

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

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Meeting Date: April 5, 2016
Department: Community Services
Advisory Board: Palm Beach County HIV CARE Council
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I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: reappointments to the Palm Beach County HIV Comprehensive AIDS Resources Emergency (CARE) Council for three (3) year terms effective April 16, 2016.

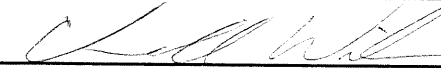

<u>Seat No.</u>	<u>Reappointment</u>	<u>Seat Requirement</u>	<u>Term Ending</u>
2	Vicki A. Krusel (f/k/a Tucci)	CBOs Serving Affected Populations	04/15/2019
11	Mary Piper Kannel	PBC Health Department Representative	04/15/2019
12	Mary Jane Reynolds	Affected Community Representative	04/15/2019
14	Glenn J. Krabec	Affected Community Representative	04/15/2019
16	Cecil Smith	Affected Community Representative	04/15/2019
19	Shirley Ann Samples	Affected Community Representative	04/15/2019
31	Jeannette Tomici	Part D/Org. Serving Children, Youth, Families of HIV	04/15/2019

Summary: The total membership shall be no more than 33 members, per Resolution No. 2011-1560. The HIV CARE Council nominations process is an open process with publicized criteria and legislatively defined conflict of interest standards. The seven reappointments successfully completed the HIV CARE Council nominations process, and the HIV CARE Council has recommended their reappointments. Ms. Kannel has disclosed that she is employed by Florida Department of Health, that contracts with the County for services. Ms. Krusel has disclosed that she is employed by Legal Aid Society of Palm Beach County, that contracts with the County for services. Ms. Tomici has disclosed that she is employed by Children's Case Management Organization, Inc. d/b/a Families First of Palm Beach County, that contracts with the County for 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. Including the current request for appointment, the board makeup will consist of four (4) Black females, three (3) Black males, four (4) White males, three (3) White females, two (2) Hispanic females, one (1) Hispanic male and one (1) Caribbean female. (Ryan White) Countywide (HH)

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.

Attachments:

1. Board/Committee Applications
2. Proposed Inventory of Seats List
3. HIV CARE Council Nominations Policy No. 10
4. CARE Council Attendance

=====
Recommended By:  5/16/16
 Department Director Date
Legal Sufficiency:  3-21-16
 Assistant County Attorney Date

II. REVIEW COMMENTS

A. Other Department Review:

Department Director

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

The information provided on this form will be used in considering your nomination. Please **COMPLETE SECTION II IN FULL**. Answer "none" or "not applicable" where appropriate. **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: 3 Years. From: 4/16/16 To: 4/15/19

Seat Requirement: CBOs serving affected populations/AIDS Service Organization Seat #: 2

*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: none**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Krusel Vicki A. (f/k/a/ Tucci)
Last First Middle

Occupation/Affiliation: Attorney

Owner Employee Officer

Business Name: Legal Aid Society of Palm Beach County

Business Address: 423 Fern Street Ste 200

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

Residence Address: 2383 SW 14th Ave

City & State: Boynton Beach, FL Zip Code: 33426

Home Phone: () Business Phone: (561) 655-8944 Ext. 252

Cell Phone: () Fax: ()

Email Address: vtkrusel@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

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>Example: (R#XX-XX/PO XX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/00-09/30/2100</u>
<u>R2015-0468</u>	<u>Community Service</u>	<u>Ryan White</u>	<u>3/1/15 - 2/29/2016</u>
<u>R2015-1757</u>	<u>Community Service</u>	<u>Ryan White</u>	<u>3/1/15 - 2/29/2016</u>
(Attach Additional Sheet(s), if necessary)			
OR			
NONE	<input type="checkbox"/>	NOT APPLICABLE/ (Governmental Entity)	<input type="checkbox"/>


ETHICS TRAINING: All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the State Guide to the Sunshine Amendment. **Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>.** Ethics training is on-going, and pursuant to PPM CW-P-79 is required before appointment, and upon reappointment.

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 on January 21, 2016
 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:  Printed Name: Vicki Krausel Date: 2/16/16

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) 355-1915.

Return this FORM to:
 {Insert Liaison Name Here}, {Insert Department/Division Here}
 {Insert Address Here}

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 02/01/2016

VICKI A. TUCCI, ESQUIRE
3781 ISLAND CLUB CIRCLE E, LANTANA, FLORIDA 33462
(561) 827-6263/VICKI.TUCCI@GMAIL.COM

EDUCATION

NOVA SOUTHEASTERN UNIVERSITY, JURIS DOCTOR, *CUM LAUDE*, TOP 10%, 2004
FLORIDA ATLANTIC UNIVERSITY, Bachelor of Political Science, *CUM LAUDE*, 2001
SOUTH UNIVERSITY, Associate of Science in Paralegal Studies, *MAGNA CUM LAUDE*, 1997

HONORS

EDUCATION MANAGEMENT CORPORATION, Subject Matter Expert (*Administrative & Constitutional Law*)
ILSA JOURNAL OF INTERNATIONAL & COMPARATIVE LAW, Executive Editor
ALLIANCE DEFENSE FUND, Blackstone Fellow, 2002
HONORABLE KENNETH L. RYSKAMP, U.S. DISTRICT COURT, S.D., *Judicial Intern*
FLORIDA BAR FELLOWSHIP RECIPIENT, PROBONO HONORS PROGRAM PARTICIPANT

COMMUNITY INVOLVEMENT

PALM BEACH COUNTY HIV CARE COUNCIL, Member 08/2011-present
PALM BEACH COUNTY COMMUNITY ALLIANCE COMMITTEE, Member 12/2009-present
SOUTH UNIVERSITY ADVISORY BOARD, Member 1997-2010

EXPERIENCE

LEGAL AID SOCIETY OF PALM BEACH COUNTY, INC., West Palm Beach, Florida
Staff Attorney, 12/05-06/07; 05/10-present

- Currently provide assistance to terminally ill clientele in an effort to provide them access to health care. Areas include: Social Security appeals, health insurance access, landlord/tenant and child support.
- Family law practice, included support, custody, dissolution of marriage and paternity actions
- Recovered over \$2 million dollars in disaster funds for local non-profit organizations
- Mediation of contracts with an emphasis on restoring wholeness to clientele
- Resolved construction litigation claims and family matters through mediation and trials
- Participated in court pandemic committee meetings, under the direction of the Chief Judge
- Provided non-profit agencies assistance with insurance contract reviews and coverage, lease reviews and recommendations, and disaster planning assistance, including plan reviews, contract development, revisions and trainings
- Participated in and conducted countywide employment trainings for non-profit agencies in the areas of Americans with Disabilities Act, Fair Labor Standards Act, employee classifications, wage & hour and general human resource regulations and risk management
- Conducted county-wide disaster preparedness & recovery seminars for non-profit organizations

STATE OF FLORIDA GUARDIAN AD LITEM PROGRAM, West Palm Beach, Florida
Circuit Director, 06/07-05/10; *CLI/Staff Attorney*, 09/03-07/05

- Oversight of recruitment, training, retention and management of hundreds volunteer GALs
- Development of Program procedures/policies – including first local human resource policy manual
- Work along with the State GAL Program on human resources, financial and legal management
- Responsible for all hiring, management, discipline and termination of staff
- Review and advisement on proposed and upcoming legislation
- Continuous risk management with a focus on the protection of the children and agency
- Management of complaints, including investigation and final decision-making
- Legal representation of the GAL Program and best interests of children in dependency court, including representation at dependency and termination of parental rights trials

- Case management and oversight of internal case reviews and review processes
- Collaboration with community child advocacy and legal organizations, including drafting and development of Memorandum of Understanding and various contracts
- Participation in management level case staffing meetings with agency partner leadership
- Participation in numerous committees and boards, with a focus on the dependency system
- Conduct presentations and trainings across the community on child advocacy and legal matters
- Development of a supporting non-profit organization, including research and preliminary drafting of corporation documents, selection and appointment of initial Board of Directors, legal advisement to the Board and continual oversight in all organization matters
- Brainstormed appellate strategies and drafted various appellate documents

SOUTH UNIVERSITY, West Palm Beach, Florida

University & On-line Instructor, ABA-Approved Paralegal Program, 10/04-Present

- Instruct paralegal students in the areas of: administrative law, computers in the legal office, constitutional law, contracts, domestic law, employment law, medical ethics/law, and probate
- Teach oral argument, public speaking, drafting and negotiation skills
- Facilitate and supervise internships with graduating paralegal students
- Provide input on program development and policies
- Consultation and development of new online course materials, including Social Security Administration Appeal projects and mock trials

AMERICAN COLLEGE OF PEDIATRICIANS, Nationwide organization, local office Lantana, Florida

Executive Director, 06/05-03/07

- Worked along with a 15 member Board to develop and grow a young, nationwide, non-profit organization with a mission to assist children nationwide
- Ascertained the needs of the organization and moved forward in planning, recruitment, membership retention, and fundraising
- Wholly responsible for the day-to-day office management, including fiscal and budgeting
- Provided legal advisement to the Board of Directors as the sole legal representative
- Provided legal representation through a Amicus Curie brief filed with the U.S. Supreme Court
- Researched and reviewed upcoming legislation and current laws nationwide Supervision and direction of an independent contractor and volunteers

PRIVATE PRACTICE, SOLO PRACTITIONER, Palm Beach & Broward Counties, 07/05-12/06

- Representation of clients in general practice areas, including: adoption, contracts, criminal, dependency, employment, estates and probate, family, juvenile, and traffic matters
- Co-counseled several Amicus Briefs to the United States Supreme Court
- Provided contract services to other firms as needed

ALLIANCE DEFENSE FUND, Scottsdale, Arizona

Blackstone Fellowship Intern, 06/02-08/02

- Trained on constitutional law, public policy, legal history and the philosophy of law
- Conducted research and writing on complex constitutional issues
- Provided strategy recommendations on large impact cases
- Prepared press releases, radio clips, media responses, and memoranda
- Brainstormed with attorneys from across the country on constitutional matters and strategies
- Trained high school children in drafting and debating legislation

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

*The information provided on this form will be used in considering your nomination. Please **COMPLETE SECTION II IN FULL.** Answer "none" or "not applicable" where appropriate. **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: 3 Years. From: 4/16/16 April 2016 To: 4/15/19 April 2019
Seat Requirement: PBC Health Department-Local Public Health Agency Seat #: 11
 *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: none**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Kannel Mary Piper
Last First Middle
Occupation/Affiliation: Operations and Management Consultant Manager
Owner Employee Officer
Business Name: Florida Department of Health
Business Address: 1150 45th Street
City & State West Palm Beach, FL Zip Code: 33407
Residence Address: 4661 120 Ave North
City & State West Palm Beach, FL Zip Code: 33411
Home Phone: () Business Phone: (561) 514-5322 Ext. _____
Cell Phone: () Fax: ()
Email Address: Mary.kannel@flhealth.gov

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>Example: (R#XX-XX/PO XX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/00-09/30/2100</u>
<u>B2DIS-0707</u>	<u>Community Services</u>	<u>Ryan White</u>	<u>3/1/15-2/29/2016</u>

(Attach Additional Sheet(s), if necessary)
OR

NONE

NOT APPLICABLE/
(Governmental Entity)

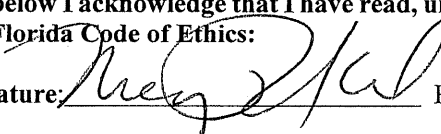
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- By watching the training program on the Web, DVD or VHS on January 25, 2016
 By attending a live presentation given on _____, 20____

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:  Printed Name: MARY KANNER Date: 02/17/16

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Return this FORM to:
 {Insert Liaison Name Here}, {Insert Department/Division Here}
 {Insert Address Here}

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

Mary Piper Kannel

Education

Antioch College	Master's Program	Clinical Psychology	1975-1977
		No thesis & non-degreed	
Ithaca College	Bachelor's Program	Psychology	1975

Work Experience

Florida Department of Health, Palm Beach County, FL	2003-Present
Operations and Management Consultant	
Haitian Center for Family Services, Riviera Beach, FL	2002-2003
Case Management Consultant	
Comprehensive AIDS Program of Palm Beach County, Inc.	1989-2002
Case Manager, Client Services Coordinator, Director of Client Services	
Island Princess Hotel, Turks and Caicos, BWI	1977-1989
Owner/Operator	
Shakespeare Institute, Mahmoud Abad, Iran	1977
Teacher	

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

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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: 3 Years. From: 4/16/16 April 2016 To: 4/15/19 April 2019

Seat Requirement: Affected Community Representative Seat #: 12

*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: none**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Reynolds Mary Jane
Last First Middle

Occupation/Affiliation: Community Member
Owner Employee Officer

Business Name: Not applicable

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 1665 NW 11th Street

City & State Belle Glade, FL Zip Code: 33430

Home Phone: (561) 985-8989 Business Phone: () Ext. _____

Cell Phone: () Fax: ()

Email Address: _____

Mailing Address Preference: Business Residence

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

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>Example: (R#XX-XX/PO XX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/00-09/30/2100</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)
OR

NONE

NOT APPLICABLE/
(Governmental Entity)

ETHICS TRAINING: All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the State Guide to the Sunshine Amendment, **Article XIII**, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. Ethics training is on-going, and pursuant to PPM CW-P-79 is required before appointment, and upon reappointment.

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 on January 21, 2016
 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: Mary Reynolds Printed Name: Mary Reynolds Date: 1/15/2016

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) 355-1915.

Return this FORM to:

{Insert Liaison Name Here}, {Insert Department/Division Here}
{Insert Address Here}

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 02/01/2016

Mary Jane Reynolds is from the Belle Glade, FL and has been a member of the Palm Beach County HIV CARE Council for approximately 23 years. She currently serves as the chair of the Community Awareness Committee and has been active in many other committees such as the Planning committee and Priorities and Allocations committee. She is determined to continue her active membership with the CARE Council and the Community Awareness Committee because she has a passion for getting out into the community and educating others, as well as navigating others through the process of receiving and staying in care. In addition to the CARE Council, she is requested on a regular basis to speak about HIV/AIDS at various local events. At these events, she always promotes the importance of the CARE Council and ways to become involved.

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At Large Appointment or District Appointment /District #: _____

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Seat Requirement: Affected Community Representative Seat #: 14

*Reappointment or New Appointment

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

Completion of term to expire on: _____

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Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Krabec Glenn _____
Last First Middle

Occupation/Affiliation: Community Member _____
Owner Employee Officer

Business Name: Retired _____

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 5754 River Club Circle _____

City & State Jupiter, FL Zip Code: 33458

Home Phone: (561) 222-5324 Business Phone: () Ext. _____

Cell Phone: () Fax: ()

Email Address: krabec@bellsouth.net

Mailing Address Preference: Business Residence

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

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:

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(Attach Additional Sheet(s), if necessary)
OR

NONE

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(Governmental Entity)

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 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: Glenn Krabec Printed Name: Glenn Krabec Date: 2/15/16

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) 355-1915.

Return this FORM to:

{Insert Liaison Name Here}, {Insert Department/Division Here}
{Insert Address Here}

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 02/01/2016

Glenn Krabec has been a member of the CARE Council for many years. He has been a leader both in title and in CARE Council commitment. Glenn is currently the Vice-Chair of the Priorities and Allocations committee and serves on the Membership Committee. He conducts the Robert's Rules of Order trainings for all new members and serves as the expert for questions during meeting on protocol. Glenn provides constructive feedback and thoughtful input during each CARE Council meeting. He thinks through each issue and truly understands the balance between medical and support services issues. He is an asset to the council and is excited to remain engaged as a member.

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

The information provided on this form will be used in considering your nomination. Please **COMPLETE SECTION II IN FULL**. Answer "none" or "not applicable" where appropriate. **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: 3 Years. From: 4/16/16 April 2016 To: 4/15/19 April 2019

Seat Requirement: Affected Community Representative Seat #: 16

*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: none**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Smith Cecil _____
Last First Middle

Occupation/Affiliation: Community Member

Owner Employee Officer

Business Name: Not applicable

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 1500 North Congress Avenue #A-305

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

Home Phone: (561) 460-4102 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>Example: (R#XX-XX/PO XX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/00-09/30/2100</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)
OR

NONE

NOT APPLICABLE/
(Governmental Entity)

ETHICS TRAINING: All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the State Guide to the Sunshine Amendment, **Article XIII**, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. Ethics training is on-going, and pursuant to PPM CW-P-79 is required before appointment, and upon reappointment.

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 on January 25, 2016
 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: Cecil Smith Printed Name: Cecil Smith Date: 2/15/16

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) 355-1915.

Return this FORM to:
 {Insert Liaison Name Here}, {Insert Department/Division Here}
 {Insert Address Here}

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

I, Cecil Smith, have been a member of the Palm Beach County HIV CARE Council for over 13 years. I have enjoyed being a part of an organization that is important to the lives of HIV-positive men, women, and children. I have been a member of various committees such as planning, community awareness, and joint medical and support services. Being a member, I am in a position to help make decisions related to Ryan White programs. I want to always volunteer and help others. Hopefully, I am a PWLHA that will make a difference and have an impact in the HIV community. I am an advocate for people living with HIV and would like to continue to make a difference.

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

The information provided on this form will be used in considering your nomination. Please **COMPLETE SECTION II IN FULL**. Answer "none" or "not applicable" where appropriate. **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: 3 Years. From: 4/16/16 April 2016 To: 4/15/19 April 2019

Seat Requirement: Affected Community Representative Seat #: 19

*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: none**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Samples Shirley Ann
Last First Middle

Occupation/Affiliation: Community Member

Owner Employee Officer

Business Name: Not applicable

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 1316 SW "B" Place Apt 1

City & State Belle Glade, FL Zip Code: 33430

Home Phone: (561) 598-1211 Business Phone: () Ext. _____

Cell Phone: () Fax: ()

Email Address: _____

Mailing Address Preference: Business Residence

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

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>Example: (R#XX-XX/PO XX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/00-09/30/2100</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)
OR

NONE

NOT APPLICABLE/
(Governmental Entity)

ETHICS TRAINING: All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the State Guide to the Sunshine Amendment. **Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>.** Ethics training is on-going, and pursuant to PPM CW-P-79 is required before appointment, and upon reappointment.

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 on January 21, 2016
 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: *Shirley Sample* Printed Name: SHIRLEY SAMPLE Date: 2-15-16

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) 355-1915.

Return this FORM to:
 {Insert Liaison Name Here}, {Insert Department/Division Here}
 {Insert Address Here}

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 02/01/2016

Shirley Samples has been a member of the Palm Beach County HIV CARE Council for approximately 21 years. She is a native of Belle Glade, FL and has become an engaged community member and CARE Council member. Shirley represents her community and keeps the needs of people with living with HIV at the forefront of her involvement. She enjoys being a CARE Council member because she is able to learn more about local services and providers, as well as positively impact her community. She has remained an active member of almost all of the CARE Council committees for many years. She would like to remain a CARE Council member to continue to be an asset to her community.

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

*The information provided on this form will be used in considering your nomination. Please **COMPLETE SECTION II IN FULL**. Answer "none" or "not applicable" where appropriate. **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: 3 Years. From: April 16, 2016 To: April 15, 2019
Seat Requirement: Part D: Serving Children, Youth, Families of HIV Seat #: 31
 *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: none**

Section II (Applicant): (Please Print)
APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Tomici Jeannette
Last First Middle
Occupation/Affiliation: TOPWA Supervisor
Owner Employee Officer
Business Name: Families First of Palm Beach County
Business Address: 3333 Forest Hill Blvd
City & State West Palm Beach, FL Zip Code: 33406
Residence Address: 1237 Pine Sage Circle
City & State West Palm Beach, FL Zip Code: 33409
Home Phone: () Business Phone: (561) 721-2887 Ext. _____
Cell Phone: () Fax: (561) 721-2809
Email Address: jtomici@familiesfirstpbc.org
Mailing Address Preference: Business Residence
Have you ever been convicted of a felony: Yes _____ No x
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>Example: (R#XX-XX/PO XX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/00-09/30/2100</u>
<u>R2015-1429</u>	<u>Community Services/ FAA</u>	<u>Client Services</u>	<u>10/01/15 - 09/30/16</u>

(Attach Additional Sheet(s), if necessary)

OR

NONE

NOT APPLICABLE/
(Governmental Entity)

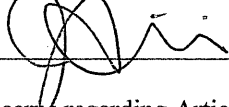
ETHICS TRAINING: All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the State Guide to the Sunshine Amendment. **Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>.** Ethics training is on-going, and pursuant to PPM CW-P-79 is required before appointment, and upon reappointment.

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 on February 15, 2016
 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:  Printed Name: Jeannette Tomasi Date: 2/16/16

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) 355-1915.

Return this FORM to:
 {Insert Liaison Name Here}, {Insert Department/Division Here}
 {Insert Address Here}

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

Jeannette Tomici

1237 Pine Sage Circle West Palm Beach, FL 33409- 561.351.8810 – Soberaln@gmail.com

Areas of Specialty

- HIV/AIDS
- Pregnant Women
- Sexual, Physical & Emotional Abuse
- Child & Family Welfare
- **Bilingual; Fluent in Spanish & English**
- Domestic Violence
- Substance Abuse

Education

Master of Social Work
Barry University – Palm Beach Gardens, FL

August, 2012 – December, 2013

Bachelor of Social Work
Florida Atlantic University – Boca Raton, FL

August, 2007 - December, 2011

Relevant Experience

Healthy Families

TOPWA and Oasis Program Supervisor

April 2014- Present

- Directing, planning and supervising staff.
- Planning events for program and agency.
- Evaluating performance of staff and reflecting upon opportunities and positive traits.
- Data collection.
- Networking and outreach activities with other community providers.
- Engagement in collaborative services.
- Evaluation of program outcomes.
- Preparation of program reports.
- Staffing HIV infected cases.
- Attend CPP and Care Council Meetings.

Healthy Families

January, 2012 – April 2014

Family Support Worker

- Cultivating and strengthening nurturing parent-child relationships in a healthy, safe home.
- Providing education about the importance of child health, immunizations and well-baby check-ups.
- Conducting child screenings for developmental delays which promote healthy childhood growth and development.
- Promoting self-sufficiency by setting and achieving goals, furthering their education and acquiring stable employment.
- Facilitate monthly support groups.
- Record and manage case notes.

SOCIAL WORK INTERNSHIP (Masters) *January 2013- August, 2013*

Partners for Change

- Provide therapeutic intervention services to adult substance abusers.
- Facilitated six adult groups in cases of substance abuse with focus on treatment plan goals and objectives.
- Conduct bio psychosocial on participants.
- Provide emergency crisis counseling.
- Prepare and demonstrate safety-plans.
- One-on-one therapy.
- Maintain updated accurate clinical files in compliance with state and federal regulations.
- Participate in clinical roundtable.

SOCIAL WORK INTERNSHIP (Bachelors) August, 2010- May, 2011
The Children's Place at Home Safe

- Provide therapeutic intervention services to children and adolescents using individual, family, and group treatment.
- Co-facilitate children and adolescent groups in cases of domestic violence with focus on treatment plan goals and objectives.
- Complete case management notes on a daily basis as needed for non-clinical interventions.
- Conduct bio psychosocial on children and adolescents.
- Provide emergency crisis counseling to victims of domestic violence.
- Facilitate parenting classes for female victims with a focus on managing difficult behavior and encouraging good behavior in children; classes are followed up by processing.
- Prepare and demonstrate safety-plans with children and adolescents.
- Maintain updated accurate clinical files in compliance with state and federal regulations.
- Participate in clinical roundtable.
- Administrative duties including, but not limited to filing, organizing, computer input, research.

**Community
Service
Activities**

- Community Prevention Partnership (CPP)
- Palm Beach County HIV/AIDS Care Council member
- National Association of Social Work (NASW) member
- Yearly volunteer assistant-coordinator for The Clarence Clemons Classic to benefit Home Safe

**Professional
References**

- **Maria Cabrera, LCSW**
HCHV Homeless Coordinator
561.667.5203 - Mobile
Healthcare for Homeless Veterans Program (Building 6)
West Palm Beach VAMC/122
7305 North Military Trail
West Palm Beach FL 33410
- **Cristy Johnson, LCSW**
561.313.3859 - Mobile
Women's Wellness Clinic / VA
West Palm Beach VAMC/122
7305 North Military Trail
West Palm Beach FL 33410
- **Joe Maltese**
Marketing Director
561.722.5645 - Mobile
Home Safe
2840 6th Avenue South
Lake Worth, FL 33461

Palm Beach County HIV CARE Council

Proposed Inventory of Seats

Updated 2.17.16

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

[Recently approved by BCC - renewal member](#)

SEAT	PROVIDERS - SEATS 1-11	OCCUPANT	POSITION/ORGANIZATION	TERM EXPIRES	DEMOGRAPHIC INFO.
1	Health care provider, including federally qualified health centers	OPEN CHAIR			
2	Community-Based Organizations serving affected populations/AIDS Service Organizations	Vicki Ann Krusel	Legal AID Society of Palm Beach County, Inc.	4/15/2016	WF
3	Community-Based Organization serving affected populations/AIDS Service Organizations	OPEN CHAIR			
4	Community-Based Organizations serving affected population/AIDS Service Organizations	OPEN CHAIR			
5	Social Service Providers, including housing and homeless service providers	Quinton Dames	FoundCare, Inc.	09/21/2018	BM
6	Social Service Providers, including housing and homeless service providers	Lilia Perez	FoundCare, Inc.	10/06/2017	HF
7	Social Service Providers, including housing and homeless services providers	Kimberly Rommel-Enright	Legal AID Society of Palm Beach County, Inc.	11/14/2016	WF
8	Social Service Providers, including housing and homeless service providers	OPEN CHAIR			
9	Mental Health and/or Substance Abuse Provider	Jesus Bautista	Compass, Inc.	9/21/2018	HM
10	Substance Abuse and/or Mental Health Providers	Thomas McKissack	Jerome Golden Center for Behavioral Health	11/14/2016	BM
11	Local Public Health Agencies	Mary Piper Kannel	PBC Health Department	4/15/2016	WF

Palm Beach County HIV CARE Council

Proposed 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 People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Mary Jane Reynolds	Community Member	4/15/2016	BF
13	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	OPEN CHAIR	Community Member		
14	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Glenn Krabec, PhD	Community Member	4/15/2016	WM
15	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	OPEN CHAIR			
16	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Cecil Smith	Community Member	4/15/2016	BM
17	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	OPEN CHAIR			
18	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	OPEN CHAIR			
19	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Shirley Samples	Community Member	4/15/2016	BF
20	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	Don Hilliard	Community Member	11/14/2016	WM
21	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	OPEN CHAIR			
22	Affected Communities, including People Living with HIV/AIDS and historically under-served subpopulations and/or individuals co-infected with Hepatitis B/C	OPEN CHAIR			

Palm Beach County HIV CARE Council

Proposed 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	Chris Dowden	Skyemed	9/21/2018	WM
25	Non-Elected Community Leaders	Denise St. Joy	Nursing Services of Palm Beach	10/06/2017	CF
26	Non-Elected Community Leaders	OPEN CHAIR			
27	Non-Elected Community Leaders	OPEN CHAIR			
28	State Medicaid Agency	OPEN CHAIR			
29	State Part B Agency	Mitchell Durant	Florida Health, Palm Beach County	11/14/2016	WM
30	Hospital Planning Agencies or other health care planning agencies	OPEN CHAIR			
31	Part D, or if none present, representatives of organizations addressing the needs of children, youth, and families with HIV	Jeannette Tomici	Families First of Palm Beach County	04/15/2016	HF
32	Other federal HIV Programs, including HIV Prevention Program	Patrice Huntley	Compass, Inc.	01/25/2019	BF
33	Representative of/ or formerly incarcerated People Living with HIV/AIDS	Stephanie Jordan	Community Member	04/15/2019	BF

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, M= Multi-Race

Palm Beach County HIV CARE Council
CARE 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**
Amended: **June 25, 2012**

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

This policy is adopted by the CARE Council (CARE Council), for the purpose of ensuring there is an open and fair nomination 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 nomination policy which complies with directives of the Division of HIV Services (DHS) and 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 CARE Council shall be sought from a wide spectrum of potential members. Recruitment shall be made through existing CARE Council committees and

through ongoing solicitation through existing CARE 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 CARE Council membership. Recruitment is not just the Membership Committee's responsibility. CARE 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.
2. Potential applicants shall be provided a nominations packet containing a letter describing roles and responsibilities of the CARE 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 used to gather information about: relevant experience, expertise, skills, the person's 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 per "Procedure for Applicant Interviews". 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.
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. The Membership Committee may also consider activities as involvement in Membership Development Sessions. 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 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. The candidate must document completion of the Palm Beach County ethics training prior to submission of their name to the Palm Beach County Board of County Commissioners. In the event a recommended candidate is not acceptable to the Palm Beach County Board of County Commissioners, a request for a replacement candidate, if available, will be forwarded to the Membership Committee and the Membership Committee will provide the name of another candidate to the 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.

1. **Candidates must fulfill the following requirements prior to being forwarded for CARE Council Membership:** Candidates must join one (1) committee and attend at least three (3) meetings. one (1) of which must be either a CARE Council meeting, or CARE Council sponsored training (inclusive of annual retreat) within a one (1) year period.
2. 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.

CARE COUNCIL MEMBERS
ATTENDANCE COMPLIANCE TRACKING FORM –TALLIED January 2015 to December 2015
Palm Beach County HIV CARE Council Committee

CARE Council Members	JAN. Regular 1-26-15	FEB. Regular 2-23-15	MAR. Regular	APRIL Regular 4-27-15	MAY Regular 5-18-15	JUNE Regular 6-29-15	JULY Regular 7-27-15	AUG. Regular	SEPT. Regular 09-28-15	OCT. Regular 10-26-15	NOV. Regular	DEC. Regular
OPEN CHAIR (Seat 1)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TUCCI, Vicki (Seat 2)	NO	YES	No Meeting	YES	YES	YES	NO	No Meeting	YES	YES	No Meeting	No Meeting
CHRONICLE, Marsharee – OPEN SEAT (Seat 3)	YES	YES	Resigned	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
OPEN CHAIR (Seat 4)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
DAMES, Quinton (Seat 5)	YES (Seat 15)	YES (Seat 15)	N/A	YES (Seat 15)	EX	YES (Seat 15)	YES (Seat 15)	N/A	YES	YES	No Meeting	No Meeting
PEREZ, Lilia (Seat 6)	YES	YES	No Meeting	NO	YES	YES	YES		YES	YES	No Meeting	No Meeting
ENRIGHT, Kim (Seat 7)	YES	YES	No Meeting	YES	YES	YES	YES	No Meeting	YES	YES	No Meeting	No Meeting
OPEN SEAT (Seat 8)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
JESUS BAUTISTA (Seat 9)	NEW MEMBER								N/A	YES	No Meeting	No Meeting

CARE Council Members	JAN. Regular 1-26-15	FEB. Regular 2-23-15	MAR. Regular	APRIL Regular 4-27-15	MAY Regular 5-18-15	JUNE Regular 6-29-15	JULY Regular 7-27-15	AUG. Regular	SEPT. Regular 9-28-15	OCT. Regular 10-26-15	NOV. Regular	DEC. Regular
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OPEN CHAIR (Seat 10)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
KANNEL, Mary (Seat 11)	YES	YES	No Meeting	YES	YES	NO	YES	No Meeting	YES	YES	No Meeting	No Meeting
REYNOLDS, Mary Jane (Seat 12)	Medical Leave	Medical Leave	No Meeting	YES	YES	YES	YES	No Meeting	YES	YES	No Meeting	No Meeting
OPEN CHAIR (Seat 13)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
KRABEC, Dr. Glenn (Seat 14)	YES	YES	No Meeting	YES	YES	YES	YES	No Meeting	YES	YES	No Meeting	No Meeting
OPEN CHAIR (Seat 15)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
SMITH, Cecil (Seat 16)	YES	NO	No Meeting	YES	YES	YES	YES	No Meeting	YES	EX	No Meeting	No Meeting
OPEN CHAIR (Seat 17)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
MCGEE, Melissa – OPEN SEAT (Seat 18)	EX	NO	No Meeting	NO	NO	NO	NO	No Meeting	Removed	N/A	N/A	N/A
SAMPLES, Shirley (Seat 19)	YES	EX	No Meeting	YES	NO	EX	EX	No Meeting	YES	NO	No Meeting	No Meeting
HILLIARD, Don (Seat 20)	YES	YES	No Meeting	YES	YES	YES	YES	No Meeting	YES	NO	No Meeting	No Meeting
OSBAND, Larry - OPEN SEAT (Seat 21)	YES	YES	No Meeting	YES	YES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

CARE Council Members	JAN. Regular 1-26-15	FEB. Regular 2-23-15	MAR. Regular	APRIL Regular 4-27-15	MAY Regular 5-18-15	JUNE Regular 6-29-15	JULY Regular 7-27-15	AUG. Regular	SEPT. Regular 9-28-15	OCT. Regular 10-26-15	NOV. Regular	DEC. Regular
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OPEN CHAIR (Seat 22)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
BROOKS, Charles - OPEN SEAT (Seat 23)	NO	NO	No Meeting	NO	NO	NO	NO	No Meeting	Removed	N/A	N/A	N/A
DOWDEN, Chris (Seat 24)	NEW MEMBER								N/A	YES	No Meeting	No Meeting
ST. JOY, Denise (Seat 25)	YES	YES	No Meeting	YES	NO	YES	YES	No Meeting	YES	YES	No Meeting	No Meeting
OPEN CHAIR (Seat 26)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
OPEN CHAIR (Seat 27)	NEW MEMBER								N/A	N/A	N/A	N/A
MARTES, Kelly – OPEN SEAT (Seat 28)	YES	YES	No Meeting	Resigned	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
DURANT, Mitchell (Seat 29)	YES	YES	No Meeting	YES	YES	YES	YES	No Meeting	YES	YES	No Meeting	No Meeting
OPEN CHAIR (Seat 30)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TOMICI, Jeanette (Seat 31)	YES	YES	No Meeting	YES	NO	YES	YES	No Meeting	YES	YES	No Meeting	No Meeting
WHITE, Tony Martez – OPEN SEAT (Seat 32)	NO	NO	No Meeting	NO	NO	YES	NO	No Meeting	Removed	N/A	N/A	N/A
MCKISSACK, Thomas (Seat 33)	YES	YES	No Meeting	NO	YES	YES	NO	No Meeting	YES	YES	No Meeting	No Meeting