

MN Council for HIV/AIDS Care and Prevention Meeting

May 9, 2017

9 am-12 pm

Health Services Building, Room L15

525 Portland Ave. S., Minneapolis

Minutes

Council Members Present:	
Alejandro Aguilera	David Neller
Robert Andrews	Lesla Nelson (Council Co-Chair)
Lisa Behr	Gelli Overton
Tom Bichanga	Val Rubin-Rashaad
Roger Ernst (Council Co-Chair)	Tyrie Stanley
Terral Ewing	Matt Toburen
Robert Gillum, Jr.	Thuan Tran
Rachel Heule	Gwen Velez
Ejay Jack	John Vener, MD
Stephen Jensen	Johnnie Williams
Florence Kulubya-Nabeta	Monica Yugu
Valentine Momo	Loyal Brooks
Beilca Guevara	Lenny Hayes
McKinzie Woelfel (Council Co-Chair)	
Council Members Absent: None	
Community Members/Guests/Consultants:	
Kathy Flynn, Ramsey County	Ryann Freeman, Hennepin County
Alissa Fountain, Children's Minnesota	Nigel Perrote, City of Minneapolis
Andrew Schuster	Aaron Peterson, Hennepin County
Dennis Anderson, Community Member	Jared Shenk, MDH
Kevin Moore	Walter Urey, Hennepin County
	Kareem Murphy, Hennepin County
Hennepin County (Part A) Representative:	DHS (Part B) Representative:
Anika Kalewoun	Rachel Heule
MDH (Prevention) Representative:	MCHACP Parliamentarian:
Krissie Guerard	Pat Reymann, PRP
MCHACP Staff:	
Carissa Weisdorf, Coordinator	Jeremy Stadelman, Admin Specialist (minutes)

Quorum Present? **Yes**

I. Call to Order, Reading of Guiding Principles, Introductions

Lesla Nelson called the meeting to order at 9:02 a.m. and read the guiding principles. Introductions were made.

Consideration and Approval of Proposed Agenda

- Lesla motioned to approve the agenda; the agenda was approved by unanimous consent.

Consideration and Approval of April 11 Meeting Minutes

- Lesla motioned to approve the minutes; the minutes were approved by unanimous consent.

II. Legislative Update by Kareem Murphy, Hennepin County Deputy Director of Intergovernmental Relations

- Kareem Murphy gave an update on state legislature activities for 2017.
 - The current session wraps on May 22, 2017. Kareem noted that this is a budgeting year, where the legislature determines who gets funding and for what.
 - Overall, 2017 state funding looks stable for HIV/AIDS programs.
 - There are ongoing negotiations occurring between Governor Dayton and the legislature, with each side differing dramatically on budget priorities. A major disconnect is that the Governor wants to add surplus funds to HIV/AIDS programs, while the legislature wants broad cuts to DHS.

- Funding cuts proposed by the legislature include 2% for providers in MN Care (mainly primary care services). This proposal would also include a 2% reduction for all services in 2018-2019, and 3% for FY 2021.
 - A staffing cut has also been proposed for DHS, which would include an initial reduction of 8.5%, or approximately 100 to 200 staff.
 - There is strong pushback from the Governor on these proposed funding cuts.
- Legislation has been proposed that would seek to develop a statewide strategy to coordinate HIV/AIDS services and programs. The bill will be debated on house floor May 10, 2017. It has been received positively thus far from both chambers.
 - MN Department of Health would be the lead on the development of the strategy. The ultimate goal is to align resources, services, access, and systems so that there is a coordinated strategy that reduces fragmentation. Broadly speaking, the goal of the strategy is to eliminate the transmission of HIV in MN.
 - There is bi-partisan support from both chambers, and Kareem has been pleasantly surprised that the proposed strategy has been received without controversy thus far.
 - The strategy will require that there be consultation with community stakeholders. There are influential benefactors who want strong stakeholder input.
- There is a proposal in the legislature that would reform how housing support services are funded, allowing for a Medicaid match.
 - Remains in conference committee in the MN State House, but would dramatically change how these services are funded.
- Rachel Heule noted that the repeal of MNSure is still included in Omnibus bill, which would result in a \$550 million cut.
 - Kareem added that because Governor Dayton is strongly against the repeal of MNSure, it is unlikely to be repealed.
- Federal update: despite the current Administration's promises of major cuts, the government has largely received level funding for 2017.
 - One area of Ryan White that suffered cuts this year is Part C. There was a \$4 million cut to early intervention services.
 - Ejay noted that he has only received 50% of the funding for Part C and D so far this year and is waiting to hear if the cuts will affect the outstanding funding. He also reminded the Council that there is a subcontract with HealthPartners, which means they could be impacted by the cuts.
 - For the 2018 fiscal year, the Trump Administration has proposed massive cuts across the board, including to Ryan White.
 - If passed, the blueprint budget would result in a \$415.18 million cut to Ryan White, including:
 - \$74 million cut to Part A
 - \$162.2 million cut to ADAP
 - \$36.7 million cut to Part C
 - \$44.2 million cut to HOPWA
 - Kareem noted that Republicans don't have a sizable majority in Senate, so it won't be easy to make these proposed cuts.
 - Democrats have signed a letter opposing cuts, and have also asked for increased funding for the Ryan White program.
 - Ryan White hasn't been reauthorized in some time, but this Congress doesn't seem to have an appetite for it.
 - Kareem gave an update on the efforts to repeal the ACA (Affordable Care Act/Obamacare) and replace with the AHCA:
 - The AHCA passed U.S. House of Representatives on May 4, 2017.
 - The AHCA would result in massive cuts to Medicaid.
 - The AHCA proposes using modified block grants.

- The AHCA would remove the provision in the ACA that mandates essential services are covered by insurance.
 - Kareem explained that to pass, the AHCA would need 60 votes in the Senate. However, the Senate could, via a simple majority, repeal the ACA without replacing it with the AHCA.
 - Senators Franken and Klobuchar have been engaged in this process and are committed to keep what is working in the ACA.
 - Robert Gillum Jr. asked when Ryan White needs to be reauthorized by Congress.
 - Kareem explain that Ryan White expired in 2011, but as long as Congress keeps funding it, it doesn't technically need to be reauthorized.

III. Co-Chair Update

- Roger Ernst announced that he continues to work with the HIV Strategic Advisory Board. He informed the Council that writing of the strategic plan has already commenced, and that basic objectives have been drafted. He noted that there are plans to have larger community meetings to gather input. The hope is that Council members will be doing some of these meetings (30-50) throughout the state to reach and compile input from all stakeholder communities.
 - Matt Toburen reiterated that there is legislation currently being considered at State House of Representatives that would mandate the development of a statewide strategy for the coordination of HIV/AIDS services/programs. He explained that this is the Council's opportunity to tell the legislature what needs to be done, and to put an ambitious plan in front of the legislature. Matt asked that each member get involved in the process. He emphasized that Council members are the people who know the people who should have a seat at the table.
- Roger announced that the Co-Chairs are going to be making efforts to get meetings started on time, and follow proper procedures to ensure that they are run more effectively.

IV. Grantee Reports

• Part A Update

Anika Kaleewoun, Hennepin County

- Anika announced that the FY2017 Core Medical Services Expenditure Waiver request will be submitted this week and that HRSA will respond within 30 days.
- Anika referenced the *Federal AIDS Policy Partnership (FAPP)* handout to explain the 2018 Appropriations and Final Grant Award. She noted that there is a reduction in funding for Part C, but that Part A should receive level funding. She added, however, that the formula portion of funding may decrease slightly because the incidence of HIV in Minnesota decreased in 2016.
- Anika announced that there is a Quality Management Advisory Committee (QMAC) meeting on May 18 and that there are still two vacancies, for one consumer and one provider.
 - Terral asked if the meeting dates had been changed because there now appears to be a conflict with committee meetings.
 - Anika explained that there should not be a conflict with committee meetings. Terral agreed to discuss his concerns after the meeting.
- Anika announced that there is a Consumer Quality Training on June 7 for the Aliveness Project, which will be led by Tyrie. Anika explained that there are two focuses of the training:
 1. Taking control of HIV/AIDS care and how to partner with your health care team.
 2. How to interact with Ryan White providers and quality management systems.
- Jeremy Stadelman was welcomed to the Council as its new Administrative Specialist.

• Part B Update on Open Enrollment 2017

Rachel Heule, DHS

- Rachel announced that there has been a recent dental benefit expansion, which is significant step because Minnesota has one of the lowest reimbursement rates for dental care. Rachel explained that the low reimbursement rate is the result of a formula created by the legislature in 1986. There are bills being considered at the state legislature to increase number MA patients and reimbursements.

- Rob from customer service can be contacted with more questions about this expanded dental benefit.
- Loyal Brooks mentioned that there could be severe budget cuts coming down the pipeline and asked how this will affect these increases.
 - Rachel explained that she is not sure, but that most cuts will be aimed at staffing first. When the time comes, they will need to look at the best way to manage cuts.
- Rachel reminded the Council to contact Rob at customer care if you know of clients who have not made their MA-EPD & MN Care Premium payments. She wants to make sure people are not falling through the cracks and losing coverage.
- Rachel announced that the open enrollment period for 2018 will be cut in half, going from November 1 to December 15.
- **Prevention Update**
Krissie Guerard, MDH
 - Krissie announced that the HIV Prevention and Surveillance Grant Guidance 2018 will be issued sometime next month. She noted that Surveillance and Prevention will be combined and that geographic area will be isolated.
 - Krissie explained that she suspects that day-to-day care, linkage, testing & condom distribution will be hot commodities in HIV Prevention Funding this year.
 - Krissie announced that \$5 million has been cut nationally from STD funding this year and we will know this summer what our cut will be (probably in the range of \$50,000 to \$70,000). She stressed that the reductions could have been worse.
 - Krissie announced that RFP information is coming soon. This year, RFPs will be for HIV testing and syringe services. An email is coming this week with more information.

V. Staff Update

Carissa Weisdorf, Hennepin County

- Carissa reminded members to submit conflict of interest forms today.
- Carissa announced that there will be a facilitation training for co-chairs on June 6, 1:00pm—3:00pm, in HSB 112. All members are invited to participate in this training.

VI. Robert's Rules of Order Training Tidbit

Pat Reymann, MN Council for HIV/AIDS Care and Prevention Parliamentarian

- Pat referred to the *Special Rules of Order: Parliamentary Training* Tidbit sheet she compiled for the meeting.
 - Pat explained that the Council should not have to reinvent Robert's Rules of Order (RRO), and emphasized that if a particular rule doesn't fit, the Council can write their own. These are referred to as Special Rules of Order.
 - Special Rules of Order require previous notice and a 2/3 vote.
 - Pat explained that the hierarchy for rules of order is: 1. laws; 2. Charters; 3. Bylaws; 4. special rules; 5. customs
- Pat reviewed the Special Rule of Order being considered today, which complies with the Bylaws and supersedes Robert's Rules of Order.
 - a. When a matter arises that involves a potential conflict of interest, the Chair shall declare that the matter will be discussed informally for a time.
 - b. The Chair shall determine when informal consideration is over and a motion is in order.
 - c. After a motion has been made, those members in conflict and guests that represent those interests shall leave the room until the vote is taken.
 - d. Those members will be listed in the minutes as having abstained from the vote.
 - e. The regular rules of debate shall go into effect after the motion has been made.
- Rachel asked if the Special Rule of Order acts as a point of clarification.

- Pat explained that, in some ways, the Special Rule of Order can clarify because it provides more information or context to the bylaws.
- Ejay added that the Special Rule or Order can be thought of as an exception to the rules; i.e., this is how we are doing this today.

VII. Committee Reports (also provided in written form)

- Executive Committee
 - a. **Action Item:** Special Rule of Order
 - Roger Ernst explained that the recommendation was developed in Executive Committee and asked if there was any debate.
 - Matt Toburen spoke in opposition to the motion, noting that he appreciates the members' efforts to address concerns about Robert's Rules of Order (RRO). Matt suggested that the Council has gone too far with its reliance on RRO and believes that the proposed Special Rule of Order contains problematic language.
 - Matt noted that his issue with the Special Rule of Order is with part c of the recommendation, "after a motion has been made, those members in conflict and guests that represent those interests shall leave the room until the vote is taken." He argued that because this is a public meeting, we cannot kick people out. The public format of the meetings is built into legislation of Ryan White Act.
 - Matt stressed that providers want to get these services right, so he wants to hear what consumers have to say. He cannot do that if he is in the hallway while debate is going on.
 - Matt also noted that he has concerns that some of the language that seems antagonist, pitting providers against consumers.
 - Matt noted that providers tend to lose money on these services and he does not want there to be a perception that providers are in it for the money.
 - Terral Ewing agreed with Matt, but explained that despite knowing not to talk about individual providers, everyone sometimes knows who you're talking about because there is only one provider in Greater MN. He shared an experience he had with a provider in which he was confronted after a meeting for speaking out against that provider.
 - Alejandro Aguilera offered a humanist perspective: we are adults and the person should understand that we are working for the greater good. If people can't separate the business side and personal side, that is the individual's issue.
 - Robert Gillum Jr. emphasized that he understands Matt's point, but as the Council changes and as members become more diverse it's not realistic to just say providers "care". It's also about power and some members feel intimidated. He argued that he doesn't believe everyone will speak up because people are feeling power dynamics, which include race, not just money.
 - Robert stressed that if you are white and have privileges, it is built in for you to feel free to speak up. This is not the case for all people. He asked why it's big deal for people to step out after the discussion for the vote.
 - Robert observed that the committee meetings seem like it's all about the provider's interests, but it really should be more about the consumer.

- Roger Ernst reiterated that the reason for the 2/3 vote needed to pass this motion is because we are removing a members right to participate. He stressed that members shouldn't take this lightly.
- Roger Ernst stressed that there are always people who don't speak up and issues are best settled if we are open and honest with each other. He questioned whether certain people are going to say anything if providers step out anyway, but intimidation is a real thing to think about.
- Gelli Overton sees the problem, but queried if the Council is coming at this issue the wrong way. Gelli argued that since discussions are captured in the minutes, we cannot guarantee anonymity and prevent intimidation simply by asking people to leave the room. Gelli suggested that there may be a way to engage in conversation at the table anonymously (i.e. written questions or debate).
- Bielca Guevara asked the Council to remember what we are talking about is this in the best interest of the client, and has nothing to do with individuals. Don't take criticisms personally.
- EJay Jack queried if the Council needs to consider coaching for new members by pairing them with a more experienced members. It may be helpful having someone to encourage new members to speak up.
- David Neller suggested that his main concern with RRO is that they are creating a rigidity and an animosity between members, or an us versus them mentality.
 - David observed that problems are being magnified, thereby defeating the purpose of what we are coming together to do.
- Robert Gillum reiterated the Council's guiding principle of assuming good intentions, and argued that until there is something better than RRO, we have to have some structure and should move forward with approving the motion. Robert emphasized that we should trust the committee that put this together and can always improve later.
- Roger Ernst questioned why the conflict of interest policy was changed 2 years ago.
 - Carissa responded that the Council requested help from HRSA for technical assistance, who asked us to firm up our conflict of interest policy. Ultimately, the Council shifted from allowing those with a conflict of interest to vote, to not allowing that to happen. This change has gone through lawyers at the government agencies. HRSA made it clear that this is how we should proceed.
 - Matt Toburen suggested that HRSA gives recommendations, but does not demand policy be followed a particular way. He said that the Council took their recommendation and went this route.
 - Matt explained that consumers have a bill of rights with providers so that they have a process to address issues if they are being treated unfairly. This body is not hear to address grievances.
- Thuan Tran agreed with Robert that intimidation is a real problem, and emphasized that the intention of the conflict of interest policy is not to pit consumers against providers.
 - Thuan argued that not all providers are at the table and those that are here can be very persuasive and do influence outcomes. The intention of the conflict of interest policy is to make sure that this is an equitable process.
- Lisa Behr asked if the intent of the motion is to allow providers with a conflict to stay only for the discussion, and then leave for the vote.

- Roger Ernst explained that the motion allows the providers to stay until the motion is made.
 - McKinzie Woelfel added that the motion makes sure the Co-Chair moves the discussion rather than it being cut off by someone making the motion.
 - Roger emphasized that the requirement that providers step out of the room for a vote is a completely different discussion than what the current motion calls for.
 - Lesa Nelson clarified that this motion would allow providers to stay for discussion, but then leave for the vote.
- Gelli noted that guests with conflicts have not been asked to leave before, so this is a new requirement.
- **MOTION:** Ejay Jack moved that the motion be amended so that guests that represent interests can stay in the room during the debate and vote. The Special Rule of Order would be updated to remove “and guests” from the text of part c. Gelli Overton seconded.
 - Roger Ernst asked if there was any discussion on the amendment:
 - Terral Ewing noted that he has an issue with providers who are guests being allowed to stay during debate/vote.
 - Gwen Velez added that people from agencies are getting all the information, but providers on the Council are missing out on having the same information.
 - Alejandro Aguilera agreed with Gwen’s point and questioned why “guests” was added to the text.
 - Tyrie Stanley indicated that he was in favor of the amendment, noting that guests have to be asked to participate in the debate. This is not same as providers who are sitting at the table.
 - Gelli Overton added that asking people to move to the hallway does not make sense.
 - Carissa Weisdorf noted that “guests” was included due to perceived intimidation.
 - Rachel Heule explained that the Council asked for technical assistance and HRSA did not think the conflict of interest policy was ridiculous. She added that consumers are feeling like their voices are being silenced. It is about perception and not about whether or not providers think they are doing something wrong.
 - Ejay Jack questioned whether the Council should try to manage perception or put systems in place to make people feel empowered.
 - Gwen Velez asked how people are getting this information from consumers about feeling marginalized or intimidated.
 - Rachel explained that consumers are contacting her directly about this.
 - Robert Ernst added that until the bylaws are changed, we are still asking those with a conflict of interest to leave the room. Robert asked to move the amendment to a vote.
 - Lesa Nelson moved that the amendment be voted on: with 19 in favor and 3 opposed, the motion carries.
- **MOTION:** Lesa Nelson moved that the motion to adopt the Special Rule of Order as amended be approved. With 16 in favor and 6 opposed, the motion carries.

- Community Voices
 - None.
- Disparities Elimination
 - None.
- Membership & Training
 - None.
- Needs Assessment & Evaluation
 - None.
- Planning & Allocations
 - a. **Action Item:** Linguistics Services Standards of Care
 - Tyrie referred members to the standards of care documents provided to members for review.
 - **MOTION:** Tyrie Stanley moved that the Action Item: Adopt Linguistics Service Standards of Care be approved. The ayes have it, the motion is carried.

VIII. Service Area Presentation

Needs Assessment and Evaluation

- Ejay Jack referenced the Non-Medical Case Management Services document provided to members for review.
 - Ejay asked that members click on the utilization history link to fully understand the allocations.
 - Matt Toburen suggested that it would be interesting to know how many people would have used this service if there was more funding.
 - Ejay responded that fuller participation in surveys by consumers would help, and noted that there needs to be more representation from subgroups in the survey. He suggested that this should be discussed more fully with the Council.
 - Alejandro Aguilera emphasized that it is important for the Council to get more survey respondents.
 - Terral Ewing agreed, and noted that as a body, we are dropping the ball on getting more involvement from consumers in the council. Carissa is reaching out to HRSA for technical assistance on this.
 - Roger stressed, however, that if you get 500 people to fill out this survey, it is an accomplishment given how long and dense it is.
 - Alejandro noted that mathematically, 500 is not good enough to make full projections.
 - Gwen Velez asked how many formats the survey is available in. She emphasized that she wants to make sure we are being fully inclusive.
 - Carissa Weisdorf indicated that online surveys were mostly used and explained that we had survey ambassadors to help people answer them. The surveys were available in English and Spanish and could be printed for those without Internet access.
 - David Neller emphasized that the survey was a good first step. The Council did not have anything before they started in 2010.
 - Thuan Tran suggested that it would be good to reach out to workgroups to reach more subgroups.
 - Terral emphasized that the Council worked hard to bring the survey out to the community.
 - Matt requested that the allocation process be better explained this year because it was very confusing last year. He added that the process was cumbersome and suggested that we do a practice allocation process.
 - Ejay responded that this is something he can discuss further at committee meetings.
- Ejay Jack referenced the Health Insurance Premium and Cost Sharing Assistance for Low Income Individuals sheet provided to the Council for review.
 - Rachel noted that this service reaches consumers after the fact (i.e. as a reimbursement).

- Ejay highlighted “Utilization History” as something important for members to understand.

BREAK

IX. HIV/AIDS Epidemiology Update

Jared Shenk, Minnesota Department of Health

- Roger proposed moving this discussion to next month due to time constraints. There were no objections.

X. Unfinished Business/New Business

- Continuation of April 11 motion and amendment:
 - Roger Ernst called attention to the April 11 minutes and to the Motion proposed by Gwen Velez.
 - Gwen emphasized that going back to the bylaws would help clarify some of the concerns members have about Robert’s Rules of Order.
 - **MOTION:** Roger Ernst moved that the amendment to the motion be approved first. The amendment is to strike out “the Council Bylaws” and insert “Robert’s Rules of Order” to be reviewed by committee to bring to the Council by the end of the year. There was no discussion on the amendment. With 17 in favor and 1 opposed, the motion carries.
 - **MOTION:** Matt Toburen moved that the motion be amended to change “form a committee” to “refer to Membership and Training Committee.” Loyal seconded.
 - Roger opened the floor to discussion.
 - Terral Ewing noted that, as a member of M&T, he would like to take up this discussion in his committee because they have already been discussing this issue.
 - Gwen argued that the point of forming a separate committee is to invite all who are interested. If this is going to another committee, the entire Council will need to know when the committee is going to discuss this so others can join.
 - Carissa Weisdorf noted that all committee meetings are open to all members.
 - Matt Toburen added that members would not necessarily have to come to Membership and Training meetings to provide input, and there should be other avenues (like a survey).
 - Roger moved that the amendment be voted on: with 20 in favor and 1 opposed, the motion carries.
 - **MOTION:** Roger Ernst moved that the amended motion to have the Membership and Training Committee revisit the Robert’s Rules of Order and bring back a recommendation to Council by the end of the year be approved. With 19 in favor and 2 opposed, the motion carries.

XI. Open Forum

- Ejay Jack asked if this council can expand the scope of its duties to include a call and response about particular areas that may be missing from the conversation. Ejay wants the Council to better understand how to impact the integration of the various services and funding pieces in this body. Our partners would be willing to work with us, so it is a matter of us making those connections.
 - Bielca Guevara suggested that the Council look at what are other jurisdictions like San Francisco are doing.
 - Matt Toburen suggested that there is precedent for this body to do this, but it should go to a committee first before coming before the full Council.
 - David Neller noted that the Disparities Elimination Committee is already working on something this, and is under the committee’s umbrella.
 - David pointed out that the committee has initiated a survey to gather information about better ways to reach marginalized groups.

- Alejandro Aguilera argued that members could assume a more active role as members. He gave an example of the drafting of a recommendation to provide to Part A he is currently working on.
- Carissa pointed members to two documents: 1. collaborative partners agreement (roles and responsibilities) and 2. The Integrated Plan

XII. Announcements

- Roger Ernst informally asked how many members would like to revisit the conflict of interest policy.
 - 15 yes
 - 2 no
 - 2 not sure
- Terral Ewing announced that camp is coming up in a couple of weeks and indicated that they need a registered nurse for the week. Please reach out if you know of anyone who might be able attend. They can talk about a stipend, if needed.
 - John Vener asked if there is liability insurance for the RN.
 - Terral and Robert will need check on this.
- Bielca had a question about clarifying linguistic services: does Hennepin County know how to certify proficiency in English language?
 - Thuan directed her to the HRSA description that indicates that these services must comply with National Standards for Culturally and Linguistically Appropriate Services.

XIII. Adjourn

- **MOTION:** Roger moved to adjourn the meeting; Johnnie seconded. The meeting adjourned at 11:54 a.m.

Meeting Summary:

- The Council approved the **Action Item:** Special Rule of Order with amended language to part c.
- The Council approved the **Action Item:** Standards of Care for Linguistic Service Areas
- The Council approved the **Motion** to have the Membership and Training Committee revisit the Robert's Rules of Order and bring back a recommendation to Council by the end of the year
- The Council received a Legislative Update by Kareem Murphy, Hennepin County Deputy Director of Intergovernmental Relations
- The Council received a Robert's Rules of Order training tidbit presentation from Pat Reymann, MCHACP Parliamentarian

Documents Distributed Before the Meeting:

- Proposed Agenda
- April 11 Meeting Minutes
- **Action Item:** Special Rule of Order
- **Action Item:** Linguistics Services Standards of Care
- Linguistics Service Area Standards of Care
- Interpretation Policy Appendix I
- Committee Report Summaries
- Needs and Assessment Committee Service Area Presentation

Documents Distributed At the Meeting:

- MDH Prevention Update
- Part A Update
- ABAC Appropriations Chart
- Parliamentary Training Tidbit

