CONTRA COSTA HIV/AIDS CONSORTIUM BYLAWS

I. NAME

The name of this body shall be the Contra Costa HIV/AIDS Consortium, hereafter referred to as the Consortium.

The Consortium is an umbrella network of clients, providers and interested community members addressing the issues of HIV and AIDS in Contra Costa County. The Consortium shall be responsible for:

- Assessment of both prevention and care service needs,
- Development of local priorities for both education and direct care services,
- Development of local HIV Prevention Plan,
- Prioritizing HIV prevention populations and service needs,
- Development and delivery of recommendations to regional Oakland TGA Collaborative Community Planning Council (CCPC) as required, and
- Advisory group to the Health Services Department HIV/AIDS & STD.

In addition to serving as a local advisory body for the Contra Costa Health Department, the Consortium is a committee of the Community Collaborative Planning Council (CCPC) for the Oakland Transitional Grant Area (TGA) which includes Contra Costa and Alameda Counties.

II. OFFICE

The office of the Consortium shall be located in the City of Martinez, County of Contra Costa, at 597 Center Avenue, Suite 200, Martinez, California, 94553.

III. PARTICIPATION IN CONSORTIUM

General: The Consortium shall strive to ensure that its participants include representatives from the following areas:

- Individuals living with HIV/AIDS,
- Agencies and community-based organizations with a record of service to populations and subpopulations with HIV and/or organizations providing HIV Prevention Services,
- Public health agencies providing services to people with HIV, and
- Other community groups and individuals concerned about HIV Prevention and/or the care and services provided to people with HIV, including members of the CCPC.

Consortium meetings are open to all members of the public. Any individual who attends the Consortium may participate in discussions. Only Consortium members can vote in those matters which require formal action or decision making from the Consortium.

Membership: Any individual may apply to become a Consortium Member at any time. An application must be completed and submitted to the Contra Costa Health Services HIV/AIDS & STD (hereinafter “HIV/AIDS & STD.”) Attendance at a consortium orientation prior to submitting an application is highly encouraged, but not required. The application will be considered by the Executive Committee at its next regular meeting after the application is received. In formulating its recommendation on the application, the Executive Committee may consider among other information, the impact approval of membership may have on the Consortium’s ability to meet quorum requirements in future meetings. The Executive Committee will then present the application with its recommendation to the Consortium at its next regular meeting. If the application is accepted by a majority of the Consortium members at that meeting, the individual becomes a Consortium Member.
For CCPC members, membership in the Consortium meetings fulfills sub-committee participation requirements for the CCPC. Membership to the CCPC requires CCPC application.

**Term of Members:** No term limit is applied to membership. Members shall remain in good standing until the member either terminates her/his membership or until the member has not participated in Consortium or Consortium Committee meetings for a period of nine (9) months. If any disputes arise as to membership, the Executive Committee, after receiving appropriate input, will in its sole discretion resolve the dispute and make a final determination as to membership. Any membership which ends due to lack of participation may be reinstated by the Executive Committee with good cause. All Members must annually complete a conflict of interest form (Form 700). If a current conflict of interest form is not on file, Membership status, including voting privileges, will be suspended until the form has been completed.

**IV. DUTIES AND RESPONSIBILITIES**

In order to coordinate efforts and plan the community response to the AIDS epidemic, the Consortium shall oversee planning for both HIV prevention and care and treatment services in Contra Costa County. This responsibility includes:

- To assist with the development and delivery of eligible services that are compatible with existing Federal, State, local and regional plans regarding the provision of HIV prevention and services to individuals with HIV.
- To assess the HIV prevention and service needs in Contra Costa. The Consortium will utilize available needs assessment information such as Contra Costa Health Services Department data and epidemiology, available service data, and other appropriate information resources as well as other discrete assessment activities conducted by the Consortium as indicated to identify local needs.
- To prioritize HIV prevention populations and HIV service needs. CARE Act funding recommendations will be developed by the Consortium and presented to the Oakland TGA Collaborative Community Planning Council (CCPC) for review and approval.
- To ensure monitoring and evaluation of services provided.

**V. MEETINGS AND NOTICE**

All meetings of the Consortium shall have an agenda. The agenda will be prepared by the chairs of the Consortium and presented at the beginning of each meeting. General meetings will be held at least four times per year, the specific dates, times and locations to be determined by the Executive Committee. The chairs of the Consortium may call special meetings. All meetings of the Consortium and its committees shall be open to the public. Notice of meetings will be provided.

**VI. QUORUM**

**General Business Quorum:** A quorum shall be constituted for the transaction of business when at least 50% of members are present. A quorum is not required for the Consortium to meet and engage in discussions or provide input or general recommendations. A quorum is necessary to make binding Consortium decisions such as votes on membership, changes in Bylaws, funding recommendations or other matters that will affect the ongoing operation and functioning of the Consortium.

**Special Quorum for Annual Funding Allocation and Interim Reallocation Recommendations:** As described in Section VII, below, any private agency, community based organization, public agency or other entity which is represented by more than one member on the Consortium, only one member (determined by the entity) may vote when the Consortium makes its annual Funding Allocation Recommendations or makes recommendations regarding the reallocation of funds during the course of the year. For purposes of these actions, a quorum shall be constituted if at least 50% of the total number of Consortium members eligible to vote is present.
VII. VOTING AND DECISIONS

General Business: The Consortium shall strive to formulate general business decisions based on consensus. In those instances when consensus cannot be attained, a vote of the Active Members participating in the meeting will be called by the chairs. Decisions will be made by majority vote of all members in attendance in all matters requiring a vote except CARE Act Funding Decisions. Majority vote will be the majority of all non-abstaining members participating in any meeting at which a quorum has at any time been constituted.

Funding Decisions: As with general business decisions, the Consortium shall strive to formulate decisions based on consensus. Formal recommendations regarding CARE Act funding will be made by a majority vote of all members eligible to vote on funding matters provided a Special Quorum as described in paragraph VI, above, is constituted. Private agencies, community based organizations, public agencies or other equivalent entities who are represented by more than one member, must select one member as its representative for voting on any action involving allocation or reallocation recommendations. The selected member is the only member from that agency or entity who is eligible to vote in the funding decision. A majority vote will be the majority (over 50%) of all non-abstaining members eligible to vote in funding decisions.

Recording of Votes: At any time a vote regarding general business or CARE Act funding recommendations is taken, a record of the voting result shall be recorded and, upon request of any member, will reflect those for, those against and those abstaining from the vote. Any member may request a vote by ballot for the purpose of anonymity.

VIII. ABSTAINING/CONFLICT OF INTEREST

In accordance with the provision of Government Code, Section 1090 on Conflict of Interest and Section 87100 (the Political Reform Act of 1974) the following will apply:

- Consortium members will neither solicit nor accept gratuities, favors, or anything of monetary value from contractors or potential contractors.
- While members may participate in the discussion of service category needs, no member shall participate in the selection, award or administration of a contract when any of the following has a financial or other substantial interest in the contract: the council member, any member of his/hers immediate family; any business partner, an organization in which any of the above is/has been during the previous 18 months an officer, director, board member, employee, consultant or volunteer (over 20 hours per week).
- Unless in receipt of services provided by a specific agency responding to a Request for Proposals, clients are not considered to have a conflict and are encouraged to participate in the review of proposals and other activities so long as no conflict (as otherwise defined) exists.
- Consortium members shall annually sign a Conflict of Interest Policy Statement (Form 700) and will submit said statement to Contra Costa Health Services Department HIV/AIDS & STD. These forms will be made available for public viewing upon request. Members will not be considered active members without a current Form 700, and waive their right to vote on Consortium business until such time as membership is reactivated.

IX. OFFICERS ELECTIONS AND TERM

The Consortium shall have at least three chairpersons. The Consortium shall strive to have one chairperson who represents consumer issues or is an individual with HIV or has an affected family member. One chair who is the appointed representative of the Contra Costa Health Department for the Oakland TGA CCPC and one additional chair. The primary responsibilities of the chairpersons include:

- Call and facilitate Executive Committee and General meetings of the Consortium.
- Set agendas with input from members and staff
- Review minutes of all meetings,
- Coordinate the work of the committees,
- Review grievances pertaining to the Consortium and its activities,
- Act as spokesperson for the Consortium,
- Ensure involvement of People Living with HIV in the Consortium’s work and
- Present to the CCPC as required.
Chairs shall be elected for a term of one year. The Health Department CPCC member will remain in the chair role for the duration of the CCPC term. If a vacancy occurs in any chair position during the term of such position, it may be filled by special election. The newly elected chair will serve the remainder of the vacated term, which he or she has filled.

X. COMMITTEES
All committees with the exception of the Executive Committee shall be advisory to the full Consortium, and as such shall make recommendations to the Consortium.

Executive Committee: The Consortium shall have an Executive Committee, which is comprised of the Consortium chairpersons, and any other members appointed by the Consortium. The maximum number of Executive Committee members shall be four. HIV/AIDS & STD staff shall call the Executive Committee meetings and participate in meetings. The terms of Executive Committee members shall run concurrently with the terms of the chairpersons. The Executive Committee shall have the authority to make decisions on behalf of the Consortium on any matter which requires action be taken before the next regularly scheduled Consortium meeting. When time allows, the Executive Committee may solicit feedback from Consortium Members by electronic or other means of communication. Any decisions made and actions taken by the Executive Committee shall be reported to the Consortium at the next Consortium meeting.

Other Committees: In addition to the Executive Committee, the Consortium may constitute any additional Committees necessary to conduct business and improve the work and services of the Consortium. Eligibility criteria for membership in any such committees shall be determined at the time the Committee is constituted and may be modified thereafter as determined to be appropriate. The HIV/AIDS & STD may require as part of a funded agency’s work plan, participation in selected committees. All committees shall strive to be representative in demographics.

XI. REMOVAL OF MEMBERS AND OFFICERS FROM OFFICE
Complaints with the improper conduct of any member or officer of the Consortium will be submitted in writing to the Contra Costa Health Services Department HIV/AIDS & STD, which will in turn acknowledge receipt of the complaint in writing within ten working days of receipt. The acknowledgment will include a specific plan for independent review of the complaint and a time frame for resolution.

Should the review process determine that an individual or individuals should be removed from office and/or barred from further Consortium activities, the individual will be dropped from the roster.

Recipients of this action are allowed to submit and appeal in writing within 5 working days to the Director of Public Health at:

Contra Costa Health Services Department
597 Center Avenue, Suite 200
Martinez, CA 94553

XII. GRIEVANCES
The Consortium will utilize the Oakland Transitional Grant Area (TGA) Grievance Policy and Procedures to prevent and address concerns about the Consortium or Ryan White Part A programs. Grievance will approve by the Consortium Executive Committee before proceeding to the CCPC.

XIII. AMENDMENTS
These procedures may be modified or amended by a two-thirds majority vote of Active Membership at any Consortium meeting in which a General Business Quorum is constituted.