HIV HEALTH AND HUMAN SERVICES PLANNING COUNCIL OF NEW YORK

BYLAWS
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DEFINITION OF TERMS

The following definitions shall have the ascribed meaning when used in these Bylaws, except to the extent that the context clearly requires and indicates otherwise.

AIDS: (Acquired Immune Deficiency Syndrome) A disease of the immune system caused by HIV infection characterized by increased susceptibility to opportunistic infections. It is chiefly transmitted through blood or blood products or other bodily fluids.

HATEA: (HIV/AIDS Treatment Extension Act) The name given to the Ryan White CARE Act when it was reenacted and updated in 2010.

CEO: (Chief Elected Official) The Mayor of the City of New York, who is the official recipient of Part A CARE Act funds within the Eligible Metropolitan Area (EMA). The CEO is ultimately responsible for administering all aspects of the CARE Act in the EMA and ensuring that all legal requirements are met.

EMA: (Eligible Metropolitan Area) The geographic area eligible to receive Part A CARE Act funds.

HIV: (Human Immunodeficiency Virus) The entire spectrum of the HIV virus, from post-infection to the clinical definition of AIDS.

HRSA/HAB: (Health Resources and Services Administration - HIV/AIDS Bureau) The Department of Health and Human Services agency that oversees the Ryan White CARE Act.

PLWHA: Persons Living With HIV/AIDS

Part A: Then name given to Title I when the CARE Act was reenacted in 2006.

Tri-County – Westchester, Rockland and Putnam Counties, the area north of New York City which are part of the New York EMA and receive a portion of the Part A grant.
ARTICLE I - DESCRIPTION OF THE PLANNING COUNCIL

Section 1. Mission. It is the mission of the HIV Health and Human Services Planning Council of New York that people living with HIV and AIDS in the New York EMA will have access to and maintain appropriate, quality services across the continuum of care, resulting in the best possible health and quality of life.

Section 2. Service Area. Pursuant to the requirements of the Health Resources and Services Administration (HRSA), the Eligible Metropolitan Area (EMA) to be served by the HIV Health and Human Services Planning Council of New York ("Planning Council" or "the Council") shall encompass the following localities: Brooklyn, the Bronx, Manhattan, Queens, Staten Island, and the “Tri-County Region” (Westchester, Rockland and Putnam Counties).

Section 3. Duties. The duties of the HIV Health and Human Services Planning Council of New York ("Planning Council" or "the Council") shall include but not be limited to:

a) Establishing binding priorities for the allocation of funds including how best to meet each such priority and additional factors that a grantee should consider in allocating funds for treatment and care of people living with HIV/AIDS in the New York Eligible Metropolitan Area, as provided by Title I/Part A of the Ryan White CARE Act of 1990, Public Law 101-381, amended under HATEA 2009, Public Law 109-145, as such Act may be amended from time to time or superseded by a new law;

b) Developing a comprehensive plan for the organization and delivery of HIV-related health and human services in the New York City metropolitan area that is compatible with all existing State or local plans regarding the provision of health and human services to individuals with HIV disease and with all laws and regulations regarding discrimination in the provision of these services;

c) Assessing, monitoring and making recommendations to the Mayor or the appropriate City agency regarding the efficiency of the administrative mechanism in rapidly allocating funds to the areas of greatest need within the eligible area;

d) Monitoring and making recommendations to the Mayor or the appropriate City agency regarding compliance with the priorities established by the Planning Council;

e) Conducting an assessment of the EMA’s needs for HIV services based on size and demographics of the population of individuals with HIV disease and

f) Coordinating in the provision of services to such individuals with programs for HIV prevention and for the prevention and treatment of substance abuse, including programs that provide comprehensive treatment for such abuse;

The Planning Council may assume additional responsibilities as may from time to time be proposed by the Mayor of the City of New York.

Section 4. Duration. The Planning Council may remain in existence for such additional time as the Mayor may propose and the Council may accept to discharge its duties under the Ryan White CARE Act of 1990, amended under HATEA 2009, Public Law 109-145, as such Act may be amended from time to time or superseded by a new law.

ARTICLE II - MEMBERSHIP OF THE PLANNING COUNCIL

Section 1. Membership. The Planning Council shall include a minimum of thirty-five (35) and a maximum of fifty (50) members. Members are appointed by the Mayor through an open nominations process, as mandated by the CARE Act, as amended under HATEA 2006, Public Law 109-145, and Mayoral Executive Order No. 162.

The Planning Council shall include in its membership at least one representative from each of the following categories:

a) health care providers, including federally qualified health centers;

b) community-based organizations serving affected populations and AIDS service organizations;

c) social service providers, including providers of housing and homeless services;
d) mental health and substance abuse providers;

e) local public health agencies;

f) hospital planning agencies or health care planning agencies;

g) affected communities, including people with HIV disease and historically underserved groups and subpopulations;

h) non-elected community leaders;

i) State government (including the State Medicaid agency and the agency administering the program under part B);

j) grantees under Part C;

k) grantees under Part D, or, if none are operating in the area, representatives of organizations with a history of serving children, youth, women, and families living with HIV and operating in the area;

l) grantees of other Federal HIV programs, including but not limited to providers of HIV prevention services;

m) representatives of individuals who formerly were Federal, State, or local prisoners, were released from the custody of the penal system during the preceding 3 years, and had HIV disease as of the date on which the individuals were so released;

n) members of a Federally recognized Indian tribe as represented in the population

o) individuals co-infected with hepatitis B or C.

(i) At least one member of the Planning Council must represent separately each of the categories specified above. The Planning Council must include at least one member who resides or provides services in each county of the EMA. To the maximum extent possible, the membership of the Planning Council shall reflect the demographics of the communities affected by the HIV epidemic in the EMA and the organizations and entities involved in financing and delivering health care and human services in response to the epidemic.

(ii) A minimum of 33% of the Planning Council shall be comprised of people living with AIDS or HIV, who are consumers of Part A services and do not serve on the executive or governing board and are not staff or consultants of a Part A-funded agency.

(iii) The Planning Council shall also include as members the following governmental representatives or their designees: the Commissioner of Health & Mental Hygiene of the City of New York (as represented by the Assistant Commissioner of the Bureau of HIV/AIDS Prevention & Control, or his/her designee); the Executive Deputy Commissioner for Mental Hygiene of the Department of Health and Mental Hygiene of the City of New York; the Administrator of the New York City Human Resources Administration; the Commissioner of Homeless Services of the City of New York; the Commissioner of Corrections of the City of New York; the President of the Health and Hospitals Corporation; the Director of the Division of HIV Health Care of the AIDS Institute of the New York State Department of Health; and the Deputy Director of the Division of HIV Health Care of the AIDS Institute of the New York State Department of Health.

Section 2. Ex Officio Members. The Planning Council may also include ex-officio, non-voting members as appointed by the Mayor. These ex-officio members shall not be included in the total number of Planning Council members.

Section 3. Duration of membership. Members who are not City or State officials or the Tri-County governmental representative shall serve three-year terms of service at the pleasure of the Mayor. No such member shall serve for more than two consecutive three-year terms. Duration of membership shall apply to members serving when these bylaws are adopted. All terms and conditions regarding mandated governmental appointees are covered under the Mayor’s Executive Order.

Section 4. Training

(a) All newly appointed Council members must complete an orientation within 90 days of appointment. Members may not vote on any matters that come before the Council until they have completed the orientation. Members must also complete all other necessary trainings as mandated by the Executive Committee.
ARTICLE III - REPLACEMENT OF MEMBERS

Section 1. Cause for replacement of member.

(a) Change in position. Pursuant to the requirement of at least 33 percent of the Planning Council members be persons living with HIV/AIDS and consumers of Part A services, any non-aligned consumer will be considered an aligned consumer if they become aligned to a funded entity by employment or board affiliation.

(b) Absences. If any member of the Planning Council fails to attend either (i) three (3) consecutive regularly scheduled meetings or (ii) fifty (50%) percent of the meetings in any twelve-(12-) month period, without a valid reason being given, the Council may by majority vote recommend to the Mayor that such member be removed. Illness shall be considered a valid reason for absence. The Rules and Membership Committee shall determine what constitutes a valid reason on a case by case basis.

(c) Resignation. Any member of the Planning Council may resign at any time by written notice delivered in person or sent by mail to the Governmental Co-Chair. Any such resignation shall take effect at the time specified in the notice, or if not so specified, immediately upon receipt of the notice by the Governmental Co-Chair.

(d) Removal for cause. The Planning Council may recommend to the Mayor that any member be removed from membership for cause. Any such action shall be taken only after the Rules and Membership Committee has conducted an investigation of the facts concerning the person’s conduct, given the person a reasonable opportunity to respond to the charges against him or her, and submitted a full report of its findings and recommendations to the Planning Council.

Recommendation of the removal of a member shall require a two-thirds vote at any regularly scheduled meeting of the Planning Council with no fewer than seven (7) days’ prior notice of the recommendation with the intent to remove.

Section 2. Procedures for replacement.

(a) Mid-term Vacancies. In the event of a vacancy, the Planning Council may, within thirty (30) days after the vacancy occurs, recommend to the Mayor no more than three (3) individuals to fill that vacancy. If the vacated seat was occupied by an individual representing one of the categories specified in Section 1 of Article II above, the recommended individuals shall satisfy the relevant qualifying criteria to fill that vacancy.

(b) End-Term Vacancies. No later than sixty (60) days before the vacancies occur, the Rules and Membership Committee shall conduct an annual analysis of the composition of the Planning Council with regard to representation of various constituencies. The findings of the Rules and Membership Committee shall be reported to the Executive Committee in order to develop guidelines to direct the Rules and Membership Committee in its subsequent review of potential nominees to the Planning Council. The Rules and Membership Committee shall solicit and review applications for Planning Council membership and shall prepare a second report to the Executive Committee listing no more than three (3) nominees for each vacancy. The Executive Committee, after reviewing and/or amending the list, shall vote to adopt the nominating report as its own, and the Co-Chairs of the Planning Council shall present this report to the Mayor on behalf of the Executive Committee.

ARTICLE IV - PLANNING COUNCIL MEETING PROCEDURES

Section 1. Meetings. The Planning Council shall meet at least six (6) times in every calendar year, and at least once during each quarter of the year. Notice of meeting date, time and place shall be provided in writing or by electronic communication to each member of the Planning Council not less than seven (7) days prior to each meeting. Emergency meetings may be called with no less than three (3) days prior notice by electronic communication and/or telephone.

(a) Regular meetings shall be called by the Governmental Co-Chair. Upon the written request of at least ten (10) Planning Council members, the Governmental Co-Chair shall call a special meeting.

(b) The rules contained in Robert’s Rules of Order, Newly Revised, shall govern meetings of the Planning Council whenever they are applicable and not inconsistent with the Bylaws.

(c) The following are Open Meeting Requirements in accordance with criteria established by HRSA:

i. Planning Council meetings shall be open to the public. Reasonable efforts shall be made to ensure that notice of scheduled meetings of the Planning Council is available to interested members of the public.
Section 2. Quorum. A quorum of the Planning Council shall be a majority of the Council’s membership. A majority is defined as more than half. Once a quorum is present at any meeting, the Planning Council may proceed to transact all business. At any time during a meeting, a member of the Planning Council may request the presiding officer to undertake a quorum count.

(a) All members of the Planning Council who are present may vote on any matter before the Council, except as otherwise provided in these Bylaws. Votes must be made in person rather than by proxy. A matter must receive a majority of the votes of those present and voting in order to pass (an abstention does not count as a vote cast).

Section 3. Code of Conduct

(a) Purpose. The code of conduct is designed to ensure appropriate behavior at Planning Council and committee meetings as well as other events conducted by the Planning Council. The code of conduct is designed to ensure that the Council can be productive, open to community input and respectful of its members and visitors. The code of conduct protects all members and public participants from inappropriate and disruptive behavior.

(b) Expected Conduct by Planning Council and committee members at all Council events. All members of the Planning Council and its sub-committees are expected to:

i. Conduct themselves in an appropriate and courteous manner at all times (e.g., no offensive or threatening behavior or creating a hostile environment);
ii. Follow Robert’s Rules of Order and the rules of respectful engagement as adopted by the Executive Committee;
iii. Follow any additional procedures for discussion that may be set by the meeting chairs, such as limiting the length of individual presentations and setting reasonable time limits on debate;
iv. Recognize the authority and follow the direction of the meeting chairs;
v. Not disrupt a meeting or encourage or assist other members or members of the public to do so;
vi. Not disclose personal information about any Planning Council or committee member, such as HIV status of anyone who is not publicly disclosed, or medical or personal information that would constitute an invasion of privacy.

(c) Sanctions. The following measures may be taken when a Planning Council or committee member fails to follow the code of conduct:

i. When a Planning Council or committee member violates the code of conduct in a meeting, the meeting chairs are expected to inform him/her that the behavior is unacceptable. If inappropriate behavior continues and the chairs feel it will disrupt the process, the chairs may ask the individual to leave the meeting. Prior to asking the individual to leave the meeting, the chairs shall publicly state the reason for removal.
ii. If a member of a committee continues to violate the code of conduct or other Council policies during committee meetings, the chairs may request that the Planning Council’s governmental co-chair, in consultation
with the community co-chair and finance officer, remove this individual as a committee member. The member will be suspended from committee attendance while the request is pending. The governmental co-chair will notify the individual in writing of the action taken and will informed the Rules & Membership Committee of any such action.ii. If a Planning Council member continues to violate the code of conduct or other Council policies, s/he may be recommended for removal as a Planning Council member for cause as stated in Article III.1(d) of these bylaws.*

iv. If the Planning Council or committee member feels that the sanction is unwarranted, s/he may appeal through the process described in the Planning Council’s Grievance Procedures.

(d) Expected Conduct by members of the public at all Planning Council meetings and events. Members of the public will have opportunity to provide public comment at Planning Council and committee meetings. Members of the public are expected to:

i. Comply with times and means for comment and input established by the Planning Council, including speaking only during public comment periods or when recognized by the meeting chairs;

ii. Follow any specified time limitations and recognize the authority and follow the direction of the chairs of the meeting;

iii. Abide by the code of conduct as outlined above in section 3(b), including treating Council and committee members and other members of the public in an appropriate and courteous manner.

(e) Sanctions. The following measures may be taken if a member of the public fails to comply with the code of conduct:

At any given meeting, a member of the public who fails to follow the code of conduct, uses disrespectful language or otherwise disrupts meetings will be warned, and, then if the behavior persists, will be asked by the chairs to leave the meeting. Prior to asking the individual to leave the meeting, the chairs will state on the record the reason for removal.

If a member of the public continues to violate the code of conduct, the Planning Council’s governmental co-chair, in consultation with the community co-chair and finance officer may exclude the individual from future meetings for 6 months. The governmental co-chair will notify the individual in writing of the action taken and will informed the Rules & Membership Committee of any such action. After 6 months, the Planning Council’s governmental co-chair, in consultation with the community co-chair and finance officer will review the decision. If a member of the public wishes to protest this decision, s/he may file a grievance using the Planning Council’s Grievance Procedures.

ARTICLE V - OFFICERS

Section 1. Procedures for election of officers. The officers of the Planning Council shall consist of a Governmental Co-Chair, a Community Co-Chair, and a Finance Officer. The Governmental Co-Chair shall be appointed by the Commissioner of NYC Department of Health and Mental Hygiene. The Community Co-Chair and Finance Officer shall be Planning Council members who are not representatives of either City or State government and shall be elected by the membership of the Planning Council. An officer shall be elected by a majority of the members present and voting. If no candidate receives a majority in the first round of voting, then the two candidates with the highest number of votes will compete in a runoff election immediately following the first ballot. In a runoff, only those votes cast for the two candidates count towards the basis of the majority. Elections of officers shall take place no more than 90 days before the end of the Planning Council session. Terms of officers-elect shall begin at the start of the new Planning Council session. If a seated officer should vacate his/her seat between an election and the beginning of the new term, the officer-elect shall fill the vacancy for the remainder of the term. Except when filling a vacancy under Article V Section 3 of these Bylaws, each elected officer shall be elected to a term of two (2) years. No elected officer shall serve for more than two (2) consecutive two- (2-) year terms.

Section 2. Duties of officers.

(a) Governmental Co-Chair. The Governmental Co-Chair shall call meetings of the Planning Council and preside at all meetings of the Planning Council and the Executive Committee and co-facilitate meetings with the Community Co-Chair. In consultation with the Community Co-Chair, the Governmental Co-Chair shall appoint all committee chairs as well as all members of committees, unless otherwise indicated in these Bylaws.
consultation with the Community Co-Chair, the Governmental Co-Chair may create such ad hoc special and advisory committees, with the approval of the Planning Council, as may be deemed necessary.

In the temporary absence or disability of the Governmental Co-Chair, the Governmental Co-Chair’s duties shall be performed by the Community Co-Chair or Finance Officer, in that order.

(b) **Community Co-Chair.** The Community Co-Chair shall work with the Governmental Co-Chair in the preparation of agendas for Planning Council and Executive Committee meetings, and co-facilitate meetings of the Planning Council and the Executive Committee. The Community Co-Chair shall serve as the principle liaison to community-based organizations and the affected community. The Community Co-Chair shall meet regularly with the Governmental Co-Chair and the Planning Council support staff, and perform the duties of the Governmental Co-Chair in the Governmental Co-Chair’s absence. In the temporary absence or disability of the Community Co-Chair, his or her duties shall be performed by the Finance Officer.

(c) **Finance Officer.** The Finance Officer shall act as a liaison between the Council and the grantee on financial issues. Duties may include: reviewing financial information provided by the grantee to the Council (which may include, but not be limited to, quarterly spending and annual close-out reports); analyzing the grantee’s spending reports for the Council membership; and explaining the financial aspects of the Part A grant to Council members. The Finance Officer shall not review information relating to individual sub-contracts. In the absence of the Governmental Co-Chair and the Community Co-Chair, the Co-Chair’s duties will be performed by the Finance Officer.

Section 3. Vacancies. A vacancy in any office other than the Governmental Co-Chair resulting from death, resignation, removal, expiration of term as Planning Council Member or other cause may be filled, upon the nomination of a successor by the Rules and Membership Committee, through election by the Planning Council. The successor shall serve for the remainder of the predecessor’s two- (2-) year term or the expiration of the successor's term as a Council member, whichever occurs first. At the end of such term, the office shall be filled in accordance with the election procedures described in Article V Section 1 of these Bylaws.

Section 4. Resignation. Any officer may resign at any time by written notice delivered in person or sent by mail to the Co-Chairs. A resignation will take effect at the time specified in the notice or, if not so specified, immediately upon receipt.

Section 5. Removal. Removal of an officer other than the Governmental Co-Chair shall require a two-thirds vote at any regularly scheduled meeting of the Planning Council with no later than seven (7) days’ prior notice.

**ARTICLE VI - COMMITTEES**

Section 1. General Terms. Unless otherwise determined by these Bylaws, the following conditions apply to all committees.

(a) The rules contained in Robert’s Rules of Order, Newly Revised, shall govern meetings of the committees whenever they are applicable and not inconsistent with the Bylaws.

(b) All committee meetings shall be open to the public. Reasonable efforts shall be made to ensure that notice of scheduled meetings of the Planning Council is available to interested members of the public.

(c) The members of each standing committee are appointed by the Governmental Co-Chair in consultation with the Community Co-Chair and Finance Officer through an open application process. The Rules & Membership Committee will review applications and make recommendations to the Council officers for appointments.

(i) Appointments made under this Section must be made known to the Planning Council within 10 days of the effective date of appointment.

(ii) The Planning Council may reject any appointment made under this Section by the vote of two thirds of Planning Council members.

(iii) Committee members are appointed for renewable three-year terms.

(d) Each committee must maintain minutes of its proceedings and report to the Executive Committee and Planning Council on a regular basis.
For each committee, a quorum exists when more than half of the people serving on that committee are present.

Section 2. Resignation. Any committee member may resign at any time by written notice delivered in person or sent by mail to the Governmental Co-Chair. Any such resignation shall take effect at the time specified in the notice, or if not so specified, immediately upon receipt of the notice by the Governmental Co-Chair.

Section 3. Absences. If any member of a Committee fails to attend either (i) three (3) consecutive regularly scheduled meetings, or (ii) fifty (50%) percent of the meetings in any twelve (12) month period, without a valid reason being given, the Committee may recommend to the Governmental Co-Chair and the Community Co-Chair that such member be removed. Illness shall be considered a valid reason for absence. The Co-Chairs and the Committee Co-Chairs shall determine what constitutes a valid reason on a case by case basis.

Section 4. Removal for cause. The Executive Committee may recommend to the Council Co-Chairs that a member of any committee be removed from membership for cause. Any such action shall be taken only after the Rules and Membership Committee has conducted an investigation of the facts concerning the person’s conduct, given the person a reasonable opportunity to respond to the charges against him or her, and submitted a full report of its findings and recommendations to the Executive Committee.

Section 5. Standing Committees. The Planning Council has 8 standing committees: Executive; Finance; Rules and Membership; Needs Assessment; Consumers; Integration of Care; Priority Setting and Resource Allocation; and Policy.

I. Executive Committee

Section 1. Duties. The Executive Committee is charged with the following duties:

(a) Provide broad oversight and general management of all Planning Council business.
   (i) In consultation with others, create an annual Planning Council performance agenda that specifies objectives with deadlines and responsible parties.
   (ii) Use the annual performance agenda to monitor the Council’s progress in meeting its objectives. If needed, work with Planning Council support staff to identify and secure appropriate resources necessary to facilitate successful fulfillment of objectives.
   (iii) In consultation with Planning Council support staff, develop and approve agendas for meetings of the Planning Council.
   (iv) Conduct business on behalf of the Planning Council on an emergency basis or where not assigned to other Committees.
   (v) Ensure that the structures, policies and procedures of the Planning Council are appropriate to its mandated responsibilities. This includes an annual assessment of the fitness of these Bylaws to current conditions.

(b) Oversee coordination of committee functions.
   (i) Monitor the work of each Committee to ensure inter-committee collaboration as stipulated in Article VI.
   (ii) Review and make final recommendations to the full Planning Council on all reports and motions from standing committees, ad hoc committees and working groups.
   (iii) Provide guidance and corrective support as necessary to ensure committee success in meeting their objectives.

(c) Supervise membership composition and disciplinary proceedings.
   (i) Using recommendations from the Rules and Membership Committee, provide the Mayor a slate of nominees for Planning Council membership. Ensure that the composition of the Planning Council membership complies with all relevant mandates of the Ryan White CARE Act, as amended under HATEA 2009, Public Law 109-145, and Mayor’s Executive Order 162.
   (ii) Review advice from Rules and Membership Committee concerning disciplinary actions for individual Planning Council members and, if warranted, recommend appropriate corrective action to Planning Council.
(d) Obtain and review fiscal information from the grantee in a timely manner, and when necessary, seek clarification of fiscal information from the grantee. Evaluate fiscal information from the grantee for completeness and accuracy. Assess the efficiency of the administering agency in rapidly allocating funds to areas of greatest need. Disseminate financial data, as needed, to the Council and its committees.

Section 2. Composition. Membership of the Executive Committee is comprised of the following:
(a) the Governmental and Community Co-Chairs of the Planning Council;
(b) the Finance Officer;
(c) Co-Chairs of all standing committees and sub-committees;
(d) an at-large consumer member from among the non-aligned consumers who are members of the Planning Council, elected by the Consumers Committee no more than 90 days before the end of the Council session. Terms of the at-large representative-elect shall begin at the start of the new Planning Council session. If a seated at-large representative should vacate his/her seat between an election and the beginning of the new term, the at-large representative -elect shall fill the vacancy for the remainder of the term;
(e) the Commissioner or designated representative of the Department of Health and Mental Hygiene of the City of New York;
(f) the Director or designated representative of the Division of HIV Health Care of the AIDS Institute of the New York State Department of Health;

II. Rules and Membership Committee
Section 1. Duties. The Rules and Membership Committee is charged with the following duties:
(a) Implement open-nominations proceedings in compliance with Article II of these Bylaws.
(b) Participate in member recruitment efforts
(c) Collaborate with Consumers Committee in outreach and member recruitment efforts.
(d) Collaborate with Consumers Committee in member orientation, training and development.
(e) Manage, interpret, enforce, review and update Planning Council bylaws.
(f) Oversee all conflict-of-interest policies and manage grievance proceedings.

Section 2. Composition. Membership must be at least 6 and no more than 10 in number. In composition, it must meet the following conditions:
(a) Each member of the Committee must be a member of the Planning Council.
(b) At least 2 members must be unaligned consumers.
(c) During nominations proceedings, the Governmental Co-Chair will participate as a nonvoting member
(d) Grantee staff is excluded from the Council’s appointments process

Section 3. Limited exception to open-meetings rule. To assure confidentiality, nomination proceedings, which involve discussion of applicants’ personal information, are not open to the public.

III. Needs Assessment Committee
Section 1. Duties. The Needs Assessment Committee is charged with the following duties:
(a) Manage all required needs-assessment activities, which include data gathering and analysis:
(i) selecting topics to investigate to contribute to the Planning Council’s assessment of local needs for treatment and care services
(ii) reviewing epidemiological and service utilization data;
(iii) estimating and assessing unmet need and service gaps;
(iv) inventory available resources including identification of other funding streams that support HIV/AIDS care; and
(v) reviewing information on the capacity and capability of the system of care.
(b) Ensure that the other committees receive objective information, in user-friendly formats, required to fulfill their duties.
(c) Collaborate with the Integration of Care Committee in the development of a comprehensive plan for the organization and delivery of HIV services following the distribution of a guidance for the comprehensive plan by HRSA.

(d) Participate in development of the statewide coordinated statement of need.

(e) Assess the effectiveness of funded services in addressing the Planning Council’s priorities and allocations.

(f) Collaborate with grantee in assessing the cost effectiveness and outcome effectiveness of funded services.

Section 2. Composition. Membership is limited to no more than 30 in number. In composition, it must meet the following conditions:

(a) broad representation from diverse service areas.

(b) members are drawn from members of committees, advocacy or research groups, and affected communities who have the expertise necessary to enhance the ability of the committee to analyze and interpret HIV-related data.

(c) a representative of the Part A grantee or his/her designee

IV. Consumers Committee

Section 1. Duties. The Consumers Committee is charged with the following duties:

(a) Oversee efforts to ensure meaningful and substantial involvement of people living with HIV/AIDS in all Planning Council activities.

(b) Collaborate with Rules and Membership Committee in recruitment measures, such as outreach efforts, to secure appropriate consumer representation on the Planning Council.

(c) Collaborate with Rules and Membership Committee in retention measures, including orientation, training and mentoring, to help consumer members stay engaged and participate fully.

(d) Work with staff to see that issues of financial support for consumer involvement are addressed appropriately and within HATEA guidelines.

Section 2. Composition. Membership is limited to no more than 30 in number. In composition, it must meet the following conditions:

(a) Committee membership includes Planning Council members who are unaligned consumers.

(b) The remainder are unaligned consumers who are not voting members of the Planning Council.

V. Integration of Care Committee

Section 1. Duties. The Integration of Care Committee is charged with the following duties:

(a) Regularly review and recommend ways to strengthen the system of care in the New York EMA so that PLWHAs remain in care and PLWHAs who are outside the care system are returned to and maintained in care.

(b) Describe services that will address needs identified by the Needs Assessment Committee, and that will ensure access to and maintenance in HIV-related primary care and supportive services.

(c) Coordinate with other HATEA programs and AIDS/HIV services.

(d) Oversee the development of a comprehensive plan for the organization and delivery of HIV services following the distribution of a guidance for a comprehensive plan by HRSA.

Section 2. Composition. Membership of the Integration of Care Committee is limited to no more than 30 in number and is comprised of the following:

(a) broad representation from diverse service areas;

(b) at least one member of the Needs Assessment Committee;

(c) at least one member of the Consumers Committee;

(d) at least one member of the Priority-Setting and Resource Allocation Committee;

(e) a representative of the Part A grantee or his/her designee.
VI. Priority Setting and Resource Allocation Committee

Section 1. Duties. The Priority Setting and Resource Allocation Committee is charged with the following duties:

(a) Periodically review the tool used to establish priorities
(b) Set priorities for services provided by HATEA based on:
   (i) Needs assessment data;
   (ii) Cost-effectiveness and outcome-effectiveness data;
   (iii) Priorities in HIV-infected communities; and
   (iv) The availability of other governmental and nongovernmental resources
(c) Allocate resources based on needs and existing services

Section 2. Composition. Membership is limited to Council members, no more than 35 in number. In composition, it must meet the following conditions:

(a) broad representation from service areas;
(b) two representatives from the Consumers Committee;
(c) the Planning Council Finance Officer;
(d) the Commissioner, or designated representative, of the Department of Health and Mental Hygiene of the City of New York;
(e) the remaining membership is drawn from Planning Council members.

VII. Policy Committee

Section 1. Duties. The Policy Committee is charged with the following duties:

(a) Ensure that the Planning Council is informed of and responds to emerging national, state, and local policy concerns and develop recommendations as needed.

Section 2. Composition. Membership must be no more than 20 in number. Members are drawn from members of the Planning Council, Planning Council committees, advocacy groups, affected communities and a representative of the Part A grantee or his/her designee.

Section 3. Urgent Matters. For time sensitive matters, the Co-Chairs of the Policy Committee are empowered to act on behalf of the full Policy Committee, support a document, and forward it to the Executive Committee. The co-Chairs will inform Policy Committee members that urgent/time sensitive matter has been forwarded to the Executive Committee. Policy Committee members are encouraged to contact Co-Chairs if they have opinions or positions on urgent/time sensitive matters. The Executive Committee may conduct a vote on an urgent policy matter or other issue via email.

VIII. Tri-County Steering Committee

Section 1. Duties. The Tri-County Steering Committee is charged with the following duties:

(a) conduct needs assessment activities and develop a comprehensive strategic plan for the Tri-County region, including data gathering and analysis
(b) make recommendations on service delivery for needs identified through needs assessment activities in the Tri-County region
(c) establish priorities for the use of program funds provided by HATEA in the Tri-County region
(d) Allocate resources for the priorities established by the Steering Committee, based on needs and existing services in the Tri-County region

Section 2. Composition. The Committee shall include a minimum of twenty-five (25) and a maximum of forty (40) voting members. Membership shall, to the extent possible, include at least one (1) representative from each of the membership categories specified in Article II, Section 1 of these Bylaws. To the maximum extent possible the membership of the Steering Committee shall represent the demographics of the communities affected by the HIV epidemic in the Tri-County region and the organizations and entities involved in financing and delivering health care and support services in the region. A minimum of thirty-three (33) percent of Committee membership shall be comprised of people with HIV/AIDS. There shall be at least one member who resides or provides services in each of the three counties in the Tri-County region.

Section 6. Ad-hoc committees. Subject to the approval of the Planning Council, the Governmental Co-Chair, in
consultation with the Community Co-Chair, may create such ad hoc, task forces, special and advisory committees as may be deemed necessary. The Governmental Co-Chair, in consultation with the Community Co-Chair, shall appoint the chairs of all such committees and shall designate such committee’s membership.

Section 7. Subcommittees. The chair of each committee may appoint such subcommittees of that committee as shall be necessary to carry out the work of the committee.

Section 8. Committee chairs. No member of the Planning Council shall be permitted to chair more than one standing committee. In addition, excluding the Finance Officer, no member may serve as an elected officer of the Council in addition to chairing a committee.

ARTICLE VII - DIRECTOR AND STAFF PLANNING COUNCIL SUPPORT UNIT

Section 1. Director, Planning Council Support Unit. The Director shall be the chief executive officer of the Planning Council’s staff. The Director shall be appointed by the Commissioner of NYC DOHMH. The Director shall direct the overall operations of the Planning Council and implement its policies. The Director shall also perform such duties as may be requested from time to time by the Planning Council. The Director shall report to the Deputy Commissioner, Division of Disease Control, NYC DOHMH.

Section 2. Staff.
(a) The Director shall be responsible for the organization and management of sufficient professional and other staff to accomplish the functions of the Planning Council, subject to the table of organization and budget approved by the Planning Council in conjunction with the Director of the Care and Treatment Program, Bureau of HIV/AIDS Prevention & Control.
(b) Policies and procedures for the selection, salary, promotion and discharge of staff shall be set by the Bureau of Disease Control and all staff shall be governed by the rules and procedures of the New York City Department of Health and Mental Hygiene.
(c) The staff of the Planning Council shall be responsible for supporting the Planning Council and its Committees, keeping the minutes for all meetings, coordinating the priority-setting, strategic planning and evaluation and monitoring tasks of the Planning Council, particularly in preparation for submission of the annual Part A application to HRSA by the grantee agency. Minutes of the previous meeting shall be available at each meeting and shall be approved by the members of the Planning Council. Draft minutes shall be made available one week prior to the next meeting. Minutes should contain a listing of those present; a description of matters discussed and conclusions and/or actions taken; and copies of all reports received, issued or approved by the Council. Minutes shall be available for public inspection and copying at a single location.
ARTICLE VIII - CONFLICTS OF INTEREST

Section 1. General rules. The rules contained in this section apply to all members, members of committees, task forces and technical advisory groups, staff members, contractors and consultants to the Planning Council, all of whom shall be referred to as Planning Council members for purposes of this section.

In accordance with HRSA guidelines, a Planning Council member who serves as a director, trustee, advisory board member, consultant or salaried employee, or who derives a financial or economic benefit from association with any agency or entity that currently receives or is a current applicant for funds allocated by the Planning Council, is deemed to have an “interest” in said agency or entity. Interests held by a Planning Council member’s spouse, domestic partner, children, parents and siblings and their spouses or domestic partners shall be imputed to that Planning Council member for the purposes of this policy. Conflict of interest does not refer to persons living with HIV or AIDS whose relationship to a grant funded service provider is as a client receiving services or a member of a community advisory board.

In order to prevent the existence, or the appearance of the existence, of a conflict of interest, a member so deemed to have an interest in an agency or entity may not vote on matters that come before the Planning Council or committees of the Planning Council regarding the allocation of funds to service program in which the associated agency or entity seeks or has obtained funds. Planning Council members also may not vote on matters that directly affect an interest held by that member, or that directly relates to an agency or entity in which the member has an interest. This shall not preclude such a member from voting on matters affecting a group of service categories that includes the one in which he or she has an interest. Nothing in this policy shall be construed to prevent governmental representatives on the Planning Council from exercising their vote on behalf of the governmental entity that they represent.

This policy shall not be construed as preventing any member of the Planning Council from full participation in discussion and debate about community needs, service priorities, and allocation of funds to broad service categories, and the process from and results of evaluation of service effectiveness. Rather, individual members are expected to draw upon their lay and professional experiences and knowledge of the HIV service delivery system and to disclose verbally any potential conflicts of interest at the beginning of any discussion that has direct relevance to their interests, including the interests that are related to an agency or entity whose funding may be directly affected by the matters under discussion.

(a) No Planning Council member shall use his or her relationship with the Planning Council for private gain.

(b) Whenever any matter arises with respect to which a Planning Council member either has a conflict of interest or has any question about the existence of a conflict, he or she shall make full disclosure of such conflict or possible conflict before the matter in question is discussed.

(c) Persons who have conflicts of interest as defined herein may participate in the discussion of the matter in question but shall not vote on that matter.

Section 2. Disclosure statement. Each Planning Council member and committee member shall file an organizational affiliation disclosure statement which shall be kept on record by Council staff. When there is a change in the Planning Council member’s affiliations, he or she shall update his or her Disclosure Statement.

Section 3. Investigation of apparent conflict. The Rules and Membership Committee shall, upon the request of the Planning Council, investigate and make recommendations to the Planning Council concerning any Planning Council member’s conflict of interest or the appearance thereof. The Planning Council shall review these recommendations, approve specific action to deal with the conflict of interest, and ensure that the agreed-upon actions are fully and fairly implemented.

ARTICLE IX- GRIEVANCE PROCEDURES

Section 1. General. Any member wishing to file a grievance shall follow the process outlined in the New York HIV Health and Human Services Planning Council Grievance Procedures.
ARTICLE X - MISCELLANEOUS

Section 1. Books and records. The records, reports, transcripts, minutes, agenda or other documents, which were made available to or prepared for or by the Planning Council, shall be available for public inspection and copying at the offices of the Planning Council support agency.

Section 2. Validity of acts.
   (a) No act by the Planning Council or any Planning Council committee shall be invalid by reason of the improper participation of any member unless the question about the member’s status is raised before the vote is taken on the matter in question.
   (b) No act by any Planning Council body which has been taken at a meeting at which a quorum appears to have been established shall be invalid by reason of the lack of a quorum present at the time the act was taken, unless the question of the presence of a quorum is raised before the vote is taken on the matter in question.

Section 3. CARE Act and Executive Order Authority. The provisions of the Ryan White CARE Act of 1990, as amended under HATEA 2009, Public Law 109-145, as such Act may be amended from time to time or superseded by a new law, shall supersede these Bylaws. The provisions of Mayoral Executive Order Number 162 of August 8, 2012, as such Executive Order may be amended from time to time or superseded by a new Executive Order, shall supersede these Bylaws.

ARTICLE XI - AMENDMENT

Section 1. General. These Bylaws may be amended by a majority vote of the Planning Council members present and voting at any meeting at which a quorum is present, provided that notice of the proposed amendment shall have been presented in writing to the Planning Council members no later than two (2) weeks prior to such meeting of the Planning Council.