and the final decision-making by the Planning Council.

- *iv.* Leading the effort to develop directives to the Grantee on how best to meet service priorities.
- **b.** Establish procedures for reallocations across service categories during the program year and work closely with the Grantee to develop recommended reallocations for Planning Council action.
- **c.** In collaboration with the Quality Improvement Committee, use data gathered through the needs assessment process to inform the allocation and re-allocation of funds to service categories.
- d. Participate in the annual needs assessment in coordination with the Quality Improvement Committee to determine health care needs of people living with HIV/AIDS in the TGA.
- **e.** Lead the annual Assessment the Efficiency of the Administrative Mechanism (AEAM).

#### Section 6.4.3 Quality Improvement (QI)

- Membership: The Committee shall consist of cross-functional representation of clinical and support service professionals, representatives from the Part A Grantee's office, other Ryan White "parts" (e.g. B, C, D, and/or F), social workers, program administrators and consumers.
- 2. **Duties:** The Committee ensures that services funded by Part A meet or exceed established HIV clinical standards and Public Health Guidelines. Additional responsibilities:
  - **a.** Provide leadership and support for development of an annual Needs Assessment.
  - **b.** Serve as Planning Council's liaison in the creation of and any revisions or amendments to the Integrated Comprehensive HIV Prevention and Care Plan.
  - **c.** Provide input into the development and updating of Standards of Care in coordination with the Grantee's office.
  - **d.** Provide input and monitor the quality management plan.
  - e. Provide input and direction on quality management activities.
  - **f.** Represent the Planning Council on the Part A Clinical Quality Committee.
  - **g.** Host round-table discussions to examine the effectiveness of the continuum of care.
  - **h.** Recommend performance measures and identify indicators to assess and improve performance.
  - i. Support provider-related capacity building efforts.
  - **j.** Ensure the development of an ongoing effort to identify and evaluate unmet services needs which are eligible for funding through the Part A Program.

The QI Committee meets monthly, or as often as needed, to fulfill Committee responsibilities. Grantee reports related to quality management initiatives will be provided to the QI committee.

#### Section 6.5 Responsibilities of the Governance Committee

#### Section 6.5.1 – Membership, Retention and Marketing (MRM)

The Membership, Retention and Marketing (MRM) Committee is the Planning Council's Governance Committee, responsible for developing policies and procedures for Planning Council operations and for maintaining Planning Council membership in accordance with legislative requirements.

- Membership: Because of the confidential nature of the Committee's work, all MRM members must be Planning Council members. The Committee shall involve other Planning Council members to serve on interview panels to conduct interviews of potential candidates interested in serving on the Planning Council.
- 2. Duties: MRM shall be responsible for developing and implementing an open nominations process (which may also be referred to as the membership application process), in accordance with legislative requirements, for Planning Council membership recruitment, review of applications, interviews of applicants, and recommendation of nominees for Planning Council service. Additional responsibilities:
  - **a.** Develop and implement an "Open Nominations Process," to maintain Planning Council reflectiveness in accordance with HRSA guidelines and Planning Council legislative requirements, including a semi-annual assessment of Planning Council's reflectiveness.
  - **b.** Develop membership recruitment strategies to maintain membership reflectiveness, including targeted outreach in accordance with the HIV prevalence in the Cleveland TGA in compliance with Planning Council legislative requirements.
  - **c.** Develop, implement and enforce an effective attendance policy to govern Planning Council member attendance.
  - **d.** Provide leadership for development and implementation of ongoing training to enhance Planning Council capacity to achieve its legislative responsibilities, including the establishment and implementation of training for the following:
    - i. An annual Planning Council training program, to include "New Member Orientation" and/or refresher training for existing members.
    - ii. Understanding and using data for decision-making.

- **iii.** Creating and monitoring implementation of Service Directives.
- iv. Needs Assessments
- **e.** Oversee evaluation and compliance with Planning Council training requirements.
- **f.** Develop program initiatives to strengthen new member capacity and understanding of Ryan White legislative responsibilities.
- g. Update and maintain the accuracy of the Planning Council Bylaws, including supporting Appendices, and Operating Procedures as further guidance for enforcing Planning Council operations, including, for example, procedures for compliance with conflict of interest or enforcement of code of conduct policies, etc.

#### Article VII – CONFLICT OF INTEREST

- A. Definition For the purpose of these Bylaws, Conflict of Interest is defined as "an interest by a Planning Council member in an action that may result in personal, organizational, or professional gain for the member or his/her spouse, domestic partner, parent, child, or sibling." The conflict of interest may be actual or perceived. Having an affiliation with a Part A funded provider such as being a Board member, staff member, consultant, or volunteer for an average of more than 20 hours a week constitutes a conflict of interest. Being a client of a Part A-funded provider is not considered or defined as a conflict of interest.
- B. Participation of Conflicted Members At the beginning of each Planning Council or Standing Committee meeting, each Planning Council member must verbally state (1) his/her name, (2) jurisdiction of residence, (3) membership category, and (4) identify any Part A-funded services category(ies) for which there is a Conflict of Interest. If a topic under discussion relates to a conflict of interest a Planning Council Member must disclose his/her potential conflict of interest before speaking on the topic. Members with a conflict of interest on a given matter shall not advocate for or against a specific position, make a motion, or vote on action related to that matter. They may participate in discussion by offering factual information and answering questions.

During PSRA or reallocations, a member with a conflict of interest shall not take part in voting related to the service category(ies) for which he/she has a conflict of interest, such as setting the service priorities or allocations or offering recommendations for the service category(ies), except that he/she may vote to approve or disapprove an entire slate of priorities or allocations.

- C. Involvement in Procurement No member of the Planning Council may have any role in procurement, which includes development of the Request for Applications (RFA), criteria for provider selection, or participation in provider selection. The sole exception is that one or more Planning Council members who do not represent a funded provider or a provider that is eligible to apply for Part A funds may, at the request of the Planning Council and the Grantee, review specific sections of the RFA that are related to directives established by the Planning Council. This restriction shall not impede or limit the Planning Council's rights to formulate appropriate directives.
- D. Violations of Conflict of Interest Planning Council members are expected to question possible conflicts of interest. If a conflict of interest is reported or alleged, the Executive Committee is responsible for investigating and addressing the conflict of interest, using written procedures adopted by the Planning Council.
- E. Planning Council Policy, Procedures & Forms related to Conflict of Interest The Planning Council has adopted and implemented a *Conflict of Interest Policy and Procedure* that is incorporated into these Bylaws in included as Appendix C.

#### Article VIII – OFFICAL COMMUNICATIONS & REPRESENTATION

- **A.** The spokespersons for the Planning Council are the Co-Chairs of the full Planning Council. They are authorized to speak on behalf of the Council with regard to its roles and responsibilities and provide factual information about actions that have been taken by the Council or are on its public agenda, as well as any other matters for which they have received official authorization by the Council.
- **B.** No officer or member of the Planning Council shall perform any act or make any statement or communication under circumstances that might reasonably give rise to an inference that he or she is representing the Planning Council, except for actions or communications that are clearly within the policies of the Planning Council or have been authorized in advance by the Planning Council.

#### Article IX – EXPENSE REIMBURSEMENT

Reimbursement is allowed for expenses that are a direct result of participating in a Planning Council meeting. The expenses must be reasonable and can include transportation. For transportation

reimbursement, a Planning Council member shall provide evidence that he/she lives within the Cleveland TGA. Following confirmation the member shall be reimbursed via gas cards, based on round-trip mileage calculation from his/her address of residence to the meeting location. When required to travel outside the Cleveland TGA in the performance of Planning Council duties, members may also be reimbursed for their necessary traveling expenses, including transportation, meals and lodging. To be reimbursed, such requests must be submitted in writing, and receive prior written approval from the Grantee/Planning Council Manager or designee prior to incurring the expense.

#### Article X – AMENDMENTS

The MRM Committee is responsible for developing, reviewing, and making any needed amendments to the Bylaws. Revised Bylaws do not go into effect until they have had a legal sufficiency review by the legal representative of the Cuyahoga County Executive or his/her designee. Bylaws must also be submitted to the HRSA/HAB Project Officer for review, to ensure that they meet Ryan White legislative requirements and HRSA/HAB policies. The following process shall be used in Bylaws review and revision.

#### A. Step 1: Submission to the Planning Council's Governance Committee

Proposed amendments to the Bylaws shall be initiated by the MRM committee as part of a governance review, drafted by the Committee at the direction of the Planning Council or Executive Committee, or submitted in writing to the MRM committee by a Planning Council member. The MRM committee shall review the proposed amendment(s). Bylaws amendments shall be recommended by the MRM Committee for further consideration only if they are supported by majority vote of the Executive Committee at a meeting at which a quorum is present.

#### **B.** Step 2: Submission to the Executive Committee

The Executive Committee shall review proposed amendments and determine whether each proposed amendment should be presented for action by the full Planning Council. To be recommended to the Planning Council, an amendment must receive the affirmative vote of a majority of Executive Committee members at a meeting at which a quorum is present.

#### C. Step 3: Planning Council Vote

To be adopted, a proposed amendment to the Bylaws must receive the affirmative vote of two-thirds (2/3) of Planning Council members present and voting at a meeting at which a quorum is present. A proposed amendment may not be considered by the Planning Council unless it has been sent, in proposed form, to each Planning Council member at least seven (7) business days prior to the Planning Council meeting for which a vote is being sought.

#### Article XI – GRIEVANCE PROCEDURE

The Planning Council shall adhere to its established procedures for addressing grievances with respect to funding under Section 2601(a) of the Ryan White legislation. The Planning Council has developed for adoption and implementation a **Grievance Policy and Procedure** that is in compliance with HRSA guidelines and incorporated into these Bylaws and included as **Appendix E.** 

#### Article XII – MAXIMIZING PART A FUNDS

To maximize the use of Part A Grant funds and avoid the risk of underutilization of the Cleveland TGA Part A Awards, the Planning Council grants authority to the Cuyahoga County Board of Health (Part A Grantee) to reallocate Part A funds during the months of December, January and February as needed and without prior approval by the Planning Council in advance of the decision. When such action is necessary the Grantee shall report the reallocation actions to the Planning Council not later than the month immediately following the action.

# **APPENDICES**

# CUYAHOGA REGIONAL HIV HEALTH SERVICES RYAN WHITE PLANNING COUNCIL

# **BYLAWS**

**APPENDIX A: Code of Conduct** 

#### **CUYAHOGA REGIONAL HIV HEALTH SERVICES PLANNING COUNCIL**

# **Code of Conduct**

**Purpose:** The Cuyahoga Regional HIV Health Services Planning Council has created this Code of Conduct in order to ensure Council members, individually and collectively, adhere to the highest possible ethical standards.

- Every Council member will treat every other Council member, support staff, Grantee staff, and members of the public with courtesy and professionalism. Each Council member is reminded to respect and recognize the legitimate right of all Council members to be part of any discussions and decision-making processes. This means that all Council members and guests, at any given meeting, will have the opportunity to speak and be listened to without interruptions, in accordance with "Roberts Rules of Order."
- 2. Every Council member will be truthful and honest.
- 3. Every Council member will honor his/her time and meeting attendance commitments and be prepared for all Council work.
- 4. A Council member who is a current or potential Part A provider, or otherwise has a conflict of interest, shall identify himself/herself as such when participating in Council discussions and decision making processes relevant to his/her service category.

- 5. Personal attacks on anyone will not be tolerated. Disagreements will focus on issues, not upon individuals.
- 6. While recognizing the individual's right to dissent, once decisions are made every Council member will abide by the decision regardless of her/his personal position.
- 7. Recognizing that within the confines of the Ohio Open Meetings Act all information presented at a Council or Committee meeting is part of the public record, Council members shall exercise discretion when discussing confidential or sensitive information, most notably an individual's HIV status.
- 8. Every Council member will honor his/her responsibility to present and consider the concerns of specific communities or populations, but shall also consider the overall needs of people living with HIV disease and balance the interests of both in discussion and decision making.
- 9. Every Council member should make every reasonable effort to speak positively about the Council in public. The Council will strive to address problems internally.
- 10. Any Council member who feels s/he cannot support the mission, goals, strategies, programs, and/or policies of the Council as agreed upon by the membership should consider resignation.
- 11. Every Council member will take responsibility not only for abiding by these rules of conduct personally, but also for speaking out to assure that all members abide by them.
- 12. Only the Planning Council Co-Chairs are authorized to speak, publish materials, provide endorsements on behalf of, or represent the views and articulate the positions or actions taken by the Planning Council. Council members are not authorized to speak on behalf of the Planning Council as a whole but may only speak publicly about their own respective positions. As

- a result, each Planning Council member when taking any of these actions must clearly state that they are speaking strictly on behalf of themselves or expressing their own personal opinion and not that of the Planning Council.
- 13. Every Council member will participate and allow the participation of every other Council member and guest without discrimination with respect to race, gender, religious belief, color, national origin, ancestry, age, physical or mental disability status, sexual orientation or gender identity.
- 14. No Council member shall use alcohol or illegal drugs, or be under the influence of such, at any Council meeting.
- 15. Violation of this Code of Conduct may lead to corrective action up to and including removal from Council membership.

# CUYAHOGA REGIONAL HIV/AIDS HEALTH SERVICES PLANNING COUNCIL **CODE OF CONDUCT AFFIRMATION & PLEDGE**

### **Purpose and Scope**

This Code of Conduct describes the behavior expected of all Planning Council members and other official meeting participants at all meetings and activities associated with the work of the Planning Council.

The Code of Conduct is designed to ensure appropriate behavior at Planning Council and committee meetings as well as other events conducted by the Planning Council. Provisions of the Code of Conduct are designed to ensure that the Council can be productive, open to community input, and respectful of its members and visitors. The Code helps to create a positive environment, and to protect all members and public participants from inappropriate and disruptive behavior.

## **Applicability**

The Code of Conduct applies to Planning Council members and participants at official Planning Council meetings and events.

#### **Understanding and Acceptance**

By signing this Code of Conduct Pledge, I acknowledge receiving a copy of the full Code of Conduct and being afforded the opportunity to discuss it with the Planning Council Co-Chair(s) or members of the Executive Committee. I affirm that I understand the statement and the reasons for it.

#### **Enforcement**

I realize that violation of any provision of this agreement may result in disciplinary measure/s up to and including removal from the Planning Council being taken against me.

Any perceived violation of the Code of Conduct is to be addressed by the full Planning Council Co-Chair(s), and/or Executive Committee as prescribed in the Code of Conduct Policy and Procedures. Any issue not resolved by those means is to be addressed and resolved using the Planning Council's Grievance Policy and Procedures

#### **Pledge**

By signing below, I agree to abide by the expectations set forth in the Code of Conduct for the Cuyahoga Regional HIV/AIDS Health Services Planning Council.

Print Name		Signature	Date
Member of:	Planning Council		
	Guest participant:		

# **CUYAHOGA REGIONAL HIV HEALTH** SERVICES RYAN WHITE PLANNING COUNCIL

# **BYLAWS**

**APPENDIX B: Confidentiality Pledge** 

# Cuyahoga Regional HIV/AIDS Health Services Planning Council

# MEMBER CONFIDENTIALITY POLICY & PLEDGE

I, the undersigned member of the Cuyahoga Regional HIV/AIDS Health Services Planning Council, hereby affirm that my position as a Planning Council member brings with it an ethical responsibility for keeping certain information confidential. This applies to information contained in documents or records, or discussed during interviews, needs assessments, meetings or other situations that may arise as the Council carries out its mandated responsibilities.

I affirm that it is up to the individual to decide whether and when to publicly disclose his/her HIV status, medical status, co-morbidities, and other personal information. I will maintain the confidentiality of such information with regard to Planning Council members; applicants for membership in the Council or any of its sub-groups; and clients/consumers who participate in Planning Council-related activities and others involved with the work of the Planning Council.

This includes holding in confidence the personal experiences or concerns and other sensitive information shared by any members of the Planning Council or its subcommittees, working groups, ad hoc committees or otherwise obtained because of my Planning Council membership. I will help to ensure that in minutes or reports posted on the Council's website, personal information shared in a committee, working group, or Planning Council meeting - with special emphasis on information shared at Community Liaison Committee meetings – is referenced generally rather than identified with a particular individual.

By signing this Confidentiality Policy and Pledge, I acknowledge receiving a copy of this statement and having the opportunity to discuss it with a Planning Council Co-chair(s) or the Planning Council Support Staff member. I affirm that I understand the statement and the reasons for it.

I realize that violation of any condition of this agreement may result in disciplinary procedure/s against me, up to and including removal from the Planning Council. Any perceived violation of the Planning Council's Confidentiality Policy is to be address and resolved using the Planning Council's Grievance Policy and Procedures.

By signing below, I agree	to the conditions set forth in this Confide	conditions set forth in this Confidentiality Policy and Pledge		
Print Name	Signature	Date		

# CUYAHOGA REGIONAL HIV HEALTH SERVICES RYAN WHITE PLANNING COUNCIL

# **BYLAWS**

**APPENDIX C: Conflict of Interest Policy & Pledge** 

# Cuyahoga Regional HIV Health Services Planning Council CONFLICT OF INTEREST POLICY & PROCEDURES

"The Planning Council is bound by the Legislative requirements of Ryan White HIV/AIDS Treatment Extension Act of 2009 ("CARE Act") Part A which expressly prohibits Planning Council participation in the selection of specific entities to receive Part A funding, or in the management of provider contracts"

**Conflict of Interest** is defined by the Planning Council Bylaws as "an interest by a planning council member in an action that may result in personal, organizational, or professional gain." The conflict of interest may be actual or perceived. A member will be deemed conflicted if they would be conflicted by plans to seek Ryan White Part A or MAI funding in that service category in the twelve (12) months subsequent to the vote in question. Therefore, any council member who is affiliated with or who has a family member affiliated with an agency receiving or competing for Part A funds in a specific service category may not participate in decisions involving that service category. The affiliated member may not initiate discussion, introduce a motion or vote on the setting of service priorities, allocation of resources, or development of directives related to that service category.

- "Affiliated" is defined as being an employee, paid consultant, contractor, officer
  or board member, or a volunteer (20 or more hours per week) for an agency
  receiving or competing for Part A funds in a specific service category.
- "Family member" is defined as spouse, partner, mother, father, child, or sibling. Being a client of a provider is not considered a conflict of interest.

**Management of Conflict of Interest:** The Planning Council manages conflict of interest by requiring members to abide by the conflict of interest standards described in the Bylaws and to the guidelines for the management of conflict of interest described below.

- 1. Each Planning Council member must file a new or updated Conflict of Interest Disclosure Form by March 1<sup>st</sup> of each year. Those with no conflict of interest must prepare a form with the notation "NONE," sign, date and submit said form. Planning Council members will be able to submit the required form at the February Planning Council meeting immediately before the March 1<sup>st</sup> deadline. Members absent from that meeting will be responsible for completing and filing a form on or before the deadline.
- 2. Forms are to be submitted to the Planning Council support staff. The support staff will ensure that copies of the member's declaration(s) are retained in the member's file.
- 3. If the member's affiliation changes, the member must submit a revised declaration form within 30 days of the effective date of the change.

- 4. Conflict of Interest is to be addressed at new member orientation and as part of any ongoing member training. New members are to complete, sign and submit a Conflict of Interest Disclosure Form during their orientation session.
- 5. At the beginning of each meeting of the Planning Council, the Co-Chair presiding shall direct each member to (1) state his/her name; (2) identify his/her Planning Council membership category and position, if any; (3) and state whether he/she does or does not have a conflict of interest.
- 6. Any affiliated member with a potential conflict of interest must verbally disclose such at the beginning of any affected discussion.
- 7. Upon disclosure of his/her affiliation and conflict of interest(s), the Planning Council member may engage in discussion of issues pertinent to the types of services provided by his/her agency but must comply with the limitation imposed and specified below.
- 8. An affiliated Planning Council member may not make or second a motion on issues directly related to services provided by the agency with which he/she is affiliated.
- 9. An affiliated Planning Council member may not vote on issues directly related to services provided by the agency with which he/she is affiliated.
- 10. During priority setting, resource allocation, directive formulation, or reallocation of funds, an affiliated Planning Council member may not initiate discussion about service category(ies) in which they have a conflict of interest.
- 11. During priority setting or resource allocation, an affiliated Planning Council member may vote on a slate of priorities or allocations that includes multiple service categories even if they have a conflict of interest with one or more, but not all, of the grouped categories.
- 12. The obligations of Planning Council members under the Conflict of Interest Policy shall extend to any discussions with other Planning Council Members regardless of location.
- 13. Any perceived violation of the Planning Council's Conflict of Interest Policy and Procedures shall be documented in meeting minutes and is to be addressed in the following manner:
  - a. For an appointed Planning Council Member's <u>1<sup>st</sup> violation</u> of the Conflict of Interest Policy, the Planning Council member shall be notified of the violation in writing with a copy of the notice forwarded to the Cuyahoga County Executive. The issue shall be resolved using the Planning Council's Grievance Policy and Procedures.
  - b. For an appointed Planning Council Member's <a href="mailto:2<sup>nd</sup> violation">2<sup>nd</sup> violation</a> of the Conflict of Interest Policy, the Planning Council member shall be notified of the violation in writing and shall be recommended to the Cuyahoga County

Executive for suspension from the Planning Council for a period not to exceed 6 months.

- c. For an appointed Planning Council Member's <u>3<sup>rd</sup> violation</u> of the Conflict of Interest Policy, the Planning Council member shall be notified of the violation in writing and shall be recommended to the Cuyahoga County Executive for termination and permanently prohibited from further Planning Council participation.
- d. For a guest/non-appointed participant attending a Planning Council meeting that violates the Planning Council's Conflict of Interest Policy, the guest shall immediately be reminded of the Conflict of Interest Policy and shall be asked to refrain from further violation. If the guest fails to comply, the incident shall be documented in the meeting minutes and the guest shall be directed to leave the meeting.

# **Acknowledgement of Receipt of Ohio Ethics Law**

Pursuant to ORC 102.09(D), within fifteen days after any Public Official or Planning Council member begins the performance of official duties, with the agency for which the Public Official or Employee serves, Planning Council shall furnish the official or employee a copy of Chapter 102 and Section 2921.42 of the Ohio Revised Code, and may furnish such other materials as the appropriate ethics commission prepares for distribution. The Public Official or Employee shall acknowledge their receipt of these materials in writing. The requirements of this division do not apply at the time of reappointment or reelection.

# CUYAHOGA REGIONAL HIV HEALTH SERVICES RYAN WHITE PLANNING COUNCIL

# **BYLAWS**

**APPENDIX D: Open Nominations Process** 

# CUYHOGA REGIONAL HIV HEALTH SERVICES RYAN WHITE PLANNING COUNCIL

# **OPEN NOMINATION PROCESS**For Planning Council Membership

# I. Legislative Background

The Cuyahoga Regional HIV Health Services Ryan White Planning Council was created by and functions in accordance with section 2602(b)(1) of the Public Health Services Act, as amended by the Ryan White Comprehensive AIDS Resources Emergency Act of 1990, Public Law 101-381, 104 Stat. 576 (August 18, 1990) as amended (Ryan White Legislation).

#### II. Process Overview

The Cuyahoga County Executive is responsible for the appointment of Planning Council members from a slate of nominees forwarded by the Planning Council. This slate of nominees shall come from an open nomination (application) and interview process that shall be conducted annually beginning in January and ending with a vote on the slate of potential candidates during the full Planning Council's May meeting. Only those candidates that have been vetted through the open process will be considered for Planning Council membership. Nominations for membership are to come from a wide spectrum of candidates.

## III. Role of Membership, Retention and Marketing Committee

The Membership, Retention and Marketing (MRM) Committee is a standing committee of the Cuyahoga Regional HIV Health Services Ryan White Planning Council. The Committee shall work collaboratively with the Cuyahoga County Executive through the Cuyahoga County Board of Health and City of Cleveland Department of Public Health. The MRM Committee is responsible for being impartial and acting in a timely manner as it recommends new candidates during the open nomination (application) and interview process and whenever vacancies may occur in the interim period. The Committee shall publicize the Open Nomination Process, recruit applicants, interview prospective members, and make recommendations for appointment. In so doing, the Committee through its Membership Interview and Review Panel shall ensure that Planning Council membership is representative of the local epidemic, that at least 33% of Council members are unaffiliated People Living with HIV/AIDS (PLWHA's), and that Council membership fulfills the mandated membership categories as defined by Ryan White Legislation and HRSA guidelines.

# IV. Criteria for Planning Council Membership

The Planning Council will comply with the Ryan White HIV/AIDS Treatment Extension Act of 2009 as amended. A member may fill only one legislatively mandated category with three exceptions to the rule as outlined in the Ryan White Part A Manual. (1) One person can represent the substance abuse and mental health provider categories if the agency provides both types of services, and the person is familiar with both programs; (2) A person represents an agency that receives grants from and knows the operations of some combination of the specific funding streams identified in the Category ("Grantee under other Federal HIV Programs") below (e.g., a provider that receives both HOPWA and SPNS funding); (3) A representative of state government may hold both the Part B and State Medicaid categories if their specific division administers both Part B and Medicaid and that person is familiar with the daily operations of both entities.

At a minimum, the legislatively mandated Planning Council membership shall include representation of the following groups, as specified in the Ryan White legislation:

- a. Health care providers (including federally qualified health centers);
- b. Community-Based Organizations serving affected populations and AIDS service organizations;
- c. Social service providers, including providers of housing and homeless services;
- d. Mental health and substance abuse providers;
- e. Local public health agencies;
- f. Hospital planning agencies or health care planning agencies;
- g. Affected communities, including people with HIV/AIDS, members of a Federally recognized Indian tribe as represented in the population, individuals co-infected with hepatitis B or C, and historically underserved groups and subpopulations;
- h. Non-elected community leaders (especially representatives from communities or populations most impacted by HIV/AIDS, based on social and geographic distribution);
- Representatives of State government, including at least one representative of a State Medicaid agency and one representative of an agency administering the program under Part B;
- j. Part C grantees;
- k. Part D grantees or organizations with a history of serving children, youth, women, and families living with HIV and operating in the area:
- I. Grantees under other Federal HIV programs, including but not limited to providers of HIV prevention services. This category shall also include, at a minimum, a representative from each of the following if present in the TGA:
  - A representative of each of the following types of grantees funded under Part F: Special Projects of National Significance (SPNS), AIDS Education and Training Centers (AETCs), and HIV/AIDS Dental Reimbursement Program,
  - ii. The Housing Opportunities for Persons With AIDS (HOPWA) program of the U.S. Department of Housing and Urban Development (HUD), and
  - iii. Other Federal programs if they provide treatment for HIV disease, such as the Veterans Health Administration.

m. Individuals or representatives of individuals who formerly were Federal, State, or local prisoners, were released from the custody of the penal system during the preceding 3 years, and had HIV/AIDS as of the date on which the individuals were so released.

The Ryan White HIV/AIDS Treatment Extension Act of 2009 mandates no less than one-third or (33%) of the members must be unaffiliated PWA/PLWH "receiving or eligible for Part A fundable services and/or the parents and caregivers of minor children who are receiving or eligible to receive such services." As specified in the legislation, Section 2602(b)(1) and Section 2602(b)(5)(c), both the Planning Council as a whole and the 33% or more of members who are unaffiliated consumers of Part A services as described in subsection (a) above shall reflect in their composition the demographics of the population of individuals with HIV and AIDS in the TGA, with particular consideration given to disproportionately affected and historically underserved groups and subpopulations.

To qualify as an Unaffiliated PWA/PLWH, one must live in the TGA and, (1) not be employed by a Part A funded agency; (2) not serve on the board of a Part A funded agency; (3) not volunteer more than 20 hours a week for a Part A funded agency; (4) not have a family member who fits into the preceding categories. A "family member" is defined as spouse, domestic partner, grandparent, mother, father, child, or sibling. A consumer who lives in the TGA, is a client of or who volunteers for <u>less</u> than 20 hours a week with a Part A funded provider is considered unaffiliated. Any consumer who, within the last two years, (1) has been an employee, paid consultant, contractor, officer or board member of; (2) has been paid for work (including but not limited to building renovation) by; or (3) has been promised work or a contract with a Part A provider shall be considered affiliated. Planning Council Conflict of Interest Policies impose strict requirements on those members who are affiliated with any Part A funded provider.

To qualify for Planning Council serving as the representative of a nonprofit organization or a local public agency, an individual must work for an agency that has offices within the TGA and must spend the majority of his/her time working in the TGA. A representative of a State Agency (such as Medicaid or the Part B program) serves based on his/her position with the State Agency and need not live or work in the TGA.

The Planning Council will attempt to obtain representation from each of the counties in the TGA proportionate to the number of living HIV/AIDS cases, as included in the annual Part A program application and work to ensure that, to the extent possible, unaffiliated consumer membership is reflective of the gender, age, sexual orientation, racial & ethnic demographic of the infected populations within the TGA.

## V. Solicitation of Applications

Cuyahoga Regional HIV Health Services Ryan White Planning Council membership is open to all persons interested in or affected by HIV/AIDS in the TGA. The Planning Council accepts applications on an ongoing basis and individuals submitting an application outside the scheduled Open Nomination's process will be notified within 5 business days of receipt of their application and advised of the application procedures. However, the official Cleveland TGA Open Nomination period shall occur annually, from January through May. When the official Open Nomination Process begins, persons

having submitted applications shall be contacted to confirm their continued interest and inform them about the process ahead.

The Open Nomination Process will inform and solicit applications from all interested stakeholders comprising the HIV-AIDS community including, but not be limited to, PWA/PLWH, minority citizens, under-served and under-represented populations, service providers, government agencies, community organizations, faith-based communities, and residents of the various counties within the TGA. The MRM committee shall conduct an annual assessment of the current membership profile and compare it against the profile of the HIV population in the TGA. Following the assessment, MRM will engage in targeted outreach to secure applications from individuals who qualify for the specific membership categories that need to be filled during a given nomination period.

The MRM Committee will develop an outreach/recruitment plan designed to maximize awareness of and interest in the Planning Council during the Open Nomination Process. The Planning Council and the Cuyahoga County Board of Health (Grantee) will support the plan's implementation.

The Planning Council shall begin the Open Nomination Process not later than six months prior to expiration of appointed terms of members. When specific vacancies occur, only applications from individuals who qualify for the federally mandated membership category that is vacant will be recommended for consideration.

#### VI. Application Form and Packet

The Planning Council application includes (1). factual questions designed to secure information used in complying with legally mandated requirements for representative and reflective membership; and (2) open-ended questions used to capture information about an applicant's experience and background, including his/her knowledge of HIV/AIDS, Ryan White legislation and guidelines, as well as her/his professional and personal skills that may be an asset to the Planning Council.

Individuals interested in applying for Planning Council membership and attending at least two (2) Planning Council or Standing Committee meetings will receive a packet containing:

- a. Application form.
- b. A brochure describing the work of the Planning Council
- c. Planning Council meetings schedule
- d. Planning Council Member Attendance Requirement & Pledge
- e. List of federally mandated membership categories;
- f. Open Nomination Process overview document; and
- g. A contact person including email address, telephone number and fax number to obtain clarification and further information.

A Planning Council Application form can be obtained via the Planning Council website (<a href="www.ccbh.net/ryan-white">www.ccbh.net/ryan-white</a>), mail, e-mail or pick-up from the Planning Council Support Staff at the Cuyahoga County Board of Health (CCBH) office.

#### VII. Reappointment of Current Members

Current Planning Council members seeking reappointment will be asked to supplement their new application by addressing the following questions (1) describe their specific contributions to the Planning Council during their present term as well as to (2) outline contributions they hope to make if reappointed and (3) to suggest goals for the Planning Council to pursue in the future, that they will actively work to achieve.

Members seeking reappointment must submit their applications on or before the deadline for reappointment specified and announced by the MRM Committee. The Reappointment Application deadline will be before the beginning of the New Member Application recruitment to enable the Membership Committee in seeking out candidates, to fill all federally mandated membership categories.

The Planning Council Staff Support in coordination with the MRM Committee will present a report showing the attendance of each member during the present appointment term. The report will show attendance at (1) Planning Council Meetings; (2) Standing Committee of Record for each member; (3) Priority Setting and Resource Allocation event activities for the TGA and other MRM designated meeting that required mandatory attendance.

#### VIII. Receipt and Initial Processing of New Applications

Upon receipt of an application, the Planning Council Support Staff shall forward the application to the MRM Committee Co-chairs or designee(s) to ensure all required information has been provided. If any information is missing, the applicant will be contacted and advised that his/her application cannot be considered until/unless the missing information is supplied. If the application is complete, the MRM Co-chairs or designee send a letter to the applicant that (1) acknowledges receipt of the application; and (2) outlines the steps and approximate dates in the next part of the process.

Applicants will be invited to attend a minimum of two Planning Council or Standing Committee meetings. Those applying during the period when the Open Nomination Period is closed will also be advised of the opportunity to become involved on a Standing Committee as well as work groups.

#### IX. MRM Interview & Review Panel

MRM will create an Interview & Review Panel (Panel) as part of each open nomination period to review and evaluate new applications as well applications from current members seeking reappointment. The chair of the Interview and Review Panel shall be a Co-chair of MRM or his/her designee.

The Panel members will be drawn primarily from the MRM Committee and supplemented by other Planning Council members as needed to ensure that the Panel is adequately diverse based on race, gender, sexual orientation, county of jurisdiction, etc.

The Panel will interview all applicants during an established interview period. Interview days and times will be varied to offer maximum flexibility in accommodating applicant

work hours and other scheduling constraints. The Panel will conduct candidate interviews primarily by telephone.

#### X. Interview Process

A standard set of open-ended questions will be developed in advance of the interview process to be asked of each applicant. Questions will be designed to gain a broad and representative perspective of each applicant's potential contribution to the work of the Planning Council as well as the individual's goals for serving on the Council. Every effort will be made to keep the interview time allowed each applicant relatively equal.

At the end of each interview, each panelist will complete a "ballot" for each interviewee using ratings (1) Recommend; (2) Recommend with reservations; (3) Do not recommend. Ballots will be completed without consulting other panelists. At the end of each interview process, the panel will discuss each panelist's perception of the interviewees.

All ballots will be collected and retained by the Panel co-chair or designee who will tally the votes and ultimately prepare a spreadsheet summary for use in deliberations held after completion of the interviews.

#### XI. Ranking and Recommending Nominees

With assistance from the Panel co-chair, the Planning Council Support Staff will prepare the following materials for Panel use during the Deliberation and Recommendation phase.

- a. Summary of Interview Panel Votes for New Applicants
- b. Summary of Demographics & Membership Categories for Applicants

The Panel will use the data to rank and determine which applicants will be recommended for appointment. Collaboration and consensus will be used to ensure all membership categories are filled and that the Council membership is both representative and reflective.

The recommendations of the Panel shall be submitted to the Executive Committee for final vote and approval.

#### XII. Confidentiality of All Materials, Information and Proceedings

All materials related to the Open Nomination Process are strictly confidential. They are entrusted to the custody of the MRM Co-chairs and Planning Council Support Staff at all times. Materials including any photocopies made for use by Panel members are to be maintained by the Panel co-chair or Planning Council Support Staff at all times. Any materials no longer needed by the panel and not required to be archived are to be shredded and disposed of in a secure manner.

Panel members are not to disclose or discuss the interview deliberations specifics with Planning Council members, applicants or any others.

#### XIII. Submitting Nominations to the Cuyahoga County Executive

Upon authorization from the Planning Council, all necessary documentation for each applicant, those recommended for appointment, for re-appointment and those interviewed but not recommended, will be submitted to the Cuyahoga County Board of Health for coordination. The Board of Health will coordinate with the City of Cleveland Department of Public Health for final submission of the Planning Council recommendations to the Mayor of Cleveland and the Cuyahoga County Executive (Chief Elected Official for the TGA). The Office of the County Executive will conduct all required screening, background checks and other actions required for formal While the County Executive appointments generally follow the recommendations of the Planning Council, the County Executive may choose to appoint any person who has completed the Open Nominations Process. The County Executive may also choose to may make fewer appointments than the number of vacancies and require the Planning Council to seek additional individuals to recommend for appointment. In the end, Planning Council members are appointed and serve at the pleasure of the County Executive. In all cases, the appointments by the County Executive are final.

#### XIV. Notification of Applicants

The Board of Health will notify the Planning Council when recommendations and documentation for nominees have been submitted to the County Executive for review, vetting and final action. The MRM Committee will advise applicants of the anticipated time frame and the fact that the County Executive's office may contact them directly to possibly arrange for an interview and to advise them of their decision.

#### XV. Official Appointment to the Planning Council

The County Executive, as the Chief Elected Official for the TGA, will vet all nominees for appointment and as political appointments, all choices are made at the sole discretion of the County Executive while following federal law and HRSA guidance and honoring the Planning Council Open Nominations Process.

Once appointments are approved, appointees will be notified via letter of their official appointment and term of service on the Planning Council.

Newly appointed members must participate in mandatory new member orientation training and sign forms agreeing to comply with Planning Council policies that cover Conflict of Interest, Code of Conduct, Confidentiality and Attendance Requirements, within the first 30-days of appointment.

# CUYAHOGA REGIONAL HIV HEALTH SERVICES RYAN WHITE PLANNING COUNCIL

# **BYLAWS**

**APPENDIX E: Grievance Policy & Form** 

# **Cleveland TGA Planning Council Grievance Policy**

# 1) Purpose of Policy

The Cuyahoga Regional HIV/AIDS Health Services Planning Council grievance procedure is established to provide a mechanism for resolution of disputes initiated by eligible individuals or entities directly affected by the outcome of a decision related to funding.

# 2) Policy

Section 2602 (c)(2) of the Ryan White Treatment Modernization Act of 2006 requires Part A Planning Councils to develop grievance procedures related to funding decisions, including procedures for submitting to binding arbitration grievances that cannot be resolved. The legislation requires that these procedures be consistent with model grievance procedures developed by HRSA, which address grievances with respect to Ryan White funding. It is the policy of Cuyahoga Regional HIV/AIDS Planning Council (Planning Council) to comply with the legislative requirements of the Ryan White Treatment Modernization Act of 2006 and to implement this policy.

### 3) Rules of this Procedure

#### A. Definitions

- **1. Party** Refers to one of the participants in the grievance process. This includes the grievant (the individual or entity that brings the grievance action) and the respondent (the entity against which the grievance is brought).
- 2. Remedy The relief or result sought by a grievant in bringing a grievance. It can include a process change, funding reallocation, or (in some situations) a reversal of a decision. Under this procedure remedies are prospective, which means they apply to future funding and/or prioritization related decisions, but do not apply retroactively to past funding and/or prioritization decisions.
- **3. Standing** A term referring to the eligibility of an entity or individual to bring a grievance.
- **4. Directly affected -** means those parties who include the following:
  - a. Providers eligible to receive Ryan White HIV/AIDS Program funding
  - b. Consumer groups/PLWHA coalitions and caucuses, and
  - c. Other affected entities and individuals as determined locally.
- **5. Grievant** The individual or entity "directly affected" by a decision of the Planning Council.
- **6. Grievance** A "grievance" shall be defined as a dispute or controversy arising from the alleged misapplication or

misinterpretation of the Ryan White Part A legislation and regulations for the priority setting and resource allocation (PSRA) process.

**7. Day -** A "day" as used in this procedure shall mean "business days" (excluding Saturdays, Sundays or holidays).

# **B.** Types of Grievances Covered

This policy allows grievances involving the process of prioritization of Part A service categories for funding, allocation of funds to the prioritized service categories, and any subsequent process to reallocate funding.

# C. Who May File a Grievance:

Individuals or entities "directly affected" by the outcome of a decision by Planning Council related to prioritization of service categories and/or allocation of funding are eligible to bring a grievance.

# D. Prospective Implementation of Settlements

Any settlement reached may involve prospective (future) change. It shall not require reversal of decisions previously made.

# E. Non-Binding Process Rules

- 1. Any hearing shall be informal.
- 2. The records and discussions between the parties shall be considered confidential to the extent permitted by state or federal law.
- 3. Time limitations for filing a grievance at any step shall be set forth in the grievance procedures outlined below and shall be strictly adhered to and enforced.
- 4. The place for informal meetings or hearings in the non-binding process shall be in-person at the offices of Cuyahoga County Board of Health (Ryan White Part A Grantee). Parties, by mutual agreement, may agree to conduct meetings via electronic or telephonic means.

#### F. Arbitration Process Rules

- 1. All hearings shall follow the formal hearing requirements of arbitration.
- 2. The records and discussions between the parties shall be considered confidential to the extent permitted by state or federal law.
- 3. Time limitations for filing an appeal and pursuing the appeal in arbitration at any step shall be set forth in the arbitration procedures outlined below and shall be strictly adhered to and enforced.
- 4. The place for arbitration meetings and/or hearings shall be in-person only and held at the offices of the Cuyahoga County Board of Health (Ryan White Part A Grantee).

- 5. At all times during the arbitration process the conduct of the parties shall be professional.
- 6. Time limits, wherever specified in this policy, shall be strictly adhered to as provided for herein.
- 7. Costs: Each party to bear own expenses. Losing party shall be required to pay the costs of mediation and/or arbitration.

#### 4. Grievance Procedures

- A. Every grievant shall have the right to present a grievance in accordance with the procedures provided herein free from any interference, coercion, restraint, discrimination or reprisal and, except at Step 1 under Section C, shall have the right to be represented at all other stages of the Grievance Procedure. It is the intent and purpose of this policy that all grievances shall be settled, if possible, at the lowest step of this procedure.
- B. The following procedures shall apply to the administration of all grievances filed under this policy.
  - 1. Except at Step 1 under Section C, all grievances shall be in writing and shall include the name and position of the directly affected party; the identity of the provisions of the statute or legislation or any regulation involved in the grievance; the time and place where the alleged events or conditions constituting the grievance took place; if applicable, the identity of the party responsible for causing the said grievance if known to the directly affected party; and a general statement of the nature of the grievance and the redress sought by the directly affected party.
  - 2. Except at Step 1 under Section C, all decisions shall be rendered in writing at each step of the Grievance Procedure. Each decision shall be transmitted to the directly affected party and their representative, if any.
  - 3. If a grievance affects multiple individuals or entities, or is associated with a TGA-Wide controversy, it may be submitted at Step 3 under Section C.
  - 4. Nothing contained herein shall be construed as limiting the right of any directly affected party having a dispute or grievance from discussing the matter informally with any appropriate member of the Planning Council Executive Committee, and having said matter informally adjusted without the intervention of the formal grievance procedures, provided that the adjustment is not inconsistent with the terms of this policy, the statutes, regulations or contractual agreements. In the event that any grievance is adjusted without a formal determination pursuant to this procedure, while such adjustment shall be binding upon the directly affected party and

shall in all respects be final, said adjustments shall not create a precedent or ruling binding upon the Planning Council in future proceedings.

- 5. The existence of this Grievance Procedure, hereby established, shall not be deemed to require any directly affected party to pursue the remedies herein provided and shall not impair or limit the right of any directly affected party to pursue any other remedies available under law, except that any directly affected party who pursues any other remedy other than provided by this procedure shall automatically have waived and forfeited any remedies provided by this procedure.
- 6. The time limits provided herein will be strictly adhered to and any grievance not filed initially or appealed within the specified time limits will be deemed waived and void.
- C. All grievances shall be administered in accordance with the following steps of the Grievance Procedure.

#### Step 1:

Any directly affected party who believes he/she/it may have a grievance involving any aspect of the process for prioritization of Part A service categories and/or the allocation of funding to prioritized service categories shall reduce the grievance to writing and present the grievance to the Part A Project Director (Project Director) at 5550 Venture Dr., Parma, Ohio 44130. Said grievance shall be submitted/filed within ten (10) days of the date of any prior decision or from the date of discovery of the facts giving rise to the grievance. The Project Director shall refer the written grievance to the Planning Council Grievance Review Committee who shall determine the eligibility of the grievance for this process and issue a written authorization to proceed or rejection within five (5) days of the notice of the grievance to the Committee. If the grievance is authorized the Planning Council Co-chairs shall schedule a meeting with the directly affected party within five (5) days of the date of the authorization from the Grievance Review Committee. The Planning Council Co-Chairs shall render their decision in writing within five (5) days after the meeting.

## **Review of Grievance Requests for Eligibility**

Prior to Step 2 of this procedure, the Planning Council Grievance Review Committee, comprised of the Planning Council Co-Chairs, the contracted Planning Council Facilitator, and the Part A Grantee Project Director shall review the directly affected party's grievance in order to determine its merit and eligibility for this process. Should the Grievance Committee decide the grievance is ineligible for this process or is lacking sufficient merit, it may deny the grievance for lack of jurisdiction or similar grounds. Such denial shall not be made in a perfunctory or arbitrary manner.

#### Step 2:

## **MEDIATION PROCEDURE**

If the directly affected party is not satisfied with the written decision at the conclusion of Step 1, a written appeal of the decision may be filed with the Part A Project Director within five (5) days from the date of the rendering of the decision in Step 2. Copies of the written decisions shall be submitted with the appeal. The process for resolution at this step involves mediation.

Upon receipt of the notice of appeal the Project Director, along with the Health Commissioner and the directly affected party, shall mutually select and agree on a third party mediator within ten (10) days of the date that the appeal from Step 2 was filed with the Project Director. A mediator shall be independent of either party and shall be an impartial person hired to assist in the resolution of the grievance. The mediator shall be promptly notified, and barring any conflicts, shall convene a hearing or conference within fifteen (15) days of their receipt of the assignment to mediate the grievance. The hearing will be held with the directly affected party, his/her/its representative, and any other party necessary to provide the required information for the rendering of a proper decision. Said hearing or conference shall be held at the offices of the Cuyahoga County Board of Health (Ryan White Part A Grantee). A resolution or decision not to proceed (impasse) by the third party mediator shall occur not later than five (5) days after the hearing/conference. If the matter is resolved through this process, any resolution shall be reduced to writing and signed by the Planning Council Co-Chairs for the Cleveland TGA and an authorized representative of the directly affected party and the mediator. A record of the written decision or agreement shall be kept on file in the records of the Grievance Review Committee.

If the directly affected party is not satisfied with the decision at Step 3, they may proceed to Step 4: Arbitration pursuant to the Arbitration Procedure contained herein below.

#### Step 4:

# ARBITRATION PROCEDURE

In the event a grievance is unresolved after being processed through all of the steps of the Grievance Procedure, unless mutually waived or having passed through the various steps by timely default of the Cleveland TGA, then within ten (10) days after the rendering of the decision at Step 3 or a timely default by the Cleveland TGA at Step 3, either party adversely affected (Cleveland TGA, directly affected party or planning council) may submit the grievance to arbitration by filing a notice to arbitrate and submitting any required application to the appropriate Arbitration association required by this policy. Within ten (10) days after the filing of the notice to arbitrate, the parties will meet to mutually select an arbitrator from the permanent panel of

arbitrators. If the parties cannot agree within the ten (10) days from the intent to arbitrate, the parties shall require a list of arbitrators from the Federal Mediation and Conciliation Service (FMCS). Arbitrators names will be stricken alternately from the FMCS list until one (1) name remains who shall be designated the arbitrator to hear the grievance in question.

The arbitrator shall have no power or authority to add to, subtract from, or in any manner alter the specific rules, regulations, statutory requirements or terms of this Policy or to make any award requiring the commission of any act prohibited by law or to make any award that itself is contrary to law or violates any of the terms and conditions of this Policy.

The arbitrator shall not decide more than one (1) grievance on the same hearing day or series of hearing days except by the mutual written agreement of the parties.

The hearing or hearings shall be conducted pursuant to the Rules of the American Arbitration Association.

The fees and expenses of the arbitrator and the cost of the hearing room, if any, shall be borne by the party losing the grievance. Neither party shall be responsible for any of the expenses incurred by the other party.

The arbitrator shall convene a hearing to be held at the offices of the Cuyahoga County Board of Health (Ryan White Part A Grantee) no later than fifteen (15) days after notice and selection of the arbitrator. The arbitrators' decision and award shall be in writing and delivered within ten (10) days from the date the record is closed. The decision of the arbitrator shall be final and binding upon the parties.

Approved by:

Approved by.
Planning Council Co-Chair
Planning Council Co-Chair
Planning Council Co-Chair
Approval Date

# CLEVLAND TGA PLANNING COUNCIL GRIEVANCE FORM

Cleveland Transitional Grant Area Cuyahoga County Board of Health Cuyahoga Regional HIV Health Services Ryan White Planning Council

Grievances may be filed against the Cleveland TGA Planning Council for the following deviations from policy:

- Deviations from the established, written priority-setting and/or resource-allocation process (e.g., failure to follow established conflict of interest procedures).
- Deviations from an established, written process for any subsequent changes to priorities or allocations.

The policy and procedures that govern the handling of this grievance can be obtained at: <a href="http://www.ccbh.net/ryan-white-hivaids-planning-co/">http://www.ccbh.net/ryan-white-hivaids-planning-co/</a>.

In order to file a grievance with the Cleveland TGA Planning Council this form must be completed, submitted, and received by the Ryan White Part A Project Director within 30 days of the date of the alleged deviation. Any grievant will be contacted within ten (10) working days of the receipt of this form.

When completed, submit this grievance form to the contact information provided at the bottom of the form.

Name(s) of Person(s) Filing the Grievance:
Address:
Telephone Number (daytime):
Date of alleged deviation from established policy/procedure:
Which policy/procedure was allegedly deviated from?

Describe in detail the alleged deviation, including how you were directly affected and what remedy you seek:				

Please return Form to: Cuyahoga County Board of Health 5550 Venture Drive Parma, OH 44130 ATTN: Ryan White Part A Project Director

# CUYAHOGA REGIONAL HIV HEALTH SERVICES RYAN WHITE PLANNING COUNCIL

# **BYLAWS**

**APPENDIX F: Attendance Policy** 

"UNDER DEVELOPMENT"

# Ryan White HIV/AIDS Part A Program Greater Cleveland Transitional Grant Area Memorandum of Understanding By and Between Part A Grantee and Planning Council

# I. Purpose

This Memorandum of Understanding (MOU) is designed to:

- Create a shared understanding of the relationship between the Greater Cleveland Transitional Grant Area (TGA) Planning Council ("Planning Council") and the Ryan White HIV/AIDS Program (RWHAP) Part A designated Grantee, Cuyahoga County Board of Health ("Grantee").
- Delineate the roles and responsibilities of each entity with regard to implementing the Part A RWHAP (Part A and Part A Minority AIDS Initiative (MAI) funds); and
- Encourage a mutually beneficial relationship between the Grantee and Planning Council.

The MOU describes the legislated responsibilities and roles of each party, as well as the locally defined roles and expectations for how these roles and responsibilities will be carried out.

# II. Roles and Responsibilities

# A. Roles and Responsibilities of the Planning Council

The Planning Council is solely responsible for the following tasks, as specified in the Ryan White HIV/AIDS Treatment Extension Act of 2009 ("Ryan White legislation") related to Part A funds:

- Priority setting and resource allocation
  - On an annual basis the Planning Council will prioritize service categories and allocate funds to those service categories. The Planning Council will also provide directives to the Grantee on how best to meet set priorities and funding allocations, including reallocation of funds as required during the program year and allocation of any funds to be carried over into the next grant year.
- Assessment of the efficiency of the administrative mechanism
   On an annual basis the Planning Council will assess the efficiency of the
   Grantee's process for procuring services and disbursing funds in accordance with the Planning Council's priority setting and resource allocation decisions.

In addition to tasks specified in the Ryan White legislation the Planning Council is responsible for developing and implementing its policies and procedures governing the items listed below. These policies and procedures will be reviewed annually, and within 90 days of any material change to federal legislation or guidance.

- Conflict of Interest
- Code of Conduct
- Confidentiality

# B. Roles and Responsibilities of the Grantee

The Grantee is solely responsible for meeting the following legislatively mandated responsibilities.

#### Procurement

The Grantee will solely manage the process for awarding contracts to service providers and will ensure distribution of all Part A formula, supplemental and Minority AIDS Initiative (MAI) funds according to legislative requirements and the priorities, allocations, and directives of the Planning Council.

# Contract Monitoring

The Grantee will monitor all contracts, including fiscal expenditures and service deliverables, to ensure that providers are meeting their contracted responsibilities and are in compliance with established standards of care.

# Funding Re-allocations

The Grantee will recommend re-allocations among service categories to the Planning Council during the grant year, based on service category utilization and expenditures.

# Technical Assistance to Funded Service Providers

The Grantee will provide technical assistance to service providers on an asneeded basis to build capacity to meet current and emerging needs, provide culturally and linguistically appropriate services, and improve contract compliance and service delivery.

# Clinical Quality Management

The Grantee will establish and implement a clinical quality management program to assess the extent to which HIV-related primary health care services are consistent with Public Health Service guidelines, enhance health and supportive services access, deliver and continuously improve systems of care, and ensure that all services contribute to positive health outcomes.

# C. Shared Responsibilities

The Grantee and Planning Council share the following legislative responsibilities, with one entity designated in the lead role for each, as stated below:

# The Planning Council has primary responsibility for the following shared tasks:

#### Needs Assessment

At a minimum, this will determine:

- The size and demographics of the population of individuals with HIV in the TGA.
- The size and demographics of the estimated population of individuals with HIV/AIDS who are unaware of their status.
- The needs of these populations, with particular attention to:
  - Individuals with HIV/AIDS who know their status but are not receiving HIV-related services.
  - Disparities in access and services among subpopulations and historically underserved communities.
  - Individuals with HIV/AIDS who do not know their HIV status.
- The Planning Council has primary responsibility for planning and overseeing needs assessments, with the Grantee assisting with the process and providing the Planning Council information such as service utilization data and expenditures by service category on a mutually agreed-upon schedule.

# Comprehensive Planning

The Planning Council has the lead role in developing a comprehensive plan for the delivery of core health and support services within the TGA, which is required by HRSA every three (3) years or as otherwise stipulated. The Planning Council has primary responsibility for developing the section of the plan related to the ideal system of care and the goals, objectives, and strategies necessary to achieve that system. The Grantee has primary responsibility for providing information and assistance with plan development, setting Grantee-specific goals and objectives as appropriate, reviewing the final plan, and making suggestions regarding changes as needed.

# The Grantee has primary responsibility for the following shared task:

#### Standards of Care

The Grantee will develop and maintain standards of care and outcome measures, allowing for extensive Planning Council involvement and input in the process.

The following tasks are shared by the Grantee and Planning Council, with each playing a different role:

#### Evaluation

Both the Planning Council and Grantee are responsible for assessing the effectiveness of prioritized and funded services in meeting identified needs via aggregate data provided by the Grantee. The Grantee takes the lead in evaluation based on HRSA-specified performance measures linked to clinical quality management. The Planning Council has the option of evaluating the

cost and outcome effectiveness of services and the continuum of care in a manner consistent with available time and resources.

#### Coordination of Services

Both the Planning Council and Grantee will work to ensure coordination of Part A services with other Ryan White programs and with non-Ryan White funded services. The Planning Council ensures coordination through its Comprehensive Plan and its priorities, allocations, and directives. The Grantee helps ensure coordination through contract provisions and monitoring.

# D. Management Responsibilities

In addition to these legislative roles, the Grantee and Planning Council share the following responsibilities related to Part A Program planning and management.

- Fiscal management of Planning Council support funds
   Planning Council support funds are part of the 10% administrative funds available to the Grantee for managing the Part A Program and are allocated to cover the following:
  - Planning Council Facilitation: A Planning Council facilitator will be procured through a competitive Request for Proposals (RFP) process on the same cycle used to procure service providers. The Planning Council Co-chairs will participate in the review of submitted proposals and selection of the winning proposal.
  - Planning Council Administrative Support: Administrative support will be provided by a designated employee of the Grantee that does not report directly to the Part A Program Supervisor for Planning Council activities. Administrative support also includes provision of office supplies, printing, copying, etc.
  - Travel Reimbursement: Planning Council members who are also PLWHA will be reimbursed for travel to Planning Council meetings and activities.
  - Food: Food will be provided at Planning Council meetings scheduled during or close to normal meal times (i.e. breakfast; lunch; dinner).
  - Needs Assessment: Funding to cover the cost(s) of conducting a needs assessment as required by HRSA will be included in the Planning Council budget.
  - RWHAP Part A Biannual Conference: Funding to cover travel and accommodation costs will be included to allow the Consumer Co-Chair to attend this biannual conference.
  - Grantee In-Kind Support:
    - The Grantee will provide office space within its facility that includes secure archive storage space with capacity for public access and review of Planning Council documents in compliance with legislative requirements.

- The Grantee will assist the Planning Council in securing meeting space appropriate for its needs as determined and defined by the Planning Council, and in compliance with Americans with Disabilities Act (ADA) requirements.
- The Grantee will provide legal counsel related to Planning Council documents, processes and procedures, etc. as requested by Planning Council and as appropriate.
- The Grantee's Ryan White Part A Project Director will serve in the role of liaison to Planning Council, which includes supervision of the administrative support position.

# Annual RWHAP Part A Application

The Grantee has primary responsibility for preparation and submission of the annual Part A grant application. The Grantee will not use Planning Council support funds to cover costs that may be incurred in this process.

- The Planning Council will be informed by the Grantee of the timeline for the
  writing and submission of the Part A grant application in order to allow
  opportunity for the Planning Council to provide input, especially with regard
  to sections pertaining to Planning Council responsibilities (needs assessment;
  the PSRA process; assessment of the efficiency of the administrative
  mechanism; directives to the Grantee).
- The Planning Council authorizes the Co-Chairs to sign any letter of concurrence required as part of the grant application, such as to indicate expenditure of funds in accordance with Planning Council priorities, allocations, and directives.
- Competitive Procurement Process for Service Providers: Procurement and
  contracting are the sole responsibility of the Grantee; the Ryan White legislation
  specifically prohibits Planning Council involvement, and government procurement
  regulations do not permit external review of the proposals submitted by prospective
  service providers during the competitive bidding process.
  - Written directives to the Grantee developed by Planning Council during the PRSA process related to how the prioritized services should be provided will be included in the Request for Proposals (RFPs) released by the Grantee during the competitive procurement process.
  - The Planning Council is prohibited from having access to information about
    the performance or expenditures of individual service providers. In the
    instance of there being only one entity providing services within a given
    service category, the Planning Council may have access to expenditure
    information but will take particular care to ensure discussions and decisions
    are compliant with Part A regulations related to procurement.
  - Planning Council members agree to refrain from requesting information related to funding for specific service providers through the State of Ohio's

- Public Records or Freedom of Information laws in their capacity as Planning Council members.
- Planning Council members agree to refrain from involving themselves in consumer or provider complaints about a specific service provider in their capacity as Planning Council members. Planning Council members agree to refer individuals and/or providers making such complaints back to the service provider in question in order to resolve the complaint through that service provider's established process.

# III. Communications

# A. Principles for Effective Communications

Both the Grantee and the Planning Council recognize the importance of regular, respectful and open communication and sharing of information in a timely and transparent fashion. There should be clarity regarding what will be communicated, when, and to whom. When problems or issues arise there should be a joint commitment to resolution through established procedures. The parties commit themselves to the following principles:

- All parties will take responsibility for establishing and maintaining open and respectful communications.
  - This includes both sharing and reviewing information in a timely fashion once it has been received. If issues or problems arise, prompt communication between both parties should occur to clarify the situation and decide how it should best be addressed.
- The Project Director/PC Liaison, Program Supervisor, Planning Council Contracted Facilitator, Planning Council Co-Chairs will communicate regularly.
  - Planning Council Co-Chairs will participate in conference calls, as needed and appropriate, with the PC Contracted Facilitator, Project Director/PC Liaison, and Program Supervisor to discuss matters related to the ongoing work of the Planning Council and standing subcommittees, as well as any issues or concerns of the Planning Council or the Grantee.
- The Project Director/PC Liaison and Program Supervisor (or their designee) will attend PC meetings.
  - The Part A Project Director and Program supervisor will attend all scheduled full Planning Council meetings as well as the meetings of the following standing committees: Executive, Strategy & Finance and Quality Improvement. The Project Director and Program Supervisor (or their designee) will make an effort to attend additional committee meetings, when invited to do so, by the Planning Council and/or will provide information as requested.
- Planning Council Administrative Support Staff will assist the PC Contracted Facilitator in coordination of PC meetings through the following activities:

- sending a meeting reminder notice via email to all committee members prior to the scheduled meeting date.
- sending meeting agendas via email to all committee members prior to the scheduled meeting date.
- recording meeting minutes.
- posting notice of meetings and meeting minutes on the Ryan White Part A website maintained by the Grantee.
- The Planning Council Facilitation Contractor will serve as a communication liaison between the standing subcommittees and the Grantee.
   This may include forwarding requests from subcommittee co-chairs for support from or participation by the Grantee in subcommittee meetings, review of subcommittee documents, etc.
- Both entities will use designated liaisons and channels of communication.
   When Planning Council subcommittee chairs or members are seeking information or materials beyond what is regularly shared by the Grantee, such requests will be made in writing using the established "Planning Council Request to Grantee" form.
  - The Planning Council Contracted Facilitator and/or the Planning Council Administrative Support Staff will assist the interested Planning Council subcommittee chair or member with completion of this form.
  - Completed request forms must be reviewed and approved by the Planning Council Co-Chairs prior to submission to the Grantee.
  - The Planning Council Administrative Support Staff will maintain a tracking system for submission and resolution of these forms. The Grantee will provide an update on any outstanding request forms at PC Executive Committee meetings. In the event that the Grantee cannot fulfill a particular request the Program Supervisor will notify the Planning Council Contracted Facilitator and/or the Planning Council Co-Chairs.
  - All parties agree to avoid making inappropriate requests and using inappropriate communication channels that fall outside of those stipulated in this MOU.

# B. Implementing these Principles

To facilitate communications and implementation of these principles, all parties agree to the following actions:

• The Planning Council Co-Chairs, Planning Council contracted facilitator, Part A Project Director and Part A Program Supervisor agree to participate in monthly conference calls to: review and approve the Executive Committee and Planning Council meeting agendas; review progress on required Planning Council activities/deliverables; and discuss any issues or concerns related to Planning Council and/or Grantee activities. A set schedule for the calls will be negotiated with the Co-Chairs based on their availability.

- All parties agree to provide adequate lead time if/when requesting special information or materials (e.g. data requests).
- All parties agree to request information with adequate notice and respond to information requests in a reasonable amount of time. When possible, information requests will include a date by which the information is needed. (also see preceding bullet related to lead time for requests)
  - If requested information is not received in a timely manner the Part A Project Director and Planning Council contracted facilitator will work together to resolve the situation. If resolution cannot be reached the provisions in Section V (below) will be followed.

# IV. Information/Document Sharing and Reports and Deliverables

# A. Overview

It is the intent of this MOU to encourage regular sharing of information and materials throughout the grant period. This section specifies the type of materials to be provided and information to be shared through meetings. Parties to the MOU may request and receive additional materials or information, except for information that should not be shared for reasons of sensitivity or confidentiality.

# B. Information to be Provided by the Planning Council to the Grantee

The Planning Council, through the Planning Council Contracted Facilitator, will provide the Part A Program Supervisor with the following information and materials:

# Annually

- A dated roster of Planning Council members that includes: the term of membership; the legislatively mandated service category filled by each member; and any agency affiliation each member may have. This list will be provided for inclusion with the Part A grant application and at the beginning of each program year. The list will be updated and provided to the Grantee if/when changes occur throughout the year.
- A listing of prioritized service categories and funding allocations made by the Planning Council at its annual priority setting and resource allocation meeting, along with a summary of the process used to establish them, within ten (10) business days of Planning Council approval.
- A listing of directives to the Grantee on how to best meet the established priorities related to provision of services, within ten (10) business days of Planning Council approval.

- A summarized report of the Assessment of the Efficiency of the Administrative Mechanism (AEAM) within ten (10) business days of approval by the Planning Council.
- Information and/or documents requested by the Grantee to complete the annual Part A grant application related to the Planning Council and its functions. Information and/or documents will be requested and provided using a mutually agreed upon schedule.
- Designation and approval of the service category or categories for use of any grant carry-over funds that are anticipated to be available for use in the next grant year, up to 5% of the total formula funding award.

# Ongoing

- Notification of the Planning Council's monthly meetings, ad hoc work group meetings, orientation and training sessions, and other Planning Council events, at the same time notification goes to Planning Council members. The Planning Council Administrative Support Staff will be responsible for using email to notify Grantee staff regarding meetings and/or events and will include relevant meeting materials such as agendas, handouts, etc.
- Any new or revised Planning Council governing documents such as bylaws and/or policies and procedures. The new or revised documents will be sent to the Grantee within ten (10) business days of approval by the Planning Council.

# C. Information to be provided by the Grantee to the Planning Council

The Grantee will provide the Planning Council Contracted Facilitator with the following reports and information. Any additional information deemed to be necessary by the Planning Council and/or the Planning Council Contracted Facilitator will be discussed with the Grantee as the need arises.

\*The asterisked items listed below will be provided within ten (10) business days of receipt or completion by the Grantee.

# **Annually**

- A copy of any Ryan White Part A Notice of Grant Award, including Conditions of Award\*.
- A copy of the grant funds carryover request to HRSA (if applicable), as well as any response to the request from HRSA\*.
- A data report on client service utilization that will include the number of unduplicated clients served in each service category and full client

- demographics (race, ethnicity, age, gender, risk category, and HIV/AIDS status).
- A data report on the epidemiologic profile of the TGA.
- Information requested by the Planning Council to conduct its annual assessment of the efficiency of the administrative mechanism. The content and format for this information will be mutually agreed upon each year but will typically include the following:
  - The procurement process for securing service providers that includes a summary description of the competitive bidding process (if applicable and to include such information as number of bids received, number of contracts awarded, service gaps resulting from lack of bids, etc.).
  - Timeliness of contract execution and amendments.
  - Timeliness of service provider reimbursement following receipt of a clean invoice.
  - Any service delivery problems and/or barriers.
  - Compliance with Planning Council priorities and funding allocations.
- A copy of the annual Planning Council itemized budget established as part of the Grantee's administrative budget per the Part A legislative requirements.

# Ongoing

- A copy of any official correspondence from HRSA/HAB that directly involves or relates to the Planning Council.
- A written monthly expenditure report by service category presented to the Strategy & Finance and Executive Committees as well as to the full Planning Council. The report should include a spreadsheet illustrating expenditures in each service category and a written explanation of any expenditures that are over-or-under established monthly targets.
- Report(s) of any delayed service provision within any service category.

# D. Documents and Information that will NOT be shared

In order to maintain the confidentiality of sensitive information, the following will not be shared:

- Planning Council members will not share information on the HIV status of members of the Planning Council who are not publicly disclosed as people living with HIV/AIDS. Except for individuals who choose to disclose their status, the HIV status of Planning Council members will not be shared with the Grantee or with other Planning Council members except those designated to ensure Planning Council compliance with legislatively mandated categories.
- The Grantee will not share information about individual bids/proposals for service provider contracts or about the performance of individual contractors.

- The Grantee will not share information about individual salaries of Grantee staff and Planning Council administrative support staff and contracted personnel except as follows:
  - The Planning Council Co-Chairs may have access to the aggregate personnel costs of Planning Council administrative staff support and contracted personnel.

# V. Settling Disputes or Conflicts

If conflicts or disputes arise with regard to the roles and responsibilities specified in Section II of this Memorandum of Understanding, or with any aspect of implementation of the MOU, the parties shall use the following procedures to resolve them:

- Convene a face-to-face meeting among the parties to attempt resolution within 10 business days after the issue or dispute arises.
- If the parties involved cannot resolve the situation via a face-to-face meeting an
  additional meeting will be held that includes the parties involved as well as their
  direct supervisors in order to work toward resolution. This meeting should be
  scheduled within 10 business days of the initial meeting during which resolution
  could not be achieved.
- If the situation remains unresolved following this second meeting involving the
  direct supervisors, the Cuyahoga County Executive (Executive) or his/her
  representative will be contacted to determine whether the Executive or the
  Executive's representative wishes to hold a meeting of the signatories to the
  MOU or to have the dispute resolved through binding arbitration. The decision
  of the Executive and/or arbitrator will be final.

# VI. Responsible Parties

The responsible parties to the MOU, along with the names of the individuals in these positions at the time the MOU was adopted, are listed in Exhibit A.

The MOU will continue in effect regardless of any changes in the individuals who hold these positions. Their successors will be expected to follow the MOU, pending review.

# VII. MOU Duration and Review

# A. Effective Date

This MOU will become effective upon signature of all parties listed on the signature page.

# B. Duration

This MOU will remain in effect unless or until the parties take formal action to end it, or the Cuyahoga County Board of Health is no longer the recipient of Part

A funding for the Cleveland TGA. This MOU will remain in effect regardless of changes in the persons occupying the positions of the responsible parties.

# C. Process for Reviewing and Revising the MOU

This MOU will be reviewed periodically and revised as necessary with the involvement and approval of all responsible parties. Reviews will occur when any of the following conditions is met:

- Within sixty (60) days of the effective date of any reauthorization or amendment of the legislation commonly known as the "Ryan White legislation" by the U.S. Congress. The purpose of this review will be to ensure that the MOU remains appropriate and reflective of the most current Ryan White legislation.
- At least annually by all responsible parties to this MOU.
- Within sixty (60) days of the appointment of a new Planning Council Co-Chair.

If the MOU is revised, the amended version will be signed and dated by all responsible parties, at which time it will become effective.

# VIII. Signatures

# FOR THE GRANTEE:

**Board President** 

Debbie Moss Esa

9/28/16 Date

Debbie Moss, Esq.

# FOR THE PLANNING COUNCIL:

Planning Council Co-Chair

Limberlin Dennis

9/21/16

Planning Council Co-Chair

Merle Gordon, MPA

9.21.2016

Date

The legal form and correctness of this agreement

Thomas P. O'Donnell

Administrative Counsel

Date

# **EXHIBIT A**

Role	Responsible Party			
Grantee				
Part A Program Supervisor	Melissa Rodrigo, MPA			
Part A Project Director	Claire Boettler, MPH, RN			
For the P	lanning Council			
Planning Council Co-Chair	Kimberlin Dennis			
Planning Council Co-chair	Merle Gordon, MPA			
Planning Council Co-Chair	Terry Allan, MPH, RS			
Planning Council Contracted Facilitator	Promesa Consulting – Sharron Harris			