



**WELCOME**

Thank you for joining today's

**Integrated Plan  
Evaluation Workgroup  
Meeting**

*Please sign in to have your  
attendance recorded.*



## **Integrated Plan Evaluation Workgroup**

**Tuesday, January 16, 2024**

10:00 AM – 1:00 PM

Behavioral Science Research Corporation  
2121 Ponce de Leon Boulevard, Suite 240  
Coral Gables, FL 33134

### **AGENDA**

- |       |  |             |
|-------|--|-------------|
| I.    | Call to Order  | Amaris Hess |
| II.   | Introductions  | All         |
| III.  | Housekeeping   | Staff       |
| IV.   | Floor Open to the Public   | Amaris Hess |
| V.    | Review/Approve Agenda  | Amaris Hess |
| VI.   | Review/Approve Minutes of September 12, 2023   | Amaris Hess |
| VII.  | Standing Business  |             |
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|       | ▪ Integrated Plan Evaluation Workgroup: Tuesday, June 11, 2024<br>10:00 a.m. – 1:00 p.m. at BSR          |             |
| XI.   | Adjournment  | Amaris Hess |

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# Meeting Housekeeping Integrated Plan Evaluation Workgroup (IPEW)

Dated January 16, 2024  
*Behavioral Science Research*

# Disclaimer & Code of Conduct

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- ❑ 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!

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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

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- ❑ 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

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- ❑ 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/the-partnership/#ipew1](https://aidsnet.org/the-partnership/#ipew1).

# Meeting Materials Access-Main Page



[The Partnership](#) [For People with HIV](#) [Quality Management](#) [Provider's Hub](#) [News and Resources](#) [Calendars](#)

## The Miami-Dade HIV/AIDS Partnership



Miami-Dade County's Official Ryan White Program Planning Council for HIV Prevention and Care.

**Our vision is to eliminate disparities and improve health outcomes for all people living with or at risk for HIV/AIDS.**

SERVING

**8,590**

people with HIV

# Main Page Selections

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**The Partnership**



**Executive Committee**



**Care and Treatment Committee**



**Needs Assessment**



**Medical Care Subcommittee**



**Community Coalition Roundtable**



**Housing Committee**



**Strategic Planning Committee**



**Prevention Committee**



**Integrated Plan and Ending the HIV Epidemic**



**Integrated Plan Evaluation Workgroup**



**Joint Integrated Plan Review Team**



**Partnership, Recipient, and Grantee Reports**



**Get On Board! Planning Council Enrichment Training**



**New Member Orientation**



**Join the Partnership!**



**Join a Partnership Committee!**



**RSVP or Contact Us**

# Review/Reference

## Integrated Plan Evaluation Workgroup

Next Meeting: January 16, 2024 at 10:00 a.m.

Behavioral Science Research Corporation, 2121 Ponce de Leon Boulevard, Suite 240, Coral Gables, FL 33134



### AGENDA

[January 16, 2024](#)



### MINUTES

[September 12, 2023](#)



### PARTNERSHIP REPORT

[Report of approved motions](#)

[December 18, 2023](#)



### RETURN TO MENU



### MEETING DOCUMENTS

- [Memo re 2024 Officer Elections](#)



### JOIN THE WORKGROUP!

Contact [Christina Bontempo](#) for details.  
People with HIV may be eligible for vouchers!



### RSVP OR CONTACT US

RSVP  
[Christina Bontempo](#)  
[cbontempo@behavioralscience.com](mailto:cbontempo@behavioralscience.com)  
[\(305\) 445-1076](tel:(305)445-1076)



### BYLAWS

[Click here.](#)

# Integrated Plan

## Miami-Dade County Integrated HIV/AIDS Prevention and Care Plan

Goal 1: Prevent new HIV infections.

Goal 2: Improve HIV-related health outcomes of people with HIV.

Goal 3: Reduce HIV-related disparities and health inequities.

Goal 4: Achieve integrated, coordinated efforts that address the HIV epidemic among all partners and stakeholders.



### 2022-2026 Miami-Dade County Integrated HIV Prevention and Care Plan

For over a decade, the Miami-Dade County (MDC) Eligible Metropolitan Area (EMA) has been a national HIV/AIDS hot spot.

The EMA leads the State of Florida in the total number of people with HIV; 27,782 people with HIV - more than 23% of the entire state's population of people with HIV - lived in the EMA in Calendar Year (CY) 2020.

For nine of the past 10 years, the South Florida Metropolitan Statistical Area (MSA) has led the nation in the annual new-infection rate for HIV.

During that time, the MDC Ryan White HIV/AIDS Program (RWHAP) Part A/Minority AIDS Initiative (MAI), through the MDC Office of Management and Budget (OMB or local Part A/MAI Recipient); the Florida Department of Health in MDC (FDOH-MDC); and the Miami-Dade HIV/AIDS Partnership (Partnership), the official RWHAP Planning Council, have been coordinating responses to the HIV epidemic, linking programs in community education, supporting HIV prevention, HIV testing, and linkage to care activities, as well as strengthening core medical and support services for people with HIV.

These collaborative activities include the Getting to Zero initiative in 2016, the 2017-2021 Miami-Dade County Integrated HIV/AIDS Prevention and Care Plan (2017-21 Integrated Plan); the National HIV/AIDS Strategy 2022-2025; the Ending the HIV Epidemic Jurisdictional Plan; and the ongoing cooperation between the Partnership's Prevention and Strategic Planning Committees.

[Ending the HIV Epidemic: A Plan for America](#)



[RETURN TO MENU](#)

# RSVP!

## RSVP!

### Your RSVP Matters!



#### JOIN THE PARTNERSHIP!



We use RSVPs to determine if there will be a quorum of members and to make sure we have enough materials for all attendees. Please click a link below to let us know which meetings you can or cannot attend. All replies are helpful!

Meeting dates and locations are subject to change. For details, please see the latest meeting calendars at [aidsnet.org/calendar](https://aidsnet.org/calendar).

Thank you for your time.

- [January 2024](#)
- [February 2024](#)
- [March 2024](#)
- [April 2024](#)
- [May 2024](#)
- [June 2024](#)
- [July 2024](#)
- [August 2024](#)
- [September 2024](#)
- [October 2024](#)
- [November 2024](#)
- [December 2024](#)



**RETURN TO MENU**



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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 line for statements to be read into the record.

(No statements were received.)





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**Integrated Plan Evaluation Workgroup Meeting**  
**Miami-Dade County Main Library**  
**101 West Flagler Street, Auditorium, Miami, FL 33130**  
**September 12, 2023 Minutes**

#	Members	Present	Absent
1	Ferrer, Luigi		x
2	Goldberg, David	x	
3	Hess, Amaris		x
4	Hilton, Karen		x
5	Ingram, Trillion	x	
6	Llambes, Stephanie		x
7	Lowe, Camille		x
8	Machado, Angela	x	
9	Marqués, Jamie	x	
10	Mooss, Angela	x	
11	Perez Bermudez, Alberto		x
12	Robinson, Joanna		x
13	Sarmiento, Abril	x	
14	Suarez, Sarah	x	
<b>Quorum = 6</b>			

Guests	
Gillens, Courtney	
Torrealba, Marco	
Valle-Schwenk, Carla	
Williams, Stephen	
Staff	
Bontempo, Christina	
Ladner, Robert	
Martinez, Susy	

Note: 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](http://www.aidsnet.org/meeting-documents).

**I. Call to Order**

Workgroup Chair, Sarah Suarez, called the meeting to order at 10:24 a.m.

**II. Introductions**

Attendees introduced themselves.

**III. Housekeeping**

Staff reviewed the PowerPoint, *Meeting Housekeeping*, which included meeting disclaimer, code of conduct, resources, language matters, meeting participation, and protocol reminders.

**IV. Floor Open to the Public**

Ms. Suarez 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.”*

There were no comments. The floor was then closed.

#### **V. Review/Approve Agenda**

Ms. Suarez asked members to review the agenda. There were no changes.

**Motion to approve the agenda as presented.**

**Moved: Angela Machado**

**Seconded: Abril Sarmiento**

**Motion: Passed**

#### **VI. Review/Approve Minutes of June 6, 2023**

Members reviewed the minutes of June 6, 2023. Staff noted that the motion will indicate, “approved as posted,” because the red-lined goals version of minutes were posted online, not distributed at the meeting.

**Motion to approve the minutes of June 6, 2023 as posted.**

**Moved: Angela Machado**

**Seconded: Dr. Angela Mooss**

**Motion: Passed**

#### **VII. Standing Business**

- **Final Activities Review**

Breakout groups continued review of activities.

Within the Prevention group, the measurements are mostly finalized, with the main focus now on how to obtain necessary data.

Within the Linkage and Care and Treatment groups, the assignment of responsible parties and data sources needs to be determined by Executive staff of the Recipient, FODH-MDC, and BSR. Those assignments will be finalized and incorporated for the Workgroup’s information at their next meeting.

- **Suggestions for Reporting to the Joint Integrated Plan Review Team (JIPRT)**

Members suggested a report highlighting accomplishments and challenges versus a presentation strictly on data. Many data points are still unknown, but staff will compile as many highlights as possible.

#### **VIII. New Business**

- **2024 Planning**

Per the Partnership Bylaws, workgroups are convened for one year. The workgroup has completed its 2023 activities and requested a continuation through 2024 as a steering committee for the JIPRT. Those who expressed interest in continued membership in 2024 were: Trillion Ingram, Angela Machado, Jamie Marqués, Dr. Mooss, Ms. Sarmiento, and Ms. Suarez. Staff will query those members not present today on their interest. A motion by the JIPRT, ratified by the Partnership, is required to reconvene the workgroup in 2024. Results of their decision will be disseminated to members..

Staff thanked members for their work throughout the year.

## **IX. Announcements**

Staff highlighted flyers posted on [www.aidsnet.org](http://www.aidsnet.org):

- National Latino AIDS Awareness Day event registration;
- Care and Treatment Needs Assessment; and
- Notice of the Main Library walkway closure from September 13 through October 27, 2023. Members attending meetings at that location should plan accordingly.

## **X. Next Meeting**

Ms. Suarez announced the next Joint Integrated Plan Review Team meeting is scheduled for Tuesday, October 10, 2023, at 10:00 a.m. at the Miami-Dade County Main Library. Since the workgroup agreed to sunset for 2023, the Chair called for a vote to ratify the item.

**Motion for the Integrated Plan Evaluation Workgroup to sunset following the September 12, 2023 meeting.**

**Moved: David Goldberg**

**Seconded: Abril Sarmiento**

**Motion: Passed**

## **XI. Adjournment**

Ms. Suarez adjourned the meeting at 11:50 a.m.

DRAFT



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*Miami-Dade County 2022-2026 Integrated HIV Prevention and Care Plan*  
Integrated Plan Evaluation Workgroup (IPEW) Goals Evaluation  
January 16, 2024

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**NHAS Goal 2: Improve HIV-Related Health Outcomes of People with HIV: *Retention in Care (R)***

**Questions**

1. What is the peer certification intended to do? Is it intended to be “certification for all” or “advanced certification for some”?
2. Once certification is established, will it be required on an annual basis?

**Objective R1. Increase the percentage of people with HIV retained in RWHAP Medical Case Management from 89% in December 2022 to 95% by December 31, 2026.**

**Strategy R1.2.** Increase Peer (PESN) involvement in client care to improve retention and viral load suppression.

**Activity R1.2.a.** Convene listening sessions among peers and peer supervisors in CY 2024 to identify potential areas of increased peer involvement with client care, peer skill development, peer skill certification.

**Measurements**

1. # of listening sessions conducted with (1) peers and (2) peer supervisors in CY 2024.
2. # of peers and peer supervisors attending sessions.
3. Specification of peer certification and/or advanced peer certification areas identified by RWHAP and approved for training.

## NHAS Goal 2: Improve HIV-Related Health Outcomes of People with HIV: *Retention in Care (R)*

### Questions

1. If peer certification is completed, could or should reimbursement rates for peer services be raised for “certified” vs. “non-certified” peers?
2. Who should be in charge of developing or identifying peer certification training curriculum?

### Note

1. Certification can be done online using readily available resources and allowing peers to proceed at their own pace. This would mean that the training curriculum is *identified*, not *developed*. This is a capacity-building activity.

**Objective R1.** Increase the percentage of people with HIV retained in RWHAP Medical Case Management from 89% in December 2022 to 95% by December 31, 2026.

**Strategy R1.2.** Increase Peer (PESN) involvement in client care to improve retention and viral load suppression.

**Activity R1.2.b.** Develop or identify peer certification and/or advanced peer certification training/resources; conduct training; and certify [75%] of peers.

### Measurements

1. Peer certification and/or advanced peer certification training curriculum *developed* or *identified*.
2. # of advanced certification trainings conducted by close of 2024 and annually.
3. # and % of peers trained and certified by close of 2024 and annually.

## NHAS Goal 2: Improve HIV-Related Health Outcomes of People with HIV: *Retention in Care (R)*

### Note

1. *If peer certification is mandatory*, the RW Part A Service Delivery Manual/Service Definition for MCM/Peer Education and Support Network and contract language will need to be updated; if it is *not mandatory*, this activity can be removed.

**Objective R1.** Increase the percentage of people with HIV retained in RWHAP Medical Case Management from 89% in December 2022 to 95% by December 31, 2026.

**Strategy R1.2.** Increase Peer (PESN) involvement in client care to improve retention and viral load suppression.

**Activity R1.2.c.** Based on certification requirements, revise local RW Part A Service Delivery Manual/Service Definition for MCM/Peer Education and Support Network.

### Measurements

1. Peer section of MCM service delivery manual revised by Part A/MAI Recipient and Care and Treatment Committee (done vs. undone)
2. Annual review of service standards conducted by Care and Treatment Committee and Recipient (done vs. undone)

## NHAS Goal 2: Improve HIV-Related Health Outcomes of People with HIV: *Retention in Care (R)*

### Note

1. This activity was originally limited to EHE HealthTec, but there is no linkage to EHE Health Tec in the measurements/.

### Question

1. Is this activity for EHE or for all RWHAP MCMs?
2. Does **Activity R1.3.a.** (access facilitation) overlap with or supplement **Activity R1.3.b.** (social determinants of health)?

**Objective R1. Increase the percentage of people with HIV retained in RWHAP Medical Case Management from 89% in December 2022 to 95% by December 31, 2026.**

**Strategy R1.3.** Ensure a “**whole person,**” holistic treatment approach that recognizes that care for RWHAP clients must go beyond viral load suppression and retention in care.

**Activity R1.3.a.** Develop guidelines and procedures **related to EHE HealthTec** to facilitate client access to a medical practitioner; mental health provider; substance abuse treatment provider; client enrollment and re-enrollment in Part A Program; and treatment adherence confirmation for program clients.

### Measurements

1. Conduct review with MCMs, MCM Supervisors and Recipient to determine areas where **access facilitation** may be built into MCM activities (done vs. undone)
2. MCM service delivery manual revised by Part A/MAI Recipient and Care and Treatment Committee to address **access facilitation** (done vs. undone)
3. # of annual training sessions with MCM and MCM Supervisors to build MCM capacity to implement access facilitation.

**Activity R1.3.b.** Review and revise local MCM standards of care to address protocols for addressing **social determinants of health** (e.g., childcare, housing, food insecurity, domestic violence, discrimination) in treatment plans and external referrals.

### Measurements

1. Conduct review with MCMs, MCM Supervisors and Recipient to determine areas where **social determinants of health** may be addressed in MCM activities (done vs. undone).
2. MCM service delivery manual revised by Part A/MAI Recipient and Care and Treatment Committee to address **social determinants of health**
3. # of annual training sessions with MCM and MCM Supervisors to build MCM capacity to address social determinants of health.

## NHAS Goal 2: Improve HIV-Related Health Outcomes of People with HIV: *Retention in Care (R)*

### Notes

1. Some subrecipients currently have initiatives in place to destigmatize or normalize mental health services.
2. There is no clear mechanism for developing these protocols, no provision for looking for input from subrecipients with initiatives in place, and no reliable way to measure the impact of these initiatives.

### Question

1. What are suggestions for clarifying this process? Having one uniform protocol? Or encouraging subrecipients to develop their own protocol?

**Objective R1. Increase the percentage of people with HIV retained in RWHAP Medical Case Management from 89% in December 2022 to 95% by December 31, 2026.**

**Strategy R1.3.** Ensure a “whole person,” holistic treatment approach that recognizes that care for RWHAP clients must go beyond viral load suppression and retention in care.

**Activity R1.3.c.** Develop or identify protocols for how mental health services are destigmatized (“normalized”) and clients are encouraged to make use of them.

### Measurements

1. # of destigmatizing protocols developed or identified.
2. # of subrecipients documenting the application of destigmatizing protocols.

## NHAS Goal 2: Improve HIV-Related Health Outcomes of People with HIV: *Health Outcomes for Special Populations (SP)*:

### Questions

1. **Activity SP3.1.a.** overlaps with **Activity SP5.1.a.** Could the two trainings/activities be combined into a comprehensive LGBTQ+ sensitivity training covering sexual identity, gender identity, providing services to transgender persons, and cultural competency/humility?
2. Who should create and conduct this training?

### SP3 - Transgender People with HIV

**Objective SP3.** Improve health outcomes for transgender people with HIV.

**Strategy SP3.1.** Expand existing programs and collaborations to address specific needs of transgender people with HIV.

**Activity SP3.1.a.** Conduct basic and annual trainings for RWHAP subrecipients' MCM/Peer, front desk and medical staff on issues related to sexual identity, gender identity, and providing service to transgender persons.

#### Measurements

1. Develop or identify appropriate training curricula.
2. # of trainings conducted to front-desk staff; medical staff; MCM/Peer staff (*3 separate measurements*)
3. #/% of front-desk staff; medical staff; and MCM/Peer staff that received the training (*3 separate measurements*)

### SP5 - MSM with HIV and Co-occurring STIs in Ryan White Care

**Objective SP5.** Improve health outcomes for MSM with HIV and co-occurring STIs in Ryan White Care.

**Strategy SP5.1.** Expand existing programs and collaborations to address specific needs of MSM with HIV and sexually transmitted infections as co-occurring health conditions.

**Activity SP5.1.a.** Provide annual LGBTQ cultural competency/cultural humility trainings for RWHAP.

#### Measurements

1. Identify/generate the appropriate training curricula needed to address these issues.
2. # and % of RWHAP agencies that have completed at least one annual training

## NHAS Goal 2: Improve HIV-Related Health Outcomes of People with HIV: *Health Outcomes for Special Populations (SP): People with HIV who are Homeless or Unstably Housed*

### Notes

1. Staff is asking the Integrated Plan Evaluation Workgroup (IPEW) to consider separating this into two strategies:
  - a. For people experiencing housing instability or who need “emergency funding”; and
  - b. For people experiencing homelessness.
2. Staff is also suggesting that we ask JIPRT to revise activities under each strategy for later IPEW evaluation and implementation mechanisms.

### Objective SP4. Improve health outcomes for homeless or unstably housed people with HIV.

#### Strategy SP4.1.

Expand existing programs and collaborations to address specific needs of people with HIV experiencing homelessness or housing instability.

#### Activity SP4.1.a.

- Reorganize the Partnership’s Housing Committee to identify and administrate housing assistance beyond the Housing Opportunities for Persons with AIDS Program (HOPWA).

#### Measurements

1. List of resources identified.
2. List of resources distributed.
3. # of additional grants awarded in Miami-Dade County.
4. # of opportunities for short-term housing assistance identified outside RWHAP and HOPWA limitations.
5. # of opportunities for long-term housing assistance identified outside RWHAP and HOPWA limitations.

### NHAS Goal 3: Reduce HIV-Related Disparities and Health Inequities: *Stigma (S)*

#### Note

1. As seen in other training development areas, the actual development of the curricula has been underspecified.

#### Questions

1. Is the FDOH-EHE goal included in Strategy S1.1. still valid for this strategy?
2. Is inclusion of FDOH agencies for receiving stigma training under Activity S1.1.a. still valid?
3. Who is the appropriate responsible agency (RWHAP, BSR, FDOH)?

#### Objective S1. Reduce HIV-related stigma and discrimination.

**Strategy S1.1.** Increase awareness of stigmatizing behaviors throughout the system of care. (FDOH-EHE Goal: Partner with Capacity Building Assistance providers (CBA), and the private sector to train STD/HIV staff on HIV stigma, and discrimination).

**Activity S1.1.a.** Develop and/or identify training curricula for MCM/Peers, front desk personnel and medical providers in RWHAP and FDOH agencies that address stigma, discrimination and unrecognized ethnic, racial, gender, and HIV-status bias.

#### Measurements

1. Conduct a baseline survey of attitudes toward HIV and people with HIV among all RWHAP direct service providers, and use this to develop the capacity-building curriculum cited below.
2. Create or adapt capacity-building curricula on reducing stigmatizing attitudes and beliefs, and mechanisms for health care professionals and paraprofessionals to become aware of such beliefs in their own practice, and work to overcome them.



## NHAS Goal 4: Achieve Integrated, Coordinated Efforts that Address the HIV Epidemic Among All Partners: *Integrated Plan Coordination (IPC)*

### Questions

1. Stakeholders need to be identified, recruited and engaged in integrated planning. What can be done to encourage a broader range of stakeholders?
2. Are “outbreaks” the same as “transmission clusters”?
3. Who is responsible for addressing “outbreaks”: RWHAP; FDOH; EHE?

### Note

1. Strategic Planning and Prevention Committees will also be asked to give suggestions for stakeholders.

**Objective IPC1. Develop strong community partnerships to leverage available services and funding for ongoing HIV care and treatment and to be able to respond quickly to HIV outbreaks.**

**Strategy IPC1.1.** Maintain and develop community partnerships.

**Activity IPC1.1.a.** Identify community stakeholders to broaden the base of Integrated Plan implementation and referrals for client needs.

### Measurements

1. Establishment of a working Integrated Plan Evaluation Workgroup to engage community stakeholders in planning and evaluating IP services.
2. # of nonaffiliated stakeholders recruited and serving on the Strategic Planning Committee, Prevention Committee (collectively Joint Integrated Plan Review Team) and/or IPEW.

**Activity IPC1.1.b.** Develop a plan among stakeholders for addressing HIV outbreaks.

### Measurements

1. Progress Report on stakeholder plan.

## NHAS Goal 4: Achieve Integrated, Coordinated Efforts that Address the HIV Epidemic Among All Partners: *Integrated Plan Coordination (IPC)*

### Questions

1. Is this measurement appropriate?
2. Who is responsible for negotiating and managing data sharing agreements?

**Objective IPC1.** Develop strong community partnerships to leverage available services and funding for ongoing HIV care and treatment and to be able to respond quickly to HIV outbreaks.

**Strategy IPC1.1.** Maintain and develop community partnerships.

**Activity IPC1.1.d.** Coordinate *client-level* data sharing between RWHAP Parts A, B, D, F; General Revenue (GR); and the AIDS Drug Assistance Program (ADAP); and between the RWHAP and Medicaid.

### Measurements

1. Progress report on data sharing agreements

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## Acronyms

- BSR: Behavioral Science Research Corporation
- EHE: Ending the HIV Epidemic
- FDOH: Florida Department of Health in Miami-Dade County
- MCM: Medical Case Managers or Medical Case Management, depending on the context
- MSM: Men who have Sex with Men
- MDC: Miami-Dade County
- OMB: Miami-Dade County Office of Management and Budgets
- Recipient: Miami-Dade County Office of Management and Budgets
- RWHAP: Ryan White HIV/AIDS Program
- STI: Sexually Transmitted Infections



## **Integrated Plan Evaluation Workgroup**

**Tuesday, January 16, 2024**

10:00 AM – 1:00 PM

Behavioral Science Research Corporation  
2121 Ponce de Leon Boulevard, Suite 240  
Coral Gables, FL 33134

### **AGENDA**

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| I.    | Call to Order  | Amaris Hess |
| II.   | Introductions  | All         |
| III.  | Housekeeping   | Staff       |
| IV.   | Floor Open to the Public   | Amaris Hess |
| V.    | Review/Approve Agenda  | Amaris Hess |
| VI.   | Review/Approve Minutes of September 12, 2023   | Amaris Hess |
| VII.  | Standing Business  |             |
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| XI.   | Adjournment  | Amaris Hess |

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# MIAMI-DADE HIV/AIDS PARTNERSHIP 2023 – A YEAR IN REVIEW

December 18, 2023

A series of several parallel white lines of varying thicknesses, slanted diagonally from the bottom-left towards the top-right, located on the right side of the slide.



## Integrated Plan Evaluation Workgroup

Tuesday, January 16, 2024

10:00 AM – 1:00 PM

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## *Memo*

**To:** Integrated Plan Evaluation Workgroup Members

**From:** Christina Bontempo

**Date:** January 16, 2024

**Re:** 2024 Officer Nominations and Elections

---

At the January 16, 2024, Integrated Plan Evaluation Workgroup meeting, nominations and elections for Committee Officers – Chair and Vice Chair – will be held.

I would like to thank Sarah Suarez for Chairing the Workgroup last year. Ms. Suarez has taken a new position and is no longer sitting on the workgroup.

I would also like to thank Amaris Hess for serving as Vice Chair last year. Ms. Hess agreed to serve as Chair for the 2024 meeting year.

Note, the workgroup is scheduled for just two meetings tis calendar year.

Committee Officers develop agendas with support staff and lead meetings. This is a great opportunity to enhance your leadership skills and add a new title to your resume! Staff provides comprehensive agenda guides for each meeting. For your reference, I am providing the Miami-Dade HIV/AIDS Partnership Bylaws (Section 5.1) qualifications - relevant to workgroups - for Officers:

- Each standing committee, subcommittee, or workgroup shall elect a Chair and a Vice-Chair from among its members; they shall serve at the will of the standing committee, subcommittee, or workgroup.
- Officers shall be full voting members.
- Standing committees, committees, and workgroups shall strive to elect at least one (1) officer who is a person with HIV.
- No individual shall serve concurrent terms as an officer of the Partnership and an officer of a standing committee or subcommittee. *The exception to this rule is for officers of workgroups, which may be led by the Chair as Chair or Vice-Chair of the committee under whose purview the workgroup was authorized.*

*You are encouraged to add your name as a nominee* in advance of the meeting; nominations will also be taken from the floor at the meeting. If you are interested in this opportunity or if you have any questions, please contact me at [cbontempo@behavioralscience.com](mailto:cbontempo@behavioralscience.com) or (305) 445-1076.



## **Integrated Plan Evaluation Workgroup**

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# FEBRUARY 2024

## RYAN WHITE PART A/MAI PROGRAM AND MIAMI-DADE HIV/AIDS PARTNERSHIP CALENDAR

Monday	Tuesday	Wednesday	Thursday	Friday
<b>MEETING LOCATIONS (also, see below)</b> <b>Care Resource</b> - Care Resource Community Health Centers, Midtown Miami, 3510 Biscayne Blvd., First Floor Community Room, Miami, FL 33137 <b>MDC Main Library</b> - 101 West Flagler Street, Auditorium, Miami, FL 33130			<b>1</b>	<b>2</b>
<b>5</b>	<b>6</b> <b>Partnership New Member Orientation</b> 2:00 PM to 5:00 PM via Zoom	<b>7</b>  National Black HIV/AIDS Awareness Day	<b>8</b> <b>Care &amp; Treatment Committee</b> 10:00 AM to 12:00 PM at BSR Corp.	<b>9</b>
<b>12</b>	<b>13</b> <b>Joint Integrated Plan Review Team: Strategic Planning &amp; Prevention Committees</b> 10:00 AM to 1:00 PM at MDC Main Library	<b>14</b> ❤️	<b>15</b> <b>RWP Subrecipient Forum</b> 10:00 AM to 1:00 PM at MDC Main Library  <b>Housing Committee</b> 2:00 PM to 4:00 PM at BSR Corp.	<b>16</b> <b>Clinical Quality Management Committee</b> 9:30 AM to 11:30 PM via Zoom
<b>19</b> President's Day (BSR Offices Closed)	<b>20</b> <b>Miami-Dade HIV/AIDS Partnership</b> 10:00 AM to 12:00 PM at MDC Main Library	<b>21</b> <b>Ryan White Program Medical Case Manager Basic Training</b> 10:00 AM to 4:00 PM via Zoom	<b>22</b>	<b>23</b> <b>Medical Care Subcommittee</b> 9:30 AM to 11:30 AM at BSR Corp.
<b>26</b> <b>Community Coalition Roundtable</b> 4:00 PM to 6:00 PM at Care Resource (Dinner begins at 3:30 PM)	<b>27</b>	<b>28</b>  HIV Is Not a Crime Day <b>Ryan White Program MCM Supervisor Training</b> 10:00 AM to 4:00 PM via Zoom <b>Executive Committee Meets as needed</b>	<b>29</b>	<b>BSR Corp. – Behavioral Science Research Corporation, 2121 Ponce de Leon Boulevard, Suite 240, Coral Gables, FL 33134</b>

All events on this calendar are open to the public.

*People with HIV are invited to participate!*



Your RSVP lets us know if we have the necessary participants to hold the activity and ensures we have enough materials.

RSVP to (305) 445-1076, [hiv-aidsinfo@behavioralscience.com](mailto:hiv-aidsinfo@behavioralscience.com), or scan the QR Code for Partnership meetings.



Visit [www.aidsnet.org](http://www.aidsnet.org) for more information.

**Version 01/11/24**  
 Information on this calendar is subject to change.

# JUNE 2024

## RYAN WHITE PART A/MAI PROGRAM AND MIAMI-DADE HIV/AIDS PARTNERSHIP CALENDAR

Monday	Tuesday	Wednesday	Thursday	Friday	
<b>MEETING LOCATIONS</b> <b>Borinquen</b> - Borinquen Medical Centers, 3601 Federal Highway, Miami FL 33137 <b>BSR Corp.</b> - Behavioral Science Research Corp., 2121 Ponce de Leon Blvd., Suite 240, Coral Gables, FL 33134 <b>MDC Main Library</b> - Miami-Dade County Main Library, 101 West Flagler Street, Auditorium, Miami, FL 33130					<p>All events on this calendar are open to the public.</p> <p><i>People with HIV are invited to participate!</i></p>  <p>Your RSVP lets us know if we have the necessary participants to hold the activity and ensures we have enough materials.</p> <p>RSVP to (305) 445-1076, <a href="mailto:hiv-aidsinfo@behavioralscience.com">hiv-aidsinfo@behavioralscience.com</a>, or scan the QR Code for Partnership meetings.</p>  <p>Visit <a href="http://www.aidsnet.org">www.aidsnet.org</a> for more information.</p> <p><b>Version 11/15/23</b> Information on this calendar is subject to change.</p>
<b>3</b>	<b>4</b>	<b>5</b>  HIV Long-Term Survivor's Day  <b>Get on Board! Planning Council Enrichment Training</b> 12:00 PM to 1:00 PM via Zoom	<b>6</b>	<b>7</b>	
<b>10</b>	<b>11</b> <b>Integrated Plan Evaluation Work Group</b> 10:00 AM to 1:00 PM at BSR Corp.	<b>12</b>	<b>13</b> <b>Care &amp; Treatment Committee</b> 10:00 AM to 1:00 PM at MDC Main Library	<b>14</b> <b>Strategic Planning Committee</b> 10:00 AM to 12:00 PM at BSR Corp.	
<b>17</b> <b>Miami-Dade HIV/AIDS Partnership</b> 10:00 AM to 12:00 PM at MDC Main Library	<b>18</b> <b>RWP MCM Supervisor Meeting</b> 10:00 AM to 4:00 PM via Zoom	<b>19</b> Juneteenth	<b>20</b> <b>Housing Committee</b> 2:00 PM to 4:00 PM at BSR Corp.	<b>21</b> <b>Clinical Quality Management Committee</b> 9:30 AM to 11:30 AM via Zoom	
<b>24</b> <b>Community Coalition Roundtable</b> 5:00 PM to 7:00 PM at Borinquen (Dinner at 4:30 PM)	<b>25</b>	<b>26</b> <b>Executive Committee</b> <i>Meets as needed</i>	<b>27</b>  <b>National HIV Testing Day</b>  <b>Prevention Committee</b> 10:00 AM to 12:00 PM at MDC Main Library	<b>28</b> <b>Medical Care Subcommittee</b> 9:30 AM to 11:30 PM at BSR Corp	



## **Integrated Plan Evaluation Workgroup**

**Tuesday, January 16, 2024**

10:00 AM – 1:00 PM

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| XI.   | <b>Adjournment</b>   | <b>Amaris Hess</b> |

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For more information about the Integrated Plan Evaluation Workgroup, please contact Christina Bontempo,  
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A word cloud of the phrase "thank you" in various languages and scripts. The most prominent words are "thank you" in red, "gracias" in green, and "mercii" in orange. Other visible words include:

- danke (blue)
- teşekkür ederim (purple)
- dank je (green)
- ngiyabonga (brown)
- спасибо (red)
- Баярлалаа (blue)
- раxмат (blue)
- 謝謝 (black)
- спас (blue)
- maafetai lava (green)
- vinaka (green)
- blagodar am (blue)
- blagodar am (blue)
- misaoatra (green)
- matondo (green)
- paldies (green)
- grazzi (green)
- mahalo (purple)
- tapadh leat (purple)
- хвала (green)
- asante (green)
- manana (green)
- enkosii (green)
- bedankt (yellow)
- nandi (green)
- kiitos (green)
- dankie (green)
- dhanyavadi (green)
- mauruuru (green)
- koszoni (green)
- hvala (green)
- gracie (green)
- bayarlalaa (green)
- chnorakaloutioun (green)
- gracias ago (green)
- gracies (green)
- sulpay (green)
- go raibh maith agat (purple)
- djiere dieut (purple)
- tau (purple)
- mochchakkeram (purple)
- mamnun (purple)
- dziękuje (purple)
- sobodi (purple)
- dekuji (purple)
- sagolun (purple)
- didid madloba (purple)
- kam sah hammida (purple)
- najis tuka (purple)
- sukriya (purple)
- kop khun krap (purple)
- taiku (purple)
- arigato (purple)
- takk (purple)
- dakujem (purple)
- trugarez (purple)
- obrigado (green)
- mesii (green)
- didid madloba (purple)
- kam sah hammida (purple)
- najis tuka (purple)
- sukriya (purple)
- kop khun krap (purple)
- taiku (purple)
- arigato (purple)
- takk (purple)
- dakujem (purple)
- trugarez (purple)
- merci (orange)
- dholch (orange)
- dhanyavadagalu (orange)
- shukriya (orange)
- merce (orange)
- mercsi (orange)
- ευχαριστώ (purple)
- diolch (orange)
- dhanyavadagalu (orange)
- shukriya (orange)
- merce (orange)
- mercsi (orange)
- terima kasih (yellow)
- tanemirl rahmet (yellow)
- xiexie (yellow)
- 감사합니다 (black)
- তোমাকে ধন্যবাদ (black)
- merci (orange)
- mercsi (orange)