

HIV/AIDS Planning Council
Supervision Plan for
Planning Council Administrator

Approved by the Planning Council on
July 12, 2004

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14, 2008

Supervision of Planning Council Administrator

This supervisory structure seeks to:

- Effectively manage the potential conflicts of interests, to the extent that is reasonable, between the Planning Council Administrator position, the Health Department Co-Chair of the Planning Council, and the HIV/AIDS Program.
 - Establish a relationship with the Council, its Administrator, and other staff that comes as close as possible to that of a contractor, while understanding that these positions are employees of King County Public Health, and that there are certain responsibilities that Public Health, as an employer, must solely retain. The Council Administrator will provide monthly budget monitoring reports to the Public Health Care Planner and Prevention Planner. The monthly budget monitoring reports will serve the same function as a monthly contractor invoice and be due by the monthly Public Health budget monitoring deadline. Spending in the Council budget will observe the same “10% rule” that is applied to all contractor budgets.
1. The HIV/AIDS Program Manager will be the sole supervisor of the Council Administrator.
 2. The HIV/AIDS Program Manager may not be a member of the Planning Council and will NOT be required to attend Council meetings.
 3. Feedback meetings between the four Co-Chairs, the HIV/AIDS Program Manager, and the Council Administrator will occur as needed.
 4. All four Co-Chairs, with the HIV/AIDS Program Manager will jointly determine the scope of work for the Administrator and assess progress in meeting goals.
 5. In order for the HIV/AIDS Program Manager to get additional input on Council meetings (over and above the perceptions of the Co-Chairs), the Assessment and Evaluation Coordinator will conduct evaluations of a meaningful sample of Council meetings and all prioritization meetings.
 6. All four Co-Chairs, along with the HIV/AIDS Program Manager, will set parameters for evaluating the Council Administrator. At least once every year, each will fill out a performance appraisal of the Administrator (with input from other Executive Committee members where available and appropriate, as well as meeting evaluations conducted by the Assessment and Evaluation Coordinator). Then the HIV/AIDS Program Manager and the four Council Co-Chairs will compile the performance appraisal and meet with the Council Administrator to discuss the evaluation. Performance feedback on the Council Administrator will be received from the Council Co-Chairs and will be included verbatim as part of the performance appraisal. The HIV/AIDS Program Manager will be solely responsible for the final performance appraisal document and its delivery and review with the Council Administrator.
 7. The HIV/AIDS Program Manager shall actively solicit performance appraisal input on the Council Administrator’s performance from all of the Co-Chairs on all of the evaluation parameters included in the King County performance appraisal document. Feedback from the Care and Prevention Planning Managers should also be included as part of the annual review for the PC Administrator, and the PC

Administrator should provide feedback on the annual review of the Care and Prevention Planning Managers.

8. It is expected that, in the normal course of the Council's work, Co-Chairs are likely to have differing points of view. Additionally, the Council and Public Health may also have differing points of view on a variety of issues. The four Co-Chairs and the HIV/AIDS Program Manager will refrain from any attempt to influence the Council Administrator to adopt a perspective, position or point of view concerning any issue, process, or person involved with the business of the Council, thus ensuring that the Administrator will remain unbiased in his/her work.
9. If a conflict arises between the HIV/AIDS Program Manager and the Council Co-Chairs regarding the supervision of the Council Administrator, the Prevention Division Manager will arbitrate the dispute.
10. If Public Health determines that the HIV/AIDS Program Manager is unable or unwilling to supervise the Planning Council Administrator, then another Public Health staff member (at the HIV/AIDS Program Manager's level or higher) should be identified to supervise the position, agreeing to the stipulations above. This person should not be a Planning Council member. Should this transfer of supervision occur, Public Health will renegotiate the specifics of the new arrangement with the Planning Council via the Co-Chairs.
11. In the interest of managing potential conflicts of interest, the Council Administrator will facilitate the Council's prioritization processes and shall not attend HIV/AIDS Program management meetings (e.g., team leaders).