

# MEETING AGENDA

*VIRTUAL:*

*Wednesday, January 13, 2021*

*2:00 p.m. – 4:30 p.m.*

- Call to Order
- Welcome/Introductions
- Approval of Agenda
- Approval of Minutes (*December 9, 2021*)
- Report of Co-Chairs
- Report of Staff
- Discussion Item
  - Updates on EHE Activities
  - Ad-Hoc Recruitment Workgroup Guidelines
- Action Items
  - Reallocation Request
  - Mission Statement Language
- Committee Reports
  - Executive Committee
  - Finance Committee -- *Alan Edelstein & David Gana*
  - Nominations Committee – *Mike Cappuccilli*
  - Positive Committee – *Gracie Borns & Kenya Moussa*
  - Comprehensive Planning Committee – *Gus Grannan*
  - Prevention Committee – *Lorett Matus & Clint Steib*
  - Ad-Hoc Workgroup
- Other Business
- Announcements
- Adjournment

HIV Integrated Planning Council

**Please contact the office at least 5 days in advance if you require special assistance.**

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**VIRTUAL: HIV Integrated Planning Council**  
**Meeting Minutes of**  
**Thursday, December 9, 2021**  
**2:00-4:30 p.m.**

Office of HIV Planning, 340 N. 12<sup>th</sup> Street, Suite 320, Philadelphia PA 19107

**Present:** Juan Baez, Keith Carter, Mike Cappuccilli, Debra D’Alessandro, Lupe Diaz (Co-Chair), Alan Edelstein, David Gana, Ebony Gardner, Gus Grannan, Pamela Gorman, Sharee Heaven, Gerry Keys, Kate King, Loretta Matus, Kaleef Morse, Shane Nieves, Hemi Park, Erica Rand, Sam Romero, Clint Steib, Desiree Surplus, Nicole Swinson, Evan Thornburg, Adam Williams

**Guests:** Ameenah McCann-Woods (AACO), Julie Hazzard (AACO), Sterling Johnson, Jose Demarco Mikah Thomas (AACO), Afrah Howlader

**Excused:** C. Steib

**Staff:** Beth Celeste, Julia Henrikson, Debbie Law, Mari Ross-Russell, Sofia Moletteri, Elijah Summers

**Call to Order:** L. Diaz called the meeting to order at 2:05 p.m.

**Approval of Agenda:** L. Diaz presented the December 2021 HIPC agenda for approval.

**Motion:** K. Carter motioned, D. Gana seconded to approve the December 2021 agenda. **Motion passed:** 11 in favor and 2 abstained.

**Approval of Minutes** (*November 11, 2021*): L. Diaz presented the previous meeting’s minutes for approval. **Motion:** D. Gana motioned to approve the minutes, K. Carter seconded to approve the November 2021 meeting minutes. **Motion passed:** 7 in favor and 7 abstained.

**Report of Co-Chairs:** No Report.

**Report of Staff:** D. Law reported that OHP has received and sent out acceptance letters from the Mayor’s Office for new members. There were 8 new members accepted to HIPC and they would be attending meetings moving forward. Additionally, she said there would be communication from OHP to new members regarding orientation in January and to be on the lookout for that email.

M. Ross-Russell reported that the Community Survey has gotten through the IRB process and, as of this meeting, OHP has received the exemption letter from the IRB. She thanked Dr. Brady, AACO, and Spanish-speaking members of HIPC who helped translate the survey to Spanish. Due to the fact that HIPC does not have access to community members, OHP needs help from providers and planning council members to assist in the dissemination of the survey. Assistance in the distribution included, but was not limited to, email blasts, newsletters, and general word of mouth. She asked that council members

contact her at mari@hivphilly.org if they have any questions and want to help. OHP would send providers and community members information on the best practices for the distribution of the Consumer Survey.

The Mission Statement discussion came from a previous conversation from the planning council and the language would help community members feel like they were an important part of this process. The Monitoring the Administrative Mech form as an action item came from the site visit and project officer/ consultants stating that OHP needed a more formalized process. The Bylaws were originally supposed to be voted on in October, but got pushed to today. Additionally, the Prevention Committee recommendations would be going to the Recipient. M. Ross-Russell stated that this was a meeting to help tie up loose ends from the disparate and outstanding things that the planning body still needed to vote on.

### **Discussion Items:**

#### ***–HIPC Mission Statement–***

S. Moletteri presented the current mission statement and shared that the idea of a new mission statement came about while discussing the bylaws and thought it was best to create this. There were sections highlighted to signify the language it was thought best to include. From this there was a mission statement drafted:

*The HIV Integrated Planning Council will work to ensure that all people living with HIV have **fair, equitable and appropriate access to all services** within the Philadelphia EMA. HIPC will focus on the continuous improvement in service system standards and functions to **maximize the quality of life for PWLH**.*

S. Moletteri asked if there were any questions or suggestions for the current iteration of the mission statement. L. Diaz stated that it looked great and was good that it took language that already existed within the mission statement. E. Thornburg asked that we expand #3 to "diminishing barriers to care, providing high-quality services, and centering dignity...". A. Edelstein suggested "promoting dignity," and that the other phrase could be cumbersome. E. Thornburg asked if #4 could include language about "client agency" because that was an issue where clinic language does not extend agency onto the client.

A. Edelstein suggested adding the words "facilitate," "foster," and "maximize" to the mission statement language. He specified that these were not one phrase, rather they could be used in place of other words for impact. A. Williams asked if the inclusion of the phrase "maximizing agency of PLWH" in point #2 would cover what E. Thornburg was trying to say. E. Thornburg answered affirmatively and went on to state that the inclusion of dignity and agency were highly activating when it came to clinicians and people doing research in HIV spaces, so it activates their ethical responsibilities and the language was used a lot. D. D'Alessandro asked if the language for #2 should include "by providing a designated space"? G. Grannan suggested that for

#3 “high quality services by following dignity focused client-centered approaches” to get both of the phrases E. Thornburg suggested.

K. Morse suggested that HIPC should consider who the target audience was in reading this mission statement and as such, consider the language used (reading level, clarity, etc.). Who were you trying to talk to with this mission statement? He continued that this should be clear and not self-serving language because it could alienate the people HIPC stood to help. P. Gorman asked what the language of “maximizing agency of PLWH” meant in this case? She continued that she thought it meant people on the planning council who were PLWH as well as agency representatives. L. Diaz stated agency in this case meant “right to choose” and reiterated that this was the issue K. Morse brought up earlier regarding reading comprehension. K. Morse suggested the original language of “meaningful involvement on the council” and again that clarity was key.

D. D’Alessandro asked what the process would be for approving this mission statement? L. Diaz said that this would most likely get voted on in the next meeting in January. M. Ross-Russell asked if members would like the draft mission statement sent out ahead of the next meeting in order for people to review and provide additional feedback. E. Thornburg answered affirmatively. E. Thornburg asked who was the target population for this mission statement? M. Ross-Russell answered PLWH, those who were interested in the work HIPC does in the EMA, and primarily community members who visited the website so that they could better understand the work HIPC does and if they wanted to join it would give them context for the work being done.

K. Carter asked if there was a previous mission statement on the website? M. Ross-Russell answered no and that this was the first formal mission statement crafted by the planning body. M. Ross-Russell reiterated that it took months for the previous mission, vision, and values statement to get approved by the council. G. Grannan stated that he agreed with E. Thornburg’s sentiment about reading comprehension and intended audience, but we need to assume more people than not would know about “Agency” and other language.

K. Carter asked if the paragraph and the follow-up points were a part of the mission statement and if it was necessary to have the four points. K. Morse stated that he believed the first paragraph was the mission statement and the following points were the values that would help achieve the mission. P. Gorman agreed with K. Morse and that the idea of mission statements was that they should be clear and brief. She continued that the numbered sections were good to have, but the bulk of the mission statement was in the paragraph. S. Nieves asked if it would be more effective to have the mission statement in present tense vs. future tense to ensure that HIPC works for all people. D. D’Alessandro agreed that active voice was a great suggestion because otherwise it would be aspirational and it was HIPC’s job to execute these goals.

H. Park suggested adding a fifth bullet point “Upholding and advocating for the autonomy of PLWH who are members.” S. Moletteri added that this tied into the discussion surrounding

agency earlier in the discussion. D. D'Alessandro agreed that we should add a fifth bullet point and adding "... autonomy and agency" to the phrase.

*–Action Items–*

*–Monitoring the Administrative Mechanism Form–*

A. Edelstein reported that AACO was visited by the federal reviewers, as part of a site visit, where the planning council got cited because HIPC did not have a formal process for different items. M. Ross-Russell clarified that this process needed to be formalized with a written process as opposed to ensuring all the process steps within the policy were covered. Alan continued that this proposed form was coming from the Finance committee, was approved by the Executive committee, and needed to be approved by HIPC in this meeting.

Motion: A. Edelstein motioned that the full planning council vote to approve the Monitoring the Administrative Mechanism form and this reporting process.

- P. Gorman – In Favor
- S. Heaven – Abstain
- A. Edelstein – In Favor
- L. Diaz – Abstain
- D. Gana – In Favor
- D. D'Alessandro – Abstain
- E. Rand – In Favor
- E. Thornburg – Abstain
- G. Keys – In Favor
- G. Grannan – In Favor
- H. Park – In Favor
- J. Baez – In Favor
- J. Hazzard – In Favor
- K. Morse – In Favor
- K. Carter – In Favor
- L. Matus – In Favor
- M. Cappuccilli – In Favor
- S. Romero – In Favor
- S. Nieves – Abstain
- D. Surplus – (did not answer)
- K. King – In Favor

15 in Favor, 5 abstained. The motion passed.

*–Bylaws regarding Quorum–* S. Moletteri presented the original bylaws:

**Article V: Meetings**

**Section 1.** “The quorum of the Planning Council shall be more than one-third ( $\frac{1}{3}$ ) of the membership of which at least twenty percent (20%) shall be members living with HIV. Absentee and proxy votes shall not be considered.

#### **Article VII: Committee**

**Section 2.** “Each committee shall establish its own quorum of which at least twenty percent (20%) shall be People Living with HIV.

There were two motions on the table to alter these by-laws and HIPC needed to wait the 30-day waiting period to allow for objections and comments.

**Motion:** D. Gana motioned to amend the bylaw language to change Article V: Section 1 from “of which at least twenty percent (20%) shall...” language to “of which it is the goal that at least 20% be People Living with HIV,” K. Carter seconded.

**Motion:** D. Gana motioned to amend the bylaw language to change Article VII: Section 2 from “of which at least twenty percent (20%) shall...” language to “of which it is the goal that at least 20% be People Living with HIV,” K. Carter seconded.

The proposed bylaws would change to “The quorum of the Planning Council shall be more than one-third ( $\frac{1}{3}$ ) of the membership of **which it is the goal at least 20% be People Living with HIV.** Absentee and proxy votes shall not be considered.” M. Ross-Russell added context for new members by stating the site visit raised a concern about individuals who were living with HIV being represented properly on the planning council.

S. Moletteri added that because HIPC has been discussing recruitment recently that the old language could be a barrier to new members joining because it implies people would have to disclose their status in order to reach quorum, which would be a breach of confidentiality. S. Moletteri asked M. Ross-Russell if the committees have historically created their own quorum because the numbers were typically smaller. M. Ross-Russell stated that they created their own quorums because there was not a set number of individuals that participated in each of the committees. Additionally, attendance varies within the committees themselves, so that was how the language originated.

- P. Gorman – In Favor
- S. Heaven – Abstain
- K. King – In Favor
- A. Edelstein – In Favor
- L. Diaz – Abstain
- D. Gana – In Favor
- D. D’Alessandro – In Favor
- E. Rand – In Favor
- E. Thornburg – Abstain
- G. Keys – In Favor
- G. Grannan – In Favor

H. Park – Abstain  
J. Baez – In Favor  
J. Hazzard – In Favor  
K. Morse – In Favor  
K. Carter – In Favor  
L. Matus – In Favor  
M. Cappuccilli – In Favor  
S. Romero – In Favor  
S. Nieves – In Favor  
D. Surplus – In Favor

17 in Favor and 4 abstained, the first motion was approved.

P. Gorman – In Favor  
S. Heaven – Abstain  
K. King – In Favor  
A. Edelstein – In Favor  
L. Diaz – Abstain  
D. Gana – In Favor  
D. D'Alessandro – In Favor  
E. Rand – In Favor  
E. Thornburg – Abstain  
G. Keys – In Favor  
G. Grannan – In Favor  
H. Park – In Favor  
J. Baez – In Favor  
J. Hazzard – In Favor  
K. Morse – In Favor  
K. Carter – In Favor  
L. Matus – In Favor  
M. Cappuccilli – In Favor  
S. Romero – In Favor  
S. Nieves – In Favor  
D. Surplus – In Favor

18 in Favor and 3 abstained. The second motion was approved.

***–Prevention Committee Memo–***

J. Henrikson reported that the Prevention Committee wrote a memo to the Recipient. In summation, based on continuing discussions of the Prevention Committee of the HIV Integrated Planning Council (HIPC), the following recommendations are being presented to AACO and in line with prevention goals outlined in the Ending the HIV Epidemic (EHE) Plan and the National HIV/AIDS Strategy (2022-2025). These recommendations were drafted and voted upon by the Prevention Committee and HIPC. The purpose of this memo was to support the inclusion of

said recommended activities in locations responsible for the provision of STI services funded through Centers for Disease Control and Prevention (CDC) and Ryan White Part A grants.

P. Gorman – In Favor  
S. Heaven – Abstain  
K. King – In Favor  
A. Edelstein – In Favor  
L. Diaz – Abstain  
D. Gana – In Favor  
D. D'Alessandro – In Favor  
E. Rand – In Favor  
E. Thornburg – Abstain  
G. Keys – In Favor  
G. Grannan – In Favor  
H. Park – In Favor  
J. Baez – In Favor  
J. Hazzard – In Favor  
K. Morse – In Favor  
K. Carter – In Favor  
L. Matus – In Favor  
M. Cappuccilli – In Favor  
S. Romero – (did not answer)  
S. Nieves – Abstain  
D. Surplus – In Favor

16 in Favor, 4 abstaining. The Prevention Memo was approved.

**Committee Reports:**

***–Executive Committee–***

No Report.

***–Finance Committee–***

No Report.

***–Nominations Committee–***

M. Cappuccilli reported that the Nominations committee met today (12/9) and voted for a new co-chair J. Baez. In today's meeting they reviewed attendance of members and D. Law was preparing for orientation for new members in the new year.

***–Positive Committee–***

S. Moletteri reported that the last meeting was November 8th, they began drafting a letter to former members about obstacles in participation.

***–Comprehensive Planning Committee–***

G. Grannan reported that during the last meeting the committee went through the Community Survey. There was no December meeting and the next one would be the third Thursday in January.

*–Prevention Committee–*

L. Matus thanked everyone for passing the Prevention committee memo. The next meeting will be in January.

*–Ad-Hoc Recruitment Workgroup–*

S. Moletteri reported that the next meeting would be next Wednesday December 15th at 2p.m.

**Any Other Business:**

None.

**Announcements:**

None.

**Adjournment:**

L. Diaz called for a motion to adjourn. **Motion: K. Carter made a motion to adjourn the meeting. D. Gana seconded to adjourn the December 9, 2021 HIPC meeting. Motion Passed: All in Favor.** The meeting was adjourned at 3:56 p.m.

Respectfully Submitted,  
Elijah Sumners, staff

Materials Included:

- December 2021 HIPC Meeting Agenda
- November 2021 HIPC Meeting Minutes
- HIPC Mission Statement
- Bylaws regarding 20% quorum
- Prevention Committee Memo

**Philadelphia HIV Integrated Planning Council**  
**Mission Statement for**  
**January 13, 2022**

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***Explanation:***

The following mission statement is to be displayed on the hivphilly.org website. The suggested language for the mission statements is only a draft and has been discussed and altered during the December 2021 HIPC meeting. This language has been up for discussion/comment for a period of 30 days.

The suggestion of a mission statement being included on the HIPC webpage came about through conversations within HIPC/Executive Committee related to the alteration of bylaws mandating 20% quorum of PLWH.

***The following language is to ensure that the importance of involvement and participation of PLWH within the Council is acknowledged.***

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**Our Mission:**

The HIV Integrated Planning Council (HIPC) works to ensure that all people living with HIV (PLWH) have **fair, equitable, and appropriate access to all services** within the Philadelphia EMA. HIPC focuses on the continuous improvement in service system standards and functions to **maximize the quality of life for PLWH.**

We do so by:

1. Promoting diversity and inclusivity through listening to individual needs;
2. Maximizing meaningful involvement of PLWH on the Council through active recruitment and by providing an additional, designated space for PLWH to meet with each other;
3. Diminishing barriers to care and promoting dignity by following client-centered approaches;
4. Ensuring that PLWH and service providers work together and have open discussions around all levels of design, delivery, and evaluation of services;
5. Upholding and advocating for the autonomy and agency of PLWH.