

Houston Area HIV Services Ryan White Planning Council

Operations Committee Meeting

12:00 pm, Tuesday, November 14, 2017

Meeting Location: 2223 W. Loop South, Suite 240

Houston, Texas 77027

AGENDA

* = Handout to be distributed at the meeting

-
- I. Call to Order Curtis Bellard and
Nancy Miertschin, Co- Chairs
 - A. Moment of Reflection
 - B. Adoption of the Agenda
 - C. Adoption of the Minutes

 - 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. 2018 Project LEAP
 - 2017 Evaluation Report
 - 2018 Service Definition
 - 2018 Student Selection Guidelines
 - B. 2018 Orientation
 - C. Dates for 2018
 - Thursday, January 11 or 18 - Mentor Luncheon
 - Thursday, January _____ - Committee Meeting
 - Thursday, January 25, 2018 - Orientation

 - IV. Old Business
 - A. Ryan White Bylaws*

 - V. Announcements

 - VI. Adjourn

OPTIONAL: Members meet with Committee Mentor

Skeet Boyle

FOUR INTERVIEWS WITH COUNCIL APPLICANTS

Houston Area HIV Services Ryan White Planning Council

Operations Committee Meeting

1:00 pm, Tuesday, October 17, 2017

Meeting Location: 2223 W. Loop South, Suite 240; Houston, Texas 77027

MINUTES

MEMBERS PRESENT	MEMBERS ABSENT	OTHERS PRESENT
Curtis Bellard, Co-Chair	Skeet Boyle, excused	Tori Williams, Office of Support
Nancy Miertschin, Co-Chair	Isis Torrente	Rod Avila, Office of Support
Denis Kelly		
Carol Suazo		

Call to Order: Nancy Miertschin, Co-Chair, called the meeting to order at 3:07 p.m. and asked for a moment of reflection.

Adoption of the Agenda: ***Motion #1:*** *it was moved and seconded (Kelly, Suazo) to adopt the agenda. Motion carried unanimously.*

Approval of the Minutes: ***Motion #2:*** *it was moved and seconded (Bellard, Kelly) to approve the August 15, 2017 minutes. Motion carried. Abstentions: Kelly*

Public Comment: None.

Old Business:

2017 Council Training Topics: After reviewing the schedule of Council trainings for the remainder of 2017, the committee agreed by consensus to include *Intimate Partner Violence and HIV* in November 2017 & *HIV and Stigmatizing Language* in December 2017.

Evaluation of the Cross Training: Via conference call, Harbolt presented the results of the evaluation of the Cross Committee Trainings.

Review Council Policies:

400.03 Approving Council Support Budget: After reviewing staff suggestions, ***Motion #3:*** *it was moved and seconded (Bellard, Kelly) to approve the Council Support Budget policy as presented. The only recommended changes are to update text. Motion passed unanimously.*

800.01 Conflict of Interest: After a brief discussion, ***Motion #4:*** *it was moved and seconded (Kelly, Bellard) to accept the Conflict of Interest policy as presented. The only recommended changes are to update text. Motion passed unanimously.*

1000.01 Grievance: After a brief discussion, ***Motion #5***: *it was moved and seconded (Kelly, Suazo) to accept the Grievance policy as presented. The only recommended changes are to update text. Motion passed unanimously.*

At 3:40 pm Miertschin had to leave so Curtis Bellard chaired the remainder of the meeting.

New Business:

Part A Stakeholder Memorandum of Understanding: ***Motion #6***: *it was moved and seconded (Kelly, Suazo) to keep as is the attached Part A Stakeholder Memorandum of Understanding, dated March 2012. Motion passed unanimously.*

Part B Stakeholder Letter of Agreement: Committee members agreed by consensus to send the Part B Stakeholder Letter of Agreement to the Priority and Allocations Committee for review and possible recommended changes.

Committee meeting schedule and tasks: Williams stated that the Committee will need to dedicate itself to the following tasks: in November the Committee will finish it's review of the Council policies and bylaws; design orientation; and review Project LEAP recommendations for 2018. The Committee will not meet in December and will need to pick a meeting date in January 2018 to review and confirm details for the 2018 Council Orientation.

Announcements: The Committee will be meeting at 12 noon on November 14, 2017.

Adjournment: *it was move and seconded (Suazo, Kelly) to adjourn the meeting at 4:01 p.m. Motion carried unanimously.*

Submitted by:

Approved by:

Tori Williams, Director

Date

Committee Chair

Date

DRAFT



**Houston Area HIV Services Ryan White Planning Council
Office of Support**

2017 Project LEAP Final Report

Approved: Pending

Prepared by:
Amber Harbolt
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**Houston Area HIV Services Ryan White Planning Council
Office of Support
2017 Project LEAP Final Report**

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- FY17 Project LEAP Service Definition (approved 12-08-16)
- 2017 Project LEAP Course Overview
- 2017 Pre/Post-Training Evaluation Forms

Introduction

“Project LEAP” (*Learning, Empowerment, Advocacy and Participation*) is a locally defined HRSA-funded Service Category for the Houston EMA. Its purpose is to “increase the number and effectiveness of people living with HIV (**PLWH**) and affected others who can participate in organizations, councils, and committees dealing with the allocation of public funds for HIV-related prevention and care services,” with an emphasis on increasing participation in the EMA’s two local Planning Bodies, the Ryan White Planning Council (**RWPC**) and the Houston HIV Prevention Community Planning Group (**CPG**).

Project LEAP is currently designed as a weekly class spanning 16 weeks including classroom training, out-of-class time observation, and experiential community-based learning. On the 17th week, students are recognized through a graduation ceremony and encouraged to apply to RWP and CPG. Annually, the RWPC reviews and makes recommendations for the Project LEAP Service Definition based on program results and student needs. An External Advisory Panel consisting of representatives from the RWPC, CPG, and Project LEAP alumni also advises Project LEAP.

Beginning in 2012, the RWPC Office of Support (**OS**) assumed responsibility for planning, implementing, and evaluating Project LEAP, including student recruitment, syllabus design, and course facilitation. In its pilot year as an Office of Support project, 29 students enrolled in the program, and 24 students graduated (for an 83% graduation rate). Of graduates, 63% were consumers living with HIV, and 63% applied for either RWPC or CPG membership. Staff conducted the pilot was also conducted at a savings of over \$38,000 compared to prior contracted providers.

This report summarizes results from the 2017 Project LEAP cohort, including the ways in which the 2017 syllabus met the objectives outlined in the RWPC-approved Service Definition, the extent of the program’s achievement in increasing the knowledge and skills of PLWH and affected individuals, and lessons learned for future program implementation.

Obj. 1: Contact Hours Requirements

From the FY17 Project LEAP Service Definition:

Since 2013, Project LEAP has been designed to include multiple experiential community-based learning opportunities, including direct observations of Planning Body activities. To ensure each Project LEAP student has the same opportunity for community-based learning activities, the FY17 Project LEAP Service Definition requires contact hours for out-of-class time and service learning. The approved contact hours for Project LEAP are as follows:

- A minimum of one day class will be provided during the [program]
- If a minimum of 5 PLWH, non-conflicted individuals apply for, and are accepted into, an evening class, then day and evening classes will be provided during the term of this agreement. Each class will include graduation and at least:
 1. 44 contact hours of classroom training;
 2. 12 hours of participation in RWPC or CPG meetings or activities; and participation in HIV-related community meetings and activities

From the 2017 Project LEAP Syllabus:

- Two classes were held each week from April 5 – July 19, 2017 (**Figure 1**), including:
 1. 48 hours of classroom training;
 2. 12 hours of participation in RWPC or CPG meetings or activities; and participation in HIV-related community activities;
- For a total of 60 hours of instruction. This is 3 hours *more per class* than the Service Definition requirement.
- A graduation dinner and ceremony was held on July 26, 2017.

Figure 1: Project LEAP Contact Hours, 2017

	FY17 Service Definition (approved 12-08-16)	2016 Project LEAP Syllabus (conducted 4-5-17 through 7-19-17)	
Requirement	Number of Hours	Number of Hours	Method
Graduation	n/a	n/a	Graduation ceremony held 7-26-17
Classroom training	44	52	12 weekly classroom sessions conducted at 4 hours/session; 4 hours of classroom sessions before RWPC, and P&A Committee mtgs
PC/Community participation	12	10*	Student attendance at 1 RWPC mtg (2 hrs), 1 P&A Committee mtg (2 hrs), 1 community mtg (2 hrs), and participation in 1 volunteer shift at an HIV testing event (4 hrs)
Total per class	56	62	
<i>Number of classes</i>	2	2	
Total contact hours	56-112	124	

*Due to changes in scheduling, students were unable to attend a CPG meeting on 5-24-17, as originally stated in the course curriculum.

Obj. 1: Curriculum Requirements

FY17 Project LEAP Service Definition curriculum requirements met through curriculum:

1. Information on the sources & purposes of HIV service funds in the Houston EMA/HSDA

- Week #2 (4/12/17): Panel – Barriers to Reaching, Linking, & Retention in Care (Epidemiology Overview & Special Populations (Meyer, Stoker, Sierra, Koroma, & Johnson)
- Week #3 (4/19/17): Overview of HIV Care Funds & RW Program: HRSA to Council and Designing HIV Care Services: HTBMN (Williams)
- Week #7 (5/17/17): HIV Prevention Program: CDC to CPG Panel (Wiley, Blue, & Townsend)
- Week #9 (5/31/17): Overview of Housing Opportunities for People with HIV/AIDS (Schultz)
- Week #12 (6/21/17): Attendance at Priorities & Allocations (P&A) Committee meeting (Williams)

2. Structure, functions, & procedures of the RWPC/CPG

- Week #1 (4/6/16): History of HIV in the Houston Area Interactive Exercise (Vargas & Williams)
- Week #3 (4/19/17): Overview of HIV Care Funds & RW Program: HRSA to Council and Designing HIV Care Services: HTBMN (Williams)
- Week #3 (4/19/17): PB & Jelly Exercise (Function of Policies & Procedures) (Harbolt)
- Week #10 (6/8/17): Attendance at Ryan White Planning Council (RWPC) meeting
- Week #11 (6/14/17): Training and Exercise on the P&A Process (Williams)
- Week #11 (6/14/17): Organizing Graduation/Robert's Rules of Order Practice (Williams)
- Week #15 (7/12/17): Project LEAP to Planning Body (Ross, Gorden, Escamilla, Blue, & Kelly)
- Week #15 (7/12/17): RWPC and CPG Application Process (Williams)
- Week #16 (7/19/17): RWPC & COI Refresher and Mock Interviews (Williams & Harbolt)

3. Training & skills building in needs assessments, parliamentary procedures & meeting management, presentation skills, accessing & utilizing resources and role models, & organizational participation & conduct

- Week #2 (4/12/17): Introduction to Robert's Rules of Order (Williams)
- Week #2 (4/12/17): LEAP Special Study Project Survey Development (Harbolt)
- Week #3 (4/19/17): LEAP Special Study Project – Survey Skills Training (Harbolt)
- Week #4 (4/26/17): Robert's Rules of Order Exercise (Williams)
- Week #4 (4/26/17): Community Needs Assessment (Harbolt)
- Week #5 (5/3/17): Leadership Skills and Team Building (Alexander)
- Week #6 (5/10/17): Speakers Related to Survey Topics (Keizman & Vargas)
- Week #7 (5/17/17): LEAP Special Study Project – Analyze Survey Data (Harbolt)
- Week #9 (5/31/17): LEAP Special Study Project –Presentation Practice (Harbolt)
- Week #10 (6/8/17): Presentation of LEAP Special Study Project to RWPC
- Week #13 (7/28/17): Advocacy 101 (Ray)
- Week #13 (7/28/17): Training on HIV Resources/Blue Book Treasure Hunt (Beck & Williams)
- Week #16 (7/19/17): Community Meeting Report-Backs (Williams)
- Week #16 (7/19/17): Leadership and Self-Deception (Goodie) – evening class only
Ongoing: Weekly designation of meeting chairs, weekly practice with Robert's Rules and following meeting agendas, regular in-class small/large-group activities requiring student presentations

4. Training on HIV-related Standards of Care, quality assurance methods, & HRSA service category definitions

- Week #3 (4/19/17): Overview of HIV Care Funds & RW Program: HRSA to Council and Designing HIV Care Services: HTBMN (Williams)
- Week #4 (4/26/17): Comprehensive HIV Planning (Harbolt)
- Week #4 (4/26/17): HIV Continuum of Care (Harbolt)
- Week #15 (7/12/17): Training on Standards of Care and Performance Measures (Harbolt)

Obj. 2: Class Composition vs. Current HIV Prevalence

From the FY17 Project LEAP Service Definition:

- Enroll a minimum of 12 (20 if evening class) PLWH individuals, and no more than six (6) (10 if evening class) affected others in order for them to receive the necessary skills and knowledge to participate in the decision-making process to fund and allocate public money to HIV-related services in the Houston EMA/HSDA.
- The race, ethnicity, and gender composition of the classes must reflect current local HIV prevalence data to the extent feasible.
- Endeavor to enroll individuals from groups that are disproportionately affected by HIV disease, including youth and transgender PLWH.

From the 2017 Project LEAP Cohort (Figure 2):

- 21 PLWH and 11 affected others were enrolled at the beginning of the 2017 Project LEAP program.
- Of graduating students, 11 were PLWH, and 11 were affected (50% each).
- Compared to HIV prevalence proportions for the Houston EMA, a greater proportion of black, non-Hispanic (53%) and Hispanic (31%) students enrolled in the program, and a greater proportion of black non-Hispanic students graduated from the program (59%).
- No youth enrolled in the program in 2017.
- One transgender student enrolled in the program and graduated.

Figure 2: Project LEAP Class Composition, 2017

	EMA HIV Prevalence (as of 12/31/15)		2017 Project LEAP Enrollees (as of 4/6/17)		2017 Project LEAP PLWH Enrollees (as of 4/6/17)		2017 Project LEAP Graduates (as of 7/26/17)	
	#	%	#	%	#	%	#	%
Race/Ethnicity								
White, not Hispanic	5,228	20	4	13	3	14	2	9
Black, not Hispanic	13,226	49	17	53	13	62	13	59
Hispanic	7,445	28	10	31	5	24	6	27
Other/Unknown	1,064	4	1	3	0	0	1	5
Total	27,023	100	32	100	21	100	22	100
Sex								
Male	20,255	75	13	41	10	50	8	36
Female	6,768	25	18	56	10	50	13	59
Transgender	n/a	n/a	1	3	*	*	1	5
Total	27,023	100	32	100	20	100	22	100
Age								
13 – 24 years	1,302	5	0	0	0	0	0	0
Total	1,302	5	0	0	0	0	0	0

*Data suppressed to maintain confidentiality

Obj. 2: Course Completion

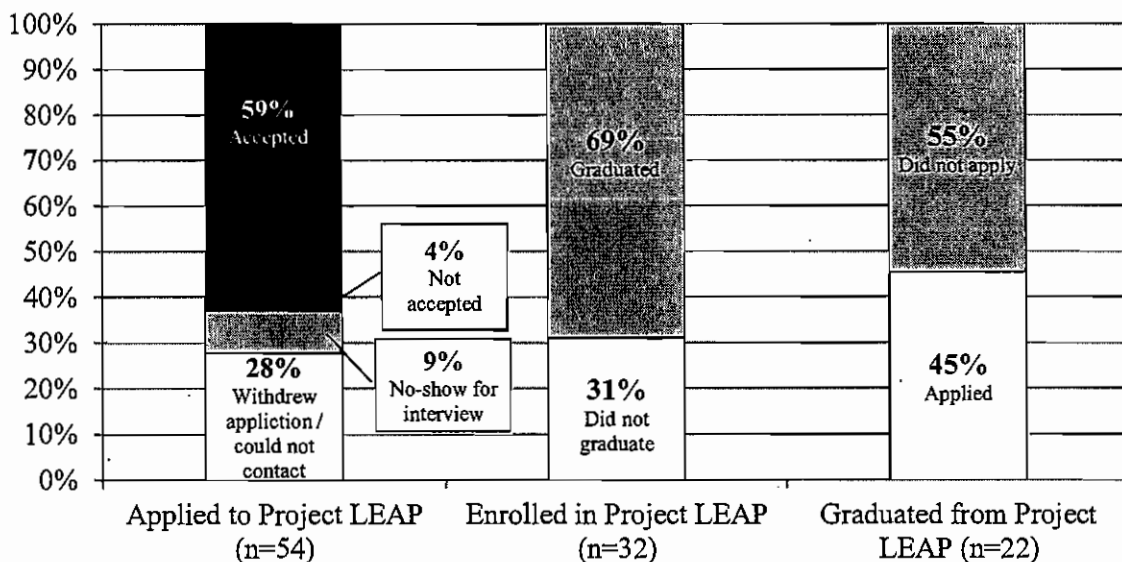
From the FY17 Project LEAP Service Definition:

- Enroll a minimum of 12 (20 if evening class) PLWH individuals, and no more than six (6) (10 if evening class) affected others in order for them to receive the necessary skills and knowledge to participate in the decision-making process to fund and allocate public money to HIV-related services in the Houston EMA/HSDA.
- Establish realistic training schedules that accommodate varying health situations of participants.

From the 2017 Project LEAP Cohort (Figures 3):

- 54 individuals applied for 2017 Project LEAP; 15 applicants withdrew from the interview process or could not be contacted after they applied. The remaining 39 applicants had interviews scheduled. Five applicants did not show up for their interviews, two applicants were interviewed but not accepted into the program, and 32 applicants were enrolled.
- Out of the 32 students enrolled, 22 graduated from the program, for a graduation rate of 69%. Reasons for attrition were conflicts with other priorities and medical concerns that prevented attendance. Five students enrolled, but never attended class. An additional five students attended classes, but did not complete the course.
- Average weekly class size was 12 students for the morning class, and 10 students for the evening class. Weeks involving off-site locations, alternate days/times, or with inclement weather correlated with higher absences. Two students had perfect attendance.
- When asked about next steps after Project LEAP, 74% of graduates planned to apply to RWPC or an External Committee; 47% planned to apply to CPG, 37% planned to join a Community Advisory Board (CAB), 58% planned to join a Task Force, and 32% planned to sign up for the Positive Organizing Project.
- Ten students (or 45% of the graduating class) submitted applications to RWPC for PC (8) and/or External Committee (9) membership. As of October 2017, nine graduates and one 2014 Project LEAP graduate have been appointed as External Committee members.

Figure 3: Project LEAP Application, Enrollment, and Course Completion, 2017



Obj. 2: Pre/Post-Training Evaluation

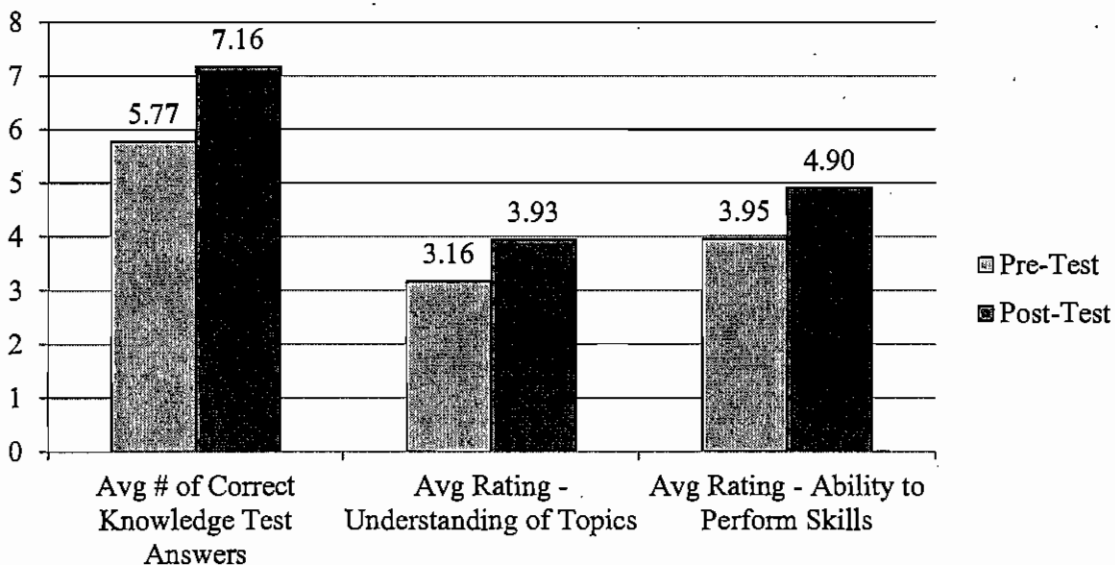
From the FY17 Project LEAP Service Definition:

- Conduct a pre-training evaluation to determine knowledge and beliefs concerning HIV disease and understanding of HIV-related funding processes.
- Conduct a post-training evaluation to measure change.

From the 2017 Project LEAP Cohort:

- A matched pre-training and post-training evaluation was conducted at Weeks 1 and 16. The evaluation tool (See Attachment) included the following:
 1. A 10-item fact-based multiple choice quiz specific to Service Definition topics measuring change in knowledge;
 2. A self-assessment of understanding of Service Definition topics (1 = “not well”; 5 = “very well”) measuring self-assessed change in understanding; and
 3. A self-assessment of ability to perform the skills or activities required by the Service Definition (1 = “not well”; 5= “very well”) measuring self-assessed change in skills.
- 97% of the graduating class was evaluated at both pre and post with the following results (Figure 4):
 1. The average number of correct answers to the fact-based multiple choice questions increased from 5.77 to 7.16, or a 24% increase in average knowledge test scores.
 2. The average self-assessment rating of understanding increased from 2.30 to 4.40 (out of 5), or a 91% increase in self-assessed understanding.
 3. The average self-assessment rating of ability to perform skills or activities increased from 3.16 to 3.93 (out of 5), or a 24% increase in self-assessed skills.
 4. As in previous years, the greatest improvements occurred in: knowledge of the purpose of the RW program and RWPC activities; understanding of the structure and function of the RWPC; and ability to effectively use Robert’s Rules of Order.

Figure 4: Project LEAP Pre/Post-Training Evaluation Results, 2017



Obj. 2: Process Evaluation and Lessons Learned

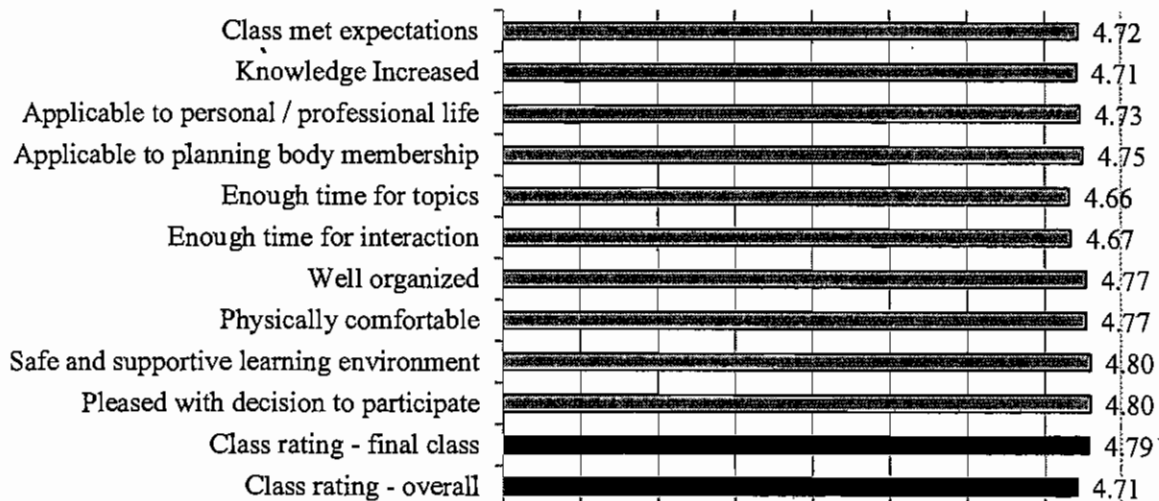
From the FY17 Project LEAP Service Definition:

- Enhance the participation of PLWH and affected persons participating in this project.
- Provide both lecture and hands-on experiential class activities to enable participants to maximize opportunities for learning.

From the 2017 Project LEAP Syllabus and Cohort:

- A variety of teaching methods was employed to meet the Service Definition:
 1. *Lectures*: included 27 guest speakers (in addition to three Office of Support staff/facilitators)
 2. *Hands-on activities*: 100% of classroom sessions included an interactive activity (e.g., Robert's Rules practice, team-building activities, group discussion, and report-back)
 3. *Experiential activities*: Graduation requirements included a special study project; attendance at a community meeting, and a volunteer shift at an HIV testing event. Two weeks of class occurred at a RWPC or Committee related function.
- Staff assessed course instruction quality was weekly. (**Figure 5**)
 1. In general, average ratings were highly favorable, with an average rating heavily skewed toward "Strongly Agree" in all quality measures assessed.
 2. The highest ratings indicate that, generally, students felt the Project LEAP class was a safe and supportive learning environment (4.80/5), were pleased with their decision to participate in Project LEAP (4.80/5), and found the class to be well organized and physically comfortable (each 4.77/5).
 3. Though still very high, lower ratings indicate students thought there was not always enough time to fully address topics (4.66/5) or interact with classmates (4.67/5).
 4. Overall, classes received an average rating of 4.71/5. The final class received an average rating of 4.79/5.

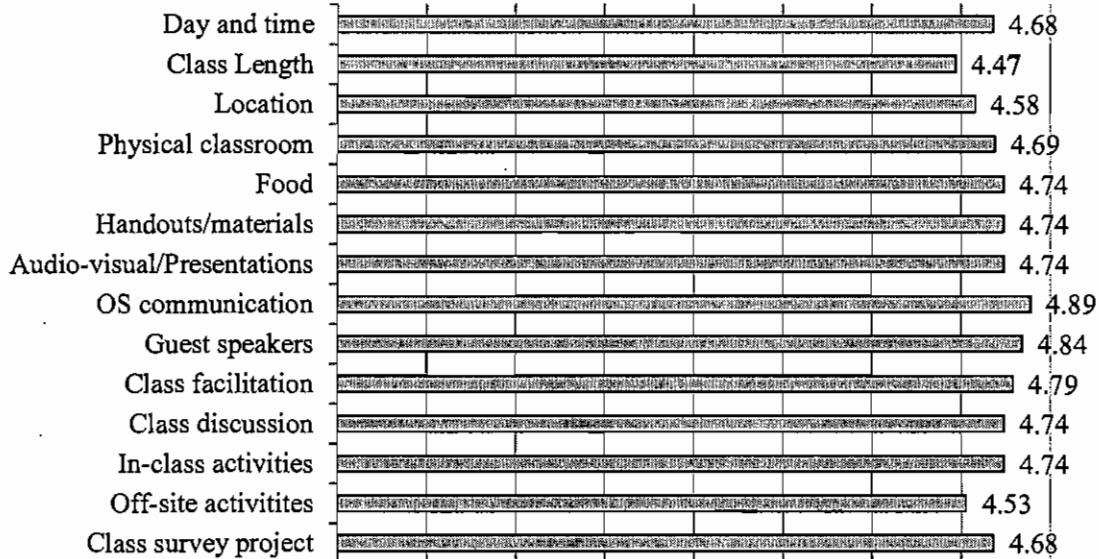
Figure 5: Project LEAP Weekly Evaluation Results, Average Ratings (1=Strongly Disagree, 5=Strongly Agree; Class Rating, 1=Poor, 5=Excellent), 2017



Obj. 2: Process Evaluation and Lessons Learned (Con't)

- Staff assessed course logistics quality at the mid-point and end of the course. **(Figure 6)**
 1. Most logistics elements showed no significant changes between the mid-point (not shown) and end-point evaluations, except a slight improvement in the food/drinks provided.
 2. Average ratings were highly favorable, with all course logistics elements rated “Very Good” (7%) or “Excellent” (93%).

Figure 6: Project LEAP Logistics, Evaluation Ratings (1=Very Poor, 5=Excellent), 2017



- General impressions of course quality were measured at the mid-point and end-point. As of the final Project LEAP 2017 class:
 1. 100% of students felt better able to be productive planning body members following Project LEAP.
 2. 100% of students were pleased with their decision to participate in Project LEAP and would recommend Project LEAP to someone else.
 3. 100% of students agreed or strongly agreed that Project LEAP made them more knowledgeable about HIV prevention and care services planning.
- Staff collected qualitative data at the mid-point and end-point with an open-ended question inviting students to suggest ways of making Project LEAP even better in the future:
 1. Give speakers more time for their presentations and questions
 2. Offer longer classes / weekend classes / classes in Spanish
 3. Continue engaging students in current events, update presentations, and avoid stigmatizing language
 4. Provide “refreshers” on previous classes the following week, and briefly review the course (all weeks) on the last day of class.
 5. Shorten evaluations

Most responses complemented the quality of the class and course content.

“Project LEAP Means I Can Be a Confident Knowledgeable Voice for the PLWH Community”: The Life-Changing Impact of Project LEAP

Near the end of the course, the 2017 Project LEAP students were asked to share the impact of the program had on their lives. The quotes were displayed in a presentation that played during the graduation ceremony. The following quotes convey sentiments shared by many of the students:

- “I have learned a lot. New challenges, new feelings and big hope for the future. Project LEAP will help me help others.”
- “Being a Project LEAP student has meant the world to me. Participating in this program has definitely expanded my knowledge in various spectrums of HIV in our community. Project LEAP has encouraged me to be more involved in the prevention of HIV. Because of Project LEAP I now have the knowledge and skills to become an advocate for the Deaf and Hard of Hearing community.”
- “This has been a thoroughly enjoyable experience for me! Today I graduate with more knowledge and understanding. Thank you Project LEAP!!!”
- “Project LEAP has furthered my understanding of the HIV epidemic in 2017, as well as the need for Ryan White funding. I have also learned how important the Ryan White Planning Council is to our community.”
- “To me, Project LEAP has meant the opportunity to learn about the current/present state of HIV on a national and local level. Project LEAP has also allowed me the opportunity to gain a better understanding and appreciation for the history and sacrifices made regarding the epidemic. Project LEAP has provided me with the knowledge and tools needed to better serve my patients and community and for that I’m so fortunate to have been a student. Thank you ☺”
- “Project LEAP is the best way to learn about all of the resources available for people living with HIV and it helps me understand the process used to award money to organizations. This class will help me become a better advocate!”
- “Project LEAP has meant the ability to gain valuable information, form unbreakable bonds and obtain great contacts to help in my advocacy work for the transgender and homeless communities.”
- “To me, Project LEAP has meant empowerment, knowledge, gaining understanding of PLWH, the RWGA system, grants available, perceptions, survey, needs assessment.”
- “Project LEAP has meant being able to learn and understand more about the HIV world. Project LEAP has also given me the knowledge and skills I need to be successful in my work field as a risk reduction supervisor.”
- “Project LEAP has empowered me to become a stronger HIV prevention and care advocate. I feel more knowledgeable and better equipped to actively participate in HIV prevention and care planning services as a result of being a Project LEAP student. I am very grateful for Project LEAP.”

“Project LEAP Means I Can Be a Confident Knowledgeable Voice for the PLWH Community”: The Life-Changing Impact of Project LEAP (Con’t)

- “Project LEAP has meant education and preparation for people with needs, when they don’t know what to do a way to know what to do. People that care, the education is thorough. Basically how to advocate, advocacy.”
- “Project Leap means... HOPE: Having the Opportunity to Provide Empowerment to my clients, friends & family.”
- “We are the ones we’ve been waiting for. Nothing about us without us!”
- “Project LEAP has meant having a supportive space to share our personal experiences and aspirations to uplift individuals and families affected by HIV; while gaining knowledge of resources available to make a difference in the community.”
- “Project LEAP means one more step towards making a difference in people’s lives by providing services from a more informed perspective.”
- “Project LEAP is a wonderful learning experience and an opportunity to be part of a great group of people who made a choice to make a positive impact in the life of fellow Houstonians.”
- “Project LEAP has given me the opportunity to see and view more closely how homeless medication is needed for them, and medical attention.”
- “Project LEAP has provided me with accurate knowledge which I can pass on to others to help them make better informed decisions about their health and safety when it involves treatment and prevention of HIV, and how I can be a more effective advocate of people living with HIV.”
- “Project LEAP has given me tools to understand HIV, and now I no longer feel it has any power over me. I am stronger than this disease.”
- “I am glad I took the Project LEAP class, I learned a lot in the class.”
- “Project LEAP has given me a lifelong guide to help me give back the knowledge I have learned.”
- “Project LEAP means I can be a confident knowledgeable voice for the PLWH community, having the ability to link the community with resources and other available tools to make a positive impact.”

Budget Information and Comparison

Original Cost of the Program: \$ 52,000
 2017 Cost of the Program: \$ 13,824
Total Savings: \$ 38,176

2017 Expenses:

Supplies	\$ 466
Facilities Rental	724
Speaker Fees	100
Student Reimbursement (mileage only – no dependent care needed in 2017)	4,525*
Meals and Snacks	6,989
Staff Mileage	0
Miscellaneous (graduation shirts)	1,020

TOTAL \$13,824

* Of the \$4,525 spent on transportation, \$3,040 was for group transportation to and from AFH housing facilities

Project LEAP Budget Comparison, 2012 – 2017

Item	2012 Expenses	2013 Expenses	2014 Expenses	2015 Expenses	2016 Expenses	2017 Expenses
Personnel & Fringe	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Supplies	1,182	1,159	523	638	493	466
Facilities Rental	268	875	318	274	1158	724
Speaker Fees	0	0	0	0	100	100
Student Reimbursement						
Transportation	3,294	3,178	4,878	1,031	1,242	4,525*
Dependent Care	560	705	0	0	0	0
Food	7,844	5,897	7,553	4,091	3,734	6,989
Staff Mileage	200	25	20	20	20	0
Miscellaneous	630	858	809	301	494	1,020
TOTAL	\$13,978	\$12,697	\$14,100	\$6,355**	\$7,241**	\$13,824

****IMPORTANT:** Please note that 2015 and 2016 expenses are significantly less than in previous years because there were no evening classes.

Acknowledgments

Project LEAP 2017 was a collaboration of the:

Houston Area HIV Services Ryan White Planning Council and the Houston Health Department Bureau of HIV/STD & Viral Hepatitis Prevention

Project LEAP 2017 was made possible by the following individuals:

Project LEAP Advisory Committee

Tracey Gorden, Co-Chair
Teresa Pruitt, Co-Chair

Curtis Bellard
Johnny Deal
Herman Finley
Angela F. Hawkins
Denis Kelly
Rodney Mills
Allen Murray

Alex Moses
Robert Noble
John Poole
Venita Ray
Isis Torrente
Steven Vargas

Guest Speakers

Mike Alexander
MLA Consulting
Lydia Avila
Harris County Sherriff's Office
Melody Barr
Houston Department of Housing & Community Development

Nike Blue
AIDS Foundation Houston
Evelio Salinas Escamilla
Avenue 360 Health and Wellness.
Rodney Goodie
Saint Hope Foundation
Tracy Gorden
Vice Chair, Ryan White Planning Council
Annette Johnson
Baylor College of Medicine, Teen Health Clinic
Heather Keizman
Ryan White Grant Administration
Denis Kelly
*Member, Community Planning Group,;
Committee Member, Ryan White Planning Council*
Juma Koroma
Legacy Community Health
Januari Leo
Legacy Community Health
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Baylor College of Medicine, Northwest Health Center

Office of Support Staff
Tori Williams, Director
Amber Harbolt, Health Planner
Diane Beck, Council Coordinator
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Sandra Longoria
Legacy Community Health
Jeffrey Meyer, MD, MPH
Houston Health Department
Scot More
Coalition for the Homeless of Houston/Harris County
John Nechman
Katine & Nechman L.L.P.
Venita Ray
Legacy Community Health
Cecilia Ross
Chair, Ryan White Planning Council
Gloria Sierra
*Latino HIV Task Force;
Member, Ryan White Planning Council*
Paul Simmons, MSN, NP-C
Legacy Community Health
Charleston Stoker
AIDS Foundation Houston
Crystal Townsend
Co-Chair, Community Planning Group
Steven Vargas
*Member, Ryan White Planning Council
Association for the Advancement of Mexican Americans*
Lou Weaver
Equality Texas
Cathy Wiley
Houston Health Department

HHD Bureau Staff
Marlene McNeese, Bureau Chief
Cathy Wiley, Training Administrator

Attachments

- FY17 Project LEAP Service Definition (approved 12-08-16)
- 2017 Project LEAP Course Overview
- 2017 Pre/Post-Training Evaluation Forms

Service Category Title: Grant Administration - Project LEAP

Unit of Service Definition:

1 unit of service = 1 class hour of training to Project L.E.A.P. participants. No other costs may be billed to the contract issued for Project LEAP.

GOAL: Agency will increase the number and effectiveness of People Living With HIV (PLWH) and the affected community who can participate in organizations, councils and committees dealing with the allocation of public funds for HIV-related prevention and care services, through an effort known as "Project LEAP" (Learning, Empowerment, Advocacy and Participation). Enrollment should include 20 to 30 persons who are living with HIV. No more than 10 individuals are to be enrolled in the training program who are affected by HIV. The race, ethnicity and gender composition of the classes must reflect current local HIV prevalence data to the extent feasible. Agency will prioritize to enroll individuals from groups that are disproportionately affected by HIV disease, including youth and transgender persons living with HIV, in Project LEAP.

Project LEAP will increase the knowledge, participation and efficacy of PLWH and affected participants through a training program specifically developed to provide PLWH and affected persons with the knowledge and skills necessary to become active, informed, and empowered members of HIV planning bodies and other groups responsible for the assessment of HIV-related prevention and service needs in the Houston EMA/HSDA. The primary focus of training is to prepare participants to be productive members of local HIV planning bodies, with an emphasis on planning activities conducted under the auspices of the Houston Ryan White Planning Council (RWPC).

Each class provided during the term of this agreement will include graduation and at least:

- A. 44 contact hours of classroom training;
- B. 6 hours of participation in Ryan White Planning Council and/or Committee related activities; and
- C. 6 hours of participation in HIV-related community activities;

no more than 2 classes at 56 hours per class. The Council-approved minimum outline for the training curriculum includes: HIV funding sources, general and specific operational procedures of HIV-related planning bodies, information regarding assessment of the needs of PLWH in the Houston EMA/HSDA, evaluation skills needed to review proposals submitted by vendors for Request for Proposals (RFP) issued by local funding sources, organizational case studies and mentoring, presentation skills, knowledge related to accessing services, overview of HIV-related quality assurance (QA) processes and parliamentary procedure/meeting management skills.

Agency will provide reimbursement of eligible expenses to participants during the period of enrollment to reimburse these participants for out of pocket costs related to their participation, limited to transportation, childcare, and meals. Agency agrees to provide Harris County Public Health (HCPH)/Ryan White Grant Administration (RWGA) and the Houston RWPC with written reports and project summaries as requested by Harris County and in a form acceptable to Harris County, regarding the progress and outcome of the project.

Agency will provide Harris County with a written report summarizing the activities accomplished during the term of the contract within thirty calendar days after the completion of this contract.

Objective 1: Agency will identify and provide training to at least 20 persons who are living with HIV and no more than 10 affected individuals in order for them to receive the necessary skills and knowledge to participate in the decision-making process to fund and allocate public money to HIV-related services in the Houston EMA/HSDA. The following training curriculum shall be provided:

1. Information on PrEP and the sources and purposes of HIV service funds in the Houston EMA/HSDA;
2. The structure, functions, policies and procedures of the Houston HIV Health Services Planning Council (Ryan White Planning Council/RWPC) and the Houston HIV Prevention Community Planning Group (CPG);
3. Specific training and skills building in needs assessments, parliamentary procedures and meeting management procedures, presentation skills, reviewing and evaluating proposals for HIV-related funding such as serving on an external review panel, accessing and utilizing support resources and role models, and competence in organizational participation and conduct; and
4. Specific training on HIV-related Standards of Care, quality assurance methods and HRSA service category definitions.

Objective 2: Agency will enhance the participation of the people living with HIV and affected persons in the decision-making process by the following documented activities:

1. Establishing realistic training schedule(s) which accommodate varying health situations of those selected participants;
2. Conducting a pre-training evaluation of participants to determine their knowledge and beliefs concerning HIV disease and understanding of HIV-related funding processes in the Houston area. Agency must incorporate responses from this pre-training evaluation in the final design of the course curriculum to ensure that, to the extent reasonably possible, the specific training needs of the selected participants are addressed in the curriculum;
3. Conducting a post-training evaluation to measure the change in participants knowledge and beliefs concerning HIV disease and understanding of HIV-related funding processes in the Houston area;

4. Providing reimbursement of allowable expenses to help defray costs of the individual's participation, limited to transportation, child care, and meals; and
5. Providing both lecture and hands-on experiential class activities to enable participants to maximize opportunities for learning.

Objective 3: Agency will encourage cooperation and coordination among entities responsible for administering public funds for HIV-related services by:

1. Involving HCPH/RWGA, The Houston Regional HIV/AIDS Resource Group (TRG) and other administrative agencies for public HIV care and prevention funds in curriculum development and training activities;
2. Ensuring representatives from the RWPC, the Houston Community Planning Group (CPG) and Project LEAP alumni are members of the Project LEAP External Advisory Panel. The responsibility of the Project LEAP External Advisory Panel is to:
 - Assist in curriculum development;
 - Provide input into criteria for selecting Project LEAP participants;
 - Assist with the development of a recruitment strategy;
 - If the agency finds it difficult to find individuals that meet the criteria for participation in the Project, assist with student recruitment; and
 - Review the final report for the Project in order to highlight the successes and brainstorm/problem solve around issues identified in the report. The results of the review will be sent to the Ryan White Operations Committee and the next Advisory Panel.
3. Collaborating with the Project LEAP External Advisory Panel during the initial 60 days of the Contract term. The criteria developed and utilized will, to the maximum extent possible, ensure participants selected represent the groups most affected by HIV disease, consistent with current HIV epidemiological data in the Houston EMA/HSDA, including youth (ages 18-24) and transgender persons living with HIV.

Agency will provide RWGA with the attached matrix and chart 21 and 14 days before the first class and again the day after the first class demonstrating that the criteria established by the Project LEAP External Advisory Panel was met. The matrix must be approved by RWGA 14 days before the first class.

EXAMPLE

Recommended Project LEAP Class of 2017

Candidate	M	F	H	HIV+	Non-Aligned HIV+	W	B	H	Youth Age 18-19	Youth Age 20-24
1	X			X	X	X				
2		X		X			X		X	
3		X					X			X
4		X		X	X			X		X
5	X					X				
6	X			X	X		X			
7	X			X	X	X				
Totals	4	3		5	4	3	3	1	1	2





Race/Ethnicity	EMA HIV/AIDS prevalence as of 12/31/10		PC Members as of 09/01/11		Non-Aligned Consumers on PC	
	No.	%	No.	%	No.	%
White, not Hispanic	5,605	26.85%	7	19.44%	4	25.00%
Black, not Hispanic	10,225	48.98%	19	52.78%	8	50.00%
Hispanic	4,712	22.57%	10	27.78%	4	25.00%
Other	333	01.60%	0	00.00%	0	0.00%
Total*	20,875	100%	36	100%	16	100%
Gender	Number	Percentage	No.	%	No.	%
Male	15,413	73.83%	21	58.33%	11	68.75%
Female	5,462	26.17%	15	41.67%	5	31.25%
Total*	20,875	100%	36	100%	16	100%






*Data are estimated cases adjusted for reporting delay. The sum total of estimates for each category may not match the EMA totals due to rounding.

Houston Area HIV Services Ryan White Planning Council Office of Support

Project L.E.A.P. 2017 Course Overview

**Class will take place at an alternate location, day, and/or time*

Course Key:  Classroom  Guest Speaker  In-Class Activity  Off-Site Class
 Group Project  Deadline  Graduation

Week	Date	Topics	Key
1	April 5 Room 416	<ul style="list-style-type: none"> • Overview of Project LEAP • Housekeeping, Logistics, and Ground Rules • Student Introductions and Expectations • HIV and Hepatitis • Suggest topics for LEAP Special Study Project • The History of HIV in the Houston Area 	
2	April 12 Room 416	<ul style="list-style-type: none"> • Epidemiology Overview • Panel: Barriers to Reaching, Linking & Retention in Care, focusing on African Americans, Hispanics, MSM and Youth • LEAP Special Study Project - Survey Development • Introduction to Robert's Rules of Order 	
3	April 19 Room 416	<ul style="list-style-type: none"> • Overview of HIV/AIDS Care Funds • From HRSA to Council: Overview of the Ryan White HIV/AIDS Program • LEAP Special Study Project –Survey skills training • Policies and Procedures: the PB&J Exercise 	
4	April 26 Room 416	<ul style="list-style-type: none"> • Community Needs Assessments • Comprehensive HIV Planning • The HIV Continuum of Care • Designing HIV Care Services: How to Best Meet the Need • Robert's Rules of Order Exercise 	
5	May 3 Room 416	<ul style="list-style-type: none"> • Leadership and Presentation Skills Building 	
6	May 10 Room 416 Dismiss class at 12 noon and 7:30 pm so students can attend a Community Meeting on date of choice	<ul style="list-style-type: none"> • IMPORTANT: Submit completed survey forms • Speaker related to survey topic – 60 min. • Student choice speaker – 60 min. 	

Course Key:



Classroom



Guest Speaker



In-Class Activity



Off-Site Class



Group Project



Deadline



Graduation

Week	Date	Topics	Key
7	May 17 Room 416	<ul style="list-style-type: none"> HIV Prevention Programs: CDC to CPG LEAP Special Study Project – analyze data, prepare class presentation Prepare for CPG Meeting 	
8	May 24 Room 416	Attend the HIV Prevention Community Planning Group (CPG) Meeting	
9	May 31 Room 416	<ul style="list-style-type: none"> Homelessness and HIV Housing Opportunities for Persons with AIDS (HOPWA) Prepare for the Planning Council meeting LEAP Special Study Project – practice presentation 	
10	THURSDAY June 8 Room 416	Attend the RWPC Meeting and Present the Class Special Study Project	
11	June 14 Room 416	<ul style="list-style-type: none"> Plan for LEAP Graduation – Student photos Priority and Allocations Exercise Prepare for Priority & Allocations Committee Meeting 	
12	June 21 Room 416	<ul style="list-style-type: none"> Attend the Priority & Allocations Committee Meeting Disclosure: To Do or Not to Do Plan for LEAP Graduation 	
13	June 28 Room 416	<ul style="list-style-type: none"> Blue Book Treasure Hunt Intimate Partner Violence & HIV The Criminalization of HIV Advocacy 101 	
14	July 5 Room 416	Participate in an HIV Testing Event	
15	July 12 Room 240	<ul style="list-style-type: none"> Ryan White Standards of Care & Performance Measures Introduction to Transgender Topics From Project LEAP to Planning Body: Panel of Planning Body and C.A.B. Members Council and CPG Application Process/Forms 	
16	July 19 Room 240	<ul style="list-style-type: none"> The 5 Languages of Love Community Meeting Report-Backs Council and COI Refresher & Mock Interviews Course Wrap-Up 	
17	July 26 Room 416	Graduation Dinner and Ceremony	



Houston Area HIV Services Ryan White Planning Council

Office of Support

Project L.E.A.P. 2017

Knowledge Assessment

The purpose of this questionnaire is to measure your understanding of core Project L.E.A.P. topics and skills *before* the course begins. You will complete the same questionnaire at the end of the course. We will then compare both questionnaires. This comparison helps us know how well we did in reaching our goal to help your Project L.E.A.P. class improve its HIV Community Planning knowledge, skills, and abilities.

Today's Date: 04/05/2017

First Name: _____ Last Name: _____

***Please know that the only reason we need your name on this form is to match it to the questionnaire you will complete at the end of the course. Your name will not be used for any other reason.*

Please rate how well you currently understand each of the following topics:

<i>I understand...</i>	Very Well	Quite Well	Fairly Well	A Little	Not at All
The sources and purposes of HIV care, treatment, and support services funding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The structure and function of the Houston Ryan White Planning Council (RWPC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The structure and function of the Houston HIV Prevention Community Planning Group (CPG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HRSA service category definitions for HIV care, treatment, and support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HIV-related Standards of Care and quality assurance methods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please rate how well you can currently perform each of the following skills or activities:

<i>I can...</i>	Very Well	Quite Well	Fairly Well	A Little	Not at All
Read and understand needs assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use Robert's Rules of Order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engage in public speaking and give presentations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access community resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Serve as a role model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work in a group setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. **What is the purpose of the Ryan White HIV/AIDS Program?** *Select one:*
- (A) To provide routine HIV testing in all health care settings
 - (B) To provide emergency and/or transitional housing for People Living with HIV/AIDS
 - (C) To provide HIV-related care, treatment, and support services for those who may not have sufficient resources to manage their HIV
 - (D) To lobby for new state and local legislation regarding HIV
2. **What federal agency funds the Ryan White HIV/AIDS Program?** *Select one:*
- (A) The Centers for Disease Control and Prevention (CDC)
 - (B) The Health Resources and Services Administration (HRSA)
 - (C) The U.S. Department of Housing and Urban Development (HUD)
 - (D) Office of National HIV/AIDS Policy (ONAP)
3. **What federal agency funds HIV prevention activities in states and cities?** *Select one:*
- (A) The Centers for Disease Control and Prevention (CDC)
 - (B) The Health Resources and Services Administration (HRSA)
 - (C) The U.S. Department of Housing and Urban Development (HUD)
 - (D) Office of National HIV/AIDS Policy (ONAP)
4. **Which Houston Ryan White Planning Council (RWPC) document contains data on consumer-reported HIV care needs?** *Select one:*
- (A) The Assessment of the Administrative Mechanism
 - (B) Epidemiologic Profile
 - (C) The "Blue Book" Resource Guide
 - (D) Community Needs Assessment
5. **Which of the following lists only Core Medical Services for HIV, as defined by HRSA?** *Select one:*
- (A) Food bank, medical case management, and legal services
 - (B) Oral health, transportation, and primary care
 - (C) Primary medical care, HIV medications, and medical case management
 - (D) Linguistic services, mental health, and HIV medications
6. **Which of these lists only Support Services for HIV, as defined by HRSA?** *Select one:*
- (A) Transportation, legal services, and food bank
 - (B) HIV medications, hospice care, and primary care
 - (C) Medical case management, substance abuse treatment, and transportation
 - (D) Food bank, oral health, and linguistic services
7. **In the Houston Area, what do the Administrative Agents do?** *Select one:*
- (A) Provide direct services to Ryan White consumers
 - (B) Distribute HIV care funds by contracting with agencies that provide direct services to Ryan White consumers
 - (C) Bring tasty snacks to all the meetings
 - (D) Provide support to the Planning Council
8. **Which of the following is an activity of the Houston Ryan White Planning Council (RWPC)?** *Select one:*
- (A) Assessing the needs of People Living with HIV/AIDS
 - (B) Allocating Ryan White HIV/AIDS Program dollars
 - (C) Maintaining a comprehensive plan for HIV care services
 - (D) All of the above
9. **Which organization administers HIV prevention education, provides HIV/STD testing, and gives administrative support to the Houston Area HIV Prevention Community Planning Group (CPG)?** *Select one:*
- (A) Ryan White Grants Administration (RWGA)
 - (B) Houston Department of Health and Human Services (HDHHS)
 - (C) Houston Regional HIV/AIDS Resource Group (TRG)
 - (D) Texas Department of Health and Human Services (DSHS)
10. **What is the purpose of a Standard of Care, as it relates to HIV services?** *Select one:*
- (A) To determine whether an agency gets funding from Ryan White
 - (B) To set the minimum level of quality for HIV services
 - (C) To measure client satisfaction with HIV services
 - (D) To evaluate agencies funded through Ryan White
11. **Take a deep breath, and give yourself a pat on the back! You did marvelously. 😊**

Service Category Title: Grant Administration - Project LEAP

Unit of Service Definition:

1 unit of service = 1 class hour of training to Project L.E.A.P. participants. No other costs may be billed to the contract issued for Project LEAP.

GOAL: Agency will increase the number and effectiveness of People Living With HIV (PLWH) and the affected community who can participate in organizations, councils and committees dealing with the allocation of public funds for HIV-related prevention and care services, through an effort known as “Project LEAP” (Learning, Empowerment, Advocacy and Participation). Enrollment should include 20 to 30 persons who are living with HIV. No more than 10 individuals are to be enrolled in the training program who are affected by HIV. The race, ethnicity and gender composition of the classes must reflect current local HIV prevalence data to the extent feasible. Agency will prioritize to enroll individuals from groups that are disproportionately affected by HIV disease, including youth and transgender persons living with HIV, in Project LEAP.

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no more than 2 classes at 56 hours per class. The Council-approved minimum outline for the training curriculum includes: HIV funding sources, general and specific operational procedures of HIV-related planning bodies, information regarding assessment of the needs of PLWH in the Houston EMA/HSDA, ~~evaluation skills needed to review proposals submitted by vendors for Request for Proposals (RFP) issued by local funding sources;~~ organizational case studies and mentoring, presentation skills, knowledge related to accessing services, overview of HIV-related quality assurance (QA) processes and parliamentary procedure/meeting management skills.

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Agency will provide Harris County with a written report summarizing the activities accomplished by or before the end of the calendar year of the project. ~~during the term of the contract within thirty calendar days after the completion of this contract.~~

Objective 1: Agency will identify and provide training to at least 20 persons who are living with HIV and no more than 10 affected individuals in order for them to receive the necessary skills and knowledge to participate in the decision-making process to fund and allocate public money to HIV-related services in the Houston EMA/HSDA. The following training curriculum shall be provided:

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EXAMPLE

Recommended Project LEAP Class of 2017

Candidate	M	F	T	HIV+	Non- Aligned HIV+	W	B	H	Youth Age 18- 19	Youth Age 20- 24
1	X			X	X	X				
2		X		X			X		X	
3		X					X			X
4		X		X	X			X		X
5	X					X				
6	X			X	X		X			
7	X			X	X	X				
Totals	4	3		5	4	3	3	1	1	2

Race/Ethnicity	EMA HIV/AIDS prevalence as of 12/31/10*		PC Members as of 09/01/11		Non-Aligned Consumers on PC	
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Total*	20,875	100%	36	100%	16	100%

*Data are estimated cases adjusted for reporting delay. The sum total of estimates for each category may not match the EMA totals due to rounding.

2018 Project LEAP Student Selection Guidelines

The following guidelines will be used by the Office of Support to select students for the 2017 Project LEAP cohort. They are presented in order of priority:

1. As outlined in the 2018 Service Definition for Project LEAP:
 - a. The Office of Support shall enroll 20 to 30 persons who are living with HIV prior to the commencement of the training program. No more than 10 affected individuals are to be included in the training program. Preference will be given to non-aligned (non-conflicted) consumers of Ryan White HIV Program services in the Houston EMA and high risk applicants.
 - b. Selected students shall be representative of the demographics of current HIV prevalence in the Houston EMA, with particular attention to sex/gender, race/ethnicity, and the special populations of youth (age 18 - 24) and transgender.
2. Not be a prior Project LEAP graduate.
 - a. If the applicant is a prior LEAP graduate, they may be selected for the 2018 cohort if they have not been appointed to the Planning Council following LEAP participation and if space in the class is available.
3. Be available for the 2018 Project LEAP class schedule.
4. Have the ability to commit to Project LEAP expectations in regards to class participation, activities, and homework assignments.
5. Demonstrate an interest in planning HIV services in the Houston EMA. Students should have an understanding of the expected roles of Project LEAP graduates in local HIV prevention and care services planning.
6. Demonstrate an interest in volunteerism, advocacy, and other types of community involvement. If possible, have a history of past volunteerism, advocacy, and/or community involvement.
7. Demonstrated interpersonal skills consistent with successful participation in Project LEAP, such as ability/willingness to work in a team, effective communication skills, etc.

2017 Council Orientation Evaluation Results

Introduction

The 2017 Houston Area Ryan White Planning Council Orientation was held on January 26, 2017 at Third Coast [formerly Trevisio] Restaurant and Conference Center. The Planning Council Operations Committee serves the official Orientation host. Members attending Orientation were asked to complete evaluation forms at the end of the event. Twenty-six attendees completed an evaluation form, **31%** of whom were new members.

Members were asked to:

- Describe their favorite part of Orientation
- Rate the quality of logistic features of the event
- Rate the helpfulness of each session for preparing the members to serve on Council
- Rate their confidence in their ability to successfully participate in Council following Orientation
- Suggest any topics they thought would be useful to include in the 2018 Council Orientation

Successes

1. In descending order, the favorite parts of Orientation:
 - a. Ann Robbins' presentation on the State of the State
 - b. The "Guess Who Loves Me" lunch activity
 - c. Meeting Committee mentors
2. All meeting logistic features had mean quality ratings of **4.23** or higher. This means that, on average, the location, meeting space, food and drink provided, materials, overall agenda, facilitators, and staff communication were rated as "**Very Good**" or "**Excellent**".
3. All Orientation sessions had a mean helpfulness rating of **4.04** or higher. This means that, on average, all sessions were rated as "**Very Helpful**", or "**Extremely Helpful**". Ann Robbin's State of the State Presentation received the highest mean helpfulness rating (**4.79**), followed by Bob Hergenroeder's Confidentiality training (**4.67**) and the Timeline of Critical Council Activities (**4.56**).
4. All new member sessions received helpfulness ratings of **4.67** or higher, meaning that, on average, all new member sessions were rated as "**Very Helpful**", or "**Extremely Helpful**". The Overview of HIV Funding received the highest mean helpfulness rating (**4.89**).
5. The mean confidence rating was **4.64**. This means, on average, members reported being "**Very Confident**" to "**Completely Confident**" following the 2017 Orientation, with skewing toward "**Completely Confident**".

Challenges

1. Though Food/Drink and Location received "**Very Good**" average ratings (**4.23** and **4.31**, respectively), these two logistic features had the lowest mean quality ratings compared to the other logistic features. Both received at least one "**Poor**" rating, and, though not solicited, comments on parking difficulty were written into the margins of the evaluation form.
2. The "Guess Who Loves Me" lunch activity (**4.04**) received the lowest mean helpfulness rating. However, this activity was also listed as the second most favorite part of Orientation. If this activity is included in future Orientations, the perception of helpfulness may be improved briefly discussing the benefits of connecting member names and faces with their shared photo and story and getting to know one's fellow Council members.

Opportunities

The following are direct quotes from members who attended Orientation on what topics they would like to see included in the 2018 Council Orientation:

- "Details about what the role of each department did. Actually confused about how my committee affects everything."
- "Houston information added instead of just hearing Texas data/stats."
- "Overview of local and national political environment re: HIV"
- "Overview of Task Forces, and information for new people about how important it is to participate on Task Forces."
- "Showing the area's of progress via Treatment Cascade"

7:30 a.m. CHECK-IN: NEW COUNCIL MEMBERS

- * Optional Breakfast

8:00 a.m. WELCOME

- * Opening Remarks, Housekeeping Reminders and Review of the agenda
Cecilia Ross, Chair, Ryan White Planning Council
- * Introductions

8:20 a.m. GENERAL OVERVIEW OF AIDS FUNDING

Tori Williams, Director, Office of Support

8:25 a.m. COUNCIL BYLAWS, POLICIES & PROCEDURES

- * Committee Structure
Tori Williams
- * How to Use the Ryan White Notebooks
Teresa Pruitt, Committee Member
- * Meeting Packets and Agendas
Tara Pradia, Committee Member
- * Bylaws and Policies
Alternating Committee Members
- * Attendance
Tori Williams

9:25 a.m. FORMAL RELATIONSHIPS

- * *Tori Williams, Facilitator*
- * *Tori Williams, Liaison for County Judge Ed Emmett, Chief Elected Official*
- * *Cecilia Ross, Chair, Ryan White Planning Council*
- * *Tori Williams, Director, Office of Support for the Ryan White Planning Council*
- * *Carin Martin, Manager, Ryan White Grant Administration, Harris County Public Health*
- * *Sha'Terra Johnson-Fairley, Health Planner, Houston Regional HIV/AIDS Resource Group*

9:55 a.m. ROBERT'S RULES OF ORDER

Tori Williams

10:15 a.m. RETURNING COUNCIL MEMBERS ARRIVE

10:30 a.m. INTRODUCTION OF OFFICERS & COMMITTEE CO-CHAIRS AND COMMITTEE ORIENTATION

11:00 a.m. TIMELINE OF 2017 CRITICAL COUNCIL ACTIVITIES
Tori Williams

11:08 a.m. HONOR THOSE WHO HAVE GONE BEFORE US
Cecilia Ross, Chair, Ryan White Planning Council

11:18 a.m. RECOGNIZE THE MENTORS
Cecilia Ross, Chair, Ryan White Planning Council

11:20 a.m. OPEN MEETINGS ACT
Venita Ray, Legacy Community Health

12:00 p.m. LUNCH
* Introduce your furry, feathered or foliage friend
Curtis Bellard, Facilitator and Connie Barnes, Timekeeper

1:15 p.m. THE STATE OF THE STATE
Cecilia Ross, Facilitator
* *Ann Robbins, Senior Public Health Advisor, ID, HIV/STD and Viral Hepatitis Unit, Texas Department of State Health Services*

2:45 p.m. CONFIDENTIALITY
Bob Hergenroeder, Montrose Center

3:15 p.m. CLOSING REMARKS
Cecilia Ross, Chair, Ryan White Planning Council

3:25 p.m. ADJOURN

Staff recommendations
regarding edits to this
document will be
provided at the
meeting

**BYLAWS of the
HOUSTON AREA HIV HEALTH SERVICES
RYAN WHITE PLANNING COUNCIL
Revised December 13, 2007**

ARTICLE I

Establishment, Definitions and Purposes

Section 1.01. Establishment. The Ryan White Comprehensive AIDS Resources Emergency Act of 1990, 42 USC §300ff et. seq. (West 1991 & Supp. 1997),), later revised as the Ryan White HIV/AIDS Treatment Modernization Act of 2006, requires the establishment of an HIV health services planning council by the chief elected official of the eligible area involved, as defined in §300ff 12(a)(1) of the Act. The County Judge (as hereinafter defined) has established the Ryan White Comprehensive AIDS Resources Emergency Act HIV Health Services Planning Council in conformity to Section §300ff 12(a)(1) of the Act. The Council, as established by the County Judge, is not incorporated under the Laws of the State of Texas or any other jurisdiction.

Section 1.02. Definitions. The following definitions shall have the ascribed meaning when used herein, except to the extent the context hereof clearly requires and indicates otherwise:

“Acquired Immune Deficiency Syndrome” (AIDS) is defined by the current criteria established by the Centers for Disease Control (CDC).

“Act” is defined as the Ryan White Comprehensive AIDS Resources Emergency Act of 1990, 42 USC §300ff et.seq.(West 1991 & Supp. 1997), later revised as the Ryan White HIV/AIDS Treatment Modernization Act of 2006.

“AIDS” is defined as Acquired Immune Deficiency Syndrome.

“Harris County HIV Services” is defined as the section of Harris County Public Health and Environmental Services that administers grant funds allocated to the “Eligible Metropolitan Area” under the Act.

“Council” is defined as the Ryan White HIV Health Services Planning Council established by the County Judge.

“County Judge” is defined as the chief elected official of the city or urban county that administers the public health agency that provides outpatient and ambulatory services to the greatest number of individuals with AIDS, as defined in §300ff 12(a)(1) of the Act and herein refers to the duly elected County Judge of Harris County, Texas.

“Eligible Metropolitan Area” is defined as the Houston/Harris County Area which area has been determined by the Centers for Disease Control to consist of Harris County, Waller County, Fort Bend County, Montgomery County, Chambers County and Liberty County.

“Emergency” is defined as an unforeseen combination of circumstances or the resulting state that calls for immediate action.

“HIV” is defined as the Human Immunodeficiency Virus.

“HIV Infection” is defined as the presence of HIV in the bloodstream as confirmed by the diagnostic tests prescribed by the Centers for Disease Control.

“HRSA” is defined as the Health Resources Services Administration of the Public Health Service of the United States Department of Health and Human Services.

“HSDA” is defined as the Texas Department of Health Services Delivery Area.

“RFPs” is defined as Request for Proposals.

Section 1.03. Purposes. The purposes for which the Council is established are:

- (1) To conduct needs assessment activities;
- (2) To develop a comprehensive plan for the organization and delivery of health services described in §300ff 14 of the Act that is compatible with any existing State of Texas or local plan regarding the provision of health services to individuals with HIV Infection or AIDS;
- (3) To establish priorities for the allocation of funds within the Eligible Metropolitan Area;
- (4) To allocate funds within the Eligible Metropolitan Area;
- (5) To assess the efficiency of the administrative mechanism in rapidly allocating funds to the areas of greatest need within the Eligible Metropolitan Area.

ARTICLE II

Appointment of Council, Composition of Council, Term and Compensation

Section 2.01. Appointment of Council. All members of the Council shall be appointed by the County Judge. Vacancies occurring on the Council shall be filled by appointment of the County Judge and serve at the pleasure of the County Judge. All candidates are subject to the established Nominations Screening process, with the exception of persons representing HRSA required governmental bodies, including the State Medicaid Agency, HOPWA and others.

Section 2.02. Composition of Council. The Planning Council will be made up of individuals as specified in Sec.2602(2) PLANNING COUNCIL REPRESENTATION as stated in the most current Ryan White Program, and will be reflective of the local HIV/AIDS epidemic. The Planning Council may also request other positions/representation in order to maintain diversity within the EMA reflecting the pandemic and/or needed expertise within the EMA subject to the approval of the County Judge. These positions are subject to the Nominations Screening Process.

Section 2.03. Term. Each Council position is for a term of two (2) years. The terms of one-half the Council positions shall terminate in even-numbered years and the other half of the positions shall terminate in odd-numbered years. A term shall begin on January 1 and shall terminate on December 31 of the second year following. Council members appointed to vacancies shall complete the unexpired term of office.

Section 2.04. Term Limits. The County Judge shall appoint Council members to no more than three two-year terms. All members serve at the pleasure of the County Judge through an open nominations process.

Section 2.05. Compensation/Reimbursement. Persons serving as members of the Council shall not receive any salary or other compensation for their services as a member of the Council. All Council members may be reimbursed allowable expenses as approved by Harris County Public Health and Environmental Services, the Ryan White Planning Council, and the CEO.

ARTICLE III

Duties of the Council

Section 3.01. Duties. The duties of the Council are to see to the establishment and implementation of the purposes of the Council as set out in Section 1.03 of these Bylaws and those duties which are prescribed by the provisions of the Act as within the purview of the Council.

Section 3.02. Orientation. All new members shall be required to attend mandatory orientation within 6 months.

ARTICLE IV

Committees

Section 4.01. Steering Committee. The Steering Committee shall be composed of the following persons: Chair of the Council, Vice Chair of the Council, Secretary of the Council, and the Chair, or Co-Chairs, of each Standing Committee. Actions of the Steering Committee are subject to ratification by the Council. The Steering Committee is responsible for the following:

- (1) setting agendas for the Ryan White Planning Council;
- (2) making recommendations to the Ryan White Planning Council;
- (3) providing leadership;
- (4) previewing reports from the Standing Committees;
- (5) and functioning in "emergency" situations as they arise.

Section 4.02. Standing Committees. There shall be six Standing Committees. Each member of the Council except the Planning Council Chair is required to serve on at least one of the following standing committees.

- 1) Affected Community
- 2) Operations
- 3) Comprehensive HIV Planning
- 4) Priority and Allocations
- 5) Quality Assurance
- 6) Steering

Section 4.03. Ad hoc groups, work groups, subcommittees. The Chair of the Council or the Council may, from time to time, establish such other ad hoc groups as may be expedient or necessary to carry out the duties and responsibilities of the Council. The scope and responsibilities of such ad hoc groups shall be delineated at the time such groups may be established.

ARTICLE V

Officers, Election of Officers, Election of Committee Chairs
Duties of Officers and Duties of Service Committee Chairs

Section 5.01. Officers. The officers of the Council shall be a Chair, a Vice Chair and a Secretary. Officers cannot serve as Standing Committee Chairs. Ryan White Part A or B or State Services funded providers/employees/subcontractors/Board Members and or employees/subcontractors of the Grantee shall not be eligible to run for office of Chair of the Ryan White Planning Council. A parliamentarian may be appointed at the pleasure of the Chair. Subsequent to election, if the Chair becomes a contractor, he/she shall be removed and a new election held to elect a new Chair.

Section 5.02. Election of Officers. The officers shall be elected by the majority vote of the members of the Council at the December meeting, which shall be termed the Organizational Meeting. (Per letter from Judge Eckels dated 12-13-00: "As in any political election, the number of candidates is not regulated. Following the first vote in the race, if one candidate has not received the majority, a run-off election is held between the two candidates receiving the most votes. The Council may accept nominations for the slate of officers that exceeds two candidates and may receive nominations from the floor regardless of the number of candidates already nominated.") One of the three officers must be a self-identified HIV positive person. Officers elected at the Organizational Meeting of the Council shall serve from the date of election to the next annual Organizational Meeting. If a vacancy occurs in any office, the Council shall elect a replacement to serve the remainder of the term.

Section 5.03. Appointment of Committee Chairs. Committee Chairs will be appointed by the Planning Council Chair. Committee Chairs must be members of the Planning Council for at least one year. If committee leadership is not available from among Planning Council members with at least one year's service, the Chair may seek leadership among remaining Planning Council members.

Section 5.04. Duties of Officers. The officers of the duly appointed Council shall have the responsibility for the performance of the following duties:

Chair: The Chair of the Council shall serve as the Chief Executive Officer of the Council and shall preside at all meetings of the Council and the Steering Committee. The Chair is the only official spokesperson for the Council and will be responsible for interfacing with the public and with the media. As the only authorized spokesperson, the Chair will have a business card that includes his/her name. He/she will also be responsible for correspondence to members regarding attendance and participation issues. The Chair shall perform such other duties as are normally performed by a chair of an organization or such other duties as the Council may prescribe from time to time. The Chair of the Council is an ex-officio member of all committees (standing, subcommittee, and work groups). Ex-officio means that he/she is welcome to attend and is allowed to be a part of committee discussion. They are not allowed to vote. In the absence of the Chair of the Council, the next officer will assume the ex-officio role with committees.

Vice Chair: The Vice Chair of the Council shall preside at meetings of the Council and Steering Committee in the absence of the Chair. The Vice Chair shall perform such other duties as the Chair may designate or the Council shall prescribe from time to time.

Secretary: Per Texas law, the Secretary may not chair a meeting. The position of Secretary shall include the following duties:

- 1) The Secretary will ensure that minutes are taken, approved, and filed as mandated by the Ryan White Program.
- 2) The Secretary will be responsible for keeping an up-to-date roll of Planning Council members.
- 3) When a roll call vote is taken, the Secretary will call the roll call vote, note the vote and announce the results of the roll call vote. The Secretary will monitor voting for possible conflicts of interest, the Secretary will process inquiries into votes made in conflict of interest.
- 4) The Secretary will keep a copy of the Planning Council Bylaws and other relevant Policies and Procedures at the Planning Council meetings, and will provide the Council with clarification from the Bylaws and Policies & Procedures, as requested.
- 5) The Secretary will keep a record of all committees of the Planning Council. When (if) new committees are established, the Secretary will assure or cause to be assured the actual formation and implementation of the new committees.
- 6) The Secretary will be responsible for notification of specially called Planning Council meetings, corresponding to the members as required by the Bylaws.

Standing Committee Chairs: The Standing Committee Chairs shall preside at all meetings of their respective committees. The Committee Vice Chair shall preside at all committee meetings in the absence of the Chair. If neither are present, committee members shall use consensus to select another committee member to chair that particular meeting. The Committee Chairs are

responsible for the execution of the duties prescribed herein for the Committees and for such other duties as may be prescribed by the Chair of the Council or the Council from time to time. The Committee Chairs are responsible for the recording of or cause to be recorded all deliberations undertaken by each respective Committee. Copies of all approved minutes are available in the Office of Support for the Ryan White Planning Council.

ARTICLE VI

Quorum, Voting, Proxies and Attendance

Section 6.01. Quorum. A majority of the members of the Council are required to constitute a quorum at Council meetings. In computing a quorum, vacant seats on the Council or Committee shall not be counted. A minimum of one (1) self-identified HIV positive member must be present to constitute a quorum.

At least two (2) committee members and a Chair must be present; one of these must be a self-identified HIV positive member, to constitute a Standing Committee quorum.

Section 6.02. Voting. Each member of the Council shall be entitled to one vote on any regular business matter coming before the Council. A simple majority of members present and voting is required to pass any matter coming before the Council except for that of proposed Bylaw changes, which shall be submitted (in written form) for review to the full Council at least fifteen (15) days prior to voting and will require a two-thirds (2/3) majority for passage. The Chair of the Council shall not vote except in the event of a tie. The Chairs of the Standing Committees shall not vote at Committee meetings except in the event of a tie.

Section 6.03. Proxies. There shall be no proxy voting.

Section 6.04. Council Attendance.

Council members are required to attend meetings of the Houston Area HIV Health Services (Ryan White) Planning Council. Any Council member with four (4) absences from Council meetings within a calendar year or who fails to perform the duties of a Council member described herein without just cause, is subject to removal by the CEO. The Secretary shall cause attendance records to be maintained and shall regularly provide such records to the Chair.

Standing Committee Attendance:

Committee members are required to attend regularly scheduled committee meetings. Four (4) absences from committee meetings in a calendar year may be grounds for reassignment or termination of committee membership. The Council Chair will be responsible for determining reassignment or termination of committee membership. Reasons for absences that would be used for determining reassignment or termination include: 1) sickness; 2) work related conflicts (in or out of town and vacations); and 3) unforeseeable circumstances. The Chair of the Operations Committee will notify the Planning Council Chair if a member is absent for four (4) committee meetings and, if warranted, the Planning Council Chair will formally notify the member in writing of removal from committee membership. The member will be given an opportunity to request assignment to another committee. If the member continues to fail to meet committee requirements, the member will not be permitted to continue as a member of the Planning Council.

Any Planning Council member who is unable to attend a Planning Council meeting or standing committee meeting of the committee must notify the Office of Support prior to such meeting. The Office of Support staff will document why a member is absent. The Operations Committee will review attendance records quarterly.

ARTICLE VII

Administration of Funds, Information Regarding Funding and Council Oversight of Funding

Section 7.01. Administration of Funds. The County Judge shall designate the lead agency which will be charged with the administration and distribution of any funds granted to the Eligible Area under the Act. The Council shall report to the County Judge its findings and recommendations regarding the prioritization and allocation of funds granted under the Act, together with its recommendations as to the use of any such funds in accordance with the provisions of the Act.

Section 7.02. Information Regarding Funding. Harris County HIV Services will be responsible for the collection and dissemination of monthly reports to the Council on the administration of the funds granted to the Eligible Metropolitan Area under the Act.

Section 7.03. Council Oversight of Funding. The Council is responsible for an annual assessment of the administrative mechanism and distribution of the funds granted to the Eligible Metropolitan Area under the Act by the lead agency designated by the County Judge. The Council shall perform such other oversight duties as may be required by the Act or any regulation promulgated there under.

ARTICLE VIII

Conflicts of Interest

Section 8.01. Conflict of Interests. A conflict of interest (COI) occurs: 1) when an appointed or voting member of the planning council has a direct or indirect fiduciary or other personal or professional interest in a council decision or the outcome of a vote, 2) when a member uses his/her positions for purposes that are motivated by pursuit of private gain for themselves or their families, friends, or business associates. COI is defined to include interests that existed within 12 months preceding the date when the conflict ended. The mere perception of COI is a significant concern.

The Council, acknowledging that perception is as important as reality, has elected to voluntarily adopt the following code of conduct regarding conflict of interest to be followed during all deliberations and decisions.

- 1) In order to make members aware of any potential positive bias, Council members agree to disclose their associations with any organization seeking to do business with the Ryan White Part A or B Administrative Agencies for which they or their spouse or domestic partner, during the past twelve months:

- a) own, have ownership interest, or have been employed;
 - b) are or have been a Board member;
 - c) are or have been a consultant; or
 - d) are or have been involved in a contractual relationship.
- 3) In order to make other members aware of any potential negative bias, Council members agree to disclose their associations with any organization seeking to do business with the Ryan White Part A or B Administrative Agencies with which they or their spouse or domestic partner, during the past twelve months are or were involved in mediation, arbitration or litigation over any employment, contract, service delivery or other matter.
- 4) Council members agree to abstain from voting on any decision related to any organization for which they or their spouses or domestic partner have association as specified in number 1, above.
- 4) Council members will not serve on Grantee proposal review panels.

Section 8.02. Disclosure of Conflicts of Interests. Council members who have COI must declare that conflict before the discussion of a motion. This will be recorded in the official minutes. All council members must submit signed affidavits disclosing any COI when joining the Council, and at least annually, and/or more often as needed, thereafter. Members who are closely affiliated with an applicant are excluded from the prioritization process.

ARTICLE IX

Regular Meetings, Special Meetings, Notice and Business to be Considered

Section 9.01. Regular Meetings. Regular Meetings of the Council shall be held no less than quarterly at such times and places as shall be designated by the Council. Written Notice of Regular Meetings shall be given no less than five (5) calendar days prior to such Regular Meeting.

Section 9.02. Special Meetings. Special Meetings of the Council shall be held at such times and places as shall be designated by the Chair of the Council or upon the written request of one-half (1/2) of the members of the Council. Notice of Special Meetings shall be given no less than three (3) **working** days prior to such Special Meeting.

Section 9.03. Notice. It shall be the duty of the Secretary to give or cause to be given such notice to each member of the Council. Notice of Regular Meetings shall be given in writing. Notice of Special Meetings may be given telephonically, by email or by telecopier. Notice of Council meetings shall be posted in accordance with the Open Meeting Act, TEX. GOV'T CODE ANN. §§ 551.001-551.146, as amended.

Section 9.04. Business to be Considered. Any business coming before the Council shall be considered at a duly constituted and noticed Regular Meeting or Special Meeting. Only items approved by the Steering Committee for presentation to the Council and posted on the agenda may be voted on.

Section 9.05. Public Comment. There is an opportunity for public comment at all meetings. Persons wishing to speak must follow the Policies and Procedures for Public Comment.

ARTICLE X

Grievance

Section 10.01. Grievance. There is a Ryan White Planning Council grievance process and the Grievance Policies & Procedures must be followed.

ARTICLE XI

Amendments, Governing Procedure, Compliance and Invalidity of Provisions

Section 11.01. Amendments. These Bylaws may be amended from time to time by a vote of two-thirds (2/3) of the entire membership of the Council. Proposed amendments shall be submitted (in written form) for review to the full Council at least fifteen (15) days prior to voting.

Section 11.02. Governing Procedure. The meetings of the Council shall be conducted in accordance with Roberts Rules of Order; revised except to the extent the provisions of Roberts Rules of Order conflict with the Bylaws of the Ryan White Planning Council in which event the Bylaws shall prevail.

Section 11.03 Compliance. The Council shall at all times comply with the duties and responsibilities set out in the Act and shall perform all of its deliberations in accordance therewith.

Section 11.04. Invalidity of Provisions. In the event any provision hereof conflicts with the provisions of the Act or other applicable law, such provision shall be deemed stricken and the remainder of these Bylaws shall be in full force and effect without regard to such invalid provision.