NEW JERSEY
HIV/AIDS PLANNING GROUP

POLICY AND PROCEDURES MANUAL

Ratified 11/19/15
## Index

<table>
<thead>
<tr>
<th>Policy 1.0</th>
<th>NJHPG Structure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy 1.1</td>
<td>Guidelines</td>
</tr>
<tr>
<td>Policy 2.0</td>
<td>NJHPG Meetings</td>
</tr>
<tr>
<td>Policy 2.1</td>
<td>Voting</td>
</tr>
<tr>
<td>Policy 2.2</td>
<td>Parity, Inclusion and Representation (PIR)</td>
</tr>
<tr>
<td>Policy 2.3</td>
<td>Meeting Attendance</td>
</tr>
<tr>
<td>Policy 2.4</td>
<td>Absences from Main NJHPG Meetings</td>
</tr>
<tr>
<td>Policy 2.5</td>
<td>Absences from NJHPG Committee Meetings</td>
</tr>
<tr>
<td>Policy 2.6</td>
<td>Appeals*</td>
</tr>
<tr>
<td>Policy 2.7</td>
<td>Conference Attendance</td>
</tr>
<tr>
<td>Policy 2.8</td>
<td>Alternates</td>
</tr>
<tr>
<td>Policy 2.9</td>
<td>Leave of Absence</td>
</tr>
<tr>
<td>Policy 3.0</td>
<td>Nominations Process*</td>
</tr>
<tr>
<td>Policy 3.1</td>
<td>Member-Elect Orientation</td>
</tr>
<tr>
<td>Policy 3.2</td>
<td>Input from Non-NJHPG Members</td>
</tr>
<tr>
<td>Policy 3.3</td>
<td>Project Development</td>
</tr>
<tr>
<td>Policy 3.4</td>
<td>Presentations to the NJHPG</td>
</tr>
<tr>
<td>Policy 4.0</td>
<td>Confidentiality &amp; Privacy*</td>
</tr>
<tr>
<td>Policy 4.1</td>
<td>Breaches of Confidentiality</td>
</tr>
<tr>
<td>Policy 5.0</td>
<td>Conflict of Interest*</td>
</tr>
<tr>
<td>Policy 6.0</td>
<td>Dispute Resolution*</td>
</tr>
<tr>
<td>Policy 7.0</td>
<td>Travel Reimbursement*</td>
</tr>
<tr>
<td>Policy 7.1</td>
<td>Phone Call Reimbursement</td>
</tr>
<tr>
<td>Policy 8.0</td>
<td>Access to Current Information</td>
</tr>
<tr>
<td>Policy 9.0</td>
<td>Media</td>
</tr>
<tr>
<td>Policy 10.0</td>
<td>Capacity Building</td>
</tr>
<tr>
<td>Policy 11.0</td>
<td>Amendments</td>
</tr>
</tbody>
</table>

* This is a policy which refers to a corresponding form.

## Appendices

<table>
<thead>
<tr>
<th>Appendix I</th>
<th>Application for Membership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix II</td>
<td>Membership Appeal Form</td>
</tr>
<tr>
<td>Appendix III</td>
<td>Confidentiality Pledge Form</td>
</tr>
<tr>
<td>Appendix IV</td>
<td>Conflict of Interest Disclosure Form</td>
</tr>
<tr>
<td>Appendix V</td>
<td>Dispute Resolution Form</td>
</tr>
<tr>
<td>Appendix VI</td>
<td>Travel Reimbursement Form</td>
</tr>
</tbody>
</table>
Policy 1.1 Guidelines

1. All Main, HIV/AIDS Issues Committee, HIV/AIDS Prevention and Care Collaborative Committee and Gay Men’s Committee meetings are open to the public.
2. All meetings will comply with the Americans with Disabilities Act (ADA).
3. There will be a section in every main meeting for public comment.
4. The NJHPG has the discretion to invite an individual or entity who represents a profession, population or community that is not represented by the current membership.
5. The NJHPG strives to make every reasonable accommodation to break down barriers that would prevent access to participation.
Policy 2.0  *NJHPG Main Meetings*

To foster a community planning process that encourages inclusion and parity among Planning members and the community at large.

**Procedure**

1. Meetings will be in compliance with the Americans with Disabilities Act (ADA).
2. Unless otherwise noted, full NJHPG meetings will be held on the third Thursday of each month.
3. NJHPG Support Staff will provide written notification of each NJHPG meeting at least one week in advance of the meeting. The notice will include a draft agenda for the meeting and the minutes of the previous meeting.
4. Meetings are held in a central location, unless otherwise noted, on Rutgers University campuses. The meetings will be held within close proximity of public transportation to include bus and rail.
5. Meetings start at 9:30 A.M. and will end upon adjournment.
6. Roll will be called at the beginning of the meeting.
7. The full NJHPG meetings are open to the public.
8. There will be time set aside on the agenda during the NJHPG meetings for public comment.
Policy 2.1  Voting

As stated in Article VI, Section 4 of the By-Laws and the process as outlined in Robert’s Rules of Order.
Policy 2.2  Parity, Inclusion and Representation (PIR)

The NJHPG defines Parity, Inclusion and Representation (PIR) as follows:

**Parity:** The ability of community planning group members to equally participate and carry-out planning tasks or duties in the community planning process. To achieve parity, representatives should be provided with opportunities for orientation and skills-building to participate in the planning process, and have equal voice in voting and other decision-making activities.

**Inclusion:** Meaningful involvement of members in the process with an active voice in decision making. An inclusive process assures that the views, perspectives, and needs of all affected communities are actively included.

**Representation:** The act of serving as an official member reflecting the perspective of a specific community. A representative should reflect that community’s values, norms, and behaviors, and have expertise in understanding and addressing the specific HIV prevention and HIV care and treatment needs of the population. Representatives also must be able to participate in the group and objectively weigh the overall priority prevention needs of the jurisdiction.

To ensure PIR is met, the following steps will be taken:

1. Any person may submit an application to the NJHPG. Members are selected through an open nominations process to ensure an inclusive community planning process (refer to By-Laws, Article III, Section 1).
2. Representatives of varying races/ethnicities, genders, sexual orientations, ages, and other characteristics, to include educational backgrounds and socioeconomic status, populations at highest risk for HIV transmission are included, and represented by persons with personal or professional expertise. These individuals must be able to represent the needs, concerns and issues of a specific population and community (for Procedure, see Policy 3.1 Nominations Process). While assessing membership gaps, the Governance Committee will ensure that all CDC and HRSA funding requirements including all Ryan White Parts, Service Categories and HIV Prevention Priority Populations and Services are met.
3. At least annually, NJHPG members will be asked to fill out the Community Service Assessment (CSA).
4. Twice a year, NJHPG Support Staff will provide DHSTS with an update on PIR for the NJHPG for the CDC mandated Interim Progress Report and the CDC application.
Policy 2.3  Meeting Attendance

To ensure that members meet their membership responsibilities.

Procedure

1. See Article VI, Section 3 of the By-Laws for the main meeting attendance policy and Article IV, Section 3 for the committee attendance policy.
2. NJHPG members are expected to attend all main meetings and participate in at least one committee.
3. NJHPG staff will maintain attendance records for all scheduled main, committee and workgroup meetings and all capacity building sessions scheduled.
4. Within two months of election, all members are required to join and participate in at least one committee. Meetings are scheduled at the convenience of the committee.
5. See Policy 2.7 for the Appeals Process
Policy 2.4  
Absences from Main NJHPG Meetings

The NJHPG understands that even with a committed membership, physical, social, and professional obligations may conflict with meeting attendance. Any member with: 1) three unexcused absences within a 12 month period; 2) five total absences within a 12 month period; or 3) two consecutive unexcused absences will be considered to have resigned.

Procedure

1. 
*See Article VI, Section 3 (1st Bullet Point) of the NJHPG By-Laws for excused absences.*

2. 
Upon review of the Attendance Grid by the Executive Committee, a member who is not in compliance with the Attendance Policy is determined by the Executive Committee to have resigned.

3. 
Anyone notified by NJHPG Support Staff may appeal to be reinstated in writing to the NJHPG Executive Committee within 30 days of the notice (see Policy 2.7).
Policy 2.5  Absences from NJHPG Committee Meetings

If a committee member has more than two unexcused absences from committee meetings or three consecutive absences from committee meetings in a year (whether excused or unexcused), they will be considered to have resigned as a member of the committee.

Procedure

1. *See Article VI, Section 3 of the By-Laws* for excused absences.
2. Upon review of the Attendance Grid by the Executive Committee, an individual who is not in compliance with the Attendance Policy is determined by the Executive Committee to have resigned.
3. Those members are notified by NJHPG Support Staff and may appeal to be reinstated in writing to the Committee Chair.
Policy 2.6  Appeals

In order to ensure fair and just accommodation to all NJHPG members, an optional appeal process has been established. This process will assure no members are excluded from the NJHPG without just cause or a proper opportunity to respond.

Procedure

1. Anyone notified by NJHPG Support Staff under this rule may appeal in writing to the NJHPG Executive Committee within 30 days of the written notice.
2. The Executive Committee will meet to consider the appeal within 60 days of receiving the appeal. The person appealing will be notified in writing of the date, time and location of the meeting during which the appeal is to be heard. As part of the process, during the session in which the Executive Committee is considering the appeal, the person appealing under this rule may present information either orally or in writing to the Executive Committee stating the reasons (e.g., illness) why he/she should be reinstated as a member.
3. Within 15 days of the Executive Committee meeting, the Committee will answer the appeal, stating its decision.
4. After successfully appealing a deemed resignation, and beginning at the date of reinstatement, members will comply with the following attendance policy for the next six meetings or will be considered to have resigned: no unexcused absences and up to two excused absences will be allowed. The existing appeal process will also apply to this rule.

See Appendix II: Membership Appeal Form
Policy 2.7  Conference Attendance

To encourage maximum representation and opportunities for members to participate in skills building, educational and other HIV related conferences as funding permits.

Procedure

1. On an ongoing basis, the Executive Committee will entertain written requests for conference support from NJHPG members. If the Executive Committee is unable to meet in time to respond to a request, the decision may be made by the Chair. A member should submit an application prior to the conference registration deadline. The written request should explain how the NJHPG will benefit from the member’s attendance, which workshops will be attended and agree to make a presentation to the NJHPG.

2. The Executive Committee will provide scholarship(s) based on the following factors:
   • Budget allowance
   • NJHPG Objectives
   • How the NJHPG will benefit
   • Economic Hardship
   • Members must be "in good standing"* with their NJHPG membership, committee membership, and Executive Committee membership (if applicable)
   • Members who have previously fulfilled their obligations under this policy.

3. The funded members’ obligations are:
   • To provide a report/presentation to the NJHPG on what they learned at the conference and/or training.
   • To provide receipts of all expenditures.
   • To attend all funded conferences and/or trainings. If members change their travel plans or fail to attend, they shall not be considered for future funding except in exigent circumstances.

* A member in good standing is a member who has fulfilled his/her main meeting attendance requirements (See Policy 2.4: Meeting Attendance).
Policy 2.8  *Alternates*

Members who are granted a Leave of Absence may designate an alternate. (NJHPG Members may update their Membership Application at any time.)

An alternate represents the NJHPG member but may not assume an officer position. Alternates are responsible for following all membership procedures as described in the NJHPG By-Laws.

**Procedure**

- An alternate shall be selected by the individual who needs the alternate personally and reviewed by the Governance Committee
- An applicant must have:
  1. Designated interest in being an NJHPG Alternate
  2. Completed an NJHPG Membership Application
  3. Confirmed as appropriate for NJHPG membership
  4. Conducted a phone interview, by Support Staff, to ensure that the individual is able to meet the time commitment required of an NJHPG member
  5. Completed the NJHPG Orientation
- Upon completion of the Governance Committee’s review process, the applicant is presented at the next Main NJHPG meeting for ratification. Upon ratification, the applicant is appointed as an Alternate.
Policy 2.9  Leave of Absence

See Article III, Section 7 of the By-Laws for Leave of Absence

Procedure

• Support Staff will notify an individual, in writing, if the Executive Committee has granted their leave of absence to include the following:
  o Effective beginning and end dates
  o Absences to date
  o Option of an Alternate
  o At the end of the leave, the NJHPG Attendance policy (attached) becomes applicable
• If an individual is unable to return to the NJHPG, they should contact Support Staff
• Should the individual not respond, Support Staff will place a follow-up call
• Any failure to return to NJHPG meetings will be referred to the Executive Committee
Policy 3.0  Nominations Process

Procedure

1. Applications for membership to the NJHPG will be distributed statewide, through a variety of venues, to interested individuals. Applications will be effective for 12 months.

2. Applications are to be forwarded to the NJHPG staff member assigned to maintain a confidential central file. The NJHPG staff will review each application for accuracy and interview each prospective applicant. Additional information will be shared with the prospective member during this interview, to include membership requirements. The Chair of the Governance Committee will be kept updated on the status of the applicant pool.

3. Active solicitation of membership applications will be ongoing, with biannual reviews of the Applicant Pool. A Nominations Meeting will be called immediately should membership fall below 30. A date will be set, and Governance Committee members will be notified in the form of the Meeting Announcement.

4. When reviewing applications, Governance Committee members must be physically present to participate.

5. The Governance Committee will be provided copies of the applications and will be reminded that the information contained within the applications is strictly confidential. All applications will be collected at the end of each meeting.

6. Each Governance Committee member is provided current membership demographics, relevant expertise and State epidemiological data to facilitate identifying membership gaps and prioritizing those gaps. Membership demographics will be updated each time there is a change in the NJHPG membership.

7. Applications are reviewed based on the prioritized demographic gaps in NJHPG membership. Membership applications will be assigned a numerical value (i.e. 5, 3, 1) according to the identified gaps. The sum of these values becomes the applicant’s total score.

8. The number of vacancies to be filled is determined by majority vote. If there are insufficient nominations to fill priority gaps, the Governance Committee can choose to reserve vacancies by majority vote. The NJHPG is committed to Parity, Inclusion and Representation (PIR), as defined in Policy 2.3 of the NJHPG Policy and Procedures Manual. The Governance Committee will not recommend applicants for membership who would negatively impact the NJHPG’s PIR.

9. Using the applicants’ total score and overall application information, the Governance Committee will determine and vote on which applicants will be included for nomination to the full body.

10. A Governance Committee member will contact each nominee to ascertain if the nominee wishes to continue in the process and is able to commit to the membership requirements.

11. A final slate of nominees, along with biographies and current membership demographics, is prepared and distributed to the full group for voting in a closed session.

12. Each NJHPG member votes by closed ballot (yes, no, abstain) on each of the nominees on the slate. New members will be added upon a 2/3 majority vote of the current members present and voting.

13. Nominees will be notified of the results of the election by the NJHPG Staff in writing within two weeks of the member election.

14. The applications that did not make the slate will be placed back into the pool of applications for future consideration.

15. The proceedings related to personnel (i.e. nominees) in the Nominations Process shall be kept confidential and will not be included in the meeting minutes.
Policy 3.1  Member-Elect Orientation

All members of the New Jersey HIV/AIDS Planning Group are required to complete the online orientation in order to be able to make informed decisions in the voting process.

Procedure

1. A member-elect is an individual who has been elected, but has not completed the online orientation and shall not be considered for establishing a quorum.
2. Members-elect will not have the privilege to vote on any matter or make a motion or second a motion until they have completed the online orientation.
3. The member-elect is expected to complete the online orientation prior to the next Main Meeting or within 30 days, whichever is sooner.
4. If a member-elect has not completed the orientation within 60 days, he/she will be considered to have resigned.
5. The member-elect will have the option of appealing this resignation to the Governance Committee.
6. The orientation will be created by and include topics designated by the Governance Committee including discussion of the By-Laws, Policy and Procedures Manual and the HIV planning process.
Policy 3.2  Input from non-NJHPG Members

NJHPG will utilize effective input mechanisms to access information from the community, particularly from the key populations.

Procedure

1. NJHPG meetings are open to the public and announced via:
   a. NJHPG website
   b. TGAs and EMA
2. NJHPG meetings will have a dedicated time for public comment.
3. NJHPG, with the input from work groups, committees, and the public, will follow the needs assessment process (for example, holding focus groups) to obtain valuable information on the HIV prevention and HIV care and treatment needs of the community.

Needs Assessment Process

Overview

To encourage parity, inclusion and representation on the NJHPG and its committees in the identification of target populations and geographic areas to be studied in the ongoing assessment of needs, the Issues Committee has developed the following timeline.

Action Plan

The NJHPG will guide the study of specific target populations as part of the needs assessment process, using the following protocol:

1. The Issues Committee will notify all NJHPG members about the meeting dates, times and agendas when the needs assessment process will be discussed.
2. By April 1st and October 1st of each year the NJHPG committees will provide to the Issues Committee their recommendations for target populations to be studied, based on surveillance data, the literature searches and identified gaps in services.
3. At the May and November NJHPG meeting each year, the Issues Committee will facilitate discussion of the Issues Committee's recommendations. At that meeting, the Issues Committee will allow time for discussion and facilitate the selection of target populations to be studied during the coming year. The Issues Committee will provide information about time constraints and financial support available to conduct the needs assessment. Final vote of the target populations to be studied will be accepted by the NJHPG.
4. In June and December of each year, the Issues Committee will engage in the planning of needs assessment methodologies, which may include panel discussions, group sessions, focus groups, public hearings, literature searches and other appropriate means.
5. By December 31st and June 30th of each year, the Issues Committee will conduct the needs assessment, including a report of its findings. Assistance and support from the NJHPG members will be encouraged.

At the next scheduled NJHPG meeting, the findings of the needs assessment will be presented to the NJHPG prior to the development and/or update of the New Jersey Comprehensive HIV Prevention and Care Services Plan.
Policy 3.3  Project Development Policy

To assure that all projects promote NJHPG goals and objectives and/or adhere to policies and procedures.

Procedure

1. If any project of the NJHPG is proposed, it should be presented by a standing committee to the Executive Committee.
2. If any project of the NJHPG is to be formed, the Executive Committee must endorse its purpose, methodology, and expenses (if applicable).
3. The committee chair must designate a person to act as a liaison to keep the Executive Committee apprised of the project's progress and final outcomes.
Policy 3.4  Presentations to the NJHPG

To assure that NJHPG members understand the objectives and conclusions of presentations, and/or their relationship to HIV prevention and HIV care and treatment.

Procedure

1. All committees or individuals bringing presentations to the NJHPG should 1) identify and provide written objectives for the presentation, 2) provide panel questions for review, if applicable, and 3) provide written conclusions about the presentation, including what action steps or follow up needs to be addressed.
2. The information should be submitted by the presenter and the Executive Committee.
3. This information has a recommended timeline of two months in advance, but no less than one month in advance.
NJHPG members and guests will:

- Understand the importance of maintaining confidentiality of members both within and outside of the group setting.
- Recognize one's own personal biases.
- Develop an awareness of one's own moral beliefs and the importance of putting judgment of others aside to achieve the goals of NJHPG.
- Assure participants that their views or their medical, legal, or sexual orientation will be held in confidence.

A NJHPG member has a moral and ethical responsibility to adhere to confidentiality standards apart from their affiliation with the NJHPG. Likewise, all guests are expected to adhere to this code of ethical conduct. Respect for the dignity and privacy of participants is of paramount concern in community planning.

**Procedure**

Rights to confidentiality and anonymity: Members will have the right to have their privacy and confidentiality respected. However, privacy and confidentiality of present members presents particularly difficult problems given the CDC reporting requirements and the relative small number of members.

1. All members will be required to sign a Confidentiality Pledge annually (see attachment).
2. At the beginning of each main NJHPG meeting, the Confidentiality Pledge shall be read.
3. If NJHPG has knowledge that media is present at a meeting, an announcement will be made acknowledging their presence.
4. Care should be taken not to compromise the privilege of any information obtained within the NJHPG meetings or its committees whether public or private.
5. NJHPG staff will take appropriate measures relating to the storage and security of records both written and electronic. The NJHPG staff will use, where appropriate, such means as the removal of identifiers, the use of pseudonyms and other technical solutions to the problems of privacy in field records and in oral and written forms of data dissemination:
   a. Staff will endeavor to anticipate problems likely to compromise anonymity; but they should make clear to participants that it may not be possible to guard confidentiality when the individual makes a public disclosure such as a statement in an open meeting;
   b. No member's HIV status and/or sexual orientation will be disclosed or discussed in any NJHPG function unless the member does so personally at that function.

See Appendix III: Confidentiality Pledge Form
Policy 4.1  Breaches of Confidentiality

To assure every effort is made to protect the privacy and dignity of NJHPG members and guests.

Procedure

1. Breaches will be handled immediately and determined to be one of two types:
   a. Accidental (unintended lapses of judgment)
   b. Deliberate with malicious intent
2. Accidental breaches will be handled privately with only involved parties.
   a. The member whose confidentiality was breached may file a grievance, per the Dispute Resolution Policy 6.0.
3. Deliberate or multiple breaches may result in loss of membership status and/or guest privileges.
   a. Formal fact gathering will be conducted by the At-Large Members of the Executive Committee.
   b. Findings will be presented to a specially formed dispute resolution group and a majority rule decision will be rendered.
   c. The aggrieved and offending member or guest will receive the decision in writing and will have 5 working days to file an appeal.
4. All breaches of confidentiality will be documented.
The purpose of the Conflict of Interest policy is to ensure that the deliberations and decisions of the NJHPG are made in the interests of the community as a whole, and to protect the interests of HIV prevention and HIV care and treatment in New Jersey.

Definitions

Conflict of Interest: A "Conflict of Interest" is when any of the following occurs:

- A NJHPG member knows that the conduct of the NJHPG on a specific issue is likely to result in compensation to the NJHPG member or their affiliated agency, a close relative, a domestic partner, or a member of the household of the NJHPG member or family member.
- When a NJHPG member knowingly takes action or makes a statement intended to influence the conduct of the NJHPG in such a way as to confer any financial benefit on the member, family member(s), or on any organization s/he is an employee of and/or has a significant interest in.
- NJHPG members who are advocates for particular group(s), rather than take part in a process intended to meet the needs of many groups.

Compensation: "Compensation" includes direct and indirect financial gain as well as gifts or favors that are substantial in nature.

Family: The "family" of any individual will include only his or her spouse; child; parent; siblings and their spouses.

Procedure

1. Upon election, each NJHPG member will complete and sign the Conflict of Interest Disclosure Form (see attached), disclosing any and all professional and/or personal affiliations with agencies that pursue HIV prevention and HIV care and treatment funding.
2. The Conflict of Interest Disclosure Form will be completed annually (or as needed) for all active NJHPG members.
3. A member with an actual or perceived conflict of interest is required to identify the conflict before discussion regarding the NJHPG issue.
4. The formal NJHPG record will reflect each member with the stated conflict of interest.
5. On issues where a group member has a conflict of interest, that member may not participate in discussion or vote on the issue; however, he/she may attend the discussion and may answer specific questions that are posed to him/her.
6. A group member may not lobby for a program that would directly benefit him/her or any organization in which he/she is an employee or has significant interest.
7. A group member may not be paid for services rendered to the group.

See Appendix IV: Conflict of Interest Form
Policy 6.0  
**Dispute Resolution**

The purpose of dispute resolution is to eliminate personal disagreements that influence the group.

**Procedure**

- Any member, alternate or staff member, can "Call for Conflict" at a meeting by raising their hand (and then completing the dispute resolution form) or at any time filing a dispute resolution form.
- Every member and alternate will receive a copy of the dispute resolution form at the annual business meeting and additional forms can be obtained from staff or the At-Large Executive Committee members.
- New members will receive a copy of the dispute resolution form in their Orientation Manual.
- The dispute resolution form must be submitted within 90 days of the dispute. In the event of illness, verbal contact must be made with the NJHPG Project Director or an At-Large Executive Committee member within 90 days of their intent to file a dispute resolution form and will be assisted in completing the form, if necessary. The individual filing the dispute resolution form may be directly involved in the dispute or may be a third party to the dispute.
- The NJHPG Chair and the two At-Large members will comprise the dispute resolution group.
- Upon receipt of the dispute resolution form, the staff will send a letter to the grievant stating that their dispute resolution form was received.
- Upon receipt of the dispute resolution form, the staff will send a letter to the grievee(s) stating that a dispute resolution form has been received.
- When a dispute resolution form is filed with NJHPG Chair, or one of the two At-Large members, the information will be shared with the remaining members of the work group within 10 business days.
- The first order of business for the work group will be to review the NJHPG By-Laws and other NJHPG Policies to determine an informal or formal resolution. If the work group determines that a formal resolution is required, they will recruit other appropriate members and hold a larger work group meeting.
  - **Informal** issues are those that are already addressed through the NJHPG By-Laws or other NJHPG policies.
  - **Formal** issues that call for a larger work group to be formed for review and resolution will consist of a minimum of 5 NJHPG members. This group will consist of at least one At-Large member, no more than one committee chair, and no more than one Chair or Vice Chair. The dispute resolution group will select the members based on conflict of interest regarding the nature of the dispute. This rule will override the group composition requirement. The remainder of the work group will be chosen by random selection via lottery. Membership will be maintained on a rolling basis for this work group.
- The dispute resolution group will select a date and time for the larger work group to meet, and then call upon the membership pool. The meeting will be set within 10 business days after a formal resolution was determined to be needed.
- The larger work group must produce a written resolution within one session.
- The staff will send a letter to all parties involved informing them of the recommendation for resolution.
- In the event of a breech in confidentiality or inability of the work group to resolve the dispute, the issue will be forwarded to the Executive Committee.

*See Appendix V: Dispute Resolution Form*
Policy 7.0  Travel Reimbursements

The NJHPG will take whatever steps necessary to ensure community participation in full group and committee meetings. Travel reimbursements will be given if available.

Procedure

Eligibility for Reimbursement

- HIV+ and/or community members whose agencies/employers do not support meeting attendance and the result is financial loss for the members to attend;
- Members and/or Alternates who are "in good standing" with attendance requirements as stated in the NJHPG By-Laws;
- Members and/or Alternates who are unemployed;
- Members and/or Alternates who are employed and for whom attendance creates a financial hardship (defined as a loss of income).

The New Jersey HIV prevention and HIV care and treatment Community Planning process is designed to include representation of all groups affected by the HIV/AIDS epidemic in New Jersey. To facilitate attendance at planning group meetings, remuneration will be provided to eligible community members. The payment will include travel expense reimbursement, including tolls, taxi, bus, train and parking. Mileage will be reimbursed at the prevailing rate.

The Travel Reimbursement form must be fully completed by NJHPG members or alternates in order to receive travel reimbursements. Members/alternates have up to 60 days to submit for travel reimbursement. Incomplete forms will delay processing. Members/alternates must attach ALL original receipts (no copies) and sign their name at the bottom of the form.

See Appendix VI: Travel Reimbursement Form
Policy 8.0 Access to Current Information

The health department assures that NJHPG has access to current information related to HIV service needs and analyses of the information, including potential implications for HIV services in New Jersey.

1. Sources of information include evaluations of program activities, local program experience, programmatic research, the best available science, and other sources, especially as it relates to the at-risk population groups within a given community and the priority needs identified in the comprehensive plan.
2. Identification, interpretation, and prioritization of HIV service needs reflect the epidemiologic profile, needs assessment, resource inventory and culturally relevant and linguistically appropriate information obtained from the communities to be served, particularly persons with or at risk for HIV infection.
3. Obtaining accurate and relevant information and analysis of HIV/AIDS in New Jersey is essential to making informed decisions and setting priorities for HIV prevention and HIV care and treatment activities.
4. The New Jersey Department of Health, Division of HIV, STD and TB Services (DHSTS) has assured access to current information related to HIV prevention and HIV care and treatment.

Procedure

NJDOH, DHSTS will provide:

1. The Epidemiologic (epi) Profile to NJHPG in a timely manner in order to assist in the setting of priorities. The epi profile will inform NJHPG of emerging public health trends, including HIV/AIDS and other related health issues such as STDs, TB, syphilis among MSM (men who have sex with men), Hepatitis C, Hepatitis A and B.
   a. Mini presentations will be provided to the Issues Committees on an ongoing basis to ensure a thorough understanding of the data in terms that are meaningful (culturally and linguistically relevant) to the members.
   b. Committees may list areas of concern or apparent trends to be considered for analysis; this list will be submitted to the state epi representative for research purposes.
   c. The full NJHPG membership will receive a complete epi profile presentation once per year and on request as needed.
2. Presentations and Panel Discussions
   a. Representatives from funded programs are invited to full NJHPG meetings as well as committee meetings to participate in panel discussions regarding their experiences and observations.
   b. Key informants are invited to full NJHPG meetings as well as committee meetings to participate in panel discussions regarding their treatment experiences, current risk behaviors that are being witnessed, as well as HIV prevention and HIV care and treatment needs of particular high-risk groups.

The resource inventory and ongoing needs assessment will be developed and monitored through collaboration of committees and HP CSPDI. HP CSPDI is available to conduct literature searches regarding programmatic “best practices,” and other available science as it relates to the Comprehensive Plan.
Only DHSTS (or a designee determined by them) may communicate views and provide information to the media on behalf of the NJHPG or its planning processes.
Policy 10.0  **Technical Assistance**

NJHPG will access technical assistance (TA), from a variety of sources, to increase its ability to carry out the HIV prevention and HIV care and treatment community planning process.

**Procedure**

**Objectives**

Provide TA to members regarding the process and expected outcomes of community planning.

- NJHPG's designated point of contact to access TA is through committee chair, then to Executive Committee, then to DHSTS.

**Administration:**

- Policies and procedure development
- Quality Assurance
- Grant Writing

**Strategies and Interventions:**

- Program design and development
- Behavioral science
- Program implementation
- Evaluation
Policy 11.0  Amendments to the Policies and Procedures and By-Laws

The intent of the Policy and Procedure manual is to formally operationalize the activities of the NJHPG.

**Procedure**

This Policy and Procedure Manual and the By-Laws must be amended at any regular meeting of the NJHPG. All proposed changes must be submitted to the Governance Committee. All recommended changes will appear on a ballot for ratification at a Main Meeting. Written notice of the proposed change shall be sent to each member at least two weeks prior to the date of the meeting. All proposed change votes shall be conducted by closed ballot per Article or Policy. Policy and Procedure Manual and By-Law changes require a two-thirds vote of the Planning Group members present and voting; abstentions shall be counted as non-votes.
APPENDIX I

APPLICATION FOR MEMBERSHIP
The New Jersey HIV/AIDS Planning Group (NJHPG) is the primary statewide planning group for the Division of HIV, STD and TB Services (DHSTS). The NJHPG is responsible for the development of the State's HIV/AIDS comprehensive services plan, and conducts the planning mandates of both the Centers for Disease Control and Prevention’s (CDC) HIV Prevention Community Planning and Ryan White medical care and treatment services. The NJHPG includes fair representation among governmental and non-governmental providers, affected communities and persons at risk for or living with HIV. Up to 40 individuals are selected to serve on the NJHPG.

Selection Process and Criteria
Applicants for NJHPG membership are encouraged to participate in the orientation, planning process, workgroups and HIV/AIDS Issues Committee. Applications are kept on file for a period of 12 months to be considered as vacancies occur. When vacancies occur, applications for membership are reviewed by the Governance Committee, as related to areas of expertise, demographics (race/ethnicity, gender, geography, etc.) and community representation (e.g. LGBTQI, IDU, Sex Workers, Youth, MSM, Substance Users, etc.) as reflected by the HIV epidemic in New Jersey. (An applicant may be contacted by NJHPG Support Staff or Governance Committee member(s) to explain the application.) The Governance Committee selects a slate of nominees so that the NJHPG membership reflects the epidemic in New Jersey and presents those applicants to the NJHPG at a main meeting to vote upon for membership by closed ballot.

The NJHPG is committed to Parity, Inclusion and Representation (PIR), as defined in Policy 2.3 of the NJHPG Policy and Procedures Manual. The Governance Committee will not recommend applicants for membership who would negatively impact the NJHPG’s PIR.

Time Commitment of Membership
The term for elected NJHPG members is two years with the possibility of reappointment; and, all members are expected to have the express support of their employer (if employed) and to commit to all of the following:

- Completion of an online orientation before gaining voting privileges
- Participation in monthly NJHPG meetings (held the third Thursday of the month) as well as monthly participation in at least one committee (in addition to the monthly NJHPG meetings)
- Preparation for each meeting by reading any materials sent
- Consideration of the needs of the community over individual or agency needs

Note: HIV positive individuals may have a designated alternate, of their choice with endorsement of the NJHPG, to help them fulfill their membership commitments as proscribed in Policy 2.4 of the NJHPG Policy and Procedures Manual.

NJHPG Committees
The Governance Committee works on the membership process and member nominations, by-laws, policy and procedures and constitutional issues of the NJHPG and is limited to members of the NJHPG.

The HIV/AIDS Issues Committee works to improve the effectiveness of New Jersey’s HIV/AIDS care and treatment and prevention programs, addresses consumer issues, service delivery challenges, conducts needs assessments, prioritization of gaps, review of treatment interventions, etc.

The HIV/AIDS Prevention and Care Collaborative Committee Works to help develop a broader coalition for prevention and care while helping to create a uniformed approach around New Jersey HIV Planning Group’s issues.

The Gay Men’s Committee provides a forum where gay and bisexual men and service providers can share up-to-date information and network in order to increase capacity of quality services for gay and bisexual men in New Jersey, highlight the ever-changing health disparities that affect gay and bisexual men, and afford gay and bisexual men a space to objectively speak about topics other than HIV.

____ Initials
Instructions to Applicants
All applicants are required to initial each page of the application and to sign the enclosed Release of Information and Certification at the end of the application. Employed applicants must have their employer sign the Supervisor Letter of Agreement allowing the applicant to attend all NJHPG full group and committee meetings.

NEW JERSEY HIV/AIDS PLANNING GROUP (NJHPG) MEMBERSHIP APPLICATION

1. Contact Information

<table>
<thead>
<tr>
<th>NAME:</th>
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</thead>
<tbody>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>City:</td>
</tr>
<tr>
<td>Phone:</td>
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<tr>
<td>E-mail:</td>
</tr>
<tr>
<td>Organization (if applicable):</td>
</tr>
</tbody>
</table>

Geographic Area of Your HIV/AIDS Involvement:
Please check either Statewide or County Planning Region

□ County Planning Region (Identify below):
  - Cumberland
  - Bergen-Passaic
  - Monmouth-Ocean
  - Middlesex-Somerset-Hunterdon
  - Middlesex-Somerset-Hunterdon
- Hudson
- Mercer
- Atlantic-Cape May
- Essex, Morris, Sussex, Union and Warren
- Burlington, Camden, Gloucester and Salem

□ Statewide
If you checked more than one Geographic Area, please explain:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

2. Demographics

<table>
<thead>
<tr>
<th>Gender:</th>
<th>Race/Ethnicity:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>African American/Black</td>
</tr>
<tr>
<td>Female</td>
<td>Asian/Pacific Islander</td>
</tr>
<tr>
<td>Transgender</td>
<td>Caucasian/White</td>
</tr>
<tr>
<td>MTF</td>
<td>Latino/Latina</td>
</tr>
<tr>
<td>Age:</td>
<td>Native American/Alaska Native</td>
</tr>
<tr>
<td>19 or under</td>
<td>Other (Must Specify): ________________________________</td>
</tr>
<tr>
<td>20 - 24</td>
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<tr>
<td>25 - 29</td>
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<td>30 - 39</td>
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<tr>
<td>40 - 49</td>
<td></td>
</tr>
<tr>
<td>50+</td>
<td></td>
</tr>
</tbody>
</table>

Initials
Affiliation:
☐ Consumer  ☐ Community Based Organization  ☐ State Employee  ☐ Other___________________

Which, if any, of the following apply to you **personally**? (Check all that apply)

- Person Living with HIV/AIDS
- Injection Drug User (current/former IDU)
- Non-Injection Substance User (current/former)
- Person who has exchanged Sex for Resources
- Person who has Unprotected Sex with a Member of the Opposite Sex
- Person affected by HIV/AIDS - **Please Explain:**

3. Experience/Accomplishments:

A. Experience/Accomplishments in HIV or HIV Planning:

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

B. What makes you a good candidate for membership on the NJHPG and why are you seeking appointment to the NJHPG?

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

C. Is there any additional information that you would like the Committee to know about, such as other experiences, things you are proud of, etc.?

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

_____ Initials
4. HIV Risk Populations You Have Knowledge of or Familiarity with: Please check the following target populations you have the most knowledge of or familiarity with.

_____ MSM (Men who have sex with men) and are at risk through unsafe sex
_____ MSM/IDU (Men who are at risk from both unsafe sex with other men and unsafe drug injection practices)
_____ Men and women who are at risk through unsafe injection drug practices
_____ Men and women who are at risk through unsafe heterosexual sex with an infected partner
_____ Women at risk for transmitting HIV during pregnancy, at birth, or during infancy
_____ Men and women not part of a specific population at risk for HIV
_____ Transgender who are at risk through unsafe sex or unsafe injection drug practices
_____ Youth

Please briefly describe your experience with the target populations you selected.

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

5. Membership Category That Best Fits Your Experience: The NJHPG makes all attempts to recruit individuals with a variety of categories/expertise. Please check the categories that best fit your experience.

_____ Person Living with HIV/AIDS
_____ Experience with Incarcerated Populations
_____ Medicaid Specialist
_____ Legal services
_____ Affordable Housing/Homeless Services
_____ Expertise
_____ Division of HIV, STD and TB Services
_____ Substance Use Provider
_____ Behavioral Scientist
_____ Medical Case Management
_____ Mental Health Provider
_____ Health Planning Specialist
_____ HIV Planning

_____ Community Based Organization
_____ Minority Based Organization
_____ Faith Based Organization
_____ Ryan White Provider/Grantee
_____ Part A
_____ Part B
_____ Part C
_____ Part D
_____ Grantees of other Federal HIV Programs, such as CCOE, Dental, SPNS and HOPWA
_____ HIV Prevention Provider/Grantee
_____ HIV Community advocate/representative
_____ Other (Must Specify) ________________

_____ Initials
6. **Committees:** All NJHPG members are **required** to join one or more of the committees listed below. Please check off the committees you are interested in joining.

<table>
<thead>
<tr>
<th>HIV/AIDS Issues Committee</th>
<th>Governance Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV/AIDS Prevention and Care Collaborative Committee</td>
<td>Gay Men’s Committee</td>
</tr>
</tbody>
</table>

__________________________

Signature and Date

Do not fax or email this application. Please send all seven pages of the application to:

**Mailing Address**
New Jersey HIV/AIDS Planning Group (NJHPG)
c/o HIV Prevention CPSDI
Rutgers, The State University of New Jersey
Three Rutgers Plaza, ASB III, 2nd floor
New Brunswick, New Jersey 08901

Please amend your membership application whenever your information changes.

For additional information, please call NJHPG Support Staff at (848) 932-4191 or email at hivstaff@ejb.rutgers.edu.

---

**FOR STAFF USE ONLY (V. 7)**

Date Received: _______________________

Date of Member Interview: *(by current member)* _______________________

Date Elected: _____________________

Orientation Completed: ______________

___ Initials
NJHPG Certification

I certify that the information contained herein is true and accurate.

Signed_____________________________________
Date _______________________________

Release of Information

I hereby give the NJHPG permission to release all information herein, excluding any health and behavioral information which must be kept confidential and reported only as a non-identifying statistic as required by the CDC, the Health Resources and Services Administration (HRSA) and New Jersey Department of Health, Division of HIV, STD and TB Services.

Signed ________________________________
Date _________________________________
Witness ______________________________
Date _________________________________

Supervisor Letter of Agreement

_____ Initials
Purpose:

The Division of HIV, STD and TB Services (DHSTS) is committed to supporting a community planning process for prevention and care services and has chosen a representative membership charged to carry out planning activities. The planning body is called the New Jersey HIV/AIDS Planning Group (NJHPG) and will be responsible for conducting comprehensive planning activities as required under our funding agreement with the Centers for Disease Control and Prevention and the Health Resources and Services Administration.

Each NJHPG member holds an expertise in a key policy area and represents one of the State’s nine planning regions. Regional knowledge and policy area expertise are essential to our planning mandate towards program development, coordinating funding streams and linking services.

Members of the NJHPG will work closely with DHSTS staff to produce the State’s comprehensive plan for HIV/AIDS services, the New Jersey Comprehensive HIV/AIDS Services Plan and the Statewide Coordinated Statement of Need.

It is expected that all members of the NJHPG will have the support of their employer and commit to the following:

- Completion of an online orientation before gaining voting privileges
- Participation in monthly NJHPG meetings (held the third Thursday of the month) as well as monthly participation in at least one committee (in addition to the monthly NJHPG meetings)
- Preparation for each meeting by reading any materials sent
- Consideration of the needs of the community over individual or agency needs

Member Name: ____________________________________________________________

I understand that the employee, if elected, will hold membership on the New Jersey HIV/AIDS Planning Group. I have read the commitments above and agree to allow the time required to fulfill obligations as a member.

 Supervisor Signature: ____________________________________________________

Agency: __________________________________________ Date: ______________

_____ This does not apply to me.

_____ Initials
APPENDIX II

MEMBERSHIP APPEAL FORM
Membership Appeal Form

☐ YES, I AM STILL INTERESTED! I would like to appeal the resignation of my membership. I am still interested in participating on the NJHPG and would appreciate the opportunity to explain my absences.

Extenuating circumstances/reasons for appeal:

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

Your appeal will be presented to the Executive Committee. Please submit your appeal in writing by completing this form or sending a letter to the NJHPG office.

☐ NO, I AM SORRY THAT I WILL NOT BE ABLE TO CONTINUE TO PARTICIPATE AS A MEMBER OF THE NJHPG AT THIS TIME.

Extenuating circumstances/reasons for resignation:

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

Signature ____________________________ Date ____________________________

Please return the completed form to NJHPG support staff at the address listed on your letter or call (732) 932-3358 if you have any questions or concerns.
APPENDIX III

CONFIDENTIALITY PLEDGE FORM
Confidentiality Pledge Form

I, ________________________________, promise that I will hold in confidence, all personal information shared by members and/or guests attending NJHPG full or committee meetings.

I will not violate the confidential relationship between NJHPG, its members and guests without expressed permission.

I understand that I have ethical and moral obligations to uphold my commitment to hold private and confidential information disclosed by members and/or guests attending NJHPG meetings.

I understand that I am personally responsible for any violation of this agreement.

I further understand that my status as a member or guest may be in jeopardy for any violation of this agreement.

________________________________________
Name

________________________________________
Signature

________________________________________
Date

Circle one:  Member  Guest
APPENDIX IV

CONFLICT OF INTEREST DISCLOSURE FORM
NJHPG Conflict of Interest Disclosure Form

A conflict of interest occurs when an NJHPG member knows that the voting for a specific issue is likely to have a direct financial impact on the NJHPG member, a close relative of the NJHPG member, a domestic partner of the NJHPG member, a member of the household of the NJHPG member or an individual who has business dealings with the NJHPG member.

Each NJHPG member shall disclose, in writing, any and all professional and/or personal affiliations with agencies that pursue HIV/AIDS funding. Annually, each NJHPG member will complete a conflict of interest statement.

By my signature below, I certify that:

1. I have read, understand and support the “Conflict of Interest” of the NJHPG.

2. I and/or a family member serve(d) as a staff member, consultant, officer, board member, or advisor with the following organizations that have received, may seek or are eligible for HIV care and treatment funding, HIV prevention funding and/or related activities.

<table>
<thead>
<tr>
<th>Organization Address, Telephone, etc.</th>
<th>Employee</th>
<th>Volunteer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Circle one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Title</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Period of Affiliation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Describe the nature of your affiliation in detail</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Organization Address, Telephone, etc.</th>
<th>Employee</th>
<th>Volunteer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Circle one</td>
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<tr>
<td>Title</td>
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<tr>
<td>Period of Affiliation</td>
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</tr>
<tr>
<td>Describe the nature of your affiliation in detail</td>
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<td></td>
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</tbody>
</table>

Name

Signature

Date
APPENDIX V

DISPUTE RESOLUTION FORM
**Dispute Resolution Form**

<table>
<thead>
<tr>
<th>Person Submitting Form:</th>
<th>Date Submitted:</th>
</tr>
</thead>
<tbody>
<tr>
<td>_______________________</td>
<td>____<strong><strong><strong>/</strong>__<strong>/</strong></strong></strong></td>
</tr>
<tr>
<td>Name</td>
<td>(mm/dd/yy)</td>
</tr>
</tbody>
</table>

**Do you wish to be identified in any communication (written or verbal) as the person who filed this form? (please circle one)**

- Yes
- No

Date on which the dispute occurred:

____________/__________/______

(mm/dd/yy)

**List all parties involved in the dispute (include self, if applicable).**

1. _________________________
2. _________________________
3. _________________________
4. _________________________

**Nature of the grievance (please be specific):**

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

*(please attach additional pages if necessary)*

**Your recommendations to resolve the dispute:**

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
APPENDIX VI

REQUEST FOR TRAVEL REIMBURSEMENT FORM
Request for Travel Reimbursement Form for the NJHPG

To facilitate attendance at planning group meetings, the New Jersey HIV/AIDS Planning Group (NJHPG) provides reimbursement for travel to and from meetings for eligible NJHPG members and alternates. Cab fare, train fare and bus fare will be reimbursed with original ticket stubs or receipts. Mileage for individuals driving to meetings will be reimbursed at 0.31 per mile. Tolls will be reimbursed with original receipts or printed EZPass statements. (Note: Mileage is reimbursed as point-to-point mileage between your home address (or starting point) and the location of the meeting. Mileage is checked against Mapquest for verification).

To request reimbursement, NJHPG members or alternates must complete this form and submit it (with original receipts) to Rutgers staff within 60 days of the travel date. **Attach ALL receipts, place a (✓) in receipt enclosed column, and sign your name at the bottom of this form. If you do not provide original receipts, the expense will not be paid.** Please allow four to six weeks for processing. You will receive a check in the mail to the address provided below.

Name: ___________________________  Complete Mailing Address: ___________________________
Phone: ___________________________

<table>
<thead>
<tr>
<th>Date of Meeting</th>
<th>Name of Meeting</th>
<th>Traveling from and traveling to</th>
<th>If by car, roundtrip # of miles</th>
<th>If by public transport, total costs</th>
<th>Total for Tolls</th>
<th>Parking</th>
<th>Receipts Enclosed</th>
<th>TRAVEL TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: 06/01/06</td>
<td>Main Meeting</td>
<td>Newark / New Brunswick</td>
<td>-----</td>
<td>train = $14.00 taxi = $6.50</td>
<td>-----</td>
<td>-----</td>
<td>✓</td>
<td>$20.50</td>
</tr>
</tbody>
</table>

Signature: ___________________________

**Forms may be faxed, mailed or submitted in person to:**
NJHPG• c/o HIV Prevention CPSDI• Rutgers, TheStateUniversity of New Jersey • 3 Rutgers Plaza, ASB III •New Brunswick, NJ08901
Telephone Number: (848) 932-4191• Fax Number: (732) 932-3357
Travel Reimbursement Forms and the Rutgers Travel Policy are also available on the NJHPG website: [http://hpcpsdi.rutgers.edu/](http://hpcpsdi.rutgers.edu/)