



NEW MEMBER TRAINING

Friday, March 15, 2024



Overview

Today we will be discussing the different areas of the Ryan White Planning Council and the roles of the committees.



Planning Council and Key People

Health Resources Service Administration (HRSA) Washington DC - The U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), HIV/AIDS Bureau (HAB) administers the Ryan White HIV/AIDS Program (RWHAP).

This is the largest federal program focused on HIV. The RWHAP funds HIV care and treatment services for low-income people with HIV. Many people who receive services through the RWHAP are uninsured or underserved.



Justin ElickerMayor of the City of New Haven



Tom ButcherCity of New Haven Health Department





Planning Council Code of Conduct

- Every member will treat every other member with courtesy and respect their legitimate right to be part of
 discussions and decision-making. This means that all members/participants in meetings will have the
 opportunity to speak and be listened to without interruptions.
- Every member will be truthful and honest.
- Every member will honor commitments and be prepared for all Planning Council work. All Planning Council members are expected to reply to email requests in a timely manner.
- A member who is a potential Part A Provider shall identify themselves as such when participating in Council discussion relevant to their service.
- There will be no personal attacks on anyone; disagreements will focus on issues, not upon individuals.
- Once decisions are made, every member of the group will support the decision, regardless of their personal position.
- Information presented in confidence will be held in confidence and not discussed outside the meeting.
- Every member will honor their responsibility to present and consider the concerns of specific communities or population groups but shall also consider the overall needs of people living with HIV disease and balance the interests of both in discussion and decision making.
- Every member will speak positively about the Planning Council in public; problems will be addressed within the group.



Planning Council Code of Conduct, con't.

- Any member, who feels they cannot support the mission goals, strategies, programs, and/or leadership of the Planning Council as agreed upon by the members, should resign from the Planning Council.
- Every member will take responsibility not only for abiding by these rules of conduct personally, but also for speaking out to ensure all members abide by them.
- No member may speak or publish materials or provide endorsements on behalf of or represent the Planning Council without express permission of the Planning Council.
- Every member will participate and allow the participation of every other member without discrimination with respect to gender, gender identity, sex, age, race, ethnicity, religious belief, sexual orientation, political belief, or physical, mental, or social impairment.
- The Planning Council members promote healthy lifestyles, and no member shall use alcohol, other drugs or be under the influence of such, at any meeting or activity, formal or informal, of the Planning Council.
- No member shall disparage or speak negatively of the NH/FF EMA, the Ryan White Program, sub recipients, or the NH/FF Counties HIV community. This includes social media.



Planning Council Operations

- Must develop Bylaws, policies and procedures to ensure fair, efficient operations
- Must have grievance procedures
- Must manage conflict of interest (COI)
- Major attention to new member recruitment including orientation, and training
- PCs expected to provide training for members at least annually
- Much of work done by committees
- Assisted by Planning Council support staff





Planning Council Committees





Quality Improvement Strategic Planning & Assessment (QISPA)

- Meets on the 1st Thursday of every month from 9:00am 12:00pm.
- Reviews and updates Service Category Definitions, Service Standards, By-Laws, Policy and Procedure manual and the Assessment of the Efficiency of the Administrative Mechanism tools.
- Determines Priorities and Allocations and Directives to the Recipient's office.
- Reviews the framework for the Priority Setting & Resource Allocation process, Quality
 Assurance Site Visit Report, HIV Care Continua and the Integrated Comprehensive Plan.



Membership Finance Committee (M/F)

- Monitor expenditures by service category by reviewing expenditure reports received from the Recipient's office, Planning Council reflectiveness to ensure HRSA mandates are met.
- Maintain membership by recruiting new members based on the EMA's epidemiological profile.
- Monitor Planning Council members' attendance, and subsequent actions (if necessary i.e.: warning letters, etc.).
- Monitor Review Planning Council meeting feedback and subsequent actions and (if necessary) share with Quality Improvement committee.
- Develop carry over requests in conjunction with the Recipient's Office (Unobligated Balance Estimate & actual carryover request).
- Determine Planning Council trainings.



Executive Committee (EC)

Made up of all the committee co-chairs. Currently the following Planning Council members make up our Executive Committee:

- Chris Cole & Roberta Stewart (Planning Council Co-Chairs)
- Joanne Montgomery, Mitchell Namias & Anthony Santella (Quality Improvement Strategic Planning & Assessment Committee, QISPA Co-Chairs)
- Rich Radocchia & Gigi Chaux (Membership/Finance Committee, M/F, Co-Chairs)



Committee Meetings Overview

EVERYONE MUST ATTEND 1 OF THE FOLLOWING MEETINGS EACH MONTH

Quality Improvement Strategic Planning & Assessment (QISPA)

Meets the 1st Thursday of every month from 9:30am – 12:00pm

Membership/Finance (M/F) Meets the 2nd Friday of every month from 10:30am – 11:30am

EVERYONE MUST ATTEND THIS MEETING EVERY MONTH

Planning Council meets the 2nd Friday of every month from 12:00pm – 2:00pm





ANY QUESTIONS?

