



Quick Reference Handout 8.1: Working Successfully with the Recipient— Tips for PC/PBs

Introduction

“The planning council is a legislatively constituted body with clearly defined responsibilities in Ryan White planning and decision making. Its members are appointed by and it is ultimately responsible to the CEO [Chief Elected Official]. It works in partnership with the grantee but not under its direction.”¹

This partnership between PC/PB and recipient—a productive, mutually respectful relationship, with ongoing communications, clearly defined roles, responsibilities, and boundaries, and regular sharing of information and data—is extremely important to the effectiveness and efficiency of a Ryan White HIV/AIDS Program Part A planning council (PC) or planning body (PB).

This handout is based on the legislatively defined roles and responsibilities of a planning council. While Part A planning bodies that are not planning councils are urged to look and function as much as possible like planning councils, their relationship with the recipient is different—because they are advisory rather than decision-making bodies, vary in structure and roles, and may not have dedicated staff. Still, many of the suggestions included here involve communications and clarity of roles, and these are relevant to both PCs and PBs.

Tips and Sound Practices

Here are some tips and sound practices for PC/PBs—led by the Chair/Co-Chairs and other leaders and assisted by PC/PB support staff—to use in building, maintaining, or strengthening a productive relationship with the recipient.

1. **Assess the current relationship.** When leadership of the PC/PB and/or recipient changes, or if you feel the relationship is not fully respectful and productive, observe interactions and have internal discussions among officers and committee leadership and with the lead PC/PB support staff person. If the relationship seems positive, try to identify what is making it work well.
2. **Identify current pressure points.** Often these involve disagreements over funding for PC/PB support, perceived overstepping of boundaries, or different views on service models and funding. Observe interactions at meetings, and consider a joint session with PC/PB leadership and staff and recipient staff to discuss each group’s perspectives. How do they feel about the relationship? What is working? What is not working?
3. **Explore underlying causes of tension and conflict,** and identify those that seem most relevant in your jurisdiction. Some common factors are:
 - Insufficient knowledge—on the part of the PC/PB, recipient staff, or both—about legislative requirements and HRSA/HAB expectations regarding the roles, responsibilities, and authority of the two entities, and their boundaries.

- Failure to observe and enforce boundaries—such as inappropriate discussions at PC/PB meetings about grants administration or procurement, or recipient attempts to determine PC/PB membership or decision making.
 - Failure of either entity to carry out its roles and meet its commitments—for example, there is a lack of follow-up on promised actions, the PC/PB does not receive data reports promptly for use in decision making, or the PC/PB does not complete the resource allocation process well before the Part A application is due.
 - Competition for resources, including the PC/PB share of the 10 percent of funds that can be spent for administration (which includes PC/PB support).
 - Strong differences of opinion about how funds should be used and services provided.
 - Past negative experiences that created distrust or lack of mutual respect—whether or not they involved current members or staff.
 - Significant differences in personality and style.
4. **Be sure all PC/PB members receive information and training on PC/PB roles, responsibilities, and boundaries.** Make this part of orientation for new members and provide periodic reminders for all members.
 5. **Review PC/PB Bylaws, the Code of Conduct, and other policies and procedures and ensure that they are being followed.** If discussions are inappropriate or disrespectful, does the Code of Conduct specify how this behavior will be addressed—and are these procedures followed?
 6. **Commit together to immediately address conflict or inappropriate behavior in meetings.** Be sure the person chairing PC/PB or committee meetings (or some other designated individual) takes responsibility for responding immediately when problems arise, and obtain a similar commitment from the recipient to enforce appropriate behavior by recipient personnel. If a few individuals are causing much of the conflict, work with them to change behavior. Be sure there is a sense of shared responsibility for ensuring that rules are followed and enforced. Engage the lead PC/PB support staff person to assist.
 7. **If roles are unclear or the relationship is a serious concern and local attempts to resolve them are unsuccessful, ask for training or other assistance from your Project Officer at the Health Resources and Services Administration-HIV/AIDS Bureau (HRSA/HAB).** This can be especially helpful when the PC/PB has many new members or staff or the recipient or their staff are new to the job. Often the best approach is a shared session including PC/PB members and staff along with recipient staff that focuses on clarifying roles, responsibilities, and boundaries—including which tasks are entirely the responsibility of a single entity and which are shared, and their legislative basis. HRSA/HAB may provide technical assistance, directly from the Project Officer or through use of a trained consultant. Technical assistance may include the following:
 - Direct discussion designed to clarify roles related to pressure points or areas of conflict.
 - Analysis of realistic scenarios that illustrate identified points of tension or conflict, how they are currently handled, and how they could be better managed.
 - Agreement on a plan of action to better enforce existing policies and procedures or develop new ones to help ensure that boundaries are respected—or make other changes to strengthen collaboration between PC/PB and recipient.
 - Document decisions, and then implement the plan of action and assess progress together.

8. **Develop and use a Memorandum of Understanding (MOU) between the PC and recipient.** HRSA/HAB encourages all RWHAP Part A programs to use an MOU. Sound practice is to:
 - Develop an MOU early on to maximize collaboration and prevent or minimize tension and conflict—don't wait until serious conflict develops.
 - To be sure you include necessary elements, refer to the *Sample MOU Between the RWHAP Part Planning Council and Recipient*² or a recent MOU from another EMA or TGA.
 - Be sure the MOU is developed and negotiated between the recipient and PC/PB, with PC/PB leadership and consumer representatives playing an active role and staff actively assisting and supporting the process.
 - Be sure the MOU is very clear about information and reports to be provided by and to each party, including their content, frequency, and timing, for example, the various data reports the PC/PB needs for its priority setting and resource allocations decisions each year, and the decisions the recipient needs to include in reports to HRSA/HAB.
 - Ensure that the MOU is approved and signed by both parties (and senior municipal officials where appropriate) and shared with the entire PC and recipient staff.
 - Build in regular review and updates.
9. **Build on positive factors.** Be sure recipient personnel who staff committees receive appropriate thanks and credit for providing sound data and technical advice to the PC/PB. Give public credit at meetings when someone goes beyond requirements. Be responsive to recipient requests of the PC/PB.
10. **Clearly define communications channels and responsibilities.** In many Part A programs, serving as liaison between the PC and recipient is a specific responsibility of the lead PC/PB support staff person; in others, PC/PB or committee Chairs/Co-Chairs have this responsibility. Be sure it is clear who is authorized to make a request from the recipient, what is considered a reasonable time period for responding, and who can respond on behalf of the recipient. If you have an MOU, be sure that information is included. Some PC/PBs use a structured form when they request information or data that is not regularly shared.
11. **Have PC/PB leaders encourage and model respectful interaction.** Disagreements are normal and can be positive, so long as they are handled appropriately. Among the factors most damaging to a positive working relationship are negative statements and personal attacks by either party. Among the most helpful factors is courtesy. It is fine to be direct about concerns, but comments should focus on content, not personality, and should be stated clearly but calmly. Prepare PC/PB and committee Chairs/Co-Chairs to demonstrate appropriate interactions.
12. **Work with PC/PB support staff and recipient staff to find practical ways to address boundary issues.** For example, PC/PBs should not discuss RWHAP subrecipients by name; their discussions should focus on the service category—and this action should be called out and stopped if it occurs. If the PC/PB feels that the recipient is attempting to unduly influence a decision that is the responsibility of the PC/PB, the Chair/Co-Chair should be expected to state the concern politely but directly.

1 Ryan White HIV/AIDS Program, Part A Manual, 2013, Section X. Planning Council Operations, Chapter 3. Planning Council Responsibilities, p 103. See <https://hab.hrsa.gov/sites/default/files/hab/Global/happartamanual2013.pdf>.

2 Sample Memorandum of Understanding (MOU) Between the Ryan White HIV/AIDS Program Part A Planning Council and Recipient. From: Compendium of Materials for Planning Council Support Staff. EGM Consulting, LLC. 2018. Available at: <https://targethiv.org/planning-chatt/sample-memorandum-understanding>