

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARD APPOINTMENT SUMMARY**

6B-2

=====

Meeting Date: November 15, 2011
Department: Community Services
Advisory Board: Palm Beach County HIV CARE Council

=====

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Appointment/Reappointment of the following individuals to the Palm Beach County HIV Comprehensive AIDS Resources Emergency (CARE) Council for a term of two (2) years with expiration dates as indicated:

<u>Seat No.</u>	<u>Reappointment</u>	<u>Seat Requirement</u>	<u>Term Expires</u>
28	Cindy Barnes	State Medicaid Agency	11/14/2013
20	Donald Hilliard	Affected Community	11/14/2013
29	Dr. Marlinda Jefferson	State Part B Agency	11/14/2013
7	Kimberly Rommel-Enright	Social Service Provider	11/14/2013
22	Rafael Abadia	Affected Community	11/14/2013
10	Rosalyn Collins	Substance Abuse	11/14/2013

<u>Seat No.</u>	<u>Appointment</u>	<u>Seat Requirement</u>	<u>Term Expires</u>
18	Melissa McGee	Affected Community	11/14/2013

Summary: The total membership shall be no more than 33 members, per Resolution No. 2011-1560. Founding members were appointed for two (2) year terms with subsequent terms of two (2) years. The HIV CARE Council nominations process is an open process with publicized criteria and legislatively defined conflict of interest standards. The six (6) reappointments and one (1) new appointment successfully completed the HIV CARE Council nominations process, and the HIV CARE Council has recommended their reappointments and appointment. Dr. Jefferson has disclosed that she is employed by Minority Development and Empowerment, Inc., that contracts with the County for outreach services. Ms. Rommel-Enright has disclosed that she is employed by Legal Aid Society of Palm Beach County, Inc., that contracts with the County for legal services. Ms. Collins has disclosed that she is employed by Gratitude House, Inc., that contracts with the County for substance abuse services. The HIV CARE Council provides no regulation, oversight, management, or policy-setting recommendations regarding contracts. Disclosure of these contractual relationships is being provided in accordance with the provisions of Sect. 2-443, of the Palm Beach County Code of Ethics. (Ryan White) Countywide (TKF)

Background and Justification: In accordance with the Ryan White Comprehensive AIDS Resources Emergency Act of 1990 (P.L.101-381), Palm Beach County was designated an eligible metropolitan area disproportionately affected by the HIV epidemic and having a demand for services exceeding the capacity of local resources to meet that demand. The federal government, through the Department of Health and Human Services has made funds available to Palm Beach County to meet such demand. In order to access these funds, it is legally mandated by Title I (Part A) of the Ryan White Care Act that Palm Beach County designate a Title I (Part A) HIV Services Planning Council. To that end, the Board established the Palm Beach County HIV CARE Council, per Resolution No. R-2011-1560, dated October 18, 2011. The Ryan White CARE Act Amendments of 1996 mandate a nomination process for appointments to Title I (Part A) Planning Councils. As vacancies occur on the CARE Council, replacements are selected in accordance with the HIV CARE Council nominations process that was adopted by the CARE Council and approved by the Board on June 27, 2011. With the addition of these nominees, the board makeup will consist of, seven (7) Black females, three (3) Black males, one (1) Hispanic male, one (1) Hispanic female, three (3) White male, five (5) White females, and one (1) Hispanic and White male.

Attachments:

- A. Board Information Packets (7)
- B. HIV CARE Council Nominations Policy
- C. Palm Beach County HIV CARE Council Inventory of Seats
- D. CARE Council Attendance Record

Recommended by: _____ **Date:** 11/1/11
 Department Director

Legal Sufficiency: _____ **Date:** 11/1/11
 Assistant County Attorney

I. REVIEW COMMENTS

A. Other Department Review:

Department Director

**REVISED 06/92
ADM FORM 03
(THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.)**

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION**

*The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form **MUST BE COMPLETED IN FULL**. Answer "none" or "not applicable" where appropriate. **Further, please attach a biography or résumé to this form.***

Section I (Department): (Please Print)

Board Name: Palm Beach County HIV CARE Council Advisory ☒ Not Advisory ☐

☐ At Large Appointment or ☐ District Appointment / District #: _____

Term of Appointment: 2 Years. From: 11/15/11 To: 11/14/13

Seat Requirement: State Medicaid Agency Seat #: 28

☒ *Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ resignation ☐ other

Completion of term to expire on: _____

***When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners: 0**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Barnes Cindy A
Last First Middle

Occupation/Affiliation: Medical Health Care Program Analyst
Owner ☐ Employee ☒ Officer ☐

Business Name: Agency for Health Care Administration

Business Address: 1655 Palm Bch Lks Blvd. Ste 300

City & State: West Palm Bch FL Zip Code: 33401

Residence Address: 213a Ardley Rd.

City & State: NPB, FL 33408 Zip Code: 33408

Home Phone: (561) 627-6416 Business Phone: (561) 712-4338 Ext.

Cell Phone: () NONE Fax: (561) 616-1545

Email Address: Cindy.barnes@ahca.myflorida.com

Mailing Address Preference: ☒ Business ☐ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code: ☐ Male ☒ Female
☐ Native-American ☐ Hispanic-American ☐ Asian-American ☐ African-American ☒ Caucasian

Section II Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. **To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business.** This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ NONE

All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the Guide to the Sunshine Amendment prior to appointment/reappointment. Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. Keep in mind this requirement is on-going.

☒ By signing below I acknowledge that I have read, understand, and agree to abide by Article XIII, the Palm Beach County Code of Ethics, and I have received the required Ethics training (in the manner checked below):

- ☒ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ By signing below I acknowledge that I have read, understand and agree to abide by the Guide to the Sunshine Amendment & State of Florida Code of Ethics:

*Applicant's Signature: Cindy Barnes Printed Name: Cindy Barnes Date: 8-29-11

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountyethics.com or contact us via email at ethics@palmbeachcountyethics.com or (561) 233-0724.

Return this FORM to:
Sonja Holbrook, Department of Community Services
810 Datura Street, West Palm Beach, FL

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 08/01/2011

Cindy A Barnes
2132 Ardley Rd
North Palm Beach, FL 33408
561-627-6416

Work History:

State of Florida AHCA

May 2005 to present

Began working for AHCA 5/95 as the Medicaid Transportation Specialist (Human Services Program Specialist Coordinator, **Supervisor**) and was responsible for all Medicaid Transportation issues. Member of 5 Transportation Disadvantaged Local Coordinating Boards in our 5 county area. **Supervised** support staff responsible for daily transportation authorizations. Developed, implemented and tracked corrective action plans as a result of monitoring activities. Provided technical assistance to transportation providers re: policy and billing issues. Provided in-service trainings, investigated providers and referred for fraud, when appropriate. Developed and implemented changes in transportation program to reduce cost. Conducted monthly staff meetings. Coordinated and attended health fairs. Compiled, verified and processed transportation dollars being spent. Received 3 different Davis Productivity Awards. Conducted coaching sessions with staff when needed. Trained staff on transportation policy and other Medicaid policies and procedures.

In 2001 my position was upgraded to a Medical/Health Care Program Analyst. I was still responsible for the Medicaid transportation program in the Beneficiary unit. Also provided on-site monitoring of School Districts and Project AIDS Care (PAC) Case Management Agencies. Provided PAC training the Case Management Agencies. Board Member of Palm Beach County HIV Care Council since 2009 and member of Treasure Coast Care Consortium since 2009. Acted as AHCA liaison between beneficiaries, providers and Medicaid program to ensure access to services. Provided in-service training in the community. Provided technical assistance to providers, elected officials and community groups. Coordinated and attended Health Fairs and other outreach activities. Attended many social service monthly meetings in order to learn what services are available in the community. Acted as Medicaid liaison at these meetings. Communicated newly found information to all staff. Referred Medicaid beneficiaries to other social service agencies when appropriate. Advised other social service agencies of any upcoming health fairs so that they may also participate. Processed all incoming correspondence. Processed incoming Area 9 e-mails and Tallahassee correspondence. Took care of legislative issues. Handled all provider enrollment issues. Processed all Medipass provider changes that came in via-fax.

In December of 2009, my position was transferred to the CQM unit from the BNM unit. I continued to be the transportation specialist and attend the Local Coordinating Board meetings. I continue to complete the Project AIDS Care Program (PAC) monitoring and work with the PAC agencies in our 5 county area. I also continue to perform the School monitoring. I also am in charge of all provider enrollment issues. I provide assistance to transportation providers regarding transportation claims resolutions. I have learned Medicaid waiver policy and direct telephone inquiries to the appropriate waiver agencies. I also took over the Personal Care Assistance (PCA) provider enrollment process to become State Plan Medicaid Providers. I have trained the PCA providers in the enrollment process, the billing process and the Prior Authorization process. I have attended the Agency for Persons with Disabilities waiver support coordinator meetings to inform them of the new PCA policy on an ongoing basis. I continue to take beneficiary calls when necessary as I have not yet lost the sort of caseload that I had when in the BNM unit. I provide policy clarification to all Medicaid providers when needed. I also work claims resolutions for providers when they are having issues in getting their claims paid.

State of Florida HRS (Aging and Adult Payments Supervisor) June 1992 to May 1995

From 6/92 through 10/93 I supervised a unit who determined initial and continued eligibility for SSI related Medicaid and Food Stamps. Explained eligibility requirements to clients and providers and monitored workers' cases for accuracy. Effective 10/93, supervised a unit who determined initial and continued eligibility for Nursing

Home residents. Explained policy to Nursing Home administrators, provided technical assistance. Completed reports. Trained workers, resolved billing problems, conducted staff meetings and coaching sessions with staff when needed.

State of Florida Child Support Case Analyst June, 1991 through June 1992

Responsible for initiating case action to establish and enforce paternity, support, and medical orders for inter and intra state public assistance. Job consisted of record keeping, case management, locating absent parents and monitoring absent parent payments. Referred absent parents to state attorney when no payment made. Attend court hearing to represent the agency.

State of Florida Quality Control Unit (Human Services Analyst) November 1984 to June 1991

Monitored AFDC and SSI related Medicaid cases for accuracy in determining eligibility. Reviewed data regarding income and assets. Job required home visits to 10 counties in Florida, including Nursing Homes. Investigative skills needed in order to verify eligibility according to Federal regulations. Completed narratives in cases. Used numerous computer systems to determine ownership of vehicles, property or other assets, such as unreported bank accounts.

State of Florida Overpayment Fraud and Recoupment Unit (Human Services Analyst) December 1980 to November 1984

Determined overpayment for AFDC, Food Stamps and Medicaid cases. Investigated possible fraud cases. Recoupment and Balanced records. Record keeping. Collected and posted payments for overpayment cases. Monitored cases for non-payment and referred to probation if dollars were not received. Worked with probation offices and court system.

State of Florida Economic Services (Public Assistance Specialist) August 1979 to December 1980

Determined continued eligibility for AFDC, Medicaid and Food Stamps. Case management

State of Florida Protective Services (Protective Investigator) November 1978 to August 1979

Ongoing supervision of children who had been adjudicated as either abused or neglected. Attended court hearings. Counseled parents and children. Wrote narrative reports. Made home visits. Referred parents to other social service agencies.

EDUCATION:

Palm Beach Junior College	Lake Worth, Fl.	August 1970 to August 1972 Associates in Ele - mentary Education
University of South Florida	Tampa, Fl.	September 1972 to December 1972
Florida Atlantic University	Boca Raton, Fl.	Bachelors in Elementary Education

SKILLS KNOWLEDGE AND ABILITIES

Fluent on FMMIS and FLORIDA systems. Type over 70 WPM. Ability to supervise others, manage multiple schedules, set priorities and meet deadlines. Ability to communicate effectively, both verbally and in writing. Ability to maintain positive working relationships with state, county and local officials in order to ensure optimum health care delivery. Ability to make decisions, work independently, train and manage staff and conduct staff meetings. Knowledge of Medicare and other health care programs in our area. Ability to work independently. Ability to

listen to customers and provide advice. Knowledge of customer service skills. Ability to maintain positive working relationships with co-workers. Knowledge of social service agencies in our 5 county area. Knowledge of Medicaid provider enrollment Policy. Knowledge of Medicaid billing for services. Knowledge of Medicaid covered services. Knowledge of all Health Insurance coverage programs in Palm Beach, Martin, St. Lucie, Indian River and Okeechobee counties.

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION**

*The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form **MUST BE COMPLETED IN FULL**. Answer "none" or "not applicable" where appropriate. **Further, please attach a biography or résumé to this form.***

Section I (Department): (Please Print)

Board Name: Palm Beach County HIV CARE Council Advisory ☒ Not Advisory ☐

☐ At Large Appointment or ☐ District Appointment /District #: _____

Term of Appointment: 2 Years. From: 11/15/11 To: 11/14/13

Seat Requirement: Affected Community Member Seat #: 20

☒ *Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ resignation ☐ other

Completion of term to expire on: _____

***When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners:** 0

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Hilliard Donald
Last First Middle

Occupation/Affiliation: Community Member

Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 1042 Francis St

City & State West Palm Bch Fla Zip Code: 33405

Home Phone: 561-6675472 Business Phone: () Ext. _____

Cell Phone: (561) 6675472 Fax: ()

Email Address: Hilliard.Donald@gmail.com

Mailing Address Preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes ☒ No ☐

If Yes, state the court, nature of offense, disposition of case and date: 1991

Minority Identification Code: ☒ Male ☐ Female
☐ Native-American ☐ Hispanic-American ☐ Asian-American ☐ African-American ☒ Caucasian

Section II Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. **To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business.** This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ NONE

All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the Guide to the Sunshine Amendment prior to appointment/reappointment. Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. Keep in mind this requirement is on-going.

☒ By signing below I acknowledge that I have read, understand, and agree to abide by Article XIII, the Palm Beach County Code of Ethics, and I have received the required Ethics training (in the manner checked below):

- ☒ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ By signing below I acknowledge that I have read, understand and agree to abide by the Guide to the Sunshine Amendment & State of Florida Code of Ethics:

*Applicant's Signature: Dee R. Hilliard Printed Name: Donald R Hilliard Date: 9-23-11

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountyethics.com or contact us via email at ethics@palmbeachcountyethics.com or (561) 233-0724.

Return this FORM to:
Sonja Holbrook, Department of Community Services
810 Datura Street, West Palm Beach, FL

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 08/01/2011

Donald Hilliard Bio

I grew up in Palm Beach County and have resided here for most of my life. I was a member of the military and the U.S. Army. I have served as a member of the CARE Council for 2 years and I am a member of several of the Committees including the Community Awareness Committee, the Medical Services Committee, the Planning Committee, the Priorities & Allocations (P&A) Committee and the Support Services Committee. I was a member of the P&A Committee for several years before I became a member of the CARE Council. I enjoy being a member of the CARE Council and Committees because I am able to take part in helping others, particularly those who are not able to help themselves. I am particularly interested in the areas of HIV prevention, overcoming stigma, increasing awareness and helping individuals of different ethnic groups and from different countries access services. I am very proud to be a member of the CARE Council because I think the work is very important. As a member of the CARE Council I have learned that it is possible to help others through action. I try to make a difference in my community and for others by speaking for others who cannot speak for themselves and helping them overcome financial barriers which prevent them from getting proper care and support. I recognize the challenges confronted by many individuals affected by HIV/AIDS. I want to help them so they do not become hopeless and help them find the resources they need. I co-lead a support group at Compass called, Positive Living Support. I attend functions endorsed by other CARE Council members in order to learn how people are overcoming stigma and increase my knowledge base. I make an effort to spread information about the work of the CARE Council and the work of the county to provide residents access to services. I feel the CARE Council does very important work and greatly improves the quality of life for many individuals. I am very proud to be a member of the CARE Council.

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION**

*The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form **MUST BE COMPLETED IN FULL**. Answer "none" or "not applicable" where appropriate. **Further, please attach a biography or résumé to this form.***

Section I (Department): (Please Print)

Board Name: Palm Beach County HIV CARE Council Advisory ☒ Not Advisory ☐

☐ At Large Appointment or ☐ District Appointment /District #: _____

Term of Appointment: 2 Years. From: 11/15/11 To: 11/14/13

Seat Requirement: State Part B Agency CBO's serving affected populations/ASO's Seat #: * 29

☒ *Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ resignation ☐ other

Completion of term to expire on: _____

***When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners: 0**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Jefferson Marlinda _____
Last First Middle

Occupation/Affiliation: Director
Owner ☐ Employee ☒ Officer ☐

Business Name: Minority Development & Empowerment, Inc.

Business Address: 3075 So. Congress Ave, Suite 207

City & State: Palm Springs, FL Zip Code: 33461

Residence Address: 3951 NW 25th Way

City & State: Boca Raton, FL Zip Code: 33434

Home Phone: (561) 241-7213 Business Phone: (561) 296-5722 Ext. 203

Cell Phone: (561) 809-3307 Fax: (561) 561 296-5723

Email Address: mjefferson@mdinc.org

Mailing Address Preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code: ☐ Male ☐ Female
☐ Native-American ☒ Hispanic-American ☐ Asian-American ☐ African-American ☐ Caucasian

Section II Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
R2011-0473	Parks & Recreation	Outreach	03/01-02/29/11

(Attach Additional Sheet(s), if necessary)

OR ☐ NONE

All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the Guide to the Sunshine Amendment prior to appointment/reappointment. Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. Keep in mind this requirement is on-going.

☐ By signing below I acknowledge that I have read, understand, and agree to abide by Article XIII, the Palm Beach County Code of Ethics, and I have received the required Ethics training (in the manner checked below):

☒ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☐ By signing below I acknowledge that I have read, understand and agree to abide by the Guide to the Sunshine Amendment & State of Florida Code of Ethics:

*Applicant's Signature: [Signature] Printed Name: Marinda Jefferson Date: 8/29/2011

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountyethics.com or contact us via email at ethics@palmbeachcountyethics.com or (561) 233-0724.

Return this FORM to:
Sonja Holbrook, Department of Community Services
810 Datura Street, West Palm Beach, FL

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 08/01/2011

Marlinda Quintana-Jefferson, MSW, Ph.D
3951 NW 25th Way
Boca Raton, Fl 33434
(561) 241-7213 (561) 574-4720 or (561) 809-3307
marlindajefferson@yahoo.com

Professional Experience

2009 to Present, Minority Development & Empowerment, Inc
Director- Palm Beach Programs

2001 to 2009, Broward County Department of Health
Patient Care Administrator

1998 - 3/15/2001 Broward House, Fort Lauderdale
Program Manager

11/93 - 3/95 Arlington Public Schools, ESOL/HILT Department, Arlington, VA
Bilingual Resource Counselor

6/91 - 7/93 Morrison Center, Child and Family Mental Health Program, Gresham, Or
Clinical Supervisor

Additional

Teaching

2010, Barry University, Graduate School of Social Work
Adjunct Instructor

- Taught course: Advanced Social Policy

2006, Barry University, Graduate School of Social Work
Adjunct Instructor

- Taught course: HIV/AIDS and Social Work

1993 - Portland State University, Portland, OR.

Clinical Instructor Graduate School of Social Work

- Taught course: "Social Work with Families and Adolescents"

3/96 - 7/97 - Universidad Academia de Humanismo Cristiano, Santiago, Chile.

Professor - Undergraduate School of Social Work

Consulting

2009 to Present, MQ-J Consulting, Boca Raton Fl
Private Consultant

- Program design and implementation

- Data management analysis
- Grant Writing

Publications

Quintana-Jefferson, M (2008). *HIV-Infected pregnant women: Factors predictive of adherence to antiretroviral medications*. VDM Verlag Dr Muller Aktiengesellschaft & Co. K.G.

Quintana-Jefferson, M (2007). *Adherence to antiretroviral medications among HIV-infected pregnant women* (Doctoral dissertation, Barry University, School of Social Work, 2007). Dissertation Abstracts International, 169 pages; AAT 3267435

Language and Technological Skills

- Bilingual-Bi-cultural: English, Spanish
- Proficient in Microsoft Word, Excel, Power Point, Publisher, and statistical software SPSS.

Education

Barry University, Miami Florida
Ph.D. in Social Work, 2007

University of Washington, Seattle Washington
MSW in Social Work, 1986
B.A. in Social Work, 1980

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION**

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form **MUST BE COMPLETED IN FULL**. Answer "none" or "not applicable" where appropriate. **Further, please attach a biography or résumé to this form.**

Section I (Department): (Please Print)

Board Name: Palm Beach County HIV CARE Council Advisory ☒ Not Advisory ☐

☐ At Large Appointment or ☐ District Appointment /District #: _____

Term of Appointment: 2 Years. From: 11/15/11 To: 11/14/13

Seat Requirement: Social Service Providers, including housing and homeless service providers Seat #: 7

☒ *Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ resignation ☐ other

Completion of term to expire on: _____

***When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners: 1**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Rommel-Enright Kimberly
Last First Middle

Occupation/Affiliation: Attorney - Reg
Owner ☐ Employee ☒ Officer ☐

Business Name: Legal Aid Society of Palm Beach County

Business Address: 423 Fern St., Ste. 200

City & State: West Palm Beach, FL Zip Code: 33401

Residence Address: 7101 182nd Rd N

City & State: Jupiter, FL Zip Code: 33458

Home Phone: (304) 743-3938 Business Phone: (561) 655-8944 Ext. 265

Cell Phone: (561) 352-5671 Fax: (561) 655-5269

Email Address: kenrigh@legalaidpbc.org

Mailing Address Preference: ☒ Business ☐ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code: ☐ Male ☒ Female
☐ Native-American ☐ Hispanic-American ☐ Asian-American ☐ African-American ☒ Caucasian

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
R2011-0472 and 1326	COMMUNITY SERVICES	LEGAL SERVICES	3/1/11 - 2/29/12
did not receive it yet	HOUSING & COMMUNITY DEV.	LEGAL SERVICES	10/1/11 - 9/30/12
did not receive it yet	DEPT. OF PUBLIC SAFETY	LEGAL SERVICES	10/1/11 - 9/30/12
(Attach Additional Sheet(s), if necessary)			
OR <input type="checkbox"/> NONE			

All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the Guide to the Sunshine Amendment prior to appointment/reappointment. Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. Keep in mind this requirement is on-going.

- ☒ By signing below I acknowledge that I have read, understand, and agree to abide by Article XIII, the Palm Beach County Code of Ethics, and I have received the required Ethics training (in the manner checked below):
- ☒ By watching the training program on the Web, DVD or VHS
- ☐ By attending a live presentation given on _____, 20____

AND

- ☒ By signing below I acknowledge that I have read, understand and agree to abide by the Guide to the Sunshine Amendment & State of Florida Code of Ethics:

*Applicant's Signature: [Signature] Printed Name: Kimberly Rommel Date: 10/1/11

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountyethics.com or contact us via email at ethics@palmbeachcountyethics.com or (561) 233-0724.

Return this FORM to:
Sonja Holbrook, Department of Community Services
810 Datura Street, West Palm Beach, FL

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

Kimberly Rommel-Enright
7101 182nd Rd North
Jupiter, Florida 33458
561-352-5671
kimmyroen@aol.com

EDUCATION:

NOVA UNIVERSITY LAW CENTER Ft. Lauderdale, FL
Juris Doctorate Degree, Cum Laude, May 1992
Nova Law Review Staff 1990-1992

FLORIDA ATLANTIC UNIVERSITY Boca Raton, FL
Bachelor of Arts, With Honors, Social Science, April 1989

LEGAL EMPLOYMENT:

LEGAL AID SOCIETY OF PALM BEACH COUNTY

West Palm Beach, FL

Supervising Attorney: May 1998- Present

Staff Attorney: September 1992- April 1998

Practiced Juvenile Law in the Juvenile Advocacy Project of Legal Aid. Cases included representation of minors in juvenile dependency, delinquency, and family law cases. Supervised the Legal Aid Society HIV/AIDS Legal Project and Project Permanent Placement. Supervisory duties included overseeing staff of two attorneys and four paralegals; conducting case reviews with staff and representing clients in the Ryan White Project of Legal Aid and Project Permanent Placement. Case handling involved issues of employment and insurance discrimination, confidentiality, dissolution of marriage, paternity, child support modification and various civil matters. Current caseload concentration is in adoption, guardianship, and third party custody. Currently supervising the Pro Bono Project. Primary responsibility is managing pro bono legal services for the 15th Judicial Circuit. Administrative duties include assigning cases to attorneys(approximately 400 per year), reporting pro bono participation (yearly reports to Florida Bar), recruiting attorneys, providing support for ongoing cases (approximately 1200), managing the information about the 1700 attorneys who participate in the pro bono program, and supervising all aspects of the Pro Bono Program.

THOMAS KINGCADE, P.A. West Palm Beach, FL

Clerk: Summer 1991 & August 1992

Researched and drafted memorandums of law and pleadings for personal injury, insurance, employment, defamation, and Worker's Compensation cases.

OFFICE OF THE STATE ATTORNEY

FIFTEENTH JUDICIAL CIRCUIT

Internship: January 1992-April 1992

Worked in County Court as a Certified Legal Intern. Responsible for case load. Duties included preparing discovery, conducting plea negotiations, case dispositions, and trials.

PROFESSOR MICHAEL BURNS Ft. Lauderdale, FL

Research Assistant: January 1991-January 1992

Researched and drafted memorandums on Constitutional issues. Also researched and edited an article for publication.

TEACHING EXPERIENCE: COOPER CAREER INSTITUTE, Paralegal Studies Program
West Palm Beach, Florida
Instructor, Intermittently 1997 to 1999
Instructed paralegal students in the following courses: Criminal Law;
Property Law; Torts; Probate; Legal Research and Legal Terminology.

SOUTH COLLEGE, Bachelor of Legal Studies Program
West Palm Beach, Florida
Instructor, Fall 1999
Instructed students in Domestic Law course

LECTURING EXPERIENCE:

In-service programs conducted for: Connor's Nursery; Jupiter Farms Elementary; Grove Park Elementary; Washington Elementary; United Way; Comprehensive AIDS Program; Palm Beach County Home, Palm Beach County School Board Nurses, Florida Atlantic University, Staff Builders (Home Health Care), Foster Parents Association of Palm Beach County, and Hope House.

Presenter at "Care of the HIV Child and Young Adult" Second Annual Conference, October 1994

Presenter at the Sixth and Seventh Annual Florida HIV Conferences, June 1997 and April 1998

Panelist at the First Annual Pediatric HIV/ AIDS Conference, October 1997

Panelist/Presenter at the First and Second Annual Women's Studies Institute Conferences "Solidarity for Our Survival", March 1998 and May 1999

Presenter at the Florida Legal Services Family Law Training, September 1999

Presenter at the Annual HIV/ AIDS Statewide Conference (Pediatric), October 2000

Presenter at FCAN Conference, October 2002

Presenter at Guardian Ad Litem Accelerated Adoption Pro Bono Attorney Training, May 2003

PUBLICATION:

"Someone to Watch Over Me: A Parent's Planning Guide"
Co-Editor

PROFESSIONAL ASSOCIATIONS/COMMUNITY AFFILIATIONS:

Florida Bar Association - Admitted 1992
Palm Beach County Bar Association - Law Week Committee 2000-Present (Chair 2003, 2005, 2006, 2007, 2009)
Florida Association of Women Lawyers- Palm Beach County Chapter 2003-Present (Secretary 06-07; President Elect 07-08; President 08-09)
Palm Beach County HIV CARE Council 1994- Present - (Secretary 1997; 2002-2005; 2007-2009)
Florida Legal Services Statewide AIDS Taskforce - Co-Chair
Palm Beach County Public Health Unit Ethics Committee 1996
St. Mary's Hospital Institutional Review Board

Florida Pro Bono Coordinators Association 2002-Present (President 2005)
Family Law Section of the Florida Bar 2003-Present

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION**

*The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form **MUST BE COMPLETED IN FULL**. Answer "none" or "not applicable" where appropriate. **Further, please attach a biography or résumé to this form.***

Section I (Department): (Please Print)

Board Name: Palm Beach County HIV CARE Council Advisory ☒ Not Advisory ☐
☐ At Large Appointment or ☐ District Appointment /District #: _____
Term of Appointment: 2 Years. From: 11/15/11 To: 11/14/13
Seat Requirement: Affected Community Member Seat #: 22
☒ *Reappointment or ☐ New Appointment
or ☐ to complete the term of _____ Due to: ☐ resignation ☐ other
Completion of term to expire on: _____

***When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners: 0**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Abadia Rafael _____
Last First Middle
Occupation/Affiliation: Community Member
Owner ☐ Employee ☐ Officer ☐
Business Name: _____
Business Address: _____
City & State _____ Zip Code: _____
Residence Address: 4254 Leo Lane Suite 113
City & State Palm Beach Gardens, FL Zip Code: 33410
Home Phone: (561) 981-0025 Business Phone: () Ext. _____
Cell Phone: (561) 247-3775 Fax: ()
Email Address: RafAbad@901.com
Mailing Address Preference: ☐ Business ☒ Residence
Have you ever been convicted of a felony: Yes _____ No ☒
If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code: ☒ Male ☐ Female
☐ Native-American ☒ Hispanic-American ☐ Asian-American ☐ African-American ☐ Caucasian

Section II Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. **To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business.** This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ NONE

All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the Guide to the Sunshine Amendment prior to appointment/reappointment. Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. Keep in mind this requirement is on-going.

☒ By signing below I acknowledge that I have read, understand, and agree to abide by Article XIII, the Palm Beach County Code of Ethics, and I have received the required Ethics training (in the manner checked below):

☒ By watching the training program on the Web, DVD or VHS

☐ By attending a live presentation given on _____, 20____

AND

☒ By signing below I acknowledge that I have read, understand and agree to abide by the Guide to the Sunshine Amendment & State of Florida Code of Ethics:

*Applicant's Signature: Rafael Abadía Printed Name: Rafael Abadía Date: 8/24/11

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountyethics.com or contact us via email at ethics@palmbeachcountyethics.com or (561) 233-0724.

Return this FORM to:
Sonja Holbrook, Department of Community Services
810 Datura Street, West Palm Beach, FL

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

Rafael Abadia

4254 Leo Lane Suite 122

(H) 561-881-0025

© 561-267-3775

RafAbad@aol.com

Objective	Encourage and Develop Access and Maintenance in Care for Persons living with HIV/AIDS	
Professional Achievements	CARE Council of Palm Beach County, FI 2006- present, Vice Chair HIV Care Council <ul style="list-style-type: none">▪ Medical Services Committee▪ Quality Management Committee▪ Medical Services Committee▪ Support Services Committee▪ Community Awareness Committee HIV Planning Council of New York, NY 1999- 2006 <ul style="list-style-type: none">▪ Help in the development and implementation of new Planning Council Structure▪ Implemented and Chaired Consumer Committee▪ Member of Executive, Priority Setting and Resource Allocation, and Membership Committees Consultant for the Religious Coalition for Reproductive Choice 2001- 2005 <ul style="list-style-type: none">▪ Develop and implemented Training the Trainers for "La Iniciativa Latina" and The Black Church Initiative▪ Developed 2 conferences on HIV/AIDS and Faith Based programs▪ Presented at CDC Conference on involving Faith Based organizations in the prevention and treatment of HIV/AIDS LTI Core and CPLOT Trainings 2001 <ul style="list-style-type: none">▪ National Minority AIDS Council▪ Cicatelli Associates Inc.	
Skills	<ul style="list-style-type: none">▪ Able to multi task▪ Fully Bilingual English/ Spanish▪ Microsoft Office Proficient	<ul style="list-style-type: none">▪ Knowledge of Ryan White Care Act▪ Able to coordinate between agencies

Rafael Abadia

4254 Leo Lane Suite 122
Palm Beach Gardens, Fl 33410
(H) 561-881-0025
© 561-267-3775
RafAbad@aol.com

- Knowledge of HIV/AIDS Funding
- Experience in development and implementation of trainings
- Able to facilitate collaboration between governmental and non governmental agencies
- Expertise on National Advocacy

Work History	Consultant	Religious Coalition for Reproductive Choice, Washington, DC	July 2001- 2005
	Transportation Planner	AIDS Coalition of Southern New Jersey, NJ	January 1998- 1999
	Assistant Manager Accounts Payable	Bloomington, New York, NY	1987- 1993
Education	BA Communication	Sacred Heart University, Santurce, PR	December 1985
References	References are available on request.		

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION**

*The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form **MUST BE COMPLETED IN FULL**. Answer "none" or "not applicable" where appropriate. **Further, please attach a biography or résumé to this form.***

Section I (Department): (Please Print)

Board Name: Palm Beach County HIV CARE Council Advisory ☒ Not Advisory ☐
☐ At Large Appointment or ☐ District Appointment /District #: _____
Term of Appointment: 2 Years. From: 11/15/11 To: 11/14/13
Seat Requirement: Substance Abuse and/or Mental Health Provider Seat #: 10
☒ *Reappointment or ☐ New Appointment
or ☐ to complete the term of _____ Due to: ☐ resignation ☐ other
Completion of term to expire on: _____

***When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners:** 0

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Collins Rosalyn
Last First Middle
Occupation/Affiliation: SUPERVISOR OF RESIDENTIAL SERVICES
Owner ☐ Employee ☒ Officer ☐
Business Name: GRATITUDE HOME
Business Address: 1700 N. DIXIE HIGHWAY
City & State: WEST PALM BEACH, FL Zip Code: 33407
Residence Address: PO Box 530038
City & State: LAKE PARK FL Zip Code: 33403
Home Phone: (941) 420 3295 Business Phone: () Ext. _____
Cell Phone: () Fax: ()
Email Address: _____
Mailing Address Preference: ☒ Business ☐ Residence
Have you ever been convicted of a felony: Yes _____ No ☒
If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code: ☐ Male ☒ Female
☐ Native-American ☐ Hispanic-American ☐ Asian-American ☒ African-American ☐ Caucasian

Section II Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. **To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business.** This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
<u>FAA - FY 2012</u>	<u>DEPT OF COMMUNITY SVCS</u>	<u>RESIDENTIAL & DAY SVC</u>	<u>10/01/11 - 9/30/12</u>
<u>140PWA</u>	<u>CITY OF WEST PALM BEACH</u>	<u>RESIDENTIAL SVCS</u>	<u>10/1 - 9/30</u>
<u>(Attach Additional Sheet(s), if necessary)</u>			

No contract #s yet

OR ☐ NONE

All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the Guide to the Sunshine Amendment prior to appointment/reappointment. Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. Keep in mind this requirement is on-going.

☒ By signing below I acknowledge that I have read, understand, and agree to abide by Article XIII, the Palm Beach County Code of Ethics, and I have received the required Ethics training (in the manner checked below):

☒ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ By signing below I acknowledge that I have read, understand and agree to abide by the Guide to the Sunshine Amendment & State of Florida Code of Ethics:

*Applicant's Signature: Rosalyne Collins Printed Name: ROSALYNE COLLINS Date: 9-16-11

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountyethics.com or contact us via email at ethics@palmbeachcountyethics.com or (561) 233-0724.

Return this FORM to:
Sonja Holbrook, Department of Community Services
810 Datura Street, West Palm Beach, FL

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 08/01/2011

ROSALYN R. COLLINS

P.O. BOX 530038
Lake Park, FL 33403
(561) 420 -3295

Licensure and Certification:

2001 Certified Addiction Professional - Florida
2000 Licensed Mental Health Counselor - Florida

Professional Experience:

2000- Present *Gratitude House, Inc. West Palm Beach, FL*
Supervisor of Residential Programs at a women's substance abuse treatment facility.

1999-2000 *Drug Abuse Treatment Association, Inc. West Palm Beach, FL*
Outpatient therapist at a substance abuse treatment program.

1996-1999 *Growing Together, Inc. Lake Worth, FL*
Staff therapist at an adolescent substance abuse treatment program.

1989-1996 *Honigman Miller Schwartz and Cohn, West Palm Beach, FL*
Supervisor of the file room, including personnel training and automation of file system in large law firm.

1982-1989 *Landscape Design and Maintenance, Boynton Beach, FL*
Owner and operator of lawn maintenance business specializing in commercial properties.

Education:

1995-1997 *Palm Beach Atlantic College, West Palm Beach, FL*
Master of Science degree in Counseling Psychology

References furnished upon request.

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION**

*The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form **MUST BE COMPLETED IN FULL**. Answer "none" or "not applicable" where appropriate. **Further, please attach a biography or résumé to this form.***

Section I (Department): (Please Print)

Board Name: Palm Beach County HIV CARE Council Advisory ☒ Not Advisory ☐

☐ At Large Appointment or ☐ District Appointment /District #: _____

Term of Appointment: 2 Years. From: 11/15/11 To: 11/14/13

Seat Requirement: Affected Community Seat #: 18

☐ *Reappointment or ☒ New Appointment

or ☐ to complete the term of _____ Due to: ☐ resignation ☐ other

Completion of term to expire on: _____

***When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners: 0**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: McGee Melissa _____
Last First Middle

Occupation/Affiliation: Community Member

Owner ☐ Employee ☐ Officer ☐

Business Name: W/A

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 643 S.W. 4 St

City & State Belle Glade Fla 33430 Zip Code: _____

Home Phone: () _____ Business Phone: () _____ Ext. _____

Cell Phone: 860 692-2728 Fax: () _____

Email Address: _____

Mailing Address Preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code: ☐ Male ☒ Female
☐ Native-American ☐ Hispanic-American ☐ Asian-American ☒ African-American ☐ Caucasian

Section II Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ NONE

All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the Guide to the Sunshine Amendment prior to appointment/reappointment. Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. Keep in mind this requirement is on-going.

☒ By signing below I acknowledge that I have read, understand, and agree to abide by Article XIII, the Palm Beach County Code of Ethics, and I have received the required Ethics training (in the manner checked below):

X By watching the training program on the Web, DVD or VHS
 _____ By attending a live presentation given on _____, 20____

AND

☒ By signing below I acknowledge that I have read, understand and agree to abide by the Guide to the Sunshine Amendment & State of Florida Code of Ethics:

*Applicant's Signature: Melissa McGee Printed Name: Melissa McGee Date: 8/29/11

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountyethics.com or contact us via email at ethics@palmbeachcountyethics.com or (561) 233-0724.

Return this FORM to:
 Sonja Holbrook, Department of Community Services
 810 Datura Street, West Palm Beach, FL

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 08/01/2011

Melissa McGee BIO

I was born in Atlantic City, NJ. My mother brought me to Florida when I was 8 years old. I currently reside in South Bay, FL. I spend a lot of time with my children, grandchildren, and participating in church activities. I heard about the Palm Beach County HIV CARE Council by one of the members. I decided to attend the meetings because I wanted to learn more about the available service and support for the HIV/AIDS community. Also, I want to be able to share my opinions and thoughts as well as represent the Western community of Palm Beach County. Attending the meetings has been a great experience and I have gained a wealth of knowledge that has not only helped me, but also my peers and community. I look forward to becoming a member of the HIV CARE Council.

Palm Beach County HIV CARE Council

Council Policy

Policy Number: **10**
Approved: **April 30, 2001**
Amended: **January 26, 2004**
Amended: **November 16, 2009**
Amended: **November 22, 2010**
Amended: **June 27, 2011**

Issue: **Nominations Process for CARE Council Membership**

This policy is adopted by the Palm Beach County HIV CARE Council (CARE Council), for the purpose of ensuring there is an open and fair nominations process which will provide for a CARE Council membership which is reflective of the AIDS epidemic in Palm Beach County, Florida. In addition, it is the intention of the CARE Council to maintain a nominations policy which complies with directives of the Division of HIV Services (DHS) and the Health Resources Services Administration (HRSA) as those directives relate to the Ryan White Act.

I. Legislative Background

Section 2602(b) of the reauthorized Ryan White Act states: "Nominations to the planning council (CARE Council) shall be identified through an open process and candidates shall be selected based upon locally delineated and published criteria. Such criteria shall include a conflict of interest standard for each nominee."

II. Expectations

An open nominations process, in combination with other legislative requirements and existing DHS policy on PLWH participation, shall result in broad and diverse community inclusion and culturally competent deliberations in CARE Council processes. The CARE Council will only approve and/or appoint members who have gone through the nominations process and shall appoint members on a timely basis to ensure minimum disruption to CARE Council activities.

Nominations to the Council shall be sought from a wide spectrum of potential members. Recruitment shall be made through existing Council committees and through ongoing

solicitation through existing council members, service providers, outreach through advertising, and staff working with consumers of HIV/AIDS services. Particular consideration shall be given to disproportionately affected and historically underserved groups and sub-populations.

Every member of the CARE Council is encouraged to actively recruit members to fill gaps in Council membership. Recruitment is not just the Membership Committee's responsibility. Council members should use their own network and seek key contacts in other communities to help identify potential members to fill gaps and to provide individuals to participate in CARE Council committee activities.

III. Steps in the Nominations Process:

1. When necessary advertising may be placed in various publications countywide notifying the public of the need for participation through membership on the CARE Council. Included in the advertising shall be notification of the need to fill membership positions based upon the demographics of the epidemic in Palm Beach County, and to ensure legislatively mandated positions are filled. A time limit for return of applications shall be included in the notification.

Potential applicants shall be provided a nominations packet containing a letter describing roles and responsibilities of the council, duties of membership, time expectations, gaps in representations, conflict of interest standards, HIV disclosure requirements, and an overview of the selection process and timeline; within three (3) business days of request. There shall also be an application form using open-ended questions to ask about relevant experience, expertise, skills, the persons interest in serving, the perspective he or she might bring to the CARE Council, how his or her peer group might relate to groups affected by HIV, and other related information.

3. Each returned application will be issued a document number, and receipt shall be logged in for tracking purposes.
4. CARE Council staff will review all application forms and will recommend a list of persons for the Membership Committee to interview. When two or more persons apply for the same slot, the committee will interview at least two applicants for the slot. Interviews shall be conducted by at least two committee members—one of which must be the Chair or Vice Chair and a staff member, according to a structured interview format. Open ended questions about past experience on boards, ideas about significant HIV/AIDS issues and professional or affected community linkages shall be incorporated into the interview. Applicants shall be interviewed within 30 calendar days. If they are not available within that time their name will be placed on the inactive pool list.
5. After the interviews are completed, the results of each interview are discussed at the next regularly scheduled Membership Committee meeting. When reviewing

candidates for membership the committee will consider the following factors: attendance at CARE Council meetings, involvement at Membership Development Sessions and involvement on committees. In addition, seat availability, the demographics of the board and candidate qualification will be taken into consideration. The final committee recommendations will be forwarded to the Executive Committee and if approved to the Palm Beach County HIV CARE Council. If the recommendation is accepted by the CARE Council, the individual's name will then be forwarded to the Palm Beach County Board of County Commissioners for appointment. In the event a recommended candidate is not acceptable to the Palm Beach County Board of County Commissioners, a request for a replacement candidate will be forwarded to the Membership Committee and the Membership Committee will provide the name of another candidate to the Palm Beach County HIV CARE Council. If the recommendation is accepted by the CARE Council, the individual's name will then be forwarded to the Palm Beach County Board of County Commissioners for appointment.

Candidates must fulfill the following requirements prior to being forwarded for CARE Council Membership:

- **Candidates must attend the Introduction to CARE Council Membership training session**
- **Candidates must join one (1) committee and then attend at least three (3) meetings, one (1) of which must be a CARE Council meeting, within a one (1) year period.**

Documented exceptions to these requirements may be made, based upon the need of the CARE Council or in an extenuating circumstance, at the discretion of the Membership Committee Chair with the approval of the Executive Committee.

Palm Beach County HIV CARE Council

Inventory of Seats

Updated 10/26/2011

Grey Shading = Federally Mandated Seat Pastel Shading = Federally Mandated Category **Bold = OPEN CHAIR**

Underlined Blue= Waiting for CC seat change approval Underline Green = Waiting for BCC approval

SEAT	PROVIDERS - SEATS 1-11	OCCUPANT	POSITION/ORGANIZATION	TERM EXPIRES	DEMOGRAPHIC INFO.
1	Health care provider, including federally qualified health centers	Lorenzo Robertson	PBC Health Department		BM
2	<u>CBO's serving affected populations/ASO's</u>	<u>Vicki Ann Tucci</u>	<u>Legal AID Society of Palm County Inc.</u>		<u>WF</u>
3	CBO's serving affected populations/ASO's	OPEN CHAIR			
4	CBO's serving affected population/ASO's	OPEN CHAIR			
5	Social Service Providers, including housing and homeless service providers	OPEN CHAIR			
6	Social Service Providers, including housing and homeless service providers	OPEN CHAIR			
7	Social Service Providers, including housing and homeless services providers	Kimberly Rommel-Enright	Legal AID Society of Palm County .Inc		WF
8	Social Service Providers, including housing and homeless service providers	OPEN CHAIR			
9	Mental Health and/or Substance Abuse Provider	Thomas McKissack	Oakwood Center		BM
10	Substance Abuse and/or Mental Health Providers	Rosalyn Collins	Gratitude House		BF
11	Local Public Health Agencies	Mary Piper Kannel	PBC Health Department		WF

Palm Beach County HIV CARE Council

Inventory of Seats

SEAT	AFFECTED COMMUNITIES, INCLUDING PLWH AND HISTORICALLY UNDER-SERVED SUBPOPULATIONS AND/OR INDIVIDUALS CO-INFECTED WITH HEPATITIS B/C – SEATS 12 - 22	OCCUPANT	POSITION/ ORGANIZATION	TERM EXPIRES	DEMOGRAPHIC INFO.
12	Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Mary Jane Reynolds	Community Member		BF
13	Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Kenny Talbot	Community Member		W/HISM
14	Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Glenn Krabec, PhD	Community Member		WM
15	Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	OPEN CHAIR			
16	Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Cecil Smith	Community Member		BM
17	Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Bobbie Cleveland	Community Member		BF
18	<u>Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C</u>	<u>Melissa McGee</u>	<u>Community Member</u>		<u>BF</u>
19	Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Shirley Samples	Community Member		BF
20	<u>Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C</u>	<u>Don Hilliard</u>	<u>Community Member</u>		<u>WM</u>
21	Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Laurence Osband	Community Member		WM
22	Affected Communities, including PLWH and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Rafael Abadia	Community Member		HISM

Palm Beach County HIV CARE Council

Inventory of Seats

SEAT	NON-ELECTED COMMUNITY LEADERS – SEATS 23 - 33	OCCUPANT	POSITION/ ORGANIZATION	TERM EXPIRES	DEMOGRAPHIC INFO.
23	Non-Elected Community Leaders	OPEN CHAIR			
24	Non-Elected Community Leaders	Juny Tetevi	CommCare Pharmacy		BF
25	Non-Elected Community Leaders	OPEN CHAIR			
26	Non-Elected Community Leaders	OPEN CHAIR			
27	Non-Elected Community Leaders	OPEN CHAIR			
28	<u>State Medicaid Agency</u>	<u>Cindy Barnes</u>	<u>Medicaid</u>		<u>WF</u>
29	<u>State Part B Agency</u>	<u>Dr. Marlinda Jefferson</u>	<u>Minority Dev. & Empowerment</u>		<u>HISF</u>
30	Hospital Planning Agencies or other health care planning agencies	OPEN CHAIR			
31	<u>Part D, or if none present, representatives of organizations addressing the needs of children, youth, and families with HIV</u>	<u>Shantreirra Monroe</u>	<u>Families First</u>		<u>BF</u>
32	Other Federal HIV Programs, including HIV Prevention Program	Nichole Leidesdorf	Compass Inc		WF
33	Representative of/or formerly incarcerated PLWH	OPEN CHAIR			

Demographic Info Key: BF= Black Female, BM= Black Male, HAIF= Haitian Female, HAIM= Haitian Male, WF= White Female, WM= White Male, HISF= Hispanic Female, HISM= Hispanic Male

CARE Council Attendance Record FY 2010-2011 Floating Calendar

CARE Council Attendance 2010-2011

2010-2011	2010	2010	2010	2011	2011	2011	2011	2011					
Members	July	Sept *	Nov.	Jan	May	June	July	August		% Attended Incl. EX	Missed 3+ consecutive	# Attended	# Meetings
Rafael Abadia	√		√	√	√	√	√	√		88%		7	8
William Albury	√									13%	7	1	8
Cindy Barnes	√	√ E	√	√	√		√			75%		6	8
Bobbie Cleveland		√ E	√	√	EX	√	√	√		88%		7	8
Rosalyn Collins	EX		EX	√	√			√		63%		5	8
Kimberly Rommel-Enright	√	√ E	√	√	√	√	√	√		100%		8	8
Don Hilliard	√	√ E	√	EX	√	√	EX	EX		100%		8	8
Marlinda Jefferson	√	√ E	√	√	√	√	√	√		100%		8	8
Mary Kannel	√	√ E	√	√	√	√	EX	√		100%		8	8
Glenn Krabec	√	√ E	√		√	√	√	√		71%		7	8
Nicole Ledesdorf							√	√		100%		2	2
Sha'Wanda Manuel							√	√		100%		2	2
Larry Osband	√	√ E	√	√	√	√	√	√		100%		6	8

CARE Council Attendance Record FY 2010-2011 Floating Calendar

**Thomas McKissack		✓	E		**✓	**✓	**✓	✓	✓		67%		6	8
Shantreirra Monroe								✓	✓		100%		2	2
Jennifer Piva	✓	✓	E	✓		EX					50%		4	8
Mary Jane Reynolds	✓	✓	E	✓	✓	✓	✓	✓	✓		100%		8	8
Lorenzo Robertson	EX	✓	E	✓	✓	EX	✓	✓	✓		100%		8	8
Shirley Samples	✓	✓	E	✓	EX	✓	✓	✓	✓		100%		8	8
Cecil Smith	✓	✓	E	✓	✓	✓	✓	✓	✓		100%		8	8
Kenny Talbot				✓	EX	✓	✓	✓	✓		100%		6	6
Juny Tetevi								✓			50%		1	2
Vicki Tucci								✓	✓		100%		2	2
No longer on the Committee**														
New Members														

* Requested a leave of absence

Requested a non medical excused

** Please note--Thomas McKissack
attendance
since January 2011