

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARD APPOINTMENT SUMMARY

Meeting Date: May 17, 2016
Department: Community Services
Advisory Board: Palm Beach County HIV CARE Council

I. EXECUTIVE BRIEF


Motion and Title: Staff recommends motion to approve: appointments to the Palm Beach County HIV Comprehensive AIDS Resources Emergency (CARE) Council for three (3) year terms effective May 17, 2016.

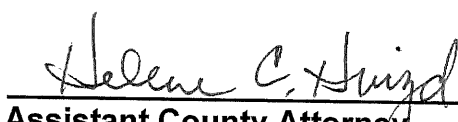
<u>Seat No.</u>	<u>Appointment</u>	<u>Seat Requirement</u>	<u>Term Ending</u>
4	Wisny Marcellus	Community Based Organizations Serving Affected Populations	05/16/2019
8	Mark D. White	Social Service Providers	05/16/2019

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. These appointments have successfully completed the HIV CARE Council’s nomination process and the HIV CARE Council recommends these appointments. Including the current request for appointment, the board makeup will consist of four (4) Black females, four (4) Black males, five (5) 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

Recommended By:  4/28/16
Department Director Date

Legal Sufficiency:  4-29-16
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: PBC HIV CARE Council Advisory ☒ Not Advisory ☐
☒ At Large Appointment or ☐ District Appointment /District #: _____
Term of Appointment: 3 Years. From: 2016 5/17/16 To: 2019 5/16/19
Seat Requirement: Community-Based Orgs serving affected population/AIDS service orgs Seat #: 4
☐ *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:** _____

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Marcellus Wisny
Last First Middle
Occupation/Affiliation: Genesis Community Health
Owner ☐ Employee ☒ Officer ☐
Business Name: Genesis Community Health
Business Address: 2623 S. Seacrest Blvd Suite 65
City & State Boynton Beach, FL Zip Code: 33435
Residence Address: 10684 Old Hammock Way
City & State Wellington, FL Zip Code: 33414
Home Phone: (561) 715-5641 Business Phone: (561) 806-6607 Ext. _____
Cell Phone: () Fax: ()
Email Address: wmarcellus@gencomhealth.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>
_____	_____	_____	_____
_____	_____	_____	_____
(Attach Additional Sheet(s), if necessary)			
OR			
NONE	<input checked="" 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 3/27 /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: [Signature] Printed Name: Winy Marcellos Date: 3/28/16

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: _____

Wisny Marcellus

Wellington, FL 33414

Phone: 561-715-5641

Email: WMarcellus@gencomhealth.org

Training

HIV/AIDS 500 and 501: Prevention, Counseling, Testing, and Linkage course administered through the Florida Department of Health completed on April 30, 2015.

Good Clinical Practice: an Introduction to ICH-GCP Guidelines course administered through the Association of Clinical Research Professionals completed on January 19, 2015.

Education

B.S. in Economics from the Florida State University

Professional Affiliations

- Member of the Association of Clinical Research Professionals (ACRP)
- 2016 New Leaders Council Fellow – Palm Beach Chapter
- Member of the CPP, Community Prevention Partnership

Skills and Strengths

- Effective communication and interpersonal skills
- Proactive in keeping a neat and organized document trail/Attention to detail
- Flexible and adaptive to a changing work environment and shifts in priorities
- Process-Oriented
- Willingness to work within a team dynamic
- Proficient in Microsoft Office suite

Employment Experience

HIV Outreach and Testing Coordinator

Genesis Community Health, Boynton Beach, FL, June 2015 –present

- Oversee a grant-funded initiative to provide HIV care services in a clinical setting
- Conduct confidential HIV testing and counseling
- Conduct HIV Education classes to at-risk groups
- Generate reports to be submitted into the FDOH for compliance
- Maintain a log of testing and outreach activity
- Serve as a liaison between the organization and other agencies

Customer Service Rep.

Whole Foods Market, Wellington, FL, January 2013 – May 2015

Licensed Independent Sales Agent

AFLAC, West Palm Beach, FL, February 2011- January 2013

- Managed sensitive documents including applications for insurance and medical history forms
- Scheduled meetings with business owners
- Conducted sales presentations to business owners and their employees

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: HIV CARE Council Advisory ☒ Not Advisory ☐

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

Term of Appointment: 3 Years. From: 2016 5/17/16 To: 2018 5/16/19

Seat Requirement: Social Service Provider, including housing and homeless service providers Seat #: 8

☐ *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: _____**

Section II (Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: White Mark David
Last First Middle

Occupation/Affiliation: HCD Administrator
Owner ☐ Employee ☒ Officer ☐

Business Name: City of West Palm Beach

Business Address: 401 Clematis Street

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

Residence Address: 17894 89th Place North

City & State Loxahatchee, FL Zip Code: 33470

Home Phone: () Business Phone: (561) 822-1250 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:

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<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
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_____	_____	_____	_____
_____	_____	_____	_____
(Attach Additional Sheet(s), if necessary)			
OR			
NONE	<input type="checkbox"/>	NOT APPLICABLE/ (Governmental Entity)	<input checked="" type="checkbox"/>

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_____ By watching the training program on the Web, DVD or VHS on _____ 20_____
☒ By attending a live presentation given on 10/13, 20 15

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: MARC WHITE Date: 3/22/16

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: _____

RESUME

Mark D. White
Loxahatchee, FL 33470

Experience

Housing and Community Development Administrator City of West Palm Beach West Palm Beach, FL	2014 - Present
Financial Analyst I Palm Beach County Board of County Commissioners West Palm Beach, FL	2013 - 2014
Community Planning and Development Specialist U.S. Department of Housing and Urban Development Miami, FL	2009 - 2013
Vice President of Sales and Marketing Advanced BioSystems, Inc. Pembroke Pines, FL	2002 - 2009

Education

Master of Business Administration
Nova Southeastern University
Fort Lauderdale, FL

Bachelor of Business Administration
Clearwater Christian College
Clearwater, FL

Palm Beach County HIV CARE Council

Proposed Inventory of Seats

Updated 3.22.16

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	Wisny Marcellus	Genesis Community Health	05/16/2019	BM
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	Mark White	City of West Palm Beach	05/16/2019	WM
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			
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 individuals 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.