

Bylaws

Of the

Cuyahoga Regional HIV Prevention and Care Planning Council

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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 Prevention and Care Planning Council, and it shall be constituted as is required by the Ryan White Comprehensive AIDS Resources Emergency (C.A.R.E) Act and the Centers for Disease Control (CDC) Human Immunodeficiency Virus (HIV) Prevention implementing regulations. As used in these Bylaws and hereinafter, the terms “HIV Care and Prevention Planning Council” and “Council” shall mean and refer to the fully integrated Planning Council. The Prevention Subcommittee of the Councils shall also serve as the Region Three (3) prevention sounding board. The term “subcommittees” or “standing committees” used in these bylaws shall refer to the committees of the HIV Care and Prevention 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 and defined in Ohio’s HIV Prevention Region Three (3). The six counties in Regional 3 that represent the service area shall include: 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) “Transitional Grant Area (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) “Grantee” or “Recipient” is defined as the entity designated by the County Executive to administer the Ryan White Part A Grant Program; and designated by the Ohio Department of Health to administer the HIV Prevention Grant.
- c) Centers for Disease Control (CDC) – The agency within the United States Department of Health and Human Services that administers the HIV Prevention Programs, including the HIV Prevention Community Planning process, among other programs. The CDC is responsible for protecting against, monitoring and reporting infectious diseases.
- d) “Consumer” as referred to in these Bylaws is an HIV positive individual.

- e) “Priority Population” as referred to in these Bylaws are individuals at risk for HIV and STIs that will be affected by or benefit from HIV interventions.
- f) “Inter-governmental Agreement (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.
- g) “Member” or “Members,” as used in these Bylaws, refers to those individuals who have been reviewed through the Planning Council’s open nominations process (also 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 Executive.
- h) “Non-Member Volunteers,” individuals who wish to attend and participate at Planning Council subcommittee meetings solely as a non-appointed volunteer. Also, those individuals who were **not** duly and lawfully appointed to the Planning Council by the Cuyahoga County Executive in accordance with the legislative requirements to officially serve as a member of the Planning Council.
- i) “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 or HIV Prevention funds in a specific service category. A person who is a client of a Part A or prevention funded provider is **not** considered affiliated.
- j) “Family Member” is defined as spouse, partner, mother, father, child, or sibling.
- k) The “affiliation” limitation does not apply to individuals affiliated with entities that receive funding under other Parts of the Ryan White legislation and do not receive funding under Part A.
- l) “Attendance” shall mean that each public body may permit its members to attend its public meetings or hearing in person, virtually, or a combination of the two. The following shall apply if any or all of the members are permitted to attend virtually:
 - 1. Each member attending virtually shall be considered present as if the member is in-person at the public meeting or hearing, shall be permitted to vote, and shall be counted for purposes of determining whether a quorum is present at the public meeting or hearing.

2. Any vote on a resolution, ordinance or formal action of any kind cast by a member attending virtually shall have the same effect as if the member is in-person at the public meeting or hearing; and
 3. The public body shall ensure that the public can observe and hear the discussions and deliberations of all the members of the public body, whether members are attending in-person or virtually.
- m) “Meeting” means any prearranged discussion of the public business of the public body by a majority of its members, at a set time and place, where formal action is or may be taken.
- n) “Formal action” means:
1. A vote resulting in the enactment, defeat or other disposition of legislation proposed and pending before the public body;
 2. The adoption of a rule or recommendation as to matters submitted to or considered by the public body as part of its normal or designated functions;
 3. The approval of appointments by the public body where such approval is required.
- o) “Open to the public” means that a public meeting, or hearing conducted in-person, electronically, virtually, or any combination thereof, to which the public has access to the deliberations and official action of the public body.
- p) “Public body” includes Planning Council and its committees established under these Bylaws and pursuant to the statutory authority identified in Section 2.1.
- q) “Electronically” means by way of electronic equipment or devices, including but not limited to, live-streaming by means of internet, local radio, television, cable public access channels; call in information for a teleconference; or by means of any other similar electronic technology.
- r) “Virtually” means by way of teleconference, video conference, or any other similar electronic technology.
- s) “PLWHA” is defined as people living with HIV/AIDS.
- t) “HRSA” is the federal Health Resources and Services Administration within the U.S. Department of Health and Human Services (HHS).

- u) “HAB” is the federal HIV/AIDS Bureau within the Health Resources and Services Administration within the U.S. Department of Health and Human Services (HHS).
- v) “DHAP” is the Division of HIV/AIDS Prevention within the Centers for Disease Control. The Centers for Disease Control is an agency within the U.S. Department of Health and Human Services (HHS).

Article II – LEGAL AUTHORITY

Section 2.1 Statutory Authority

The Cuyahoga Regional HIV Prevention and Care Planning Council’s was created 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 members to Planning Council. The Cleveland TGA shall also follow policy and protocol guidance as published by the Secretary or as amended from time to time.

The CDC’s HIV/AIDS prevention efforts are the responsibility of the Office of Infectious Diseases *National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)*. Within the NCHHSTP is the Division of HIV/AIDS Prevention (DHAP) charged with the mission of preventing HIV infection and reducing the incidence of HIV-related illnesses and death. The Planning Council’s prevention committee will provide the leadership on prevention related matters.

Article III – MISSION STATEMENT; DUTIES

Section 3.1 Mission

Whereas the mission of the Cuyahoga Regional HIV Prevention and Care 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 Part A funds, working to ensure a system of HIV related care that effectively serves all eligible people living with HIV/AIDS in the Cleveland TGA.

Whereas the mission of the Prevention Committee is to serve as a sounding board and provide input for the targeting of populations at high risk for HIV and STI infections to ensure there are no gaps in HIV interventions.

Now, therefore, these former separate missions of the Cuyahoga Regional HIV Health Services Ryan White Part A Planning Council, and the HIV Prevention Regional Advisory Group shall now be combined to form an integrated planning approach. This collaborative effort shall be titled, the Cuyahoga Regional HIV Prevention and Care Planning Council.

Wherein, the combined mission shall be accomplished through the planning and coordination of HIV prevention services to reduce the incidence of HIV infection and other STIs and the prompt linkage to HIV-related health care services as needed for individual living with HIV.

Section 3.2 – Part A Ryan White Duties

The duties, 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 Part A 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.

Section 3.3 – HIV Prevention Duties

- a) Serve as a sounding board to ensure there are no gaps in HIV interventions in the jurisdiction and to minimize or reduce the spread of HIV.
- b) Provide data-based input on effective HIV interventions.
- c) Provide input for the targeting of populations at high risk for HIV and STIs.

Article IV – MEMBERSHIP

Section 4.1 Membership

The membership of the Cuyahoga Regional HIV Prevention and Care Planning Council shall consist to individuals representing and serving populations impacted by HIV/AIDS and other STIs. Members shall be appointed and shall serve in accordance with Ryan White Part A legislative requirements and HIV prevention community input requirements. The Planning Council shall have a total membership of thirty-five (35) members.

Section 4.2 Open Nominations Process

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, terms of the Cuyahoga County Intergovernmental Agreement (IGA) and all applicable guidance for community input on prevention programs. This process shall include broad recruitment for potential members, use of an approved application form, and an interview and assessment process that follows clearly established criteria and the recommendation of a slate of nominees for membership.

- a) **Ryan White Part A Applicants:** All members appointed to the Planning Council shall be appointed in accordance with the mandatory requirement of the Ryan White legislation. The slate of candidates shall be presented to the Grantee/recipient 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 all applicable federal laws. All duly appointed members shall have voting privileges related to all Planning Council decisions; however, no individual may vote on Planning Council matters until he or she has been officially appointed to serve on the Council. Planning Council members with recently expired terms of service and an application for re-appointment that has been submitted to the Cuyahoga County Executive and is pending approval may continue to serve and vote until reappointed or replaced.
- b) **Non-member Volunteers:** Any individual interested in participating in Planning Council meetings as a non-member volunteer must complete a non-member application and select a committee of record. Non-member volunteers may attend and vote in their chosen committee of record. However, non-member volunteers voting authority shall be limited to their chosen committee of record. Non-member volunteers shall have no voting authority at the Full Planning Council.

- c) The “**Open Nominations Process**” is incorporated into these Bylaws and included as **Appendix D**.

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.
- 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 fully integrate HIV prevention, twenty percent (20%) of Planning Council membership shall be composed of service providers of prevention services and representatives of priority populations that will benefit from prevention related interventions.
 - e) 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), 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.
 - f) 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 and the goals and objectives of the Region 3 Prevention Program. The Council will work to ensure that, to the extent possible, priority populations for prevention and unaffiliated consumer membership are reflective of the gender, age, sexual orientation, racial and ethnic demographics of the impacted populations within each county.
 - g) 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 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) during the next open nominations period.

Section 4.4 Terms of Service

- a) Members of the Planning Council appointed under the Ryan White authority 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) and members appointed to the prevention committee shall be appointed according to appropriate HIV prevention guidelines.
- b) The terms of appointment shall be for a three (3) year term. Upon successful completion of an initial 3-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 Cuyahoga County Executive in conjunction with the Mayor of the City of Cleveland or Planning Council Executive co-chairs. Terms will officially begin the first day of the month following the official notification of appointment and will end on October 31 following the appointed term. Planning Council membership shall not exceed two (2) consecutive 3-year terms without a minimum of one-year off before the individual becomes eligible to re-apply, with allowance for extension of the last term as a voting member for members appointed to mandatory categories under Part A authority until a suitable replacement candidate is found and appointed. Those representing, the State Medicaid agency, Federally Qualified Health Center, Representatives filling mandatory membership categories under Ryan White Parts B, C, D and F, shall be exempt from these term limit restrictions since their respective agencies may have a limited pool of potential candidates to adequately fulfill the responsibility. Term limits for members of the Ryan White Planning Council in the Cleveland TGA, officially began with the passage of these Bylaws on April 19, 2017.

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, members must choose one of the following subcommittees as a primary “Committee of Record” (*e.g., CLC, S&F, MRM, QI or Prevention*) 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 (30) days after appointment.
- f) Participate as appropriate in 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) Participate in all aspects as appropriate for prevention planning.
- h) Review materials of Council and/or subcommittees as required prior to scheduled meetings.
- i) 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 member to attend, in person, any regular or special meetings of the full Planning Council and to participate actively in at least one Subcommittee (standing committee). Attendance at a meeting means the Planning Council member arrives in-person meetings within fifteen (15) minutes of the meeting start time and remains for the duration of the meeting or if attending virtually, logs in prior to the start of the meeting and remains connected and visible on screen during the duration of the meeting.

- a) Each member of the Planning Council is expected to attend one hundred percent (100%) of the regularly scheduled meetings of the full Planning Council during each program year. The attendance policy is outlined in these Bylaws at **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 one hundred percent (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 notice 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 or other Electronic Means

- a) **Planning Council Meetings:** Members are expected to attend Planning Council meetings in person, except in unusual circumstances (such as a health emergency, very bad weather, or other specified circumstances). The MRM co-chairs, in concurrence with at least one Planning Council Executive Co-chair, may approve electronic participation at their discretion provided a good reason for the request is given, the request is made prior to the meeting, and capability for such participation is available at the meeting site. A member participating electronically

must comply with Ohio State Law. To do so, members participating by electronic means must be visible by video so the public can see them and must have the audio capability so the public can hear them in order to be counted toward calculation of a quorum for purposes of conducting official Planning Council business. Any member participating by electronic means and meeting the legal requirements as outlined in the law and shall be **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 section 4.6.1(a); The Committee co-chairs, with concurrence by at least one (1) Planning Council Executive Co-chair, may choose to hold meetings by electronic means, particularly if the committee or work group is small or a meeting is held on short notice.

Section 4.6.2 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 thirty (30) days of verbal notice. However, if the individual fails to provide written notice after thirty (30) days have passed, the Membership, Retention and Marketing Committee shall notify the member in writing within forty-five (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 Executive 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 Executive Co-chairs
c/o Cuyahoga County Board of Health
Ryan White Part A Program
5550 Venture Drive
Cleveland, OH 44130
Email: ClevelandTGA@ccbh.gov

Section 4.6.3 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 (in the event the individual was appointed under Ryan White Part A regulations) or the Planning Council’s Executive co-chairs (in the event the individual was appointed under the HIV prevention process) 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 (2) sequential absences or three (3) total absences during a single program year – the MRM committee shall work with the Planning Council support 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 thirty (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 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 Planning Council's Executive co-chairs. If the member's removal creates a vacancy in a federally mandated category as defined in Ryan White regulations, the MRM committee must also include in the County Executive's transmittal a nominee for consideration to fill the vacancy as soon as possible following the 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 for the purpose of meeting quorum requirements.
- d) **Change in status:** Members are appointed to fill membership categories. When a member 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 fit 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 Executive co-chairs, in writing, of the change.

If, according to Ryan White regulations 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 ninety (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 as soon as possible.

Section 4.6.4 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, but is not limited to:
 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 specific subcommittee co-chairs for resolution. If the concerns/issues are still not resolved, the subcommittee co-chairs will bring the concerns/issues to the Planning Council's 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 members present at the meeting shall be required for approval of a recommendation of termination.
- d) For all termination recommendations, the MRM Committee, in coordination with 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. If the County Executive supports the recommendation for removal for cause, a letter notifying the member of his/her removal from the Planning Council shall be sent by the County Executive's Office and copied to the MRM Committee.

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 related to nondisclosure of a member's HIV/AIDS status for Planning Council members and meeting attendees, 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 Executive Co-Chairs

The Cuyahoga Regional HIV Prevention and Care Planning Council shall be led by three (3) Executive Co-Chairs. Cuyahoga County appoints one (1) co-chair, and the Mayor of the City of Cleveland appoints one (1) co-chair. For the third (3rd) co-chair, the Planning Council elects a representative from the membership of the Planning Council to represent people living with HIV/AIDS. The Executive 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 Executive 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 twelve (12) consecutive months.
3. In good standing related to meeting attendance (i.e., have attended at least seventy-five percent (75%) of Council and assigned committee meetings within the last twelve (12) months)
4. A current resident of the TGA.

The Cuyahoga County Council, in accordance with applicable local laws and Ryan White legislative requirements, may ratify the appointment of the Planning Council's Executive co-chairs. The term of office shall be for three (3) years.

Executive Co-chair terms shall end in rotating years so as to maintain stability and consistency in the leadership roles. In the event that Executive co-chair terms cannot end in rotating years, the Planning Council will request that the co-chair with the latest term ending date have his/her term extended by one (1) year.

In the event a co-chair resigns prior to completion of his/her term, the entity (County Executive, Mayor, City of Cleveland, or election by the PC) that originally appointed/elected the co-chair shall put forth a candidate for ratification by County

Council to replace the resigning Executive co-chair within ninety (90) days of the official notice of resignation.

Section 4.9.2 Council's Consumer Executive Co-Chair Selection Process

Planning Council's Consumer Executive Co-chair selection shall be conducted by in-person vote only. Only members appointed to the Planning Council in accordance with Ryan White Part A legislative authority shall vote for the Planning Council's Consumer Executive Co-Chair. During the meeting in which nominations for Consumer Executive co-chair is being considered the following process shall occur:

1. The Planning Council support staff in coordination with the MRM committee shall distribute information about the nominee(s). Nominees shall have the opportunity to address the Planning Council and then leave the room during Planning Council's 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 outcome to ensure the integrity of the process.
5. At any time during the Consumer Executive co-chair balloting process, the Planning Council may go into Executive Session in compliance with these Bylaws to discuss confidential information.
6. The MRM Committee prepares an official motion to recommend the nominee with the most votes to the Cuyahoga County Executive for appointment in accordance with Ryan White Part A legislative requirements.

Section 4.9.3 Planning Council Executive Co-Chair Responsibilities

Executive 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 to the County Executive, Mayor of Cleveland, and the Ryan White Grantee Office.
4. Serve as 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 as appropriate.

5. Coordinate, or cause to be coordinated, interaction among stakeholders such as representatives from other Ryan White Parts (B, C, D, F, others) and HIV Prevention related programs, 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 all Planning Council sub-committee or standing 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 and prevention guidelines.
9. Give, or cause to be given, all notices of meetings of the Planning Council consistent with the Planning Council Bylaws and Ohio Open Meetings Act.
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 subcommittee co-chair attends each standing/sub-committee meeting.
13. Serve as co-chair of a standing/sub-committee in the absence of both standing/sub-committee co-chairs.

Section 4.9.4 Planning Council Executive Co-Chair Removal

Only the Cuyahoga County Executive can remove the appointed Planning Council Consumer co-chair from his/her position. The Planning Council may recommend the Consumer co-chair's removal from this position in accordance with the Health Resources and Services Administration's (HRSA's) guidelines, by a two-thirds (2/3) vote of members present at any regularly scheduled or special meeting that provides required prior notice.

Section 4.10 Standing/Sub-committee Co-Chairs

Each Planning Council standing/subcommittee committee shall have two (2) co-chairs appointed by the PC Executive co-chairs. This Council shall make all attempts to secure at least one (1) standing committee co-chair who is an individual living with HIV/AIDS 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 (6) months, with exceptions for the newly integrated Prevention Committee, where co-chair eligibility for the new subcommittee is left to the discretion of the Executive co-chairs. 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. Lead development of 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 Committee meeting agenda 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 4.10.2 is subject to removal by the Planning Committee 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's Executive co-chairs for investigation and resolution. Finally, if the issue/concern is still not resolved, the Planning Council's Executive 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. Public Meetings:** All meetings of the Planning Council shall be open to the public for the purpose of observing the operations of Planning Council and its 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 Section 2602(c)(7) of the Public Health Services Act, as amended from time-to-time and in accordance with criteria established by the Secretary of the U.S. Department of Health and Human Services and Ryan White Care Act federal regulations and HIV prevention community participation requirements. 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 at such time as determined in the discretion of the Planning Council, except in December when the Planning Council will be on recess. The Planning Council's meeting frequency shall include at minimum an annual meeting for the purpose of conducting Priority Setting and Resource Allocations (PSRA). A regular meeting schedule shall be established by the Planning Council Co-Chairs, in consultation with the Executive co-chairs, 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 (www.ccbh.net/ryan-white) and sent to all Planning Council members by January 31st, 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 meetings of the Planning Council in order to conduct official Planning Council business. A quorum for official Planning Council meetings is defined as fifty percent (50%) of the membership plus one (1) of the appointed members. In computing a quorum, vacant seats on the Council shall not 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 generally 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 or HIV Prevention 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. Planning Council Business
9. Committee Reports
10. Other Business
11. Announcements and Public Comment opportunity
12. Planning Council Feedback
13. Adjournment

The Public has two (2) 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 initial review of the agenda, prior to distribution, or 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 three (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 and distribute the draft minutes to the Council co-chairs and subcommittee co-chairs for their respective committee. 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 (www.ccbh.net/ryan-white) following the month in which the meeting was held.

In accordance with legislative requirements, HRSA expectations and Prevention guidelines, 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 the Health Insurance Portability and Accountability Act (HIPAA), medical or other personal matters that should not be disclosed.

- H. Voting:** At official meetings of the Planning Council and the Standing Committees, every member appointed to Planning Council shall be entitled to one (1) vote on any question before the Planning Council with the following exceptions:
- a. Non-member Volunteers** – Non-member volunteers shall only vote in their chosen "committee of record" and shall **not** have voting authority at any other subcommittee or the full Planning Council.
 - b. One Vote per Organization** – in instances where multiple non-member volunteers represent a single organization, only one (1) individual shall be granted authority to vote on behalf of the organization. Each

organization shall designate the voting representative on behalf of their organization. If no designee is named by the organization, the subcommittee co-chairs shall designate the non-member representative on behalf of the organization that fails to designate a voting representative.

Voting shall take place by voice vote, or by show of hands of the members present or in attendance via virtual means in compliance with these Bylaws. Alternatively, any vote may be taken orally with the Council member raising his/her appropriate placard and counting 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 Planning Council's Consumer Executive co-chair position or as designated by the Planning Council's Executive Co-chairs. In determining the outcome of a vote, members abstaining (*an abstention*) will be counted as "not voting." The same will hold true for any member absent from the room or in the event of a virtual meeting, the member is not logged in or connected online and visible onscreen 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 Executive co-chairs, or by the co-chairs upon written request of any of the 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 (www.ccbh.net/ryan-white). A notice of special meetings shall state the specific subject matter of the meeting and shall comply with these Bylaws and any Ryan White Part A and HIV Prevention related federal regulations.

Section 5.3 Executive Session

During any duly called meeting, a motion to adjourn into Executive Session may be made by a Planning Council Executive co-chair or by two-thirds (2/3) of the Planning Council members present and voting. Issues and topics that warrant adjournment into 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 full Planning Council. Standing Committees may be composed of both Planning Council Members and non- members; however, the co-chairs and not less than a majority of the Committee(s) members must also be duly appointed members of the Planning Council. It is mandatory that each member appointed to the Council select a “Committee of Record” for service. Appointed members of the Planning Council may attend and participate at any standing committee and shall have voting authority at any meeting.

The Standing Committees of the Planning Council shall be as designated:

- a. Community Liaison Committee (CLC)
 - b. Strategy and Finance (S&F)
 - c. Membership, Retention & Marketing (MRM)
 - d. Quality Improvement Committee (QI)
 - e. Prevention Committee (PC)
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’s Executive co-chairs or 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 one (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 (1) Standing Committee, with attendance requirements as stated in *Article IV, Membership, Section 4.6 Attendance*.

6. **Membership:** The majority of the members of standing committees, with the exception of the Community Liaison and HIV Prevention Committees must be duly appointed Planning Council members. The Committee that deals with Planning Council membership and governance issues (MRM) shall include only Planning Council members as voting committee members.
7. **Leadership:** Two (2) co-chairs shall govern each standing committee with the exception of the Executive Committee. Standing committee co-chairs must be Planning Council members and will serve on the Executive Committee as provided in Section 6.2.1. Standing Committee co-chair appointments are the sole responsibility of the Planning Council's Executive co-chairs.
8. **Voting Rights:** When non-members serve on standing committees, these individuals shall have the same attendance requirements, member expectations, and voting rights in the specific standing committees they have chosen to serve on; 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's 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's support staff shall provide meeting coordination and support to the committees.

Section 6.2 Executive Committee

1. **Membership:** The Executive Committee shall be comprised of the Planning Council Executive co-chairs and the co-chairs of each of the standing committees. The make-up of the Executive Committee shall include at minimum four (4) PLWH/A. If at least four PLWH/A are not reflected in the standing committee co-chairs, then at-large PC members will be appointed by the Planning Council's Executive co-chairs 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 full PC meeting.

- c. Providing leadership and oversight of the Planning Council's consolidated work plan 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. Appointing and removing co-chairs of standing & special committees (as needed in conjunction with Planning Council Executive co-chairs)
- j. 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

In addition to the Full Committee of the Planning Council, which is comprised of all appointed members, and the Executive Committee, there shall be the following standing and management committees:

- a. *Standing Committees*: Community Liaison; Strategy & Finance, Quality Improvement, and the Prevention Committee.
 - b. *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 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 directly 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 linkage 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 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 (public relations materials) for release in the community (including English/Spanish versions).

Section 6.4.2 Strategy & Finance (S&F)

1. **Membership:** Because of its responsibility for overseeing the Priority Setting and Resource Allocation (PSRA) process, the majority of members of the S&F committee must be appointed Planning Council members in accordance with Ryan White Part A legislative requirements. 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 include:
 - 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 ensure directives to the Grantee are created 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 need's assessment in coordination with the Quality Improvement and Community Liaison Committees 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)

1. **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 in conjunction with the Grantee that services funded by Part A meet or exceed established HIV clinical standards and Public Health Guidelines. Additional responsibilities include:
 - a. Provide leadership and support for development of Needs Assessments.
 - 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 in coordination with the Grantee's office.
 - e. Provide input and direction on quality management activities.
 - f. Represent the Planning Council on the Part A Clinical Quality Committee.
 - g. Lead discussions and/or initiatives to examine the effectiveness of the continuum of care.
 - h. Recommend performance measures and identify indicators to assess and improve performance.
 - i. Recommend and 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 6.4.4 Prevention Committee

1. **Membership:** To provide effective community input on HIV prevention programs and services, committee members shall be comprised of representatives of organizations funded to provide HIV prevention programs and services; individuals from target populations at high risk for HIV and STIs or organizations that serve or support members of target populations at high risk for HIV & STIs and others interested or experienced in the delivery of HIV prevention programs and services.
2. **Duties:** Serve as a sounding board to minimize gaps in HIV programs and services throughout the jurisdiction. Prevention committee members are to provide data-based input to strengthen the effectiveness HIV prevention programs and services. Provide input for the targeting of populations at high risk for HIV and STIs.

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.

1. **Membership:** Because of the nature of the Committee's work related to member recruitment, including candidate interviews and nominations, 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 include:
 - 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 twenty (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 discussions 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 Planning Council Executive co-chairs or their authorized designees. They are authorized to speak on behalf of the Council regarding 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/Region 3. 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/Region 3 and 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. Reimbursements will be dependent on submission of valid receipts.

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 Bylaw's 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). Bylaw's 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 at **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 PREVENTION AND CARE PLANNING COUNCIL

BYLAWS

APPENDIX A: Code of Conduct

CUYAHOGA REGIONAL HIV PREVENTION & CARE PLANNING COUNCIL

Code of Conduct

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

1. 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 confidentiality, 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 PREVENTION & CARE 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 Prevention and Care Planning Council.

Print Name

Signature

Date

Member of: ___ Planning Council

___ Guest participant: _____

CUYAHOGA REGIONAL HIV
PREVENTION & CARE PLANNING
COUNCIL

BYLAWS

APPENDIX B: Confidentiality Pledge

Cuyahoga Regional HIV Prevention & Care Planning Council

MEMBER CONFIDENTIALITY POLICY & PLEDGE

I, the undersigned member of the Cuyahoga Regional HIV Prevention & Care 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 Confidentiality Policy and Pledge

Print Name

Signature

Date

CUYAHOGA REGIONAL HIV PREVENTION & CARE PLANNING COUNCIL

BYLAWS

APPENDIX C: Conflict of Interest Policy & Pledge

Cuyahoga Regional HIV Prevention & Care 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.” For the purpose of this policy, members appointed to the Planning Council in accordance with HIV prevention guidelines shall also be prohibited from Conflicts of interest.

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 (twenty (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 1st 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 1st 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 thirty (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 **1st violation** 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 **2nd violation** 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 six (6) months.
 - c. For an appointed Planning Council Member's **3rd violation** 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 and Financial Disclosure Form

Pursuant to ORC 102.09(D), within fifteen (15) 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 PREVENTION & CARE PLANNING COUNCIL

BYLAWS

APPENDIX D: Open Nominations Process

CUYHOGA REGIONAL HIV PREVENTION & CARE PLANNING COUNCIL

OPEN NOMINATION PROCESS

For Planning Council Membership

I. Legislative Background

The Cuyahoga Regional HIV Prevention & Care 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 in accordance with Ryan White Part A Authority; and the Planning Council's Executive Co-chairs are responsible for appointment of members according to prevention guidelines. Membership recommendations shall originate 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 conclude with a vote on the slate of potential candidates during the full Planning Council's August 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 Prevention & Care Planning Council. The Committee shall work collaboratively with the Planning Council's Executive Co-chairs and 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 and all appropriate HIV prevention guidelines. 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).
- i. 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.
- l. 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:
 - 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.
- 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 twenty (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 *less* than twenty (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 five (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 June. 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, HIV prevention and care 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 (www.ccbh.net/ryan-white), 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 video and 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 review and vote. Nominees approved by the Executive Committee shall be presented to the Full Planning Council 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 or Planning Council Co-Chairs

Upon authorization from the Planning Council, all necessary documentation for each applicant, those recommended for appointment and for re-appointment will be submitted according to the following:

1. **Cuyahoga County Board of Health** - 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 appointment. 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.
2. **Planning Council Executive Co-Chairs** - The MRM Committee shall submit the nominees recommended for service on the Prevention Committee to the Executive Co-chairs for final appointment. Members appointed to serve on the Prevention Committee

shall be appointed in accordance with HIV prevention guidelines for providing community input on HIV prevention matters.

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 PREVENTION & CARE PLANNING COUNCIL

BYLAWS

APPENDIX E: Grievance Policy & Form

Cuyahoga Regional HIV Prevention & Care Planning Council Grievance Policy

1) Purpose of Policy

The Cuyahoga Regional HIV Prevention & Care 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 Prevention & Care 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 3:

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:

Planning Council Co-Chair

Planning Council Co-Chair

Planning Council Co-Chair

Approval Date

CUYAHOGA REGIONAL HIV PREVENTION & CARE PLANNING COUNCIL

GRIEVANCE FORM

**Cleveland Transitional Grant Area
Cuyahoga County Board of Health
Cuyahoga Regional HIV Prevention and Care 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: <http://www.ccbh.net/ryan-white-hiv-aids-planning-co/>.

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 PREVENTION & CARE PLANNING COUNCIL

BYLAWS

APPENDIX F: Attendance Policy

ATTENDANCE POLICY

The Cuyahoga Regional HIV Prevention and Care Planning Council's attendance policy has been created to be both flexible and innovative in allowing for members to account for dealing with the complexities of work, health, and family obligations.

It is our goal that every member has 100% attendance in both sub-committees and planning council meetings. Since life sometimes gets in the way of the best of plans, the Planning Council will award a point-based system for attendance.

Point will be awarded for meeting attendance as follows:

Planning Council Meeting - 20

Sub-Committee of Record - 20

Sub-Committee (other) - 10

Special Meetings - 20 Points will be allocated for each meeting. Points allocated for special meetings (PSRA, HRSA special meetings, etc.), will count toward overall attendance. The Executive Committee may allocate additional points for special meetings to encourage participation.

This system will allow members who miss a Planning Council meeting or a sub-committee or another meeting of importance to the work of Planning Council to attend a meeting of another sub-committee and strengthen their knowledge of the work of Planning Council, while getting their attendance back towards 100%. New members need to be especially conscious of attendance as they will be scored on only the meetings since their appointment.

Attendance will be scored based on a 12-month calendar year and anyone below 75% will be reached out to by the chairs of their Committee of Record. Upon falling below 70%, a letter will be sent to the member to bring their attendance to their attention. A member with attendance below 50% will automatically begin the removal process (*For Cause*) through the Membership, Retention & Marketing Committee and finally the Executive Committee.

To accommodate the need for extended absence, the Planning Council has instituted this flexible "Attendance Policy" to provide opportunities for every member to maintain a compliant attendance record.