Houston Area HIV Services Ryan White Planning Council

Operations Committee Meeting

10:00 am, Tuesday, February 20, 2018 Meeting Location: 2223 W. Loop South, Suite 240 Houston, Texas 77027

AGENDA

* = Handout to be distributed at the meeting

I. Call to Order

Ella Collins-Nelson and Johnny Deal, Co- Chairs

- A. Moment of Reflection
- B. Adoption of the Agenda
- C. Adoption of the Minutes
- D. Nuts and Bolts, Petty Cash Deadlines and Open Meetings Act

Tori Williams, Manager

II. Public Comments and Announcements

(NOTE: If you wish to speak during the Public Comment portion of the meeting, please sign up on the clipboard at the front of the room. No one is required to give his or her name or HIV status. All meetings are audio taped by the Office of Support for use in creating the meeting minutes. The audiotape and the minutes are public record. If you state your name or HIV status it will be on public record. If you would like your health status known, but do not wish to state your name, you can simply say: "I am a person living with HIV", before stating your opinion. If you represent an organization, please state that you are representing an agency and give the name of the organization.

III. New Business

- A. Purpose of the Committee
- B. 2018 Committee Goals
- C. 2018 Committee Meeting Dates & Critical Timeline

Tori Williams

- D. Critique the 2018 Mentor Luncheon
- E. Critique the 2018 Council Orientation

- Amber Harbolt, Health Planner
- F. Sign Member Statement of Confidentiality Forms

Tori Williams

G. Elect a Committee Vice Chair

IV. Old Business

- A. 2018 Council Training
- B. Revise Petty Cash text to full or part time employment, M F
- C. Petty Cash Waiver Form
- V. Announcements
- VI. Adjourn

OPTIONAL: Members meet with Committee Mentor Skeet Boyle

Date

Houston Area HIV Services Ryan White Planning Council

Operations Committee Meeting

11:00 am, Thursday, January 18, 2018 Meeting Location: 2223 W. Loop South, Suite 240; Houston, Texas 77027

MINUTES

MEMBERS PRESENT	MEMBERS ABSENT	OTHERS PRESENT
Denis Kelly via phone	Skeet Boyle	Tori Williams, Office of Suppor
Carol Suazo via phone		Rod Avila, Office of Support
Isis Torrente via phone		
Call to Order : In the absence of asked Tori Williams, Director, Of to order at 11:09 a.m.		
Membership update: Williams is Bellard and Escamilla. Mr. Bellar		
Adoption of the Agenda: <u>Motion 7</u> Motion carried unanimously.	<u>#1</u> : it was moved and seconded (1	Kelly, Suazo) to adopt the agenda
Approval of the Minutes: <u>Motion</u> November 14, 2017 minutes. Mot		
Public Comment: None.		
2018 Council Orientation Itiner The committee reviewed the itine tasks.		ntation and signed up for specific
Announcements: None.		
Adjournment: it was move and Motion carried unanimously.	l seconded (Kelly, Suazo) to ad	ljourn the meeting at 11:27 a.m

Date

Committee Chair

Tori Williams, Director

Nuts and Bolts for New Members

Staff will mail meeting packets a week in advance; if they do not arrive in a timely manner, please contact the Office of Support.

The meeting packet will have the date, time and room number of the meeting; this information is also posted on signs on the first and second floor the day of the meeting.

Sign in upon arrival and use the extra agendas on the sign in table if you didn't bring your packet.

Only Council/committee members sit at the table since they are the voting members; staff and other non-voting members sit in the audience.

The only members who can vote on the minutes are the ones who were present at the meeting. If you were absent at the meeting, please abstain from voting.

Due to County budgeting policy, there will be no petty cash reimbursements in March and possibly April so save receipts and turn them into Eric for payment in April.

Be careful about stating personal health information in meetings as all meetings are tape recorded and, due to the Open Meetings Act, are considered public record. Anyone can ask to listen to the tapes, including members of the media.

Houston Area HIV Services Ryan White Planning Council Office of Support

2223 West Loop South, Suite 240, Houston, Texas 77027 713 572-3724 telephone; 713 572-3740 fax

MEMORANDUM

To: Members, Ryan White Planning Council

External Members, Ryan White Committees

Copy: Carin Martin

From: Tori Williams, Director, Office of Support

Date: January 25, 2018

Re: End of Year Petty Cash Procedures

The fiscal year for Ryan White Part A funding ends on February 28, 2018. Due to procedures in the Harris County Auditor's Office, it is important that all volunteers are aware of the following end-of-year procedures:

- 1.) Council and External Committee members must turn in all requests for petty cash reimbursements at or before 2 p.m. on Friday, February 9, 2018.
- 2.) Requests for petty cash reimbursements for childcare, food and/or transportation to meetings before March 1, 2018 will not be reimbursed at all if they are turned in after March 30, 2018.
- 3.) The Office of Support may not have access to petty cash funds between March 1 and May 31, 2018. This means that volunteers should give Rod the usual reimbursement request forms for transportation, food and childcare expenses incurred after March 1, 2018 but the Office may not be able to reimburse volunteers for these expenses until mid to late May 2018.

We apologize for this significant inconvenience. Please call Tori Williams at the number listed above if you have questions or concerns about how these procedures will affect you personally.

(OVER FOR TIMELINE)

March 1	Feb 9	Feb 28	March 30
2017	2018	2018	2018
Beginning of	Turn in all	End of	Turn in any remain

fiscal year 2017

receipts

fiscal year 2017. No money available to write checks until April the end of May

aining receipts for fiscal year 2017 or you will not be reimbursed for any expenses incurred between March 1, 2017 and Feb. 28, 2018

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www.rwpchouston.org

Memorandum

To: Members, Houston Ryan White Planning Council

External Members, Ryan White Committees

From: Tori Williams, Director, Ryan White Office of Support

Date: February 1, 2018

Re: Open Meetings Act Training

Please note that all Council members, and External Committee members, are required to take the Open Meetings Act training at least <u>once in their lifetime</u>. If you have never taken the training, or if you do not have a certificate of completion on file in our office, you must take the training and submit the certificate to the Office of Support <u>before March 31, 2018</u>. The training takes 60 minutes and can be accessed through the following link (if you have difficulty with the link, copy and paste it into Google and it should lead you to the correct area of the Attorney General's website):

https://www.texasattorneygeneral.gov/og/oma-training

If you do not have high-speed internet access, you are welcome to view the video in the Office of Support. We will make the training available in suite 240 after the Council adjourns on Thursday, February 9th; popcorn will be provided. Or, you can contact Diane Beck and make an appointment to see it on one of the computers in our office.

Upon completion of training, you will be provided with a code that is used to print a certificate of completion. Using the code, you may obtain the certificate from the Attorney General's Office in the following ways:

Print it from the Attorney General web link at: https://www.texasattorneygeneral.gov/forms/openrec/og_certificates.php
Or, call the Office of Support with the validation code and the staff will print it for you.

We appreciate your attention to this important requirement. Do not hesitate to call our office if you have questions.

Houston Area HIV Services Ryan White Planning Council Standing Committee Structure

(Reviewed 07-15-15)

1. Affected Community Committee

This committee is designed to acknowledge the collective importance of consumer participation in Planning Council (PC) strategic activities and provide consumer education on HIV-related matters. The committee will serve as a place where consumers can safely and in an environment of trust discuss PC work plans and activities. This committee will verify consumer participation on each of the standing committees of the PC, with the exception of the Steering Committee (the Chair of the Affected Community Committee will represent the committee on the Steering Committee).

When providing consumer education, the committee should not use pharmaceutical representatives to present educational information. Once a year, the committee may host a presentation where all HIV/AIDS-related drug representatives are invited.

The committee will consist of HIV+ individuals, their caregivers (friends or family members) and others. All members of the PC who self-disclose as HIV+ are requested to be a member of the Affected Community Committee; however membership on a committee for HIV+ individuals will not be restricted to the Affected Community Committee.

2. Comprehensive HIV Planning Committee

This committee is responsible for developing the Comprehensive Needs Assessment, Comprehensive Plan (including the Continuum of Care), and making recommendations regarding special topics (such as non-Ryan White Program services related to the Continuum of Care). The committee must benefit from external membership and expertise.

3. Operations Committee

This committee combines four areas where compliance with Planning Council operations is the focus. The committee develops and facilitates the management of Planning Council operating procedures, guidelines, and inquiries into members' compliance with these procedures and guidelines. It also implements the Open Nominations Process, which requires a continuous focus on recruitment and orientation. This committee is also the place where the Planning Council self-evaluations are initiated and conducted.

This committee will not benefit from external member participation except where resolve of grievances are concerned.

4. Priority and Allocations Committee

This committee gives attention to the comprehensive process of establishing priorities and allocations for each Planning Council year. Membership on this committee does include external members and must be guided by skills appropriate to priority setting and allocations, not by interests in priority setting and allocations. All Ryan White Planning Council committees, but especially this committee, regularly review and monitor member participation in upholding the Conflict of Interest standards.

5. Quality Improvement Committee

This committee will be given the responsibility of assessing and ensuring continuous quality improvement within Ryan White funded services. This committee is also the place where definitions and recommendations on "how to best meet the need" are made. Standards of Care and Performance Measures/Outcome Evaluation, which must be looked at within each year, are monitored from this committee. Whenever possible, this committee should collaborate with the other Ryan White planning groups, especially within the service categories that are also funded by the other Ryan White Parts, to create shared Standards of Care.

In addition to these responsibilities, this committee is also designed to implement the Planning Council's third legislative requirement, assessing the administrative mechanism in rapidly allocating funds to the areas of greatest need within the eligible area, or assessing how well the grantee manages to get funds to providers. This means reviewing how quickly contracts with service providers are signed and how long the grantee takes to pay these providers. It also means reviewing whether the funds are used to pay only for services that were identified as priorities by the Planning Council and whether all the funds are spent. This Committee may benefit from the utilization of external members.

2018 QUARTERLY REPORT OPERATIONS COMMITTEE

(submit April 2018)

Status of Committee Goals and Responsibilities (* means mandated by HRSA):

1.	Design and implement Orientation for Council members and new external committee members in January and February 2018. Status:
2.	When necessary, address member needs for additional orientation and training, including through the Committee Mentoring Program. (Example: create more training for mentors and a "Frequently Asked Questions" form. The information for this document can be gathered from Project LEAP and others.) Status:
3.	*When necessary, review and revise the bylaws, policies, and procedures of the Ryan White Planning Council. Status:
4.	When necessary, review and revise policies and procedures for the Council support staff. Status:
5.	*Investigate and make recommendations regarding complaints and grievances brought before the committee in order to assure member/staff compliance with bylaws, policies, and procedures. Status:
6.	*Resolve any grievances brought forward. Status:
7.	*Make nominations to the CEO, which ensure the reflectiveness and representativeness of the Council. Status:
8.	Evaluate the performance of the Manager in conjunction with the Planning Council Chair and CEO. Status:
9.	Ensure that the Council is complying with HRSA, County and other open meeting requirements. Status:
10.	Annually, review the status of Committee activities identified in the Comprehensive Plan.
<u>Statu</u>	us of Tasks on the Timeline:
Com	mittee Chairperson Date

(as of 02/01/18)

AFFECTED COMMUNITY

Meetings are on the Mondays following Council starting at 12 noon.

February 12	July 16
March 12	August 13
March 13*	September 17
April no meeting	October 15
May 14	November 12
June 18	December no mtg

COMPREHENSIVE HIV PLANNING

Meetings are on the second Thursdays starting at 2:00 pm:

February 8	August 9
March 8	September 13
April 12	October 11
May 10	November 8
June 14	December 13
July 12	

OPERATIONS

Meetings are on the Tuesdays following Council starting at 10 am:

February 20	August 21
March 20	September 25
April 24	October 23
May 22	November 20
June 26	December no mtg
July 24	

PLANNING COUNCIL

Meetings are the second Thursdays starting at 12 noon:

February 8	August 9
March 8	September 13
April 12	October 11
May 10	November 8
June 14	December 6
July 12	

PRIORITY & ALLOCATIONS

Meetings are on the fourth Thursdays starting at 12:00 pm:

February 22	July 26
March 13*	August 23
March 22	September 27
April 26	October 25
May 24	November no mtg
June 15, 18 & 19	December no mtg
Wed. June 27	

QUALITY IMPROVEMENT

Meetings are on the Tuesdays following Council starting at 1:00 pm:

February 13	August 14
March 13*	September 18
April 17	October 16
May 15	November 13
June 19	December no mtg
July 17	

STEERING

Meetings are on the first Thursdays starting at 12 noon:

February 1	August 2
March 1	September 6
April 5	October 4
May 3	November 1
June 7	November 29
July 5	December –
	meeting on Nov 29

*Joint meeting of the Affected Community, Priority and Allocations and Quality Improvement Committees.

** Time to be announced

BOLD = Special meeting date, time or place

Houston Area HIV Services Ryan White Planning Council

Timeline of Critical 2018 Council Activities

(Revised 02-01-18)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location.

The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 713 572-3724.

General Information: The following is a list of significant activities regarding the 2018 Houston Ryan White Planning Council. Consumers, providers and members of the general public are encouraged to attend and provide public comment at any of the meetings described below. For more information on Planning Council processes or to receive monthly calendars and/or meeting packets, please contact the Office of Support at 713 572-3724 or visit our website at: www.rwpchouston.org.

Routinely, the Steering Committee meets monthly at 12 noon on the first Thursday of the month. The Council meets monthly at 12 noon on the second Thursday of the month.

Thurs. Jan. 25	Council Orientation.
Thurs. Feb. 1	12 noon. First Steering Committee meeting for the 2018 planning year.
Feb. date TBD	10:00 am. Orientation for new 2018 External Committee Members.
Thurs. Feb. 8	12 noon. First Council meeting for the 2018 planning year.
Mon. Feb. 12	5:00 pm. Deadline for submitting Proposed Idea Forms to the Office of Support. The Council is currently funding, or recommending funding, for 17 of the 28 allowable HRSA service categories. The Proposed Idea Form is used to ask the Council to make a change to a funded service or reconsider funding a service that is not currently being funded in the Greater Houston area with Ryan White Part A, Part B or State Services dollars. The form requires documentation for why dollars should be used to fund a particular service and why it is not a duplication of a service already being offered through another funding source. Anyone can submit a Proposed Idea Form. Please contact the Office of Support at 713 572-3724 to request a copy of the required forms
Feb. 22	12 noon. Priority & Allocations Committee meets to approve the policy on allocating FY 2018 unspent funds , FY 2019 priority setting process and more.
March	EIIHA Workgroup meeting.
Thurs., March 1	5 pm Deadline for submitting a Project LEAP application form. See April 4 for description of Project LEAP. Call 713 572-3724 for an application form.
March 12	12 noon. Consumer Training on the How to Best Meet the Need process.
March 13	1 pm Joint meeting of the Quality Improvement, Priority & Allocations and Affected Community Committees to determine the criteria to be used to select the FY 2019 service categories for Part A, Part B and <i>State Services</i> funding.
Wed. April 4	Project LEAP classes begin. Project LEAP is a free 17-week training course for individuals

(Continued)

prevention and care services in the Houston Area.

living with and affected by HIV to gain the knowledge and skills they need to help plan HIV

Houston Area HIV Services Ryan White Planning Council

Timeline of Critical 2018 Council Activities

(Revised 02-01-18)

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The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 713 572-3724.

Thurs. April 5

12 noon. Steering Committee meets.

Thurs. April 12

12 noon. Planning Council meets.

1:30 – 4:30 pm. Council and Community Training for the How to Best Meet the Need process. Those encouraged to attend are community members as well as individuals from the Quality Improvement, Priority & Allocations and Affected Community Committees. Call 713 572-3724 for confirmation and additional information.

Tentative: April 16 and/or 18

Workgroups for proposed ideas, as well as Outreach and Referral for Health Care and Support Services.

Tues. April 24

10:30 am – 4:00 pm. **How To Best Meet the Need Workgroups #1 and #2** at which the following services for FY19 will be reviewed:

- Ambulatory/Outpatient Medical Care (including Emergency Financial Assistance, Local Pharmacy Assistance, Medical Case Management & Service Linkage – Adult, Rural and Pediatric)
- Clinical Case Management
- Health Insurance Premium & Co-pay Assistance
- Medical Nutritional Therapy (including Nutritional Supplements)
- Mental Health
- Substance Abuse Treatment/Counseling
- Non-Medical Case Management (Service Linkage at Testing Sites)
- Oral Health Untargeted & Rural
- Vision Care

Call 713 572-3724 for confirmation and additional information.

TENTATIVE: April 25

3:00 pm - 5:00 pm. How To Best Meet the Need Workgroup #3 at which the following services will be reviewed:

- Early Intervention Services
- Home & Community-based Health Services (Adult Day Treatment)
- Hospice
- Linguistic Services
- Transportation (van-based-Untargeted & Rural)

Call 713 572-3724 for confirmation and additional information.

April 26

12 noon. Priority & Allocations Committee meets to allocate Part A unspent funds.

Mon. May 7

5:00 pm. Deadline for submitting **Proposed Idea Forms** to the Office of Support. (See February 12 for a description of this process.) Please contact the Office of Support at 713 572-3724 to request a copy of the required forms.

(Continued)

Houston Area HIV Services Ryan White Planning Council

Timeline of Critical 2018 Council Activities

(Revised 02-01-18)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location.

The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 713 572-3724.

May 22	10 am. How to Best Meet the Need Workgroup meets for recommendations on the Blue Book . The Operations Committee reviews the FY 2019 Council Support Budget.
May 15	1 pm. Quality Improvement Committee meets to approve the FY 2019 How to Best Meet the Need results and review subcategory allocation requests . Draft copies are forwarded to the Priority & Allocations Committee.
Mon. May 21	7:00 pm., Public Hearing on the FY 2019 How To Best Meet the Need results.
Tues. May 22	10:00 am. Special Quality Improvement Committee meeting to review public comments regarding FY 2019 How To Best Meet the Need results.
May 24	12 noon. Priority & Allocations Committee meets to recommend the FY 2019 service priorities for Ryan White Parts A and B and <i>State Services</i> funding.
Thurs. June 7	12 noon. Steering Committee meets to approve the FY 2019 How to Best Meet the Need results .
Thurs. June 14	12 noon. Council approves the FY 2019 How to Best Meet the Need results. Project LEAP students present the results of their needs assessment to the Council, hence the meeting may be at an off-site location.
June 15, 18 & 19	11 am – 4 pm. Special Priority & Allocations Committee meetings to draft the FY 2019 allocations for RW Part A and B and State Services funding.
June 19	1 pm. Quality Improvement Committee reviews the results of the assessment of the administrative mechanism and hosts Standards of Care training.
Wed. June 27	12 noon. The Priority & Allocations Committee meets to approve the FY 2019 allocations for RW Part A and B and <i>State Services</i> funding. LEAP students will be in attendance.
Mon. July 2	7 pm. Public Hearing on the FY 2019 service priorities and allocations .
Tues. July 3	10 am. Special meeting of the Priority & Allocations Committee to review public comments regarding the FY 2019 service priorities and allocations.
July/Aug.	Workgroup meets to complete the proposed FY 2019 EIIHA Plan.
Thurs. July 5	12 noon. Steering Committee approves the FY 2019 service priorities and allocations.
Thurs. July 12	12 noon. Council approves the FY 2019 service priorities and allocations.

(continued)

Houston Area HIV Services Ryan White Planning Council

Timeline of Critical 2018 Council Activities

(Revised 02-01-18)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location.

The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 713 572-3724.

July 26	12 noon. If necessary, the Priority & Allocations Committee meets to address problems Council sends back regarding the FY 2019 priority & allocations. They also allocate FY 2018 carryover funds. (Allocate even though dollar amount will not be avail. until Aug.)	
Thurs. Aug. 2	ALL ITEMS MUST BE REVIEWED BEFORE BEING SENT TO COUNCIL – THIS STEERING COMMITTEE MEETING IS THE LAST CHANCE TO APPROVE ANYTHING NEEDED FOR THE FY 2019 GRANT. (Mail out date for the August Steering Committee meeting is July 26, 2018.)	
Aug. 13	Consumer Training on Standards of Care and Performance Measures.	
Mon. Sept. 10	5:00 pm. Deadline for submitting Proposed Idea Forms to the Office of Support. (See February 12 for a description of this process.) Please contact the Office of Support at 713 572-3724 to request a copy of the required forms.	
Sept. 17	Consumer-Only Workgroup meeting to review FY 2019 Standards of Care and Performance Measures.	
Sept. 18	1 pm. Joint meeting of the Quality Improvement, Priority & Allocations and all Committees to review data reports and make suggested changes.	
Sept. 17	Consumer-Only Workgroup meeting to review FY 2019 Standards of Care and Performance Measures.	
Oct. 16	10 am. Review and possibly update the Memorandum of Understanding between all Part A stakeholders.	
October or November	Community Workgroup meeting to review FY 2019 Standards of Care & Performance Measures for all service categories.	
Oct. 25	12 noon. Priority & Allocations Committee meets to allocate FY 2018 unspent funds.	
Nov/Dec/Jan.	Review the evaluation of 2018 Project LEAP. Operations Committee also hosts a How to Best Meet the Need Workgroup to make recommendations on 2019 Project LEAP.	
November	The Resource Group contacts all stakeholders to see if changes need to be made to the Ryan White Part B/State Services Letter of Agreement.	
Thurs. Nov. 8	12 noon. Council recognizes all external committee members.	
Tues. Nov. 13	9:30 am. Commissioners Court to receive the World AIDS Day Resolution.	
Sat. Dec. 1	World AIDS Day.	
Dec. 6	12 noon. Due to a national meeting, the date for the December Council meeting will be earlier than usual. 2019 Council officers will be elected at the meeting.	

Houston Area HIV Services Ryan White Planning Council

2223 West Loop South, Suite 240, Houston, Texas 77027 713 572-3724 telephone; 713 572-3740 fax www.rwpchouston.org

Houston Ryan White Planning Council Operations Committee Member Statement of Confidentiality

I, the undersigned, am a member of the Operations Committee or an ex-officio member of the Committee as current Chair of the Houston Ryan White Planning Council.

I understand that in the course of my service as a member of the Operations Committee, or Chair of the Ryan White Planning Council (RWPC), I may learn certain facts about individuals in the application/nomination and membership selection process that are of a highly personal and confidential nature (i.e. information such as, but not limited to: HIV status, medical conditions, sexual orientation, or other personal matters).

I agree to the best of my ability to protect the information of a personal and confidential nature of a Council applicant. I further agree to the best of my ability to protect any information of a personal and confidential nature learned while on the Operations Committee, or during my tenure as Chair, after my membership on the Operations Committee and my relationship with the Houston Ryan White Planning Council has ceased.

I also understand that a violation of this confidentiality agreement may result in my removal from the Houston Ryan White Planning Council.

Printed Name: _	
Signature:	
Date:	

Training Topics for 2018 Ryan White Planning Council Meetings (updated: 02/05/18) DRAFT

Shading = may be room on agenda for a second speaker

Month	Topic	Speaker
January 25	_	
2018	Council Orientation	N/A
February 8	Open Meetings Act	Venita Ray, Legacy Community Health
March 8	2018 HIV Comprehensive Plan: Council Activities How To Best Meet the Need Training & Process	Amber Harbolt, Health Planner, Office of Support Denis Kelly & Gloria Sierra, Quality Improvement Committee
April 12	Houston HSDA HIV Care Continuum	Ann Dills, Texas Dept. of State Health Services
May 10	TENTATIVE: Molecular HIV Surveillance: Cluster Response and Community Engagement	Camden Hallmark, Analyst, Houston Health Department
June 14	Project LEAP Presentation	Project LEAP 2018 Students
July 12	Priority Setting and Allocations Processes	Peta-gay Ledbetter & Bruce Turner, Co-Chairs, Priority & Allocations Committee
August 9		
September 13		
October 11	EIIHA Update TENTATIVE: Intimate Partner Violence and HIV	Amber Harbolt, Health Planner Heather Keizman, RN, RW Grant Administration
November 8	We Appreciate Our External Members Election Policy	Chair, Ryan White Planning Council Operations Committee
December 6	Elections for the 2018 Officers	Curtis Bellard and Nancy Miertschin, Co-Chairs, Operations Committee

Requests: DSHS Updates (2/year)

Transgender Health Issues by Dr. Lake – recommended by Dr. Patel

Training in how to be a good committee participant: keep questions related to the topic

Training in reading Council reports

HOUSTON AREA HIV HEALTH SERVICES RYAN WHITE PLANNING COUNCIL

EST. JUL. 15, 1997

REV JANUARY 1, 2018

POLICY No. 900.01

PETTY CASH

PURPOSE

This policy establishes the guidelines by which petty cash reimbursements of expenses to attend Houston Area HIV Health Services (Ryan White) Planning Council meetings are made. The purpose of these funds is to encourage a wide range of community participation. While all members of the RWPC are eligible for reimbursement, all members are encouraged to pay for their own expenses out of their own funds if possible. This policy includes both internal as well as external members.

AUTHORITY

"Guidelines for Reimbursement of People on a Ryan White Title I Planning" dated January 21, 1997, and the Ryan White HIV/AIDS program Part A Manual - Revised 2013. The RWPC voted on February 10, 1996 to set as a priority the reimbursement of expenses to attend RWPC meetings (including subcommittee and related meetings). Those eligible to receive reimbursement of expenses to attend committee, subcommittee and related meetings include Council and external committee members.

DEFINITIONS

Meetings - are defined as outlined in the RWPC adoption of its Bylaws, Article IX. Rev. 01/18.

Meals - are those that are related to and occur as the result of attending any scheduled Houston area HIV/AIDS Health Services (Ryan White) Planning Council meeting, including Ryan White committee and workgroup meetings, and outreach events.

PROCESS

<u>Review</u> – Annually, the Operations Committee will review RWPC petty cash policies and forms.

<u>Transportation</u> - Expenses will be reimbursed as a result of a Planning Council or external committee member attending a scheduled meeting. If travel is conveyed through the use of the members own vehicle the rate will be the same as the county rate per mile. Council and external committee members are reimbursed for mileage to and from a consistent, designated starting point (either home or work). The start point will be documented in the member's file and mileage will be determined by an Internet site selected annually by the Office of Support. Members are encouraged to carpool. When members carpool, only the member who is the driver of the automobile can request mileage reimbursement from his or her designated starting point.

If a member is employed (full time) and work hours are Monday through Friday during regular business hours (approximately 8 a.m. until 5 p.m.), the member must provide the requested employment-related information on the Petty Cash Transportation Form. If work hours typically

overlap with Ryan White meetings, then the member must use their primary work address as their designated starting point for determining mileage reimbursement. Harris County may contact an employer to confirm employment information provided on the Petty Cash Transportation Form. When an individual uses their work address as the point of origin for their travel reimbursement, then they are not eligible for childcare reimbursement.

If the member travels by cab, then an official cab company receipt must accompany the request for reimbursement. Traveling by cab should be the option of last resort, with the following exceptions. Council and external committee members who are accompanied by children are allowed to take a cab to and from work, home and/or the child care provider. Members are also allowed to use a cab if no other means of transportation is available or there are barriers to existing transportation. Bus expenses will be reimbursed at the prevailing METRO rate (round trip).

Meals - Snacks are provided at all Council related meetings to assist individuals with dietary needs. Individuals will not be reimbursed for purchasing a meal if staff notifies members that a meal is being provided at a particular meeting. Exceptions will be made for individuals with special dietary needs. If a meeting takes place near a meal time and the Office of Support has not announced that a meal will be provided, members are allowed to purchase a meal one hour before the scheduled start time of the meeting. Members will not be reimbursed if the receipt indicates that a meal was purchased after the scheduled start time for the meeting. Members will be reimbursed for food as well as transportation and childcare when representing the Council at off-site events such as health fairs, unless a meal is provided at the event.

 Expenses for meals are to be reimbursed for "in-town" and "out-of-town" meetings. In-town meetings are those that occur as a result of a regularly scheduled meeting and a meal reimbursement is requested. The maximum amount allowed will be in accordance with current Harris County reimbursement rate for meals and receipts will be required.

<u>Child Care</u> - Expenses for childcare will be \$35 per child per visit, not to exceed \$100 per day (total). An exception to this would be an activity that takes place outside of normal business hours (6 am - 6 pm) in which case a volunteer could be reimbursed for an additional \$35 per child per visit, not to exceed \$100 (total). A Council approved Child Care Expense Receipt must be attached to the Claim for Reimbursement. Child Care reimbursements are based on RWPC meetings or committee related events.

 Other - Council and External Committee members who choose to attend a non-assigned meeting or event will not be reimbursed from petty cash for their participation in that meeting. Also, members will not be reimbursed for transportation, childcare and/or food if they arrive 20 minutes after the scheduled start time for the meeting. Within the calendar year, members are allowed two exemptions if they arrive at a meeting 20 minutes late. If necessary, members are allowed to ask the Operations Committee for additional exemptions for reimbursement if they are more than 20 minutes late to a meeting.

REIMBURSEMENT

Reimbursement requests are to be submitted to the Office of Support for payment. Receipts must be submitted any time within 45 days of the date of the event or they will not be approved. End of year reimbursements must be submitted within 30 days after the end of the Ryan White Part A fiscal year. Reimbursement requests presented 30 days after the end of the fiscal year will not be approved. Any request that does not fall within the time frames outlined above needs to be

submitted in writing to the RWPC Director for approval. All reimbursements are available from 93 94 the Ryan White Office of Support Staff. 95 96 If a check is lost or stolen, as long as the check has not been cashed, the Office of Support will 97 replace one check per year as a courtesy to the member and Ryan White will pay the administrative 98 fee. If more than one check is lost or stolen within a calendar year, the lost or stolen check will 99 not be replaced. 100 101 Per Harris County policy, petty cash is not allowed to be taken off site. Therefore, members will 102 be reimbursed for off-site meetings the next time they are at the Office of Support. Members will 103 not be reimbursed for travel to the Office if the sole reason for coming to the Office is to be 104 reimbursed for an off-site meeting. 105 106 The RWPC will not reimburse members for loss of wages as a result of attending meetings. 107 108 Members are allowed to ask the Operations Committee for exemptions from any portion of the 109 above policy by submitting a letter to the Director of the Ryan White Office of Support stating 110 why personal circumstances should allow them to be exempt. The Director will share the letter 111 with the Operations Committee at their next scheduled meeting. The Operations Committee will 112 respond to the request in writing. 113 114 MAXIMUM REIMBURSEMENT RATES 115 116 All Ryan White Council and external committee members can receive up to the following amount 117 in petty cash reimbursement within a 12 month calendar year, unless the member receives a waiver 118 for an increased amount from the Operations Committee based upon personal circumstances. 119 120 The allowable amount for all members is: 121 11 committee meetings + 2 trainings 122 + 3 workgroups or Public Hearings 123 124 125 16 meetings/year x 100/meeting = 1,600126 Council Chair: up to \$5,000/year 127 (\$1,600 + 12 Council meetings + 12 Steering Committee meetings + 10 additional 128 misc. meetings) 129 130 Officers & Committee Chairs: up to \$4,000/year 131 (\$1,600 + 12 Council meetings + 12 Steering Committee meetings) 132 133 Council Members: up to \$2,800/year 134 (\$1,600 + 12 Council meetings)135 136 External Committee Members: up to \$1,600/year 138

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Written requests for exceptions can be submitted to the Operations Committee for review and approval.

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If it becomes clear that an individual is going to exceed the amount listed above within a calendar year, the following steps are to be taken:

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Step 1: The Director of the Office of Support will verbally bring the matter to the

attention of the member and document the conversation in the member's folder.

Step 2: If the situation continues after two conversations with the member, the m

Step 2: If the situation continues after two conversations with the member, the member will receive a letter signed by the Chair of the Planning Council and the Director of the Office of Support. The letter will document the total amount the member has received in petty cash reimbursement and request a meeting to outline ways in which the individual can begin to limit reimbursement.

Step 3: If the member is unable or unwilling to limit reimbursement than the Council Chair will review and possibly reappoint the member to a committee that has fewer meetings and/or fewer outside activities.

Step 4: If the individual member reaches the cap outlined above, they can request a waiver from the policy from the Operations Committee. The Operations Committee will review the request and, after consulting with the Chair of the Ryan White Planning Council and the Director of the Office of Support, the Committee will have final approval regarding the response to the request for a waiver and will notify the individual of their decision in writing. If the request for a waiver is denied, the member will not be reimbursed for mileage, childcare and/or meals for the remainder of the calendar year. The member will be eligible to receive petty cash reimbursement for activities that take place in the next calendar year, once the new year begins.

Petty Cash Transportation Form

Fill out this form ONLY if you will be requesting reimbursement for transportation

Per the Ryan White Petty Cash Policy: Council and external members are reimbursed for mileage to and from a consistent, designated starting point (either home or work). The start point will be documented in the member's file and mileage will be determined by an Internet site selected annually by the Office of Support. If a member is employed full time, and work hours are Monday through Friday during regular business hours (approximately 8 a.m. until 5 p.m.), the member must provide the requested employment information on this Petty Cash Transportation Form. If work hours typically overlap with Ryan White meetings, then the member must use their primary work address as their designated starting point for determining mileage reimbursement. Harris County may contact an employer to confirm employment information stated below.

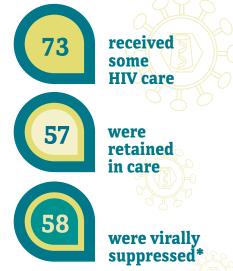
FILL IN THIS BOX ONLY IF YOU ARE EMPLOYED. IF NOT				
EMPLOYED, GO TO THE NEXT BOX	⟨.			
NAME:	DATE:			
Name of employer:				
Address of primary work location:				
Days and hours of employment:				
NIARAT	DATE			
NAME:	DATE:			
ADDRESS OF DESIGNATED START	ING POINT (nome or work):			
Request for Change of Designated Starting Point				
DATE:	INITIALS:			
NEW DESIGNATED STARTING POINT:				

Evidence of HIV Treatment and Viral Suppression in Preventing the Sexual Transmission of HIV

HIV treatment has dramatically improved the health, quality of life, and life expectancy of people living with HIV (Cohen, 2011; Farnham, 2013; Farnham, 2013; Samji, 2013). Moreover, since breakthrough research in 2011 also showed the profound impact of HIV treatment in preventing the sexual transmission of HIV among heterosexual HIV-discordant couples, HIV treatment has transformed the HIV prevention landscape (Cohen, 2011). The Centers for Disease Control and Prevention (CDC) has worked with prevention partners across the nation to prioritize efforts to maximize the impact of HIV treatment in prevention and has responded with new initiatives that help diagnose HIV-infected individuals earlier, link or reengage them to effective HIV care and treatment, and support adherence to HIV treatment, with the ultimate goal of achieving viral suppression (https://www.cdc.gov/hiv/pdf/funding/announcements/ps18-1802/cdc-hiv-ps18-1802-factsheet.pdf).

These interventions across the care continuum (https://www.cdc.gov/hiv/pdf/library/factsheets/cdc-hiv-care-continuum.pdf) are essential to help those living with HIV stay healthy, live longer, and reduce the risk of further transmission to partners. Additionally, to increase awareness of the full range of prevention strategies now available, CDC has worked to implement multiple education campaigns and provide online risk reduction tools and resources with information on different prevention strategies and their effectiveness (https://www.cdc.gov/actagainstaids/index.html; https://wwwn.cdc.gov/hivrisk/; https://effectiveinterventions.cdc.gov/).

FOR EVERY 100 PEOPLE LIVING WITH DIAGNOSED HIV IN 2014:



* People living with HIV who take HIV medicine as prescribed and get and stay virally suppressed have effectively no risk of sexually transmitting HIV to HIV-negative partners.

Over the past year, as new research has provided even stronger evidence on the prevention benefit of HIV treatment and viral suppression, CDC has joined with other federal agencies as part of an effort led by the U.S. Department of Health and Human Services (HHS) to review the latest evidence and ensure that these findings are communicated in a way that is consistent and accurate. As part of CDC's continued efforts to communicate evidence around effective prevention strategies, this fact sheet summarizes the latest scientific evidence regarding the effectiveness of HIV treatment and viral suppression in preventing the sexual transmission of HIV, and provides an update on evolving prevention messages developed by the HHS workgroup, as well as CDC's next steps to evaluate and update messages in our communications and prevention activities.

The Evidence

In 2011, the interim results of the HPTN052 clinical trial were released (Cohen, 2011) demonstrating a 96% reduction in HIV transmission risk among heterosexual HIV-discordant couples for those starting antiretroviral therapy (ART) versus those delaying ART initiation. In addition to the powerful initial results, subsequent analyses published in 2016 demonstrated that there were no HIV transmissions between these couples when the HIV-positive partner had a suppressed viral load (defined as having a viral load less than 400 copies per milliliter) (Cohen, 2016).

Some HIV infections were observed among couples in the treatment condition; however, most of these were not genetically linked to the primary HIV-positive partner in the study, indicating that they came from another partner outside the study. Only a limited number of linked sexual transmissions of HIV were observed; however, this

The HHS workgroup includes senior leaders, communicators, and subject matter experts from the Office of HIV/AIDS Infectious Disease Policy (OHAIDP) in HHS, the Centers for Disease Control and Prevention (CDQ), National Institutes for Health (NIH), Health Resources and Services Administration (HRSA), and Substance Abuse and Mental Health Services Administration (SAMHSA).



National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention

was while the HIV-positive partner was not virally suppressed. In other words, linked HIV transmissions only occurred either:

- In the months *after* the HIV-positive partner began ART but *before* the HIV-positive partner was virally suppressed, or
- When the ART regimen failed and the HIV-positive partner did not maintain viral suppression.

Two recently conducted studies, PARTNER and Opposites Attract, have reported similar results on the effectiveness of taking ART and achieving and maintaining viral suppression in preventing the sexual transmission of HIV — that is, no linked infections were observed while the HIV-positive partner was virally suppressed while the couples engaged in condomless sex with no exposure to pre-exposure prophylaxis (PrEP) (Rodger, 2016; Bavinton, 2017). In these two studies, viral suppression was defined as less than 200 copies per milliliter, although most HIV-positive participants were undetectable in the PARTNER study (<50 copies/mL; Rodger, 2016). These studies also quantified the extent of sexual exposure. Over 500 heterosexual couples, with about half having a male HIV-infected partner (PARTNER), and more than 650 male-male couples (Opposites Attract) from 14 European countries, Australia, Brazil, and Thailand engaged in over 70,000 episodes of condomless vaginal or anal intercourse, while also not taking PrEP, during approximately 1,500 couple years of observation.

The studies reported transmission risk estimates and their corresponding 95% confidence intervals as:

- PARTNER study (Rodger, 2016): 0.0 (0.00 0.30) per 100 couple years
- Opposites Attract study (Bavinton, 2017): 0.0 (0.00 1.56) per 100 couple years

When combining the data from both PARTNER and Opposites Attract studies, the combined transmission risk estimate is 0.0 (0.0 - 0.25) per 100 couple years (unpublished data). Relevant person-time data have not been reported for HPTN052 to be combined with these two studies. CDC is now working with HPTN052 investigators to examine these data. When HPTN052 data can be combined with these two studies, the upper bound of a combined transmission risk estimate is expected to be smaller than 0.25 per 100 couple years including additional years of follow-up time.

Updating Prevention Messages

Given the significance of these recent findings, HHS convened scientific and communication leadership across several federal agencies to review the latest evidence and develop updated messages to communicate that evidence to the public in a clear, concise, consistent, and accurate manner.

In September 2017, the HHS workgroup agreed on the following interim message, to be tested with multiple audiences, which summarizes the scientific evidence of the effectiveness of HIV treatment and viral suppression in preventing the sexual transmission of HIV:

People living with HIV who take HIV medicine as prescribed and get and keep an undetectable viral load have effectively no risk of transmitting HIV to their HIV-negative sexual partners.

The term "effectively no risk" was selected by the HHS workgroup as the interim language to describe the magnitude of the estimated risk of transmitting HIV to a sexual partner when an HIV-positive individual is taking ART daily as prescribed and then achieves and maintains an undetectable viral load. "Effectively no risk" was chosen to reflect the fact that there have been no linked infections observed in studies among thousands of sexually active HIV-discordant couples engaging in female-male and male-male sex without a condom or PrEP over several thousand person-years of follow-up, while the HIV-positive partner is virally suppressed.

Although these studies provide extremely strong evidence, they are based on a finite number of observations that result in point estimates (zero) and corresponding 95% confidence intervals that indicate the precision or uncertainty associated with those estimates. In these studies, the lower bounds of confidence intervals are all zero, but the upper bounds of the confidence intervals are very small but greater than zero, which implies the possibility of a non-zero risk. Although these three studies found no cases of HIV transmission over several thousand person-years of follow-up, these data, even when combined, cannot statistically rule out the possibility that the true risk is greater than zero.

Because "effectively no risk" might have different meanings in different audiences or populations, the HHS workgroup agreed that message testing was critical to evaluate the understanding of this interim message and to determine how best to communicate the evidence and potential challenges with successfully implementing this prevention strategy among people living with HIV and their sexual partners.

Maximizing the Effectiveness of the Prevention Strategy in Practice

The success of this prevention strategy is contingent on achieving and maintaining an undetectable viral load. Data show, however, that not all HIV-positive individuals on ART are virally suppressed, while even fewer maintain viral suppression over time. CDC's national surveillance data estimate that 58% of persons living with diagnosed HIV in the United States in 2014 were virally suppressed, defined as less than 200 copies/mL at most recent test (CDC, 2017). In addition, while most (about 80%) HIV-positive persons in the United States in HIV clinical care (defined as either receiving HIV medical care or having a viral load test) were virally suppressed at their last test, almost 20% were not (CDC, 2016; CDC, 2017; Marks, 2016). Also, about two-thirds achieved and maintained viral suppression over twelve months, which means about one-third (or about 33%) did not maintain viral suppression over that time period (CDC, 2016; Marks, 2016).

To help all individuals living with HIV and their partners get maximal benefit from this prevention strategy, it will be important to give providers, those living with HIV, and their partners clear information regarding the challenges with achieving and maintaining viral suppression. These challenges include the following:

- **Time to viral suppression:** Most people will achieve an undetectable viral load within 6 months of starting ART. Many will become undetectable very quickly, but it could take more time for some.
- Importance of regular viral load testing: Regular viral load testing is critical to confirm that an individual has achieved and is maintaining an undetectable viral load. Just because someone was virally suppressed in the past does not guarantee they are still virally suppressed. It is not known if viral load testing should be conducted more frequently than currently recommended for treatment to achieve maximal protection if relying on treatment and viral suppression as a prevention strategy.
- Adherence challenges: Taking HIV medicines as prescribed is the best way to achieve and maintain an undetectable viral load. Poor adherence, such as missing multiple doses in a month, could increase a person's viral load and their risk for transmitting HIV. People who are having trouble taking their HIV medicine as prescribed can work with health care providers to improve their adherence. If an individual is experiencing adherence challenges, other prevention strategies could provide additional protection until the individual's viral load is confirmed to be undetectable.
- Stopping HIV medication: If an individual stops taking their HIV medicine, their viral load can increase very quickly (e.g., within a few days) and eventually returns to around the same level it was before starting their HIV medicine. People who have stopped taking their HIV medicine should talk to their health care provider as soon as possible about their own health and consider using other strategies to prevent sexual HIV transmission.
- **Protection against other STIs:** Taking HIV medicine and achieving and maintaining an undetectable viral load does not protect you or your partner from getting other sexually transmitted infections. Other prevention strategies are needed to provide protection from STIs.

Next Steps in Communicating the Evidence

To help ensure prevention partners are aware of the effectiveness of this powerful HIV prevention strategy, CDC summarized the scientific evidence and the interim HHS-wide prevention message in a Dear Colleague Letter (https://www.cdc.gov/hiv/library/dcl/dcl/092717.html) for National Gay Men's HIV/AIDS Awareness Day (NGMHAAD) on September 27, 2017. CDC is currently updating key web pages to summarize the evolving science and message updates (https://www.cdc.gov/hiv/risk/art/index.html).

CDC is currently conducting message testing to better understand how to most effectively communicate the science on optimal use of HIV treatment and viral suppression for prevention and the real world requirements for its success. We will continue to update campaigns, websites, and other communications materials as messaging evolves and is improved based upon research findings.

For More Information

Call 1-800-CDC-INFO (232-4636) Visit www.cdc.gov/hiv

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1/2 PRICE Dessert and free COFFEE Refills. 2nd and 4th Monday from 2PM till 4PM.

We are meeting January 8th and January 22nd to have a social and meet old and new friends. This Social will be held every Month. Please join our NEW SOCIAL. For more info call Denis at 832-578-9891.