



Meeting of the
EXECUTIVE COMMITTEE
Tuesday, November 9, 2010
3:00-5:00 pm

Cicatelli Associates, 505 Eighth Avenue, Yellow Room, 20th Fl., New York, NY

MINUTES

Members Present: Jan Carl Park (Governmental Co-Chair), Victor Benadava, Felicia Carroll, Gregory Cruz, Joan Edwards, Marya Gilborn, Alexander Hardman, JoAnn Hilger (for F. Laraque, MD), Matthew Lesieur, Gonzalo Mercado, Tom Petro, Dorella Walters

Members Not Present: Damian Bird, John Anthony Eddie, Steve Hemraj, Lee Hildebrand, Charles Shorter

Staff Present: NYCDOHMH: Rafael Molina, David Klotz, Nina Rothschild, DrPH, Darryl Wong

Public Health Solutions: Rachel Miller

Agenda Item #1: Welcome/Minutes:

Jan Park opened the meeting and reviewed the meeting agenda/materials. David Klotz led the moment of silence. The minutes of the July 22, 2010 meeting were reviewed and approved.

Agenda Item #2: Planning Council Training Initiatives

John Hatchett of the Leadership Training Institute (LTI) presented the revised 2010-11 training program for PC members and their alternates. The series of three (3) one day trainings includes 1) a contextual overview of Ryan White and the decision making process of the Part A Planning Council, i.e., structure, roles, responsibilities, current service category descriptions, 2) an overview of data and epidemiologic terms of relevance in decision making and 3) the priority setting/resource allocation process, including the priority setting tool. The fourth workshop (2 days) examines individual and group process dynamics that influence members' participation in the decision making process. There will also be opportunities for new committee members, grantee and Planning Council staff to be trained.

Jan Park re-iterated that this series will supplement other training initiatives to be implemented, including an on-line training platform and a one on one mentoring program. David Klotz described and demonstrated one of the modules of the on-line training of the Denver EMA, which incorporates educational, audio, review and testing components. Darryl Wong described the on line Robert's Rules of Order training, which will be offered to Executive Committee members and is modeled along the same adult learning principles as other online trainings.

Agenda Item #3: Community Co-Chair & Finance Officer Election

David Klotz reiterated that the calls for nominations for the Planning Council Community Co-Chair and the Finance Officer were made at the last Planning Council meeting, with a deadline of November 15, 2010. The election will be conducted on November 18, 2010 by secret ballot and overseen by the Chair of the Rules & Membership Committee.

Agenda Item #4: HRSA NY HIV Planning Council Assessment

Mr. Park reviewed the Technical Assistance Assessment Report delivered by HRSA consultant Emily Gantz McKay, who has worked with Part A EMAs for many years and is the author of the *HRSA Part A Primer*. The purpose of the TA was to assess issues related to roles and responsibilities, boundaries, the relationship between the Council and grantee, and to recommend best practice policies and procedures related to Council orientation and training, meetings and operations, grantee support and decision making.

The assessment involved individual interviews of the Council leadership, grantee, and administrative agent; small-group meetings of the Executive Committee (EC), Council staff, and grantee staff; an online survey (N=35); and a review of the bylaws, memorandum of understanding, service model templates, etc.

Highlights of the report include:

- The EMA has a functional Planning Council with an identified need for additional training on PC roles, responsibilities, boundaries.
- There are differences of opinion about the system of care and the need and responsibilities for changing it.
- There are issues around PC staffing and budget.
- There are difficulties in the relationship between the Grantee and Council.
- There are challenges in the relationship between Part A program and parts of the community.
- Strengths identified: Council member expertise; diversity and commitment to cause; consumer involvement; the priority setting and resource allocation process; community involvement; and Council operations.
- Weaknesses identified: the relationship between the Council and Grantee; less than full understanding of roles, responsibilities and relationship to Grantee; Council members not working together as a team; the need to adjust to chronic care model; the need for more orientation and training; a fear of taking positions not supported by others.
- Findings from group interviews include: committees need to have more “voice”; Council members need more information and time to review it before making decisions; Public Health Solutions provides fewer reports resulting in an information gap; the Council does not have sound procedures for managing public input; the relationship between the PC and the PLWHA Advisory Group seen as difficult and unclear; and managing conflicts of interest.
- Four broad issue areas were identified:
 - 1) Training (some members do not fully understand roles and responsibilities; a one-day orientation is not sufficient preparation; some members are unable to attend orientation and never receive training; alternates not adequately trained; committee members receive insufficient committee-specific training; grantee staff, including those at operational rather than management levels, need to participate in trainings);
 - 2) Differences in Perception and Approach (differing philosophies and priorities regarding Ryan White-funded services; HIV as a chronic disease; input into service guidance and community planning; and personality and style);
 - 3) Roles of the Planning Council (engagement in legislatively defined roles and responsibilities is unclear regarding needs assessment, etc.), and
 - 4) Planning Council Staffing and Budget (administrative funds are used to support Council operations, but the Council must negotiate budget with Grantee).
- Proposed action steps in the area of training include: develop a training plan for PC and Grantee staff; consider mandating trainings for PC and Grantee staff; provide web-based online trainings; provide small group in-depth trainings for PC and Grantee staff; provide leadership training for EC; provide web-based online parliamentary procedures training for EC; establish a mentoring program for new members; provide training to alternates.

- Proposed action steps in the area of perceptions/approach include: Commit to open discussion regarding the changing environment of RW-funded services; seek HRSA TA regarding PC role in developing and approving service models; adhere to HRSA *Planning Council Primer*; adhere to rules of respectful engagement, value diversity of opinion, focus on issues not personalities.
- Proposed action steps in the area of Council Roles include: Ensure active partnering in development and implementation of needs assessment; continuing to assess the efficiency of the administrative mechanism; provide additional data for priority setting.
- Proposed action steps in the area of Council Budget and Staffing include: seek HRSA TA to clarify requirements and expectations around budget; clarify in MOU how the Council budget will be negotiated and managed; provide Council with FY10 and proposed FY11 budget; clarify procedures for selecting support staff and consultants; seek HRSA TA to clarify requirements and expectations around PC staff; maintain a separation of PC and Grantee staff

Members expressed the following comments:

- Need for continuing dialogue among all stakeholders regarding the current reporting structure and relationship of the grantee and Planning Council & staff;
- Possible need to change Planning Council staff from reporting to the DOHMH, e.g., reporting to the Mayor or an entity operating outside of government and to examine the implications of those suggested changes;
- Concern that the assessment report could compromise the EMA's FY application;
- Budget clarification, including funds allocated to support PLWHA participation and engagement, including contracts and research initiatives. The to-be implemented PC training initiative will further support a synergy between the Planning Council and the Grantee;
- The lack of HRSA guidance regarding past Planning Council areas of conflict; and
- The need for an internal, proactive approach to addressing the concerns in the assessment.

Mr. Park underscored that we are a highly functioning Planning Council and that the Executive Order needs to be updated to reflect the current relationship between the DOHMH and the Planning Council. It was moved that a separate Executive Committee be convened, within thirty days, during which this assessment and recommended course of action will be discussed.

Agenda Item #4: Grantee Report

JoAnn Hilger presented the change in the 2010 EMA Allocation Plan, which was promulgated by HRSA's questioning of substance abuse funding for HIV testing. In order to remain consistent with HRSA service category descriptions, \$ 1,810,012 in substance abuse/harm reduction funding was shifted to early intervention services. The FY11 Spending Plan was similarly amended. A motion was made and approved to accept the change as presented. It was acknowledged that the Rules & Membership Committee needs to discuss bylaws changes which will address challenges regarding decision-making processes and time-related terms of leadership.

Agenda Item #5: Public Comment

There was no public comment. There being no further business, the meeting was adjourned at 5:15 PM.