

IV. Floor Open to the Public

Dr. Zayas opened the floor to the public with the following statement: “Pursuant to Florida Sunshine Law, I want to provide the public with a reasonable opportunity to be heard on any item on our agenda today. If there is anyone who wishes to be heard, I invite you to speak now. Each person will be given three minutes to speak. Please begin by stating your name and address for the record before you talk about your concerns.”

The floor was opened to the public. No questions or comments were raised. The floor was then closed.

V. Review and Approve Minutes of March 10, 2017

Members reviewed the May 15, 2017 minutes. There were no changes.

Motion to approve the minutes of May 15, 2017 as presented.

Moved: Miguel Puente

Seconded: James Powell

Motion: Passed

VI. Membership

Christina Bontempo

▪ Committee Applicants

Ms. Bontempo advised the committee that Kira Villamizar has resigned in order to allow David Rigg to serve on the committee since the Partnership’s Bylaws do not allow “. . . representation by more than one (1) representative from a provider agency.” (Article 3.D).

David Rigg, Linkage to Care Coordinator at Florida Department of Health in Miami-Dade County, and Takisha Nelson, QA Coordinator at Public Health Trust (PHT)/South Florida AIDS Network (SFAN), applied for committee membership. Both applicants completed the New Member Orientation requirement.

Since the committee has a representative from the PHT/PET Center, staff will verify with the Assistant County Attorney if having two members of the PHT is a violation of dual representation. If not, the committee will vote on Ms. Nelson’s application in September.

David Rigg introduced himself and stated his interest in joining the committee.

Motion to approve David Rigg to serve on the Strategic Planning Committee.

Moved: Barbara Messick

Seconded: Eddie Orozco

Motion: Passed

Mr. Rigg was welcomed as a new member.

Ms. Bontempo noted the Vacancy Report (copy on file), which indicates the committee has three (3) vacancies. Anyone needing an application may contact staff or may download the application from www.aidsnet.org.

VII. Standing Business

▪ Ryan White Part A/MAI Program Update

Staff

The Ryan White Part A/MAI Expenditure Report for FY 2017 as of July 31, 2017 (copy on file) was noted in the meeting materials for the committee’s information. Since the committee was to review results of the Assessment of the Administrative Mechanism survey which relates to the Ryan White Program Recipient, the recipient representative was not present at the meeting for further analysis of the Expenditure Report.

▪ **Partnership Report**

Christina Bontempo

Ms. Bontempo noted the July 17, 2017 Partnership Report was in the committee's packets for their information (copy on file).

▪ **Retention in Care Workgroup Final Report**

Robert Ladner, PhD

The committee received a copy of the Retention in Care Workgroup's Draft Year End Report (copy on file). The workgroup concluded its business on July 18, 2017 and disbanded. Dr. Ladner led a discussion on the workgroup's final recommendations:

1. *Reserve space on the agendas of Strategic Planning and Joint Integrated Plan meetings for a standing business item reporting on findings, interventions, best practices and client outcomes related to retention in care.*

The committee expressed the need for the public to be heard and for consumers to feel they have a voice so that retention in care issues can be addressed. Members also noted that data, particularly evidence-based data, should be brought to the committee for review. In order to promote consumer and subrecipient input and to review data, the committee agreed Retention in Care can be a standing agenda item for Strategic Planning and Joint Integrated Plan meetings.

2. *Ensure that stakeholders, Ryan White clients and members of the affected community have a voice in discussions about retention in care issues at Strategic Planning and Integrated Plan meetings.*

Retention in Care Workgroup members should be advised to attend Strategic Planning and Joint Integrated Plan meetings to further address retention issues. Members discussed the need to turn data into action; collecting data is important and what is done with it is also important. Activities and desired outcomes should be incorporated into the Integrated Plan, including studies on lag time, wait time and hold time; and consumers feeling like they are just a number in the system. Retention in care issues present an opportunity for subrecipient training, particularly that consumers need to be treated like human beings, not just a number.

3. *Apply research findings to developing protocols/interventions to address client mental health issues and their impact on treatment retention.*

This will be addressed at the Joint Integrated Plan Review Team meetings.

4. *Apply research findings to developing protocols/interventions to address client substance abuse issues and their impact on treatment retention.*

This will be addressed at the Joint Integrated Plan Review Team meetings.

Members agreed to forward the report to the Full Partnership.

Motion to forward the Retention in Care Workgroup's Draft Year End Report to the Partnership for ratification.

Moved: Barbara Messick

Seconded: Eddie Orozco

Motion: Passed

VIII. New Business

▪ July 10th Joint Integrated Plan (IP) Meeting Review

All

Dr. Ladner reviewed the Summary of the July 10, 2017 Integrated Plan Review Team (copy on file).

Regarding IP activity P2.3a (*Dissemination of 1,000 units of educational materials/year promoting the "Protect Yourself, Protect Your Baby" campaign*), members noted that materials should be disseminated to all women of child-bearing age in all healthcare settings.

Regarding barriers faced by substance abusers, more education is needed on the University of Miami's needle exchange program.

Regarding the transient nature of South Florida residents, the Quality Management team at BSR is reviewing records of clients to identify non-residents. Clients must live in and be permanent residents of Miami-Dade County. Those found to be in violation will no longer receive Ryan White program services.

Regarding IP activity R1.2b (*Expand implementation of 2016-17 RWP Texting Intervention Project protocols to PLWHA at five MCM sites...*), the review team made a motion to expand the activity to encompass a pilot study in order to measure the efficacy of the intervention. The Joint IP moved to revised the activity to read: "*Complete a pilot study on the impact of regular contact by text messaging on retention of PLWHA in Part A care, with the proviso that the findings would be shared with subrecipients, and based on the findings, subrecipients will be encouraged to implement the intervention independently at their agencies.*"

Regarding allowing FDOH and Part A sufficient time to receive quarterly data (normally subject to reporting lag times), and to process and analyze these data for the quarterly IP reviews, the Joint IP moved to wait to hold meetings at least 30 days after the close of the quarter. The next Joint Integrated Plan Review Team meeting is scheduled for November 13, 2017 which will accommodate that schedule.

▪ 2017 Assessment of Administrative Mechanism Review

All

Dr. Ladner presented a review of the findings of the 2017 Assessment of the Administrative Mechanism (AAM) which included a comparative analysis of AAM results from 2014 to 2017 (copy on file). The committee reviewed the results and generated some follow up questions for the Office of Management and Budget-Grants Coordination (OMB-GC):

- Partnership Survey: The AAM responses are based on the Likert Scale (strongly agree to strongly disagree). Throughout the Partnership section of the AAM, there is a noticeable shift in responses from *strongly agree* in 2016 to *agree* in 2017. What does the OMB-GC think the reason is for the reduced level of enthusiasm?
- Partnership Survey Question 10: *OMB-GC responds promptly and adequately to inquiries, requests and problem-solving needs from the Partnership, including those related to the annual needs assessment.* There was an increase in the *neither agree nor disagree* response category from 9% in 2016 to 17% in 2017. Do Partnership members understand the process that the OMB-GC uses to respond to inquiries, requests and problem-solving needs from the Partnership, including those related to the annual Needs Assessment?
- Partnership Survey Question 12: *HIV/AIDS services funded by Part A/MAI are directed toward the demographic population of greatest need.*
 - Should we increase marketing services for RWP Part A/MAI Services?
 - Does the Florida Department of Health (FDOH) have a way of informing people

- of/marketing RWP Part A/MAI services?
- Does FDOH have a say on marking or advertising RWP Part A/MAI services?
 - If marketing services were offered pro-bono, would that be allowed?
- Provider Survey Question 1: *The Miami-Dade County OMB-GC conducted a timely and fair contract negotiation process with our agency.* This question came directly from the survey responses: “Programs have been funded the same for some years. When will there be a new RFP for opportunities to increase funding other than the sweeps process every year?”

The committee also discussed if there is a way to determine if RWP Part A/MAI service subrecipients are satisfied with the sweeps process and if it is possible for the OMB-GC to address the connectivity issue inherent in the Service Delivery Information Systems (SDIS). Regarding sweeps, the OMB-GC can only allocate available funds, which are limited. SDIS system issues are known to the OMB-GC and are addressed regularly with the SDIS contracted subrecipient.

The committee will review the OMB-GC responses at their September meeting and will forward a final report to the Full Partnership in September.

IX. Announcements

There were no announcements.

X. Next Meeting

The next meeting is Friday, September 8, 2017 at United Way Ansin Building, Conference Room A.

XI. Adjournment

Motion to adjourn this meeting.

Moved: Lileaus Hill

Seconded: Miguel Puente

Motion: Passed

The meeting was adjourned at 11:50 A.M.