



BUILDING STRONG PLANNING COUNCILS/PLANNING BODIES, PART II: TOOLS AND STRATEGIES FOR BUILDING AND MAINTAINING STRONG RELATIONSHIPS

Michelle Vatalaro: Good afternoon and welcome to our second Planning CHATT webinar. My name is Michelle Vatalaro and I am a technical assistance coordinator for the Planning CHATT project and a consultant here at JSI. Our goal on the Planning CHATT project is to provide technical assistance and training to Ryan White HIV/AIDS program, planning councils and planning bodies to help you meet legislative requirements, strengthen consumer engagement and increase involvement of community providers of HIV services. We do hope that you are able to join us for part one last week of this webinar series, if not that's okay. You can view the archived materials on our website, which you'll see at the end. This week we will discuss tools and strategies for building and maintaining strong relationships, these strong relationships help to improve services for consumers who are the primary focus of both the Ryan White HIV/AIDS programs planning council planning bodies and for HRSA. Before we get started, here are some technical details. First, attendees are in listen only mode but we do encourage you to ask lots of questions using the chat box. You can submit your questions at any time during the call or during the question period at the end. Our presenters along with Planning CHATT staff will take as many of your questions as we can at the end of today's session.

We'll also be answering some of the questions in the chat as well so be sure to keep an eye out there. If you think of a question after the webinar, that's fine too. You can always email questions to us at planningchatt@jsi.com. The easiest way to listen to our webinar is through our computer. If you can't hear very well, check to make sure that your computer audio is turned on. If you still can't hear us or if you experience a sound delay at any point, try refreshing your screen. Finally, if needed, you can mute your computer audio and call in using your telephone and passcode, which is here on the screen. We've also put this information into the chat box. Today we're going to welcome you all again. We're going to introduce a little bit the Planning CHATT project then we'll go over some objectives, the content of the webinars, then we'll have a question and answer period and we'll discuss some future webinars that are coming down the pipes for this year. I do want to make mention of the Planning CHATT our colleagues at HRSA who helped us with the Planning CHATT projects and

support this project under our cooperative agreement. We have Steven Young who is the director of the Division of Metropolitan HIV AIDS programs, HIV AIDS Bureau at HRSA and Lenwood Green who is our project officer at Division of Metropolitan HIV AIDS program's HIV AIDS Bureau at HRSA.

At this point, I'm going to hand it over to our project director, Mira Levinson, who is going to talk to you about the Planning CHATT project. Mira?

Mira Levinson:

Thanks Michelle and hi everyone. Welcome back to those of you that were on last week's webinar. We're excited to have you on the line again and welcome to your first Planning CHATT webinar for those of you that haven't been with us before. I'm Mira Levinson the Planning CHATT project director and I'm just going to give you a couple of little overview of the project and tell you about some things we're working on and then I will introduce the team. As a reminder, the focus of our project is to build the capacity of Ryan White HIV/AIDS Program Part A Planning Councils and planning bodies across the United States. Our goal is to help you all as planning council members, staff and Part A recipients to meet legislative requirements, strengthen consumer engagement and increase the involvement of community providers in HIV service delivery planning. I want to tell you about a new resource that we have just launched and we are super excited about it, it is called the "Compendium of Materials for Planning Council Support Staff" and we're chatting out a link to it right now. The compendium is designed to help planning council staff carry out their duties in supporting and facilitating the work of part a planning councils and planning bodies. It provides tools and templates, model orientation and training materials and other time saving resources. It also offers tips and some sound practices from planning councils and planning bodies across the nation.

The Division of Metropolitan HIV/AIDS program commissioned the compendium as part of the follow up work that was done to the 2016 assessment that EGMC conducted and many of you participated in. That assessment generated a great deal of information about both best practices and challenges facing planning councils and planning bodies including the importance of the PCS role in helping PCPDs meet their legislative requirements. This collection of 70 plus resources includes sections on legislative requirements, planning council support, membership, implementing legislative requirements, relationships between councils, planning bodies and recipients and CEOs, orientation and training for members and potential members, operations and a resource section. Before I finish talking about this, I do want to acknowledge that this product was developed by EGM Consulting and that includes Emily Gantz McKay and Hila Berl and with significant insight, assistance and model materials provided by Sandra Vincent from Atlanta, Marvin Krieger from Hudson County, Tori Williams

from Houston and numerous other Planning Councils including Boston, Chicago, Columbus, Fort Worth, Indianapolis, Los Angeles, Memphis, Miami, New Orleans, Norfolk, Orlando, Phoenix, Portland, Sacramento, San Antonio and Seattle.

Many thanks to all of you for your great work. We are so excited to be launching it. I hope you all enjoy it. Now the next thing I want to let you all know about, and I mentioned this last week too is that we're working on an update to the much loved Planning Council primer. It is almost ready and we will be emailing everyone as soon as it's up so just make sure that you have subscribed to our email list and then we will let you know as soon as it's available. Before I turn it back to Michelle, I also want to introduce the Planning CHATT project team. This is a little picture of our team. I'm Mira the project director, Chris La Rose is our project manager, Emily Gantz McKay and Hila Berl who I just mentioned are senior TA consultants on the project and they are also in the chat today moderating and answering quick questions. They're going to answer any easy questions, quick questions and one on one type questions there. Then some of the questions that are questions that we really need the whole group of you to hear the answers to, we'll move those over to the question and answer period at the end. Welcome Emily and Hila to this webinar. We appreciate your help on this.

We also have from our team Deborah Dean, our materials developer, Michelle Vatalaro who you've already heard from, Molly Tasso who is our TA coordinator, Andy Goetschius who is our communications and design person, Dan Hostetler who is our data manager and Emily Breuer who is our project associate. Thanks everyone for joining us. With that, I will turn it back to Michelle.

Michelle Vatalaro:

Thanks Mira. Now I have the privilege of announcing our presenters for today. First we have Ms. Brandi Bowen. She has over 17 years of experience in the HIV services field. Ms. Bowen is the project director for the New Orleans Regional Aids Planning Council. She served in many capacities to facilitate continuous program improvement across Ryan White HIV/AIDS programs and HUD programs. Ms. Bowen's experience in the provision of clinical and supportive services informs her commitment to meeting the needs of people living with HIV. She successfully operated HUD and HRSA funded programs and has a particular specialty for nonprofit strategic planning, project management, community planning and policy development. Her experience supports community efforts to raise the bar of HIV care continuum. Next, we have Dorian-Gray Alexander who has been living with HIV AIDS since 2006 and is a policy fellow for change, a coalition of HIV/AIDS nonprofits and governmental entities. He served on the New Orleans Regional AIDS Planning Council on and

off since 2008. He is the co-chair of the board of trustees of CrescentCare and serves as the chair of Ryan White Part C Primary Medical Care Consumer Advisory Council for CrescentCare where he is a client. As community co-chair of the Louisiana Statewide HIV planning group, he contributed to plans for the state of Louisiana's HIV/AIDS strategy and integrated plans.

Last but certainly not least we have Marvin Krieger who recently retired after 20 years serving as the Director of the Hudson County New Jersey HIV AIDS Planning Council and as a United Methodist pastor. Prior to his planning council work, Marvin served as the director of the Hoboken Clergy Coalition Shelter and served as the Protestant Chaplain at Steven's Institute of Technology. Marvin has served as the Chair for the New Jersey HPG Issues Committee and President of the former New Jersey AIDS Broad Task Force and National AIDS Health Broad Council. Mr. Krieger continues to be an advocate for creating stronger HIV planning councils and planning bodies. Welcome to all of our presenters and to all of you. To get everybody warmed up today we do have a poll. We'd love to hear your responses to this. Tell us, what is your primary relationship with your local Ryan White HIV/AIDS Program Part A planning council or planning body? I'm starting to see the answers come in and it looks like about half or little less than half of you are planning council staff, which is wonderful and also planning council members. We do have some recipients about 20% of you, that's nice so a nice mix today. I'm really pleased to see such a diverse group out here.

Then so that we know where you are, we'd love to know did you attend our webinar last week? That was part one of the Building Strong Planning Councils and Planning Bodies. Great so we have about 75% of you did hear our presentation last week, which is wonderful. For those of you who weren't able to join us, that's fine. You can view it archived later and get all that great information. We're glad that so many of you came back for part two. Okay so as a quick review of part one, what we did go over last week were the roles of each planning council and planning body entity, that was the planning council or planning body, the Ryan White HIV/AIDS Program Part A recipient and the CEO. We talked about the shared and separate responsibilities of each entity and some strategies to maintain these roles and relationships. Today we're going to learn how we can understand how planning councils and planning bodies and Ryan White HIV/AIDS Program Part A recipients can work together, understand how other entities can work together, we'll be able to name strategies to resolve conflicts and to identify two tools available to support effective collaboration between entities.

At this point, I'd like to hand it over to Dorian who is going to start by talking about the relationships between entities.

Dorian-Gray Alexander: Hello all.

Besides being a person who is living with HIV I'm also a person who stutters so don't be alarmed by that. The talk about relationships between entities, relationships with people living with HIV community, relationship between POWH and planning council and planning bodies. It's important to highlight the importance of people living with HIV and also their voice, empower people living with HIV and allies to use their voice and also their experience. Members of the community who are directly living with HIV or directly affected by HIV, you want to empower and also respect and encourage them to fully use their voices and their perspectives, outreach through personal networks and public notices. It is always a good idea to try to encourage people who may not be at the table to bring them in. I can talk about that from my own personal experience. Relationship between people living with HIV and the recipient, the recipient's role is to participate and to engage in input about services there in the HIV community and also it is to create a mechanism to evaluate the quality of services for clients, for example, a client satisfaction survey might be done or some focus groups might also be done.

Relationship with providers of Part A services and the planning council and planning body, encourage sharing of the expertise for planning discussion but with some caution, example you want to have of course case managers in the room, people from housing, folks from mental health and also substance use and so forth. Enforce conflict of interest policies, you also are going to be careful to not overload one committee with too many members with conflicts of interest or of the same conflict. You want to provide team building opportunities between providers and people living with HIV. For example, you might encourage early arrival before meetings so that group members can informally dialogue with each other before the meeting is called to order. You also want to keep in mind other HIV and AIDS providers and have relationships with them as well. You want to do so to create collaboration and also coordination. You want to ensure that you reduce side flows in the community and also you want to share resources there in the community. Relationships between HRSA and HAB, the Ryan White Part A recipient or the administrative agency has the direct relationship with HAB. Also remember that the notice of grant award is between HAB and the administrative agency and not the planning council.

Relationship between providers of Part A services and the recipient should be that the recipient procures services for the community and also it administers the grant based on data and also assessments done. Relationships with other

essential programs, include other HIV and AIDS providers for example HIV prevention and medical providers not funded by Ryan White Part A other Ryan White Part A recipients such as Ryan White Part B, C or D and then other essential programs for example substance abuse and mental health services administration, SAMSA, Centers for Medicaid and Medicare CMS, housing opportunities for people with AIDS HOPWA and other community health centers or FQHCs. For all of these and also other essential programs in the community, you want to make sure that you know the scope of available services in your area. You want to be able to communicate with leadership and you want to secure and use data for planning purposes. Now I believe we have a poll so I'll hand this off.

Michelle Vatalaro: Right okay. Now we want to see your answer here. The recipient oversees the planning council but does not choose its members. Go ahead and tell me whether you think that's true or that's false, that the recipient oversees the planning council but doesn't choose its members. All right I'm seeing some responses come in, 50 50 it's so exciting. Okay so we have a split decision it seems like, the answer here is false. The planning council or planning body is expected to be an independent body that works closely with the recipient but not under its direction. This is not true of a non-planning council planning body so excuse me. The planning council is expected to be an independent body that works closely with the recipient but not under its discretion. Great everyone, okay. So onto using communication to build strong relationships between entities and I'll hand it to you Marvin.

Marvin Krieger: Okay thank you. Ideally the Ryan White Part A recipient, which was formerly known as the grantee and the planning council work together as a cohesive unit to identify and procure the services, which will most benefit the HIV population within their grant area. There should be a mutual respect on behalf of both entities and the ability to listen to the opinion of each party and make a unified decision as to the needs and also to the distribution of funds throughout the various service categories. The Ryan White Part A recipient should also follow the directives of the planning council if at all possible. If it cannot do so, it really should share with the planning council why it cannot fulfill those directives. Both the Ryan White HIV AIDS Program Part A recipient and the planning council should be able to discuss and also to share openly their information and their opinions. One of the things that is necessary is the transparency, it is vital for creating a good working relationship.

The planning council should have established guidelines with regard to conduct, roles and responsibilities and these apply to all members of the council especially those persons in leadership need to be models of the use of neutral

language and remind the group that this is a place of teamwork but that there will be times in which conflict and tension will arise, agree to disagree but we must move past positions and focus in on the future ... next slide. Here are some of the pressure points we're going to be talking about. I am sharing with you a quote from William James who is a philosopher and psychologist, "Whenever you're in conflict with someone, there is one factor that can make the difference between damaging your relationship and deepening it, that factor is attitude". Another quote that I also like from him is, "It is our attitude at the beginning of a difficult task, which more than anything else will affect its successful outcome". A brief discussion with regard to the causes of conflict, number one, different views on what is right or desirable, when one is determined to get a specific result regardless of the views of the other group. Passion can also be a good thing and can also be detrimental if an individual is not ready to listen.

Desire to control the resources, the planning council is made up of persons who are either employed by or may have received services from specific agencies throughout the area and therefore may want the funding to be either directed toward to away from a specific entity. This is part of the conflict, which is apparent within the system. Insufficient knowledge of Ryan white HIV/AIDS Program and or its rules and roles of each of the entities involved. In the Ryan White Program, we must be clear about situations where there are concerns about allocations. The conflict of interest policy should take care of it and also all of the allocations should be based on data. Personality clashes is another reason for conflict. In every working environment there are personality clashes and conflict results. Identify why the clash exists and clarify the real issues rather than making assumptions. Beliefs about the other group, what perceptions are held with regard to others? Now as we try to navigate into the dynamics of the group, we must model neutral language. Restate inflammatory language in a more objective way to help make the information less emotionally laden and more useful for future discussions. Separate the person from the problem, view the problem as a specific behavior or set of circumstances rather than attributing negative feelings to the whole person, this approach makes the problem more manageable and hopefully it will help in deciding you can't stand this person any longer.

Restriction of placing blame, work together to resolve the conflict, take ownership and become committed to resolve the conflict which may exist. As stated before, agree to disagree. Each person has a unique point of view and rarely agrees on every detail. Being right is not what is important, resolution and compromise or take an outside of the box alternative. Try to disagree with respect and without making a person feel defensive or resentful. Avoid

offensive comments. Be especially careful about statements that might be taken as sexist, racist, homophobic or insensitive to any group involved in HIV activities. Focus on the future, the goal to recreate the most advantageous and beneficial HIV healthcare system as possible and serving the areas in HIV population should be the focus of us all. Be creative, finding a resolution to the problem that satisfies everyone requires creativity and also hard work. Solutions that are created because someone feels they gave in in order to avoid conflict or maintain harmony usually do not last, that conflict often returns at a later time. Maintain confidentiality throughout the process. In all situations, both in Ryan White HIV/AIDS Program Part A recipient and those on the planning council and its committees must remember that there is a code of confidentiality. A reminder of this code should be shared at every planning body meeting.

Use leadership and leadership training as vital to the Ryan White HIV/AIDS Program. Create a safe environment. Print the statement of confidentiality on the agenda sheet for planning council, planning bodies meetings and also their further committees. Read the statement of confidentiality prior to the beginning of each meeting. When a person becomes a part of the Ryan White HIV/AIDS Program planning body, they should be given a set of meeting ground rules and conduct expectations as well as signing a statement of confidentiality in addition to the statement of conflict. The chair will establish procedures for discussion and will have the last word to cut off debate or discussion. Ensure training and provide reminders of roles and boundaries. There should be established rules of behavior and conduct and what is acceptable. These should be established by the council, given to members prior to their accepting voting membership and published several times throughout the year so that people are reminded of their roles and responsibilities. Share information, it should be the goal of both the Part A recipient and also the planning council to be as transparent as possible. All information should be shared by all parties in order that a seamless means of communication and working relationship is established. Some of this communication is legislatively mandated however, the more open more parties are with one another, the more productive and beneficial the outcome.

Model respectful behavior, use neutral language, which refrains from inflammatory language to reduce defensive responses and shows respect for those with whom you are communicating. The art of listening is a basic but too often a difficult communication skill to master. People often hear but do not listen. Focus on what the individual is saying and if you do not understand their position, inquire and ask them to develop their thought or position in a manner which might be understood better. Listen to the other person in totality rather than what you want to say. Establish and enforce behavioral ground rules. Share

ground rules regularly. Many planning bodies have established behavioral ground rules but they are only on paper and often and not too often shared on a regular basis. The ground rules also should have within them a segment which establishes the resulting consequences if they are not followed. Ensure decisions are based on defined procedures and criteria. Each Part A recipient and planning council should have established policies and procedures which should be refreshed periodically and shared within the general meeting. The recipient should also report its policies and procedures and periodically report to the planning council ensuring that any directives have been followed and if not, the reasoning for their diversion.

This goes on to Brandi I think. I don't have my thing before me.

Michelle Vatalaro: Oh you know what? I actually am going to pass it over to Dorian.

Dorian-Gray Alexander: Hello guys. Let's talk about using communication to build stronger relationships between entities. The idea ... am I on the right slide? Not quite okay here we are, some good communication practices, share information on a routine basis. Always try and share reports and share data, agenda and community events regularly. Create a culture of transparency, a culture of yes perhaps but if nothing else, you want to make sure that information is always available in a timely manner for all those who might attend meetings or else serve on committees. You want to foster and understanding of the importance of clear information. You want to keep an open line of communication. You want to empower consumers to participate. A good way to do that is to provide a safe space for council members Ryan White HIV and AIDS Program Part A recipients and for the planning council staff to also speak and to all be heard. Encourage open discussion and listening as often as possible. Open discussion and active listening are important to reduce barriers to effective communication. Encourage questions during meetings and also during trainings. Again you want to be transparent with as much information, data and so forth. Establish the ground rules early on in the term inclusive of all stakeholders and the community participants. It is critical to ensure the establishment of an ongoing, respectful dialogue.

Separate the issue from the individual. Facilitation can be a challenge when individual members express personal challenges to service delivery or service provision. It is important to respectfully remind all of the mission and goals of the planning council and the planning bodies. Coordinate with planning council and planning body chairs and also committee chairs regularly to determine if issues raised are systemic issues or if they're just isolated incidents. Try to deescalate emotions from potential actions needing to be addressed. Remind

the group of its purpose, reiterate the roles and the responsibilities of all stakeholders involved with planning councils, planning bodies in all of the capacities. Take a second to look around the room particularly for those who are being served, particularly people living with HIV. Focus on the mission to serve people living with HIV in the community. Now I think I'm handing it back over to Michelle.

Michelle Vatalaro: Yes that's right thank you. Now we have a nice little knowledge check here for you here. Which of the following strategies are good strategies for navigating group dynamics? There's a bunch of options here, a little bit of a teaser. You can go ahead and check all that apply. Is it use neutral language, separate the person from the problem, avoid placing blame, end all disagreements, avoid offensive comments or focus on the goal? All right, so I'm seeing your answers come in, all right and yes most of you got it correct, which is that all of them are good strategies for navigating good group dynamics except for ending all disagreements, that's not the right option. We should be agreeing to disagree and not shutting down conversations where there is disagreement. Disagreement can lead to creative good solutions. It's important for people to be able to be heard and to express a differing opinion. We don't want to end a disagreement just because it's a disagreement. With that, I will hand it over to Brandi who is going to talk about some tools to achieve optimal roles, responsibilities and relationships, so Brandi?

Brandi Bowen: Yes there are important written local standards that can help to achieve the optimal roles and responsibilities and relationships. One example of that would be a local code of conduct. It may be specific to the planning council or it may be required through your chief elected officials rules related to boards and commissions. The things that need to be included in a local code of conduct include, "Who does it apply to" such as both your members and your guests, "What is the purpose of the code of conduct, what kind of behavior is expected and how is it to be enforced"? Make sure that the enforcement protocol is also covered in your code of conduct. It is important of course to train members consistently around what's expected of them in terms of professional ethics and their ethical behavior to remind them that they are agents of public purpose and at all times under the highest possible scrutiny both their actions and their decisions and that the training needs to show that these expectations are clear. As Marvin and Dorian have both indicated, the leadership of the council its officers and its chairs of the committee play very important roles in setting the tone and helping to enforce these codes of conduct and ethical policies, they lead by example and they need to be supported by the planning council support staff as well as the Part A recipients.

Ideally you are involving strong leaders who are people living with HIV with the necessary support and training. You may also want to have a standard operating procedure, which would outline the role of your standing chairs and clearly document what their duties are. Of course you want to honor the contributions of your leaders. Their contributions are what help make you meet your mission and to be so successful but at the same time, you want to be realistic in what you're asking of your leaders. There is always the federal guidance that must be followed and it can also be an important tool to help make sure that you're achieving optimal relationships. As most of you probably know, the last time that the Ryan White Care Act was reauthorized was in 2009 under the title, "The Ryan White Treatment Extension Act" and of course that covers the planning council mandates and many of the planning expectations. As you're doing your day to day work, you may need more information on how best to achieve the legislative expectations and there is a wide variety of resources available to you. There's a great deal that has been put out but the HIV AIDS Bureau through health resources and services administration. You have access to the HAB Listserv, the TARGET Center has a wealth of material available on it, policy clarification notices help to describe what is expected of the program in terms of being in compliance.

You can visit the general governmental websites such as hrsa.gov, the primer was talked about earlier the new primer is being released, there are slides available such as through webinars today and you can always request technical assistance when appropriate and needed. Of course, I want to remind us all to stay current even after we learn the basics for example if you're setting service priorities, you want to make sure that you're using Policy Clarification Notice 1602, which is the most recent list of fund able service category. To ensure sound practice, you need proper interpretation and application of program rules. This can be clarified through the project officer when needed and through the direct communication with your Part A recipient. You can also use collaborative tools such as the Google groups, this webinar we're starting today. The Ryan White Planning Council support Google group was sharing some best practice documents, examples and membership applications, that's a great way to share with your peers as well. As always, you want to conduct evaluations, assessments, internal assessments to determine how well the tools that you're using in your jurisdiction are working for your members and your community.

Then of course you have your local bylaws for your planning council, these are going to be your focused operating principles that are an essential foundation to support your planning work. While you're developing revising your bylaws, you can review samples from other jurisdictions. You'll also want to include

emergency preparation considerations so that if your council needs to make decisions following a natural disaster, a hurricane, a flood for example, those considerations should be outlined in your bylaws as well. Most importantly, you need to ensure that your policies are consistently applied. Of course the specific details of those processes would be outlined under the standard operating procedures while your bylaws are covering the more general overview. Another very important tool especially in terms of negotiating the relationship between the planning council and the Part A recipient is your memorandum of understanding. This document should cover all relevant duties of both the planning council and the recipient including the reporting expectations but it may also include a philosophical programmatic approach for example meaningful engagement of people living with HIV at all levels. This memorandum of understanding or MOU as it is often called should be updated annually in coordination with your Part A recipient.

You can always talk with your project officer for technical assistance if needed. There are many resources and examples available on the TARGET Center through the planning council compendium. We may do an in depth webinar about MOUs and bylaws in the future. There's one other important tool that I am very pleased to share with you today. It was brought to our attention by people living with HIV who developed and handed out a person centered language handout, which enables us all to be able to use preferred language to address stigma. This of course hearts back to the principle "Nothing about us without us" and this particular handout that we're sharing with you today was developed by Vicky Lynn and other people living with HIV. There's a great deal of information on the Well Project's website, on the PWN website explaining the rationale and why using preferred language is so important. The language that we use can affect the way that people living with HIV feel about themselves as well as how other people perceive them. For example, you would not want to use the language an HIV infected person, instead you would want to say a person living with HIV. Another example from the handout is not to say full blown AIDS because there is no medical definition for this phrase, simply use the term AIDS or stage three HIV.

You can see the link for this handout has been chatted out to you and you can learn more about it and I thank you all for attempting to use preferred language. I have a quote to share with you as well to keep in mind as we're working toward our optimal relationships, "In order to make big changes in society, we must first take the little steps ourselves. When we as people living with HIV begin to change the language we use, others will take notice. It will take time, change always does, but it is the right time to change how we talk

and write about people living with HIV", that's a quote from Language and HIV People First. I'll hand it back to Michelle for our next poll.

Michelle Vatalaro: Great so, which of the following tools can assist you in achieving ideal relationships to support the planning council or planning body's mission and goals of the Ryan White HIV/AIDS program? Is that local code of conduct, legislation, HRSA guidance, silencing of dissenting voices, sound practice, bylaws or Memorandum of Agreement? I'm looking great responses coming in, almost everybody is recognizing that silencing of dissenting voices is not something that we really want to have. We want to be able to have people making their opinions known and coming to agreement with a larger group. I would note that Dorian pointed out in the chat there was some great conversation going on in there about parliamentary procedure. Dorian pointed out that we should be careful and cautious not to use Robert's Rules of Order or parliamentary procedure to silence or exclude voices. Again getting back to that, we don't want to be silencing dissenting voices but again coming to some sort of agreement so thank you. Thank you to our presenters for all of the wonderful content that they covered today shared with us today during the webinar. As you've noticed, Emily has been responding to some of your questions in the chat but we've also been pulling out some of the questions to address at the end.

At this time, we'd like to move to a question answer period. If you do have additional questions you think of some that you'd like to ask now, go ahead and chat them in and we'll pull them out so that we can start to respond to them. If there's questions that we don't get to today, we will pull together a Q and A, question answer document that we will be sharing out after the webinar. We'll answer your questions whether we have time to do it now or have to do it later. Okay, the first question that we have is for Dorian if you could unmute your phone. That first question is, "What was meant by when you said, 'with discretion' in the first point of the relationships with providers of Part A services"?

Dorian-Gray Alexander: Discretion you really want to be careful let me try to find ... you want to make sure that all state their conflicts of interest and not to stack the deck with too many people or else members of any committee with people who all have the same conflict or else you don't want a room full of all case managers, you don't want a room full of people who are all working for the same agency. You want the diversity to be there in the room.

Michelle Vatalaro: Great, thank you for that. I'd like to direct our next question to Marvin, if you could unmute? Okay, so you've been asked to discuss in greater length what's meant by "confidentiality" as all meetings are public.

- Marvin Krieger: Even though the meeting is open to the public it is important for those who are present at the meetings to understand that it is that there are rules of confidentiality and if you are attending the meeting you are expected to adhere to those. This is one of the reasons why I stated that it's important that at the beginning of each of the meetings to make sure that you state your rules of confidentiality. Emily shared with me because it was also asked about an example of confidentiality. She said she has one from DC and she says that that's a good model.
- Michelle Vatalaro: Great that's awesome. We look forward to seeing that. Just a reminder that if you have questions you can ask them in the chat and we'll pull them off to the side. I do see a question in the chat about the planning council support Google group. I may be perhaps ... Brandi do you want to address that or did you mean the Google document that we've been using?
- Brandi Bowen: If you're referring to the question about the MOU being annual, I'd be happy to answer that now.
- Michelle Vatalaro: Sure so let me go ahead and ask that question out. The question was, "Should the MOU between the planning council and the recipient be updated more than once a year"?
- Brandi Bowen: I would just encourage, it is best practice to review this annually and to update it when necessary. There may be changes in personnel or chairs. You want to make sure that everybody's on the same page and in agreement with all the parameters and stipulations of the MOU. Particularly if your chair changes every year or if you have changes in other personnel, I would highly encourage that that get re-signed and updated annually.
- Michelle Vatalaro: Great, okay. Now we have a question of HRSA. Should the administering agency be over the support staff or similarly who supervises the planning council support? Is it the administrative agency?
- Lennie Green: Actually it's the ... this is Lennie Green, it's the planning council that is in line with the planning council support however when ... we've got several models of how that can happen. One of the most important things is the recipient and planning council support that there be some distance when it comes down to assessment of the administrative mechanism of which the planning council support would be assisting the planning council in. Through these models that we've offered and we're going to see if we're going to get the location of them up in the chat area, through these models that we offer, there are several different ways to ensure that that happens and ensure that there is the right

line of relationship between the planning council support staff, the planning council and the recipient as far as supervision is concerned.

Steven Young: Thanks Lennie.

Michelle Vatalaro: Great thank you.

Lennie Green: One more thing, the models are in the compendium if you take a look in the index in the compendium you will see the location of it, thanks.

Steven Young: Just to add, this is Steven Young so basically what Lennie is referring to we commissioned our assessment last year we found a couple of different ways in which planning council support staff are retained from a financial perspective how are they supported, how are they put in place. There are five or six different models as to how that might occur. Overall the basic overriding principle is that the support staff work for the planning council and its leadership so that they can assume their responsibilities.

Michelle Vatalaro: Great, thank you both. We have another question, which says, "Can you give more examples regarding behavior or conflict of interest"?

Brandi Bowen: I'd love to answer this one because it gives me the opportunity to use one of my favorite phrases from Robert's Rules of Order, which is rising to the question of privilege. What I'd like to explain is regarding behavior and the conflict of interest policy. If you have members in the room who are discussing on a matter where they know they have a conflict and they have not disclosed their conflict of interest or perhaps they try to cast a vote when they should be abstaining, different conflict of interest policies may look different in different places but depending on what your policy says, you need to be sure to enforce it across the board. How you enforce it can depend on the situation as somebody has just accidentally forgotten to disclose their conflict you might gently remind them or you might gently say, "You must abstain on that vote, that's what the policy says". If you've done it a couple of gentle reminders and they're not being heard, any member in the room can always rise to the question of privilege as is outlined under Robert's Rules of Order and call that member into question and ask to have that conflict of interest directly disclosed. I hope that answered the question.

The question was somewhat vague regarding behavior and conflicts so I'm hoping that that spoke to the nature of the question

Michelle Vatalaro: It did and I apologize, I was on mute. I was saying that thank you for your wonderful answer. While we're looking for more questions to come in, I was going to bring to the large group's attention some of the questions that were answered in chat. The first was, "Who enforces the ground rules"? Emily responded that ideally the planning council leadership is the one who enforces this and the planning council support can help, although she did ask and note that there are people in groups that may have had other experiences. It can be really helpful for the planning council leadership to have a copy of the ground rules in front of them for each meeting so that they can be the ones responsible for enforcing that leadership. Okay and let's see if we have any other questions coming in. Okay so here's a question for perhaps Dorian or Brandi, "How can planning council staff help new members understand what the scope of the planning council is? How can we keep members from becoming frustrated when the issues that they bring up are outside of the planning council's purview"?

Dorian-Gray Alexander: Okay this is Dorian here. I'll try and take a stab here. Obviously it's fine if planning council staff is there to help to provide the training of new members and also to help to explain the roles as expected for all members. Regarding trying to keep the level of frustration down with outside concerns, I would think that members there in the room and also planning council staff and other providers are going to do their best to make sure that those concerns are addressed appropriately. You want to make sure that those concerns get at least communicated with the recipient. You also can encourage consumers and to remind them that there should be policies in place and depending on I guess the planning council, planning body, administrative agency, whenever we talked about creating transparency, with that is also a sort of an open door policy in which we might have where folks feel like they have a place to direct concerns that they may have, so that's my stab at it. Do any of you have any more to add.

Brandi Bowen: Just echoing as you said to honor that person's perspective and to make sure that their concern gets directed in the right direction so that even if the planning council is the place to take up specific issues that their concerns are still addressed in the appropriate manner, absolutely.

Michelle Vatalaro: Great, thank you both very much for that. We have a question from New York about "The discussion about confidentiality is broad and I don't know how the planning council staff can enforce it. Our meetings are webcast and very open to the public. I am not sure how this would work. We have never been asked to have a confidentiality statement before". Emily is going to take a moment to respond to this, Emily?

Emily Gantz McKay: Okay, well one of the points that's important here is that having a confidentiality statement helps several places like DC because of the fact that you do have open meetings but there's certain things that you don't want being discussed in open meetings so there's an agreement before the open meetings that you just won't talk about them. There's two things that are most common are HIV status for those that are not publicly disclosed and people's health status. There may be other things also of course sometimes there are things that are discussed in the committee that should not be discussed. It isn't that they're discussed somewhere else, they shouldn't be discussed. You put that in the agreement. Remember that HRSA requires and Steve and Lennie, correct me if anything's changed but I don't think it has because I think I asked you this recently, two members of a planning council who are unaffiliated, unaligned consumers filling those slots must be publicly disclosed. In many places including a lot of the big cities, the larger metro areas and the ones where they I guess they feel there's somewhat less stigma or for whatever reason they said, "Everybody must be disclosed. If you want to be a nonaligned consumer, you must be publicly disclosed" but that's not true everywhere. There's not discussion of people's HIV status or whether they're consumer or other members in public discussion.

There are even some places that don't use full names. Again some of this depends on what your open meeting laws are but meetings are open but that doesn't mean you have to discuss these things. Again, it may not be an issue in some places, could be an issue in others.

Lennie Green: This is Lennie and Emily you are correct in that, the legislation speaks to two people being open and out about their status but that's the limitation, thanks.

Michelle Vatalaro: Okay, thank you both for your responses to this. Okay here let's see, our next question is for I believe it's for Brandi, "What is the distinction between the service standard crafted by the local planning body and those drafted by the state and or HRSA"?

Brandi Bowen: The very short answer to that is that the local service standards can be more stringent than HRSA standards but that they can never be more broad. If you're in a jurisdiction where you have very limited resources or need to target your resources very carefully, you can provide less than what may be allowable according to HRSA but you can never provide more than what's allowable through HRSA. There's some excellent guidance on this. We can chat out the link to the caretargt.org site, which will show the latest guidance from HRSA and Policy Clarification Notice 1502, that's a very good question.

- Michelle Vatalaro: Okay, our next question was answered in chat so I do want to take a moment to answer this, it was just a clarification that to the question that sub recipients or providers should not be discussed during planning meetings and the answer was that if it's a planning council or planning body meeting, theoretically they discuss service categories, the recipient is the overseer of the individual sub recipients, that one was answered in the chat. Okay this is just a reminder that we do have another moment, if you do have additional questions, this is your time to chat them in and I think we do have one more question for our presenters, which is, "Is there a standard timeline for the planning council committee work product deliverables"? Does anybody want to take an answer at that?
- Brandi Bowen: We're all very quiet, this probably means that may well depend on your local needs. Certainly you want a timeline for your local jurisdiction. I can say that for our local planning council we know that we're setting our priorities and allocations in the summertime that that's going to happen in advance of when our recipient's going to respond to the funding opportunity announcement, we know what our planning term year is, we know when our training happens and then our training is lined up so that people are trained on using data to inform decision making and advance of those summer decisions but other jurisdictions may have other needs but of course your recipient needs to be able to be equipped to respond to HRSA's reporting timeline.
- Dorian-Gray Alexander: Also, I might add it really depends on I guess the nature and structure of the various committees that each planning council and planning body has. I can say here in New Orleans, committees that are focused toward consumers such as a community outreach committee might be more of a challenge but with the right chair and also the right planning council staff to help lead, deliverables can be made.
- Marvin Krieger: This is Marvin, just to add to Brandi and Dorian, this is why it is vital that planning councils make sure that they have a timeline set up and also that timeline needs to be done in coordination with the recipient so that both are working together to make sure that everything is accomplished and gotten together.
- Emily Gantz McKay: I'll quickly add that while we use a Gantt Chart timeline locally, I know the JSI has a model annual timeline and that that can be shared via the compendium. There are tools that we can share with you all as well.

- Lennie Green: Hi this is Lennie. I just wanted to add that there is one more confronted to that and that is when one committee is waiting for another committee's work to complete its product. An example for that would be analysis of the needs assessment by the needs assessment committee feeding data into a priority setting committee. It's important that the timeline that the data be completed and available for integration into priority setting activities by that committee would be also very important. When you look at it, it's also committee to committee as well as planning council to recipient and HRSA, thanks.
- Michelle Vatalaro: Thank you. We have a great question that came in, the question is for anyone but I'd like Dorian to answer, "What is the most important role as a consumer or member of a planning council"?
- Dorian-Gray Alexander: I think the most important role is to be the voice, cannot be a voice for all people living with HIV but you can be a voice in the room and you can be a very engaged voice. The role is to be a voice, to be present, to be engaged and also to make a conscious effort to really do all of the training that is there and to have an active participation in committees, assessments, focus groups as much as possible, encourage consumers to be sponges there in the room.
- Michelle Vatalaro: Awesome, thank you Dorian for that answer. We do have one more question for Emily, which is, "Regarding the evaluation of the administrative mechanism, is it necessary to obtain and include comments from sub recipients"?
- Emily Gantz McKay: I think the typical answer is periodically yes but it's never done in a way that planning council members will see who made those comments. You get aggregate information generally from the recipient, it's quite normal to have ... sometimes it's done every few years, maybe a SurveyMonkey kind of survey to sub recipients, are they getting paid on time, what do they see as issues blah blah blah, related to the things that an AAM should cover, which I think Marvin described very well last week. It is typically done by a consultant or by PC staff and the names of those providers are never mentioned with the planning council because if ideas ... what he needs to know is if you've got seven sub recipients, how many of them are doing x or finding x, not who they are.
- Michelle Vatalaro: Great thank you, thank you for that, thank you for that Emily. You can see that we just chatted out a flow chart document in the compendium so you should be able to access that using the link that you see in that chat box if you have questions about that. Okay and we have I think one more question for HRSA or perhaps Emily, "Is the response to the HRSA notice of funding opportunity the

primary responsibility of the recipient or planning council or both and what is the contribution of the planning council to the process"?

- Emily Gantz McKay: Lennie you want to take that you want me to?
- Steven Young: Sure no we can take it and others can chime in. The submission of an application to have for a Ryan White Part A award is primarily the responsibility of the recipient who sits in the city or county that leads the effort in the jurisdiction. The NOFOs traditionally cover a wide range of areas related to an understanding of the epidemic and needs in the area. We ask about the priority setting and resource allocation process and how the council went through that process to arrive at its stated priorities and that of course leads to implementation plan. The basic answer is it's the recipient but the recipient cannot submit an application without substantive involvement from the planning council leadership and some of its committees and the planning council as a whole. I would welcome any of our consultants to add to that based on their experience in various communities and Lennie if you want to add anything, please feel free.
- Lennie Green: Excuse me the only thing I might add to that is that often times the planning council has deliverables that must be incorporated into that response so that should be reflected in the planning council's timeline to have that completed so that it matches a reasonable timeframe for the submission of the response.
- Emily Gantz McKay: Yeah this is Emily and that's I think really key. They have to have the priorities and the allocations, which have to go in there, they have to be the result of the needs assessment, there's got to be a description of how PSRA has been done. There's certain questions that involve planning council operations and planning council decisions and clearly they need to be done on time so that everything is there to submit the applications.
- Brandi Bowen: This is Brandi and I'll only add to that is it should all be outlined in the Memorandum of Understanding, which everybody signed off and agreed to and clearly detailed in writing.
- Michelle Vatalaro: Great, thank you everyone for responding to those questions. We had such a great Q and A so thank you all for your questions. We're glad we were able to get answers to them today. Before we close out, I do want to let you know about some of our upcoming webinars. Coming in the springtime we'll be having a webinar about needs assessments and then in the summer, we'll be talking about priority setting and resource allocation so you can look forward to those coming soon. Of course, you can access great resources on the Planning CHATT website, which is on the TARGET Center and it's

careacttarget.org/planningchatt. This is where today's webinar will be recorded and archived on the TARGET Center page. Everybody who participated today will also receive an email when it's posted so you can share it with your colleagues. You can find the resources that we talked about earlier today on there through both the homepage and through the topic library. Thank you again for joining us today, please take a moment to complete your evaluation. This really is going to help us be able to provide helpful informative webinars that meet your needs in the future and we really do look at it so please take a moment to complete that. It's just going to pop up on your screen after the webinar.

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