



Executive Committee

Wednesday, May 31, 2023

10:00 a.m. – 12:00 p.m.

Behavioral Science Research,
2121 Ponce de Leon Blvd, Ste. 240
Coral Gables, FL 33134

AGENDA

- | | | |
|-------|---|--------------------|
| I. | Call to Order | Alecia Tramel |
| II. | Introductions | All |
| III. | Meeting Housekeeping and Rules | Alecia Tramel |
| IV. | Floor Open to the Public | Alecia Tramel |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of March 29, 2023 | All |
| VII. | Standing Business | |
| | ▪ Vacancy Updates | Christina Bontempo |
| | ▪ Fishbone Exercise Updates | All |
| | ▪ Suggestions for ordinance changes to comply with HRSA | All |
| VIII. | New Business | |
| | ▪ Invitation to Collaborate-National Dialogue on the Intersection of Racism and HIV as a Public Health Crisis | Christina Bontempo |
| IX. | Open Discussions and Announcements | All |
| X. | Next Meeting: July 26, 2023 at Behavioral Science Research | Alecia Tramel |
| XI. | Adjournment | Alecia Tramel |

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For more information about the Executive Committee, please contact Marlen Meizoso,
(305) 445-1076 x107 or marlen@behavioralscience.com.



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Meeting Housekeeping

Updated April 13, 2023
Behavioral Science Research

Disclaimer & Code of Conduct

- ❑ Audio of this meeting is being recorded and will become part of the public record.
- ❑ Members serve the interest of the Miami-Dade HIV/AIDS community as a whole.
- ❑ Members do not serve private or personal interests, and shall endeavor to treat all persons, issues and business in a fair and equitable manner.
- ❑ Members shall refrain from side-bar conversations in accordance with Florida Government in the Sunshine laws.

Language Matters!

In today's world, there are many words that can be stigmatizing. Here are a few suggestions for better communication.



Remember **People First** Language . . .
People with HIV, *People* with substance use disorders, *People* who are homeless, etc.

Please don't say **RISKS** . . . Instead, say **REASONS**.
Please don't say, **INFECTED with HIV** . . . Instead, say **ACQUIRED HIV, DIAGNOSED with HIV, or CONTRACTED HIV**.

Please **do not** use these terms . . .
Dirty . . . Clean . . . Full-blown AIDS . . . Victim . . .

General Housekeeping

- ❑ You must sign in to be counted as present.
- ❑ Place cell phones on mute or vibrate - *If you must take a call, please excuse yourself from the meeting.*
- ❑ Eligible committee members should see staff for a voucher at the end of the meeting

Meeting Participation

- ❑ Raise your hand if you need clarification about any terminology or acronyms used throughout the meeting.
- ❑ Raise your hand to be recognized by the Chair or added to the queue.
- ❑ Discussion should be limited to the current Agenda topic or motion.
- ❑ Speakers should not repeat points previously addressed.
- ❑ Any attendee may be permitted to address the board as time allows and at the discretion of the Chair.

Resources

- ❑ Behavioral Science Research Corp. (BSR) staff are the Resource Persons for this meeting.
- ❑ See staff after the meeting if you are interested in membership or if you have a question that wasn't covered during the meeting.
- ❑ Today's presentation and supporting documents are online at aidsnet.org/meeting-documents/.





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Floor Open to the Public

“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.

“BSR has a dedicated phone line and email for statements to be read into the record. No statements were received.”



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**Executive Committee Meeting
Behavioral Science Research Corporation
2121 Ponce de Leon Boulevard, Suite 240,
Coral Gables, FL 33134
March 29, 2023**

#	Members	Present	Absent	Guests
1	Burks, Laurie Ann		X	Alex Noir
2	Goldberg, David	X		
3	Iadarola, Dennis	X		
4	McIntyre, Harold		X	
5	McMullen, Lamar		X	
6	Mooss, Angela	X		
7	Perez-Bermudez, Alberto		X	Staff
8	Sarmiento, Abril	X		Bontempo, Christina
9	Sheehan, Diana M.	X		Ladner, Robert
10	Shmuels, Diego		X	Meizoso, Marlen
Quorum = 4				

Note that all documents referenced in these minutes were accessible to members and the public prior to (and during) the meeting, at www.aidsnet.org/meeting-documents.

I. Call to Order

The Chair, Dennis Iadarola called the meeting to order at 10:14 a.m.

II. Introductions

Mr. Iadarola introduced himself, and requested introductions of all participants around the room.

III. Meeting Housekeeping and Rules

Mr. Iadarola reviewed the meeting rules and housekeeping presentation (copy on file), which provided the ground rules and reminders for the meeting. He identified Behavioral Science Research (BSR) staff as resource persons for the meeting.

IV. Floor Open to the Public

Mr. Iadarola 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. BSR has a dedicated telephone line as well as a general email address for statements to be read into the record. No statements were received via the telephone line or email.”

No comments were made so the floor was closed.

V. Review/Approve Agenda

The committee reviewed the agenda and approved it as presented.

Motion to approve the agenda.

Moved: David Goldberg

Seconded: Abril Sarmiento

Motion: Passed

VI. Review/Approve Minutes of January 25, 2023

Members reviewed the minutes of January 25, 2023, and made a motion to accept the minutes as presented.

Motion to approve the minutes of January 25, 2023 as presented.

Moved: Dr. Diana Sheehan

Seconded: David Goldberg

Motion: Passed

VII. Standing Business

▪ Vacancies

Marlen Meizoso reviewed the vacancy report for March (copy on file). There are 11 vacancies on the Partnership. One of the applications recently submitted for the Part D seat will need to be recalled. There are also several vacancies on the Committees. The Prevention Committee does not have any pending applicants. A member inquired if there were any Committees in need of academic representatives. The Medical Care Subcommittee has assigned seats and there is a vacancy for a mental health provider, which can include a psychiatrist or psychologist. On most of the committees (except for Prevention), an entity/agency can only have one representative member.

▪ Fishbone Exercise

The Committee reviewed the responses of the November Fishbone Exercise (copy on file). The intent of the exercise was to flesh out problems and solutions to engaging and retaining members of the affect community on the Partnership and the Committees. The following additional input was offered:

- Provide context for the discussions at the Partnership meeting.
- Have clear goals and share them.
- Make meetings meaningful.
- Run through the purpose and end result of action if it approved.
- The agenda is too long.
- Currently, the focus is mostly funding.
- Provide some explanation about what the funders do.
- Create a portion of the agenda that is interactive, such as an open forum.
- Reports should include a summary of the discussion.
- Instead of reading the reports, raise a question regarding the report.
- More discussion and less lecture
- Change the way items are discussed, ask how the item impacts clients instead.
- Seek strategic feedback on items that can be addressed.
- QR code that takes you to the website for input.
- Concern about lone members representing the entire group may discourage continued participation.
- Emphasize how does it helps/impacts everyone else.
- Add to the announcements section an open discussion at the end of the meeting, if not elsewhere on the agenda.
- Need targeted marketing.

- Encourage participation at Ryan White conference and prepare members to present items.

VIII. New Business

Suggestions for Ordinance to Comply with HRSA

Mrs. Meizoso indicated that a proposal for suggestions to the ordinance was shared (copy on file). Due to time constraints, the item was not discussed, nor could Community Coalition review the document since they did not have a quorum. The proposal includes revamping some seats to align more with the HRSA requirements and adjusting quorum requirements. The item will be brought back to the next meeting.

IX. Announcements

Mr. Iadarola indicated there were no announcements, but if there are any additional suggestions these should be forwarded to staff.

X. Next Meeting

The next scheduled Executive Committee meeting is Wednesday, May 31, 2023.

XI. Adjournment

Dennis Iadarola thanked everyone and adjourned the meeting at 11:58 a.m.



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Membership Report

May 15, 2023

The Miami-Dade HIV/AIDS Partnership

The official Ryan White Program Planning Council in Miami-Dade County and Advisory Board for HIV/AIDS to the Miami-Dade County Mayor and Board of County Commissioners

Opportunities for People with HIV

People with HIV who receive one or more Ryan White Program Part A services and who are not affiliated or employed by a Ryan White Program Part A funded service provider are invited to join the Partnership as a Representative of the Affected Community.

11 AVAILABLE SEATS

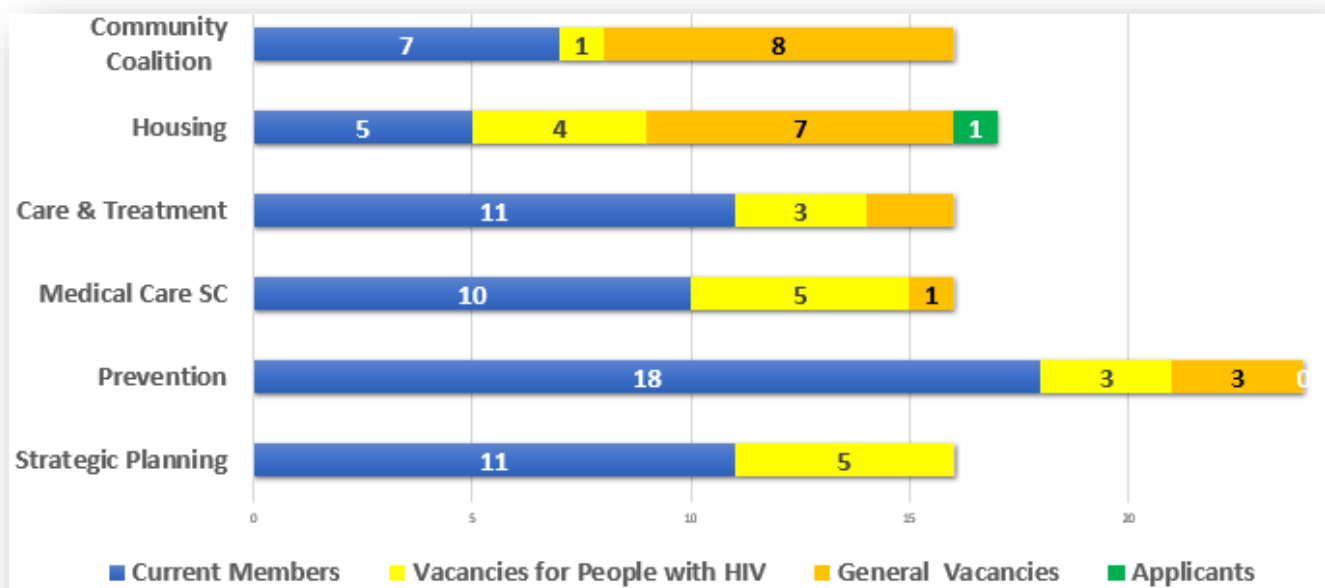
General Membership Opportunities

These Partnership positions are open to people with HIV, service providers, and community stakeholders who have reputations of integrity and community service, and possess the knowledge, skills and expertise relevant to these positions:

Representative Co-infected with Hepatitis B or C
Hospital or Health Care Planning Agency Representative
Other Federal HIV Program Grantee Representative (SAMHSA)
Federally Recognized Indian Tribe Representative
Mental Health Provider Representative
Miami-Dade County Public Schools Representative

Partnership Committees

*Committees are now accepting applications for new members.
People with HIV are encouraged to apply.*





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2023 MIAMI-DADE HIV/AIDS PARTNERSHIP

Meeting Fishbone Exercise

May 2023

A Plan for Partnership Quality Improvement

- ✓ 1) List the membership recruitment and retention challenges faced by the Miami-Dade HIV/AIDS Partnership.
- ✓ 2) Prioritize the challenges, choosing the most important to work on first.
- ✓ 3) Use the fishbone process to identify the most likely “root causes”.
- ✓ 4) Develop a strategy to address the identified root cause.
- 5) Try the new strategies and see how they work.

A first-person perspective from inside a car, looking out the windshield at a two-lane asphalt road winding through a desert canyon. The road is flanked by towering, rugged red rock formations. Sparse desert vegetation is visible along the roadside. The sky is clear and bright. The car's dashboard and steering wheel are partially visible in the foreground.

*TO MAKE THINGS HAPPEN,
FOCUS ON THE FUTURE,
NOT THE PAST.*

Challenges Identified and Actions to Date

❑ Lack of quorum → de-motivates the people who have come.

- Some members don't RSVP, don't show up, or don't arrive on time → Delays meetings or causes cancellation.
 - Action: Reduce size of committees.
 - Action: Hold smaller, more interactive meetings.
 - Action: Change in Ordinance suggests Partnership quorum is reduced from 13 members to "one-third-plus-one" as is the case for committees.

❑ Meaningfulness of Meetings

- Disengagement with the materials reviewed at meetings → playing with cell phones during the meeting, coming unprepared, not reading and responding to material posted in advance of the meetings.
- Members in some committees don't feel they have meaningful work to → may not see the value of their participation.
- Some members don't feel they have a reason to vote/participate on items.
- Focus of meetings is mostly funding.
 - Action: Focus meetings to business items so members know they need to be there to participate in decision-making (not just listen to reporting).
 - Action: Make meetings more interactive.
 - Action: Make materials available on-line for easy access.





❑ Representation

- Affected Community is under-represented (e.g., 9 affected community vacancies on the Partnership, 3 on Strategic Planning, 1 on Care and Treatment, 5 on Medical Care Subcommittee).
- Minority voices are underrepresented at meetings.
- One person representing an entire group may discourage additional participation.
- Changes to the epidemic and therefore changes to the way people with HIV are now living should be acknowledged → people are working and receiving care.
- Stakeholder buy-in needed.
 - Action: Changes to Ordinance to bring the Partnership in line with HRSA planning council requirements will reduce the size of the Partnership from 39 members to 27 members.
 - Action: Partnership membership process changed from 7-page application to simple online interest form.
 - Action: Ongoing training and promotion.



❑ Reporting

- Context is needed for motions at Partnership meeting.
- Reports should include a summary of discussions.
- More discussion, less lecture; change the way items are discussed, e.g., ask how does the item impact clients.
- Lack of understanding of the importance of different funders.
- Instead of reading reports, raise a question regarding the report.
 - Action: Changing how reports are presented is in process.
 - Action: Meetings with only reports and no actionable business will be cancelled.
 - Action: Reports are available online.
 - Action: Get On Board training is offered to help members read and better understand the importance of reports.

❑ Meeting Agendas

- Agenda is too long.
- The goal of the meeting, purpose of motions, and the desired end-result should be stated if not clear from the agenda.
- A portion of the agenda should be added as an open forum.
 - Action: Holding meetings when there are actionable items and not just reporting.
 - Action: Make sure items needing action are clear by the New Business/Old Business titles and the supporting documents.
 - Note: Agendas require some regular business (approve agenda, approve minutes, Floor Open the Public, etc.).





❑ Other

- Seek strategic feedback on items that CAN be addressed.
- Create QR code for input on meetings.
- Case managers do not understand the importance of the Partnership.
- Encourage participation at Ryan White Conference and prepare members.
 - Action: Pending further review of procedures and new strategies.

Additional Input?

THANK YOU FOR
YOUR CONTINUED
PARTICIPATION
TODAY!





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Proposed Updates to the Membership Structure of the Miami-Dade HIV/AIDS Partnership

Presented to the Executive Committee
May 31, 2023

BACKGROUND

The Miami-Dade HIV/AIDS Partnership (Partnership) has struggled for many years to fill both federally legislatively required seats and seats as defined in the Miami-Dade County Ordinance which created the Partnership.

Filling vacancies for Ryan White Program clients has been most challenging. Clients are either not aware of the opportunity, do not see the value in service, and/or do not have the capacity to serve. A variety of strategies have been used to encourage membership:

- Holding meetings at provider agencies in various locations throughout the county;
- Providing professional training programs targeted toward people with HIV;
- Providing meals at Community Coalition Roundtable meetings;
- Requesting assistance from other members;
- Requesting assistance from Medical Case Managers (MCM) and MCM supervisors to identify potential clients;
- Having a presence at community events (health fairs, community meetings, testing events); and
- Direct contact with clients who expressed interest and/or gave permission to be contacted.

To date, none of these efforts have produced the desired results of filling vacancies.

RECENT CHANGES

On April 6, 2022, Health Services Resources Administration (HRSA) issued a letter regarding Planning Council membership indicating “A recipient representative, whose position is funded with RWHAP Part A funds, provides in-kind services, or has significant involvement in the RWHAP Part A grant, shall not occupy a seat in the PC/PB, nor have a vote in the deliberations of the PC/PB.”

Per the December 6, 2022 Health Services Resources Administration (HRSA) letter on Supporting People with Lived Experience, “. . . RWHAP Part A PCs or PBs may provide clients with meals during in-person meetings scheduled around mealtimes (only if needed for health reasons), transportation to and from meetings, and/or childcare services for the children of clients who participate in meetings . . .” This effectively amplified barriers to participation by removing incentives and reimbursements for people with lived experience to participate, including: reimbursement of mileage, covering parking costs, and providing meals. It was not attempted to incorporate the practice of ascertaining a health reason for meals into Partnership business.

The budget was adjusted to allow members with HIV to receive a \$10 gift card for participation. It is unclear how long this incentive will be available. Likewise, providing meals using other funds has proved challenging.

In February 2023, the Partnership approved changes to their Bylaws reducing the number of members on each committee (including subcommittees and work groups) from 24 to 16 members (with some exceptions). The

committee structure change is meant to better reflect the reality of participation, to provide less dire optics on outstanding vacancies, and to have a more inviting space to have one's voice be heard.

CURRENT MEMBERSHIP

The following 21 seats are currently filled:

1. Community Based AIDS Service Organization (CBO/ASO) Representative
2. Former Inmate of local, state, or federal prison representative
3. Health Care Provider Representing FQHC
4. HIV Prevention Provider
- 5-6. Housing, Homeless or Social Service Provider (2 members)
7. Local Health Department Representative
8. Mental Health Provider Representative
9. Non-Elected Community Leader, not an HIV provider
10. Other Federal HIV Grantee Representative (HOPWA)
11. Other Federal HIV Program Grantee (Part F)
12. Other Federal HIV Program Grantee Representative (CDC)
13. Part A Local Grantee Representative
14. Part C Grantee Representative
- 15-18. Representative of the Affected Community (4 members)
19. State Government RW Part B Grantee Representative
20. State Government/Medicaid Agency Representative
21. State of Florida General Revenue Grantee Representative

The following 18 seats are currently vacant:

1. Part D Grantee Representative
2. Federally Recognized Indian Tribe Representative
3. Hospital or Health Care Planning Agency Representative
4. Miami-Dade County Public Schools Representative
5. Other Federal HIV Program Grantee Representative (SAMHSA)
6. Representative Co-infected with Hepatitis B or C
- 7-17. Representative of the Affected Community (11 vacancies)
18. Substance Abuse Representative

The following three (3) alternate seats are currently vacant:

- 1-3. Alternate member Representative of the Affected Community (3 vacancies)

The following two (2) ex-officio seats are currently vacant:

1. Ex-officio Rep. - Office of the MDC Mayor
2. Ex-officio Rep. - Board of County Commissioners

PROPOSED CHANGES TO THE PARTNERSHIP ROSTER

The proposed changes to the Partnership Roster are intended to:

1. Reduce Partnership membership from 39 members to 28 members;
2. Redefine member seat for Miami-Dade County (restrictions apply);
3. Remove alternate member seats;
4. Redefine the openings for ex-officio members;
5. Redefine quorum requirements; and
6. As appropriate, bring Partnership membership categories as defined in the County Ordinance in line with HRSA legislative definitions.

Following are proposed changes and justifications. Membership categories are organized by the County Ordinance definitions.

A. Fifteen (15) member representatives of affected communities that include thirteen (13) people with HIV, who are not affiliated or employed by a Part A funded provider and are recipients of Part A services, and historically underserved groups and subpopulations that reflect the demographics of the population within the eligible metropolitan area

1. Proposal

- a. Reduce to nine (9) members.
- b. Incorporate Federally Recognized Indian Tribe Representative and Representative Co-infected with Hepatitis B or C into this membership category.
- c. Match HRSA language, “affected communities, including people with HIV, members of a Federally recognized Indian tribe as represented in the population, individuals co-infected with hepatitis B or C and historically underserved groups and subpopulations.”

2. Justification

- a. The affected community seat is to comprise 33% of membership. If membership is reduced to 28 members, nine (9) members would constitute 33%.
- b. The Partnership currently defines unique seats for Federally recognized Indian tribe and for individuals co-infected with hepatitis B or C. The seats have never been filled. By adopting the HRSA definition, those persons could still participate under the broader definition of “affected communities . . .”

3. Overall Change

- a. Reduce roster by five (5)
 - b. Reduce vacancies to five (5) from 13 (11 Representative of the Affected Community + 1 Federally Recognized Indian Tribe Representative + 1 Representative Co-infected with Hepatitis B or C).
-

B. One (1) HIV prevention provider

1. Proposal

- a. Remove this seat.

2. Justification

- a. This is not a HRSA-required category.
- b. The seat is currently filled by FDOH-MDC staff; prevention grantee, not a provider; another FDOH-MDC member sits on the Local Health Department seat on the Partnership; and FDOH-MDC services include prevention and care.

3. Overall Change

- a. Loss of one active member.
 - b. Reduce roster by one (1).
-

C. One (1) Miami-Dade County Representative

1. Proposal

Amend the Code to reflect the seat is for a representative of Miami-Dade County, who shall not be a recipient representative, whose position is funded with RWHAP Part A funds, provides in-kind services, or has significant involvement in the RWHAP Part A grant.”

2. Justification

- a. Inclusion of this seat does not follow HRSA’s interpretation of the membership rules in the CARE Act legislation, as stated in their Ryan White HIV/AIDS Program Part A Recipient Letter, not dated but emailed to Ryan White Program Recipients on April 6, 2022, which states, “Separation of PC/PB and Recipient Roles: A separation of PC/PB and recipient roles is necessary to avoid conflicts of interest. The legislation prohibits PC public deliberations to be “chaired solely by an employee of the grantee.” [2602 (7)(A)]. A recipient representative, whose position is funded with RWHAP Part A funds, provides in-kind services, or has significant involvement in the RWHAP Part A grant, shall not occupy a seat in the PC/PB, nor have a vote in the deliberations of the PC/PB.” However, the law does not prohibit another representative of Miami-Dade County serving as a member of the Partnership.

3. Overall Change

- a. Change title of seat.
 - b. Change qualifications of who can be a member in this seat. Restrictions apply as noted above under “Proposal.”
-

D. One (1) Miami-Dade County Public Schools representative

1. Proposal

- a. Move this from a voting member seat to an ex-officio position.

2. Justification

- a. This is not a HRSA-required category.
- b. This seat has been vacant for the majority of the life of the Partnership. Moving the designation to ex-officio status leaves the door open for participation from the school board while relieving the burden of filling a highly specified vacant seat.
- c. Removal of the seat realistically reflects the political climate of Florida.

3. Overall Change

- a. Reduce roster by one (1).
-

E. One (1) State of Florida General Revenue grantee representative

1. Proposals

- a. Remove this seat.
- b. Move member currently in seat to the empty HRSA required “One (1) Community based AIDS service organization (ASO)” seat.

2. Justification

- a. This is not a HRSA-required category.
- b. Reporting on General Revenue funding would still be included in regular Partnership business.

3. Overall Change

1. Reduce roster by one (1).
 2. If member moves to ASO seat, there will be no net change in active members.
-

F. One (1) representative of a federally recognized Indian tribe as represented in the population from the affected community

1. Proposal

- a. Remove this seat.

2. Justification

- a. This is not a HRSA-required category outside the designation of, “affected communities, including people with HIV, members of a *Federally recognized Indian tribe* as represented in the population, individuals co-infected with hepatitis B or C and historically underserved groups and subpopulations.”
- b. This seat has been vacant for the majority of the life of the Partnership. Grouping the designation with the affected community leaves the door open for participation from a Federally recognized Indian tribe representative while relieving the burden of filling a highly specified vacant seat.

3. Overall Change

- a. Reduce roster by one (1).
-

G. One (1) representative co-infected with hepatitis B or C from the affected community.

1. Proposal

- a. Remove this seat.

2. Justification

- a. This is not a HRSA-required category outside the designation of, “affected communities, including people with HIV, members of a Federally recognized Indian tribe as represented in the population, *individuals co-infected with hepatitis B or C* and historically underserved groups and subpopulations.”

- b. This seat has been vacant for the majority of the life of the Partnership. Grouping the designation with the affected community leaves the door open for participation from an individual co-infected with hepatitis B or C while relieving the burden of filling a highly specified vacant seat.

3. Overall Change

- a. Reduce roster by one (1).

H. Three (3) Alternates – Representatives of the Affected Community

1. Proposal

- a. Remove these seats.

2. Justification

- a. This is not a HRSA-required category.
- b. These seats have been vacant for more than five (5) years in addition to the full voting member vacancies in the same category.
- c. The inclusion of these seats is a throw-back to a time when there was a need for alternates for affected community members, primarily due to health concerns. The removal of these seats reflects the reality of the HIV epidemic today in which people with HIV who are in care and receiving treatment are living long and healthy lives.
- d. Persons who occupy these seats have no voting power and they may sit on the Partnership for two terms without ever voting and then be ineligible to serve as a voting member until a two-year waiting period ends.

3. Overall Change

- a. Reduce Alternates from 3 to 0.
 - b. No change to Voting Members.
-

I. Two (2) Ex-Officio Members

1. Proposal

- a. Change the designation of these seats from “members” to “Ex-Officio Representatives”.
- b. Include the position of Miami-Dade County Public Schools; retain representative seats from the Office of the MDC Mayor and Board of County Commissioners).

2. Justification

- a. These are not HRSA-required categories.
- c. These seats have been vacant for the majority of the life of the Partnership. Moving the designation from “member” to “Ex-Officio Representative” status leaves the door open for participation while relieving the burden of filling highly specified vacancies.

3. Overall Change

- a. Increase Ex-Officio seats by one (1) for a total of three (3).
-

J. Other

These categories require no change; County Ordinance definitions are exactly or very close to HRSA definitions:

- One (1) Health care provider, which must represent a Federally Qualified Health Center;
- One (1) Community based AIDS service organization;

- Two (2) Housing, Homeless or Social Service providers;
 - One (1) Mental health provider;
 - One (1) Substance abuse provider;
 - One (1) Hospital or health care planning agency;
 - One (1) representative from agencies receiving grants under Part C of the Ryan White Program;
 - One (1) representative from agencies receiving grants under Part D of the Ryan White Program, or from organizations with a history of providing services to children, youth, and families if funded locally;
 - Four (4) grantee representatives of Other Federal HIV programs including Ryan White Program Part F and HOPWA, if funded locally excluding a Recipient representative from the Ryan White Part A Program;
 - One (1) State government/Ryan White Program Part B grantee representative;
 - One (1) State government/Medicaid Agency representative;
 - One (1) Local public health agency representative from the Florida Department of Health in Miami-Dade County;
 - One (1) Non-elected community leader who does not provide HIV related health care services subject to funding under Partnership programs; and
 - One (1) former inmate of a local, state, or federal prison released from the custody of the penal system during the preceding three (3) years and had HIV disease as of the date of his release, or a representative of HIV+ incarcerated persons.
-

CURRENT VS. PROPOSED PARTNERSHIP MEMBERSHIP CATEGORIES

#	Current Membership Categories
1	Community Based AIDS Organization (CBO) Representative
2	Former Inmate of local, state, or federal prison representative
3	Health Care Provider Representing FQHC
4	Hospital or Health Care Planning Agency Representative
5	Housing, Homeless or Social Service Provider
6	Housing, Homeless or Social Service Provider
7	Local Health Department Representative
8	Mental Health Provider Representative
9	Non-Elected Community Leader, not an HIV provider
10	Other Federal HIV Grantee Representative (HOPWA)
11	Other Federal HIV Program Grantee (Part F)
12	Other Federal HIV Program Grantee Representative (CDC)
13	Other Federal HIV Program Grantee Representative (SAMHSA)
14	Part C Grantee Representative
15	Part D Grantee Representative
16	Representative of the Affected Community
17	Representative of the Affected Community
18	Representative of the Affected Community
19	Representative of the Affected Community
20	Representative of the Affected Community
21	Representative of the Affected Community
22	Representative of the Affected Community
23	Representative of the Affected Community
24	Representative of the Affected Community
25	State Government RW Part B Grantee Representative
26	State Government/Medicaid Agency Representative
27	Substance Abuse Representative
28	<i>State of Florida General Revenue Grantee Representative</i>
29	<i>Federally Recognized Indian Tribe Representative</i>
30	<i>HIV Prevention Provider</i>
31	<i>Miami-Dade County Public Schools Representative</i>
32	<i>Part A Local Grantee Representative</i>
33	<i>Representative Co-infected with Hepatitis B or C</i>
34	<i>Representative of the Affected Community</i>
35	<i>Representative of the Affected Community</i>
36	<i>Representative of the Affected Community</i>
37	<i>Representative of the Affected Community</i>
38	<i>Representative of the Affected Community</i>
39	<i>Representative of the Affected Community</i>
#	Alternate Members
1	Representative of the Affected Community
2	Representative of the Affected Community
3	Representative of the Affected Community
#	Non-Voting Ex-Officio Members
1	Ex-officio Rep. - Office of the MDC Mayor

#	Proposed Membership Categories
1	Community Based AIDS Service Organization (CBO/ASO) Representative
2	Former Inmate of local, state, or federal prison representative
3	Health Care Provider Representing FQHC
4	Hospital or Health Care Planning Agency Representative
5	Housing, Homeless or Social Service Provider
6	Housing, Homeless or Social Service Provider
7	Local Health Department Representative
8	Mental Health Provider Representative
9	Non-Elected Community Leader, not an HIV provider
10	Other Federal HIV Grantee Representative (HOPWA)
11	Other Federal HIV Program Grantee (Part F)
12	Other Federal HIV Program Grantee Representative (CDC)
13	Other Federal HIV Program Grantee Representative (SAMHSA)
14	Part C Grantee Representative
15	Part D Grantee Representative
16	Representative of the Affected Community (1)
17	Representative of the Affected Community (2)
18	Representative of the Affected Community (3)
19	Representative of the Affected Community (4)
20	Representative of the Affected Community (5)
21	Representative of the Affected Community (6)
22	Representative of the Affected Community (7)
23	Representative of the Affected Community (8)
24	Representative of the Affected Community (9)
25	State Government RW Part B Grantee Representative
26	State Government/Medicaid Agency Representative
27	Substance Abuse Representative
28	Miami-Dade County Representative (restrictions apply)
#	Ex-Officio Representatives
1	Office of the MDC Mayor
2	Board of County Commissioners
3	Miami-Dade County Public Schools

PROPOSED CHANGES TO QUORUM REQUIREMENTS

Proposal

- Change the Partnership quorum requirement from 13 members to *one-third plus one* active members.

Justification

- The Partnership requires a set number of 13 members, regardless of the number of currently active members. Meetings have been cancelled (in advance and on site) due to lack of quorum. Even if 13 members are present, this is often not enough since some members may need to leave the room when there is a voting conflict (or might step away for other reasons). Therefore, in reality, without at least 14 members present, it is difficult to conduct business.
- Partnership committees require a quorum of one-third plus one active members. Quorum is variable among committees based on active members.
- A brief review of other County Advisory Boards shows a variety of requirements for quorum, from a set number (such as one-third plus one) to a percentage.
- A change to quorum brings the Partnership into agreement with its committees and is expected to improve the Board's ability to achieve quorum.

RESOURCES

- County Ordinance: [https://library.municode.com/fl/miami - dade county/codes/code of ordinances?nodeId=PTIIIICOR_CH2AD_ARTLXXXMIDECOHIAIPA](https://library.municode.com/fl/miami-dade_county/codes/code_of_ordinances?nodeId=PTIIIICOR_CH2AD_ARTLXXXMIDECOHIAIPA)
 - Partnership Bylaws: <http://aidsnet.org/wp-content/uploads/2023/02/Bylaws-Approved-011723.pdf>
 - Partnership Vacancy Report: <http://aidsnet.org/wp-content/uploads/2023/02/022223-Vacancies.pdf>
-



Executive Committee

Wednesday, May 31, 2023

10:00 a.m. – 12:00 p.m.

Behavioral Science Research,
2121 Ponce de Leon Blvd, Ste. 240
Coral Gables, FL 33134

AGENDA

- | | | |
|-------|---|--------------------|
| I. | Call to Order | Alecia Tramel |
| II. | Introductions | All |
| III. | Meeting Housekeeping and Rules | Alecia Tramel |
| IV. | Floor Open to the Public | Alecia Tramel |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of March 29, 2023 | All |
| VII. | Standing Business | |
| | ▪ Vacancy Updates | Christina Bontempo |
| | ▪ Fishbone Exercise Updates | All |
| | ▪ Suggestions for ordinance changes to comply with HRSA | All |
| VIII. | New Business | |
| | ▪ Invitation to Collaborate-National Dialogue on the Intersection of Racism and HIV as a Public Health Crisis | Christina Bontempo |
| IX. | Open Discussions and Announcements | All |
| X. | Next Meeting: July 26, 2023 at Behavioral Science Research | Alecia Tramel |
| XI. | Adjournment | Alecia Tramel |

Please mute or turn off all cellular devices.

For more information about the Executive Committee, please contact Marlen Meizoso,
(305) 445-1076 x107 or marlen@behavioralscience.com.



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