

WELCOME

Thank you for attending today's

Community Coalition Roundtable

Please sign in to have your attendance recorded.





Community Coalition Roundtable

Monday, March 31, 2025

4:00 PM – 6:00 PM (Dinner served at 3:30 PM)

Care Resource Community Health Center 3510 Biscayne Boulevard, 1st Floor Community Room, Miami, FL 33137

AGENDA

I. Call to Order Lamar McMullen II. Introductions All III. Recognition of Meeting Host Lamar McMullen IV. Housekeeping Lamar McMullen V. Floor Open to the Public Lamar McMullen Review/Approve Agenda A11 VII. Review/Approve Minutes of February 24, 2025 All VIII. Reports All Membership Partnership Ryan White Program Expenditures IX. **Standing Business** Staff/All Officer Training Brief 2025 Officer Elections Getting to Know Ryan White Services: Substance Abuse and Mental Health Services Recruitment Luigi Ferrer □ Phone Bank - Feedback from March and Scheduling for April □ Recruitment Event Planning All Tabling at Speed Networking Event - Wednesday, April 30, 2025 Budget Request for a Special Recruitment Event or Recruitment Materials X. **New Business** Application Updates Staff A11 Announcements and Open Discussion XII. Next Roundtable: April 28, 2025, at 5:00 PM Lamar McMullen Empower U CHC, 7900 NW 27th Avenue, Suite C3A, Miami FL 33147 XIII. Adjournment Lamar McMullen

Special thanks to our meeting host, Care Resource!





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Meeting Housekeeping Community Coalition Roundtable

2025

Created by Behavioral Science Research

Disclaimer and 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.

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 and applicants should see staff for a travel expense offset at the end of the 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.

About the Partnership

- ☐ The Miami-Dade HIV/AIDS Partnership is the official Ryan White Program Planning Council for Miami-Dade County.
- ☐ Partnership Members are appointed by the Mayor of Miami-Dade County based on recommendations by the Community Coalition.
- ☐ The Community Coalition is one of six Standing Committees of the Partnership.
- □ All Partnership and Standing Committee members are volunteers and commit to abiding by the Partnership's Bylaws, including regular meeting attendance and completion of required training and paperwork.
- ☐ See staff after the meeting for additional details.



Meeting Participation

Everyone has a role to play!

- ☐ All attendees may address the board as time allows and at the discretion of the Chair.
- ☐ Please *share your expertise* on the current Agenda topics and motions. Remember to . . .
 - Raise your hand to be recognized by the Chair or added to the queue during discussions.
 - Avoid repeating points previously addressed.



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 experiencing homelessness, 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 ...

Meeting Terminology

Meetings can be fast-paced and confusing!

- ☐ Terms and acronyms you might hear at today's meeting are on the back of your Agenda.
- ☐ Please raise your hand at any time if you need more information!

= 11.	Meeting Guide
7. (Meetings can be fast-paced and confusing!
= 1	These terms and acronyms can help you follow along.
	Please raise your hand at any time if you need more information!
Partnership, PC, or Planning Council	The Miami-Dade HIV/AIDS Partnership - Official Ryan White Program Planning Council in Miami-Dade County
RWP or RWHAP	The Ryan White Program or The Ryan White HIV/AIDS Program (Usually referring to Part A/MAI).
ADAP	AIDS Drug Assistance Program. Provides FDA-approved medications for low- income individuals with HIV who have limited or no coverage from private insurance or Medicaid. Provides insurance coverage for uninsured RWP clients.
BSR	Behavioral Science Research Corp. (aka, Staff).
EHE	Ending the HIV Epidemic: A Plan for America. Four Pillars:
	1. Diagnose, 2. Treat, 3. Prevent, 4. Respond.
EMA	Eligible Metropolitan Area (locally, Miami-Dade County).
FDOH or FDOH-MDC	Florida Department of Health in Miami-Dade County.
FPL	Federal Poverty Level. Used to determine RWP eligibility and benefits.
НОРWA	Housing Opportunities for People with AIDS Program. Federal program that provides funding to support housing and housing-related services for people wit AIDS and their families. Related terms: STRMU: Short-Term Rental, Mortgage an Utilities Assistance; Project-based: Funds designated units in a building; LTRA: Long-Term Rental Assistance (voucher program); and FMR: Fair Market Rents.
HRSA	The Health Resources and Services Administration. The source of federal RWP grant funds.
Integrated Plan or IP	The Miami-Dade County Integrated HIV Prevention and Care Plan.
JIPRT	The Joint Integrated Plan Review Team (Prevention Committee & Strategic Planning Committee).
MAI	Minority AIDS Initiative. Additional RWP funding to improve access to HIV care and health outcomes for disproportionately affected racial and ethnic minority populations.
NHAS	National HIV/AIDS Strategy. Four Goals: 1. Prevent new HIV infections; 2. Improv HIV-related health outcomes of people with HIV; 3. Reduce HIV-related disparities and health inequities; 4. Achieve integrated, coordinated efforts that address the HIV epidemic among all partners.
PE-Miami or Provide Enterprise	Provide Enterprise® by Groupware Technologies (RWP client database system).
The Recipient, The County, or OMB	The Miami-Dade County Office of Management and Budget. The Recipient of RWP Part A/MAI funds from HRSA.
TTRA	Test and Treat/Rapid Access. Protocol designed to ensure newly diagnosed people or those returning to care will obtain immediate linkage to medical care and treatment.

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 www.aidsnet.org/the-partnership/, or by scanning the QR code on your agenda.







Scan for documents

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Special thanks to our meeting host, Care Resource!

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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XIII. Adjournment



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Special thanks to our meeting host, Care Resource!

Lamar McMullen



Community Coalition Roundtable

Care 4 U Community Health Center 4690 NW 7th Avenue, Miami, FL 33127 February 24, 2025 Minutes

#	Members	Present	Absent
1	Burks, Laurie Ann	X	
2	Chassi, Kai		X
3	Farshchi, Auva	X	
4	Ferrer, Luigi	X	
5	Jones, Keddrick		X
6	Jones, Sandra	X	
7	McIntyre, Harold		X
8	McMullen, Lamar	X	
9	Robinson, Joanna	X	
10	Tramel-McIntyre, Alecia		X
Quo	rum = 4		

Guests	
Staff	
Bontempo, Christina	

All documents referenced in these minutes are on file and were accessible to members and the public prior to (and during) the roundtable, at www.aidsnet.org/the-partnership#roundtable1.

I. Call to Order

Community Coalition Roundtable Chair, Lamar McMullen, called the meeting to order at 5:01 p.m.

II. Introductions

Mr. McMullen led introductions, including an ice breaker on prevention ideas.

III. Recognition of Meeting Host

This item was not specifically addressed since Mr. McMullen was the representative of Care 4 U Community Health Center.

IV. Housekeeping

Attendees each read a slide of the *Meeting Housekeeping* PowerPoint, which included general reminders, code of conduct, meeting participation best practices, and resource persons.

V. Floor Open to the Public

Mr. McMullen 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 members of the public present so the floor was closed.

VI. Review/Approve Agenda

Members reviewed the agenda and approved it without changes.

Motion to approve the agenda as presented.

Moved: Sandra Jones Seconded: Luigi Ferrer Motion: Passed

VII. Review the Minutes of January 27, 2025

Members reviewed the minutes of January 27, 2025. Two corrections were noted. Keddrick Jones should be marked as absent; and Auva Farshchi's attendance will note she was unable to access the building. Christina Bontempo shared her cell phone number so members could contact her in the future in case of problems getting to the meeting.

Motion to approve the minutes of January 27, 2025, as amended.

Moved: Luigi Ferrer Seconded: Joanna Robinson Motion: Passed

VIII. Reports

Membership

□ Vacancy Review

Staff reviewed the Vacancy Review handout which highlighted the vacancies for Ryan White Program clients. Staff emphasized that both the Partnership and all committees are lacking in Ryan White Program client members. Also, although participation by all persons with lived experience is important, the set aside seats on the Partnership are specific to Ryan White Program clients, and those persons need to be the focus of recruitment efforts.

As to the other vacancies on the Partnership, Mr. McMullen may be able to apply for the SAMHSA Representative seat; Empower U was suggested as a recipient of Part F funds and should be contacted to fill that vacancy; the County has been asked to name a person for the Non-Ryan White Program seat; and the Health Council of South Florida should be contacted for the Hospital or Healthcare Planning Agency seat. Staff will contact those agencies.

□ Source of Income Filing

Members completed their required annual Source of Income forms prior to and during the meeting, and staff collected the forms for submission to the County.

IX. Standing Business

2025 Officer Elections

Members discussed the roles and responsibilities of both Committee and Partnership officer positions. Members Joanna Robinson, Luigi Ferrer, and Auva Farshchi all expressed interest and wanted to better understand the role before making a commitment to either the Roundtable or the Partnership. Staff offered to present the Officer Training at the next Roundtable. Members voted to table elections until after the training. Mr. McMullen agreed to remain as Chair for one more month, with elections to be held in March.

Motion to table 2025 Officer Elections until March 2025.

Moved: Luigi Ferrer Seconded: Sandra Jones

Calendar of Activities

Members read the Bylaws Responsibilities from the Calendar of Activities, which emphasizes the responsibility of new member recruitment.

□ Recruitment Event Planning

Members discussed options for a recruitment event. Staff advised the available budget will be \$1,200, not \$1,500, as requested. However, incentive items may be able to be purchased outside the \$1,200 which could free up some funds. Regardless, members agreed \$1,200 was probably not sufficient to hold an event and funds would be better spent on other initiatives. Members had asked staff in January to report on what was not allowed within the budget. Staff advised the answer was to make a proposal for review.

Members agreed that targeted recruitment at provider agencies during support groups and community events would be the most impactful, and that funds should be requested for incentive items, promotional materials, gift card incentives, and special guest speakers, including social media influencers, as allowable.

Staff was asked to research the cost and feasibility for various ideas and will report back on the items, including:

- Printing costs for a simple palm card with a picture of members and a call to action featuring a QR code linked to the Partnership's website. Mr. McMullen offered to assist with the card design.
- Plastic or insulated water bottles branded with "Community Coalition Roundtable" and a QR code linked to the Partnership's website. Bottles must be BPA-free.
- Designing a new pen with a stylus nub.
- Hiring a social media influencer to create a TikTok video.
- Hiring a special presentation speaker.
- The availability of funds for gift cards for potential members.

Members discussed renaming the Partnership's website from www.aidsnet.org to a URL that does not contain the term AIDS (or HIV). Several ideas were suggested and will need to be researched for availability. Members agreed that some of their recruitment funds could be used for the renaming of the website if it is otherwise cost-prohibitive within the current budget. New incentive items should not be created until the new website URL is established. Staff advised that a motion should be brought to the Partnership once the parameters of changing the URL are better understood.

Mr. Ferrer suggested HealthMerch as a vendor for incentive items and offered to send their information to staff.

□ Script Development and Phone Bank Scheduling

Members reviewed and edited a proposed script to assist with contacting Ryan White Program clients who had completed the 2024 Client Satisfaction Survey and had expressed interest in learning more about the Partnership. Overall, members agreed the script was too long and that it

Motion: Passed

will be necessary to get to the point of why they are calling in order to keep the attention of the respondents. The new script will read:

Hi, is this (client name)?

a. If NO Thank you. I will try to reach (client name) at a later time. Goodbye.

Do not leave a message. Call ends. Make a note on the call sheet.

b. If YES

Good morning (afternoon). My name is _____ and I'm a member of the Miami-Dade HIV/AIDS Partnership Planning Council.

You took the Ryan White Program client satisfaction survey last fall and said you were interested in information about the planning council.

The best way to learn more is to come to a Community Coalition Roundtable meeting.

It's free and includes a light dinner and information about Ryan White Program services.

Our next Roundtable is Monday, March 31 at 3:30 PM at Care Resource at 3510 Biscayne Boulevard.

I'll be attending the Roundtable. Can I count on you to attend?

Great. Let me get your email address for a meeting reminder and calendar invite.

Nice to meet you, (client name), I'll see you next Monday at Care Resource.

Call ends. Make a note on the call sheet.

Possible Pushback

- I don't want to attend.
- I don't want to give my email address (or I don't have email).
- Can I call you back?

Response

- I understand. How about I call you back for our next Roundtable in April?
- I understand. How about if we give you a call back at this number?
- Sure, you can call the Partnership Planning Council office at 305-445-1076 and ask for Christina.

Members agreed to hold a phone bank on March 24, 2025, at BSR Corp. Members may come throughout the day as their schedule allows. Each member will make at least ten calls, ideally resulting in at least one, "Yes." Staff will provide refreshments throughout the phone banking day.

☐ Getting to Know Ryan White Services: Medical Case Management

Members were provided with the basic Medical Case Management Service Description (excluding billing requirements). Members were tasked with reading the service description for discussion at the next meeting.

Service descriptions will be reviewed each month. Members asked to see the Substance Abuse and Mental Health services in March, and Outpatient Ambulatory Medical Care in April.

Staff reminded members that service descriptions are edited by the Care and Treatment Committee and that questions about the services would be presented to that committee as requested.

Grantee Reports

Staff briefly reviewed the Part A Expenditure and Utilization Reports and will bring updates to each meeting.

□ Report to Other Committees (as needed)

Staff reminded members that they may ask questions of or offer suggestions to other committees as it relates to better understanding of planning council processes or more meaningful involvement by people with HIV.

X. Announcements and Open Discussion

Staff announced the next Report for Action Partnership meeting briefing is Friday, February 28.

Mr. Ferrer announced an HIV Is Not A Crime Day event at Simply Health in Hialeah on February 28. Mr. McMullen will be speaking about HIV criminalization and lunch will be served.

Mr. McMullen shared flyers for two current University of Miami studies seeking study participants.

XI. Next Roundtable

The next Roundtable is scheduled for March 31, 2025, at 3:30 PM at Care Resource, 3510 Biscayne Boulevard, 1st Floor Community Room, Miami, FL 33137. Mr. Ferrer offered to send staff the name of a potential food donor for the dinner.

XII. Adjournment

Mr. McMullen adjourned the meeting at 6:57 p.m.





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Membership Report

March 21, 2025

The Miami-Dade HIV/AIDS Partnership

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

Opportunities for Ryan White Program Clients

5 seats are available to Ryan White Program Clients who are not affiliated or employed by a Ryan White Program Part A funded service provider.

Opportunities for General Membership

7 seats are open to people with HIV, service providers, and community stakeholders who have reputations of integrity and community service, and possess the relevant knowledge, skills and expertise in these membership categories:

Hospital or Health Care Planning Agency Representative
Mental Health Provider Representative
Housing, Homeless or Social Service Provider
Other Federal HIV Program Grantee Representative (Part F)
Other Federal HIV Program Grantee Representative (SAMHSA)
Non-Ryan White Program Miami-Dade County Representative
Part D Grantee Representative

Are you a Member?

Thank you for your service to people with HIV! Be sure to bring a Ryan White client to your next meeting!

Do You Qualify for Membership?

If you answer "Yes" to these questions, you could qualify for membership!

Are you a resident of Miami-Dade County?

Are you a registered voter in Miami-Dade County? *Note: Some seats for people with HIV are exempt from this requirement.*

Can you volunteer three to five hours per month for Partnership activities?



Get Started Today!
Scan the QR Code or contact
mdcpartnership@behavioralscience.com.



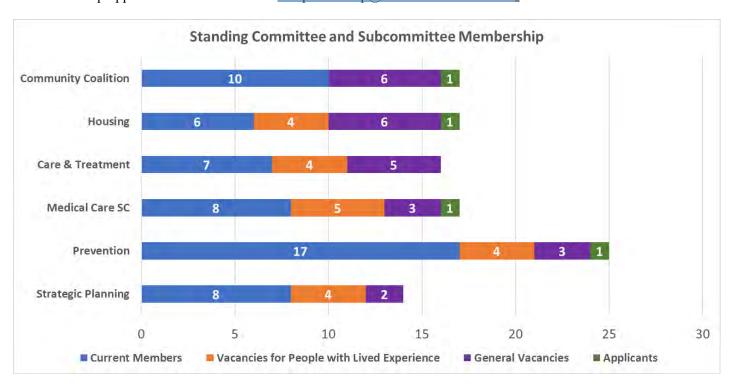
Committees

MEMBERSHIP Work with a dedicated team of volunteers on these and more Partnership activities to better serve people with HIV in Miami-Dade County! People with HIV are encouraged to join!

- A Allocate more than \$27 million in Ryan White Program funds with the Care and Treatment Committee
- A Develop an Annual Report on the State of HIV and the Ryan White Program in Miami-Dade County with the **Strategic Planning** Committee
- **&** Recruit and train new Partnership members with the Community Coalition
- Work with the City of Miami Housing Opportunities for Persons with AIDS Program to address housing challenges for people with HIV/AIDS with the **Housing Committee**
- **X** Oversee updates and changes to medical treatment guidelines for the Ryan White Part/ MAI Program with the Medical Care **Subcommittee**
- Set priorities for Ryan White Program HIV health and support services in Miami-Dade County with the Care and Treatment Committee

- **8** Share a meal and testimonials at Roundtables with the Community Coalition
- **8** Develop and monitor the official HIV Prevention and Care Integrated Plan with the **Strategic Planning Committee & Prevention** Committee
- Develop your leadership skills and be a committee leader with the Executive Committee
- Oversee updates and changes to the Ryan White Prescription Drug Formulary with the **Medical Care Subcommittee**
- **8** Develop and monitor local Ending the HIV Epidemic activities with the Florida Department of Health in Miami-Dade County with the Prevention Committee & Strategic **Planning Committee**
- **8** Be in the know about the latest HIV activities of the Prevention Mobilization Workgroups with the Prevention Committee

Visit www.aidsnet.org/the-partnership/ for the complete list of applications and details on Partnership and committee membership opportunities. Contact us at mdcpartnerhsip@behavioralscience.com or 305-445-1076 for assistance.





Partnership Report to Committees and Subcommittee March 4, 2025 Meeting

Supporting documents related to motions in this report are available at www.aidsnet.org/the-partnership#partnership1, or from Behavioral Science Research Corporation (BSR) staff.

For more information, please contact mcdpartnership@behavioralscience.com.

Members heard regular reports and approved the following motions:

Care and Treatment

- 1. Motion to accept the Medical Case Management service description with edits as presented.
- 2. Motion to accept the Outreach service description with edits as presented.
- 3. Motion to accept the Substance Abuse Outpatient Care and Substance Abuse Services (Residential) service description with edits as presented.
- 4. Motion to approve the Oral Health Care Standards with the edits as presented.
- 5. Motion to approve the 2025 Provider Capacity Survey as presented.

Other

- 6. Motion to table officer elections until April 2025.
- 7. Motion to change the name of the Partnership's website, www.AIDSNET.org, to a name not containing the terms AIDS or HIV.

The following meeting dates were announced:

- Friday, April 4, 2025, 12:00 p.m.-12:30 p.m.
 Report for Action! February Partnership Meeting Briefing
 Microsoft Teams, ID: 238 353 321 012; Passcode: pW9t2mR7
- Monday, April 7, 2025, 10 a.m.-12:00 p.m.
 Partnership Meeting
 Miami-Dade County Main Library, 101 West Flagler St., Auditorium, Miami, FL 33130
- Monday, May 12, 2025, 10 a.m.-12:00 p.m.
 Partnership Meeting
 Miami-Dade County Main Library, 101 West Flagler St., Auditorium, Miami, FL 33130









We value your time!

And your time at meetings should be productive and valuable to YOU! If there are no action items on the agenda, the meeting will be cancelled.



Not enough members RSVP'd.

When members don't RSVP, we cannot ensure a quorum of members will be present. Without a quorum of members, meetings must be cancelled.



Not enough members came to the meeting.

We all count on your regular meeting attendance to conduct the necessary business of the Partnership. Please respect the time of your fellow members - if you RSVP, please show up!



Mother Nature

If there is a significant weather event, we follow the County's guidance on facilities closure and event cancellation. Often this does not allow time to reschedule your meeting.



Meeting Space Availability

Most meetings are held at the MDC Main Library. Sometimes there is a meeting space conflict with another group, and we do not have time to reschedule.

If your meeting is scheduled, we have work to do and we need your input and expertise to make the best decisions to help more than 9,000 people living with HIV.

We look forward to seeing you at your next meeting!



1,612,233.25

3.982.329.78

Printed On:

3/25/2025

RYAN WHITE PART A GRANT AWARD (Grant #: BURW3201)

EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE YR34 FORMULA AND SUPPLEMENTAL FUNDING

Per Resolution #s: R-1162-21, R-246-20, R-247-20 & R-817-19

Project #: BURW3403 AWARD AMOUNTS **ACTIVITIES** Grant Award Amount Formula 16,389,150.00 **FORMULA** Grant Award Amount FY22 Formula 2,353.00 PY_FORMULA Grant Award Amount Supplemental 6,799,165.00 SUPPLEMENTAL FY 2024 Award Grant Award Amount FY22 Supplemental 1,620,086.00 PY_SUPPLEMENTAL \$24,810,754 Carryover Award of FY'23 Formula Funds 795,210.00 CARRYOVER otal Award

18,582,437.00

21,729,679,00

25.605.964.00

This report includes YTD paid reimbursements for FY 2024 Part A service months up to February 2025, as of 3/25/2025. This report reflects reimbursement requests that were due by 3/20/2025, and have been paid thus far. Pending Part A reimbursement requests that have been received and are in the review process currently total \$1,668,197.02. The Recipient is still in the grant closeout process. Final expenditures for FY 2024 Part A will be provided after the grant closeout process is complete.

CONTRACT ALLOCATIONS/ FORMULA, SUPPLEMENTAL & CARRYOVER

DIRECT SERVICES:

5	Core Medical Services	Allocations	Carryover (C/O) Allocations
			Allocations
8	AIDS Pharmaceutical Assistance	7,679.00	
6	Health Insurance Services	328,454.00	
1	Medical Case Management	6,063,727.00	
3	Mental Health Therapy/Counseling	69,501.00	
4	Oral Health Care	4,082,857.00	
2	Outpatient/Ambulatory Health Svcs	8,020,778.00	
9	Substance Abuse - Outpatient	9,441.00	

	-		
			Carryover
	Support Services	Allocations	Allocations
12	Emergency Financial Assistance	0.00	
5	Food Bank	972,532.00	795,210.00
13	Medical Transportation	253,654.00	
15	Other Professional Services	40,274.00	
14	Outreach Services	149,032.00	
7	Substance Abuse - Residential	1,731,750.00	
	_		
	SUPPORT Services Totals: _	3,147,242.00	795,210.00

CORE Services Totals:

FY 2024 Award (not including C/O)

Unobligated Funds (Carry Over)

DIRECT SERVICES TOTAL:	\$	22,524,889.00
Total Core Allocation	18.582.437.00	
Target at least 80% core service allocation	17.383.743.20	
Current Difference (Short) / Over	\$ 1,198,693.80	
Recipient Admin. (GC, GTL, BSR Staff)	\$ 2,477,019.00	
Quality Management	\$ 604,056.00	3,081,075.00
(+) Unobligated Funds / (-) Over Obligated:		
Unobligated Funds (Formula & Supp)	\$ _	

Core medical % against Total Direct Ser	vice Allocation (Not including C/O):	
Cannot be under 75%	85.52%	Within Limit

	Quality Management % of Total Award (N	lot including C/O):	
	Cannot be over 5%	2.43%	Within Limit
-			

OMB-GC Administrative % of Total Award (Cann	ot include C/O):	
Cannot be over 10%	9.98%	Within Limit

CURRENT CONTRACT EXPENDITURES

15 807 553 60

DIRECT SERVICES:

			Carryover (C/O)
Account	Core Medical Services	Expenditures	Expenditures
5606970000	AIDS Pharmaceutical Assistance	1,490.50	
5606920000	Health Insurance Services	240,904.99	
5606870000	Medical Case Management	5,483,331.35	
5606860000	Mental Health Therapy/Counseling	48,847.50	
5606900000	Oral Health Care	3,626,889.00	
5606610000	Outpatient/Ambulatory Health Svcs	6,404,770.26	
5606910000	Substance Abuse - Outpatient	1,320.00	

CORE Services Totals:

		COIL DEIVICES TOTALS.	10,007,000.00	
-				Carryover
	Account	Support Services	Expenditures	Expenditures
-	5606940000	Emergency Financial Assistance	0.00	
1,767,742	5606980000	Food Bank	817,023.25	795,210.00
	5606460000	Medical Transportation	193,641.05	
	5606890000	Other Professional Services	33,606.00	
	5606950000	Outreach Services	103,480.68	
	5606930000	Substance Abuse - Residential	1,549,000.00	

Outreach Services	103,480.68	
Substance Abuse - Residential	1.549.000.00	
	,,	
SUPPORT Services Totals:	2,696,750.98	795,210.00
FY 2024 Award (not including C/O)	18,504,304.58	

TOTAL EXPENDITURES DIRECT SVCS & %:	\$ 19,299,514.58	85.68%

 Formula Expenditure %
 91.00%

 5606710000
 Recipient Administration
 1,774,119.64

5606880000 **Quality Management 550,000.00** 2,324,119.64

Grant Unexpended Balance FY 2023 Award Carryover 3,982,329.78

Total Grant Expenditures & %	\$	21,623,634.22	84.45%	
			\sim	=
Core medical % against Total Direct Service Expenditures (Not including C/O):	6	, , , , , , , , , , , , , , , , , , , 		I)
Cannot be under 75%	(85.43%	Within Limit	l く
)
Quality Management % of Total Award (Not including C/O):				ハ
Cannot be over 5%		2,22%	Within Limit	1)
				' イ
OMB-GC Administrative % of Total Award (Cannot include C/O):				ıλ
Cannot be over 10%	7	7.15%	Within Limit	17
				' ا

RYAN WHITE PART A GRANT AWARD (Grant#: BURW3201)

EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE YR34 MINORITY AIDS INITIATIVE (MAI) FUNDING

Per Resolution #s: R-1162-21, R-246-20, R-247-20 & R-817-19

PROJECT #: BURW3403 AWARD AMOUNTS **ACTIVITIES**

This report includes YTD paid reimbursements for FY 2024 MAI service months up to February 2025, as of 3/25/2025. This report reflects reimbursement requests that were due by 3/20/2025, and have been paid thus far. Pending MAI reimbursement requests that have been received and are in the review process currently total \$162,887.30. The Recipient is still in the grant closeout process. Final expenditures for FY 2024 MAI will be provided after the grant closeout process is complete.

	Grant Award Amount MAI		2,600,572.00	MAI		
\rightarrow	Carryover Award of FY'23 MAI Funds		1,474,770.00	MAI_CARRYOVER		
\rightarrow	Total Award	\$	4,075,342.00			
Order	CONTRAC	CT ALLOCAT	IONS			
Priority	DIRECT SERVICES:			Carryover (C/O)	_	
4	Core Medical Services		Allocations	Allocations		Ac
	AIDS Pharmaceutical Assistance					5606
	Health Insurance Services					5606
1	Medical Case Management		350,102.00	661,318.00	1,011,420.00	5606
3	Mental Health Therapy/Counseling		18,960.00			5606

			ourry over (or o)
4	Core Medical Services	Allocations	Allocations
	AIDS Pharmaceutical Assistance		
	Health Insurance Services		
1	Medical Case Management	350,102.00	661,318.00
3	Mental Health Therapy/Counseling	18,960.00	
	Oral Health Care		
2	Outpatient/Ambulatory Health Svcs	1,024,748.00	712,385.00
6	Substance Abuse - Outpatient	8,058.00	
	CORE Services Totals:	1,401,868.00	1,373,703.00
			Carryover
	Support Services	Allocations	Allocations

5	Emergency Financial Assistance	0.00	
	Food Bank		
13	Medical Transportation	7,628.00	8,300.00
	Other Professional Services		
7	Outreach Services	39,816.00	
	Substance Abuse - Residential		
	SUPPORT Services Totals:	47,444.00	8,300.00
	FY 2024 Award (not inlouding C/O)	1,449,312.00	
	FY 2024 Carryover Award		1,382,003.00

DIRECT SERVICES TOTAL:

Total Core Allocation Target at least 80% core service allocation Current Difference (Short) / Over	\$	1,401,868.00 1,166,089.60 235,778.40		
Recipient Admin. (OMB-GC)	\$	260,057.00		
Quality Management	\$	100,000.00	360,057.00 \$	3,191,372.00
(+) Unobligated Funds / (-) Over Obligated: Unobligated Funds (MAI) Unobligated Funds (Carry Over)	\$ \$	791,203.00 92,767.00	883,970.00	4,075,342.00

a	92,767.00	883,970.00
ervice Allocation (Not inc	cluding C/O):
96.73	3%	Within Limit
I (Not be also the or O/O)		
(Not including C/O):		
3.85	%	Within Limit
vard (Cannot include C/O):	
10.00	0%	Within Limit
	96.7: d (Not including C/O): 3.85 ward (Cannot include C/O	ervice Allocation (Not including C/O 96.73%

		DIRECT SERVICES.			
					Carryover (C/O)
	Account	Core Medical Services	Expenditures		Expenditures
	5606970000	AIDS Pharmaceutical Assistance			
	5606920000	Health Insurance Services			
	5606870000	Medical Case Management	;	347,707.30	409,495.85
	5606860000	Mental Health Therapy/Counseling		1,982.50	
	5606900000	Oral Health Care			
	5606610000	Outpatient/Ambulatory Health Svcs	;	363,727.84	442,112.88
	5606910000	Substance Abuse - Outpatient		0.00	
		CORE Services Totals:		713,417.64	851,608.73
			_		Carryover
	Account	Support Services	Expenditures		Expenditures
5	606940000	Emergency Financial Assistance		0.00	
;	5606980000	Food Bank			
Ę	606460000	Medical Transportation		6,881.69	4,755.21
Ę	606890000	Other Professional Services			
5	606950000	Outreach Services		23,226.00	
	5606930000	Substance Abuse - Residential			
		OUDDODT Overdess Testeles		00 407 00	4.755.04
		SUPPORT Services Totals:		30 107 69	4 755 21

DIRECT SERVICES:

FY 2024 Award (not inlcuding C/O)

Grant Unexpended Balance

Total Grant Expenditures & % (Including C/O):

5606710000 Recipient Administration 5606880000 Quality Management

1,737,133.00

15,928.00

2,831,315.00

CURRENT CONTRACT EXPENDITURES

TOTAL EXPENDITURES DIRECT SVCS & %:	\$ 1,599,889.27	56.51%

82,425.03

91,666.63

FY 2024 Award

1.682.955.01

174,091.66

2,306,116.28

43.53%

1,773,980.93

	$\overline{}$	$\overline{\gamma}$	
Core medical % against Total Direct Service Expenditures (Not including C/O): Cannot be under 75%	7	95.34%	Within Limit
	\succ		
Quality Management % of Total Award (Not including C/O): Cannot be over 5%	>	3.52%	Within Limit
OMB-GC Administrative % of Total Award (Cannot include C/O): Cannot be over 10%		3.17%	Within Limit
	(Printed On:	3/25/2025

Carryover

623,161.27





Scan for documents

Community Coalition Roundtable

Monday, March 31, 2025

4:00 PM – 6:00 PM (Dinner served at 3:30 PM)

Care Resource Community Health Center 3510 Biscayne Boulevard, 1st Floor Community Room, Miami, FL 33137

AGENDA

I. Call to Order Lamar McMullen II. All Introductions III. Recognition of Meeting Host Lamar McMullen IV. Housekeeping Lamar McMullen V. Floor Open to the Public Lamar McMullen Review/Approve Agenda A11 VII. Review/Approve Minutes of February 24, 2025 All VIII. Reports All Membership Partnership Ryan White Program Expenditures IX. Standing Business Staff/All Officer Training Brief 2025 Officer Elections Getting to Know Ryan White Services: Substance Abuse and Mental Health Services Recruitment Luigi Ferrer □ Phone Bank - Feedback from March and Scheduling for April □ Recruitment Event Planning All Tabling at Speed Networking Event - Wednesday, April 30, 2025 Budget Request for a Special Recruitment Event or Recruitment Materials X. **New Business** Application Updates Staff A11 Announcements and Open Discussion XII. Next Roundtable: April 28, 2025, at 5:00 PM Lamar McMullen Empower U CHC, 7900 NW 27th Avenue, Suite C3A, Miami FL 33147 XIII. Adjournment Lamar McMullen

Special thanks to our meeting host, Care Resource!

Miami-Dade HIV/AIDS Partnership Officer Training Brief

Presented to the Community Coalition Roundtable March 31, 2025

Presentation created by Behavioral Science Research Corp.





Officers of the Partnership

Miami Dade HIV/AIDS Partnership

Chair: Alecia Tramel-McIntyre Vice-Chair: Harold McIntyre

Executive Committee

Alecia Tramel-McIntyre
Harold McIntyre

Care and Treatment Committee

Dr. Steven SantiagoDr. Diego Shmuels

Community Coalition Committee

Lamar McMullen Vacant Housing Committee

Lileaus Hill Vacant Prevention Committee

Virginia Muñoz Tajma Darlington Strategic Planning Committee

Stephanie Stonestreet Angela Machado

Reports To

Medical Care
Subcommittee

James Dougherty Christian Ysea Joint Integrated Plan Review Team (JIPRT)

Co-Chairs: Stephanie Stonestreet & Virginia Muñoz Co-Vice Chairs: Angela Machado & Tajma Darlington

Characteristics of an Effective Officer



Demonstrates Leadership and Teamwork



Prepares in Advance



Communicates Clearly



Maintains Order and Keeps Everyone on Track



Encourages Participation



Is Respectful of Everyone's Contributions

Your Role as Committee Chair

Before the Meeting

- Reply to meeting notices.
- Review the Agenda and reply to staff with corrections as needed.
- Review the Minutes and offer corrections as needed.
- Review meeting materials and offer corrections or request clarification as needed.

During the Meeting

- Arrive on time and stay throughout the entire meeting.
- > Guide the meeting agenda while encouraging participation.
- Use the basic structure of Robert's Rules of Order:
 - > Ensure that discussion follows the agenda.
 - Remind members and guests to address the Chair and speak only after being acknowledged by the Chair.
 - Announce the queue ("Q" or line) of speakers.
 - > Invite members and guests to speak in the order of the queue.
 - > Ensure motions are moved, seconded, discussed, and voted.

After the Meeting

- > Follow up with Staff on future action items.
- Sign correspondence as needed.

Your Role as Committee Vice Chair

Before the Meeting

- > Reply to meeting notices.
- Review the Agenda and reply to staff with corrections as needed.
- > Review the Minutes and offer corrections as needed.
- Review meeting materials and offer corrections or request clarification as needed.

During the Meeting

- Arrive on time and stay throughout the entire meeting.
- Lead the "Floor Open to the Public" agenda item.
- Assist the Chair with maintaining an orderly queue.
- Lead the "Next Meeting" agenda item.
- Lead the meeting in the absence of the Chair.

Your Role as Partnership Chair

Before, During and After the Meeting

Follow the guidelines of Committee Chairs.

Additional Responsibilities

- Lead the Executive Committee Meetings.
- Attend meetings and conferences as a representative of the Partnership as approved by the Partnership.
- Report monthly Partnership activities to the Health Resources and Services Administration Project Officer (HRSA PO) via Microsoft Teams.

Special Designation

The Partnership Chair is a de-facto member of all committees and serves as a voting member at all committee meetings.

Your Role as Partnership Vice Chair

Before, During and After the Meeting

> Follow the guidelines of Committee Vice Chairs.

Additional Responsibilities

- Serve as Vice Chair at Executive Committee Meetings.
- ➤ Lead Partnership or Executive Committee meetings in the absence of the Chair.



Terms of Service



- Serve up to two one-year terms as a Chair or Vice Chair*
- Serve as a voting member of the Executive Committee for the life of your term.
- Elections are held annually in:
 - January for committees/subcommittee
 - March for the Partnership

^{*} Under some circumstances, terms may end earlier than two terms or may be extended beyond two terms.

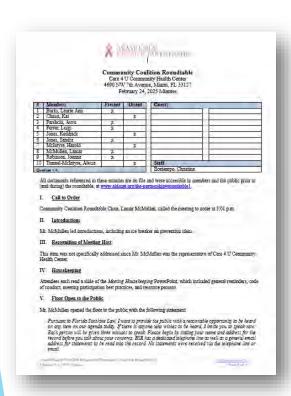
Essential Meeting Documents

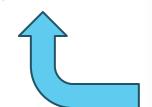
The Agenda – Your Roadmap for the Meeting

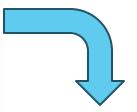
Structure is based on Robert's Rules of Order.

Staff will provide an Agenda Guide to Officers.

Approval of this document requires a **Motion**.









The Minutes – The Official Record of Activities

Who was present and what did we do at the last meeting.

Approval of this document requires a Motion.

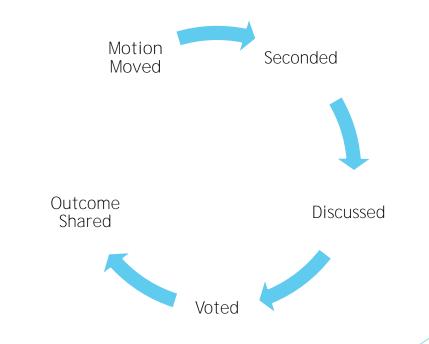
Action!



- Motions are the foundation of group decision-making.
- > Chairs lead members through motions.
- Chairs cannot make motions; Vice Chairs can make motions.
- All members, including Officers, must vote on every motion. No abstentions!
- > The **Agenda** and **Minutes** are always approved by a **motion**.
- Sometimes discussion leads to a motion you should still include the "Call for Discussion".
- > To be sure everyone understands the motion, repeat the motion or ask staff to repeat the motion.

Motions!

- As a Chair, you will:
 - 1. Call for a Motion
 - 2. Announce who made the motion.
 - 3. Call for a **Second**.
 - 4. Announce who seconded the motion.
 - 5. Call for Discussion
 - 6. Call for a Vote.
 - 7. Announce the outcome of the vote.



Ready for the Next Step?

- Members are encouraged to place your name on the ballot!
- (Coming up next on the Agenda)



Want to know more?

- A more in-depth training will be held via Teams on April 30, 2025!
- Details coming soon!

Thank You!

Thank you for all you do!

You are all leaders!

Support Staff are here to help when you're ready to take on the role of an Officer!

Marlen Meizoso (Habla Español) Project Manager/Research Associate

Christina Bontempo Project Manager/Community Liaison



305-445-1076

mdcpartnership@behavioralscience.com





Community Coalition Roundtable

Monday, March 31, 2025

4:00 PM – 6:00 PM (Dinner served at 3:30 PM)

Care Resource Community Health Center 3510 Biscayne Boulevard, 1st Floor Community Room, Miami, FL 33137

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Community Coalition Roundtable Officers Ballot

March 31, 2025

Print Your Name: Please select ONE candidate for Community Coalition Roundtable CHAIR:		
Nominee:	_ 🗆	
Nominee:		
Nominee:	_ 🗆	
Please select <u>ONE</u> candidate for C Roundtable VICE CHAIR:	ommunity Coalition	
Nominee:	_ 🗆	
Nominee:	_ 🗆	
Nominee:		
Nominee:	_ 🗆	





Community Coalition Roundtable

Monday, March 31, 2025

4:00 PM – 6:00 PM (Dinner served at 3:30 PM)

Care Resource Community Health Center 3510 Biscayne Boulevard, 1st Floor Community Room, Miami, FL 33137

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MENTAL HEALTH SERVICES

(Year 35 Service Priorities: #7 for Part A and #6 for MAI)

Excerpt from the Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 2025 (Year 35) Service Delivery Manual for the Miami-Dade HIV/AIDS Partnership's Community Coalition Roundtable; March 31, 2025

Mental Health Services are a set of core medical services that consist of counseling and treatment for diagnosed behavioral health disorders. These services are designed to reduce harmful behaviors and episodes of instability and improve mental status and client health outcomes. These Mental Health Services include the provision of outpatient psychological and psychiatric screening, assessment, diagnosis, treatment, and counseling services offered to people with HIV. Services are based on an individualized treatment plan and are conducted in group and individual sessions. All services are provided by mental health professionals licensed or otherwise authorized within the State of Florida to render such services. All clients receiving this service must have at least one mental or behavioral health diagnosis specified in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR) or International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM; Codes F01-F99, excluding "Mental and behavioral disorders due to psychoactive substance use" – codes F10-F19).

Mental Health Services require an individualized treatment plan, as noted above. Treatment plans incorporate the findings of assessment and diagnostic tools and specify the goals and objectives to be achieved during the treatment episode. The treatment plan also specifies the recommended clinical interventions and frequency with which these interventions shall be delivered. Mental health providers may use this service category to conduct the assessment and diagnostic steps for the development of a treatment plan. If ongoing mental health services are being provided to a client, it is expected that the client receives a mental health treatment plan at least every six months.

SUBSTANCE ABUSE OUTPATIENT CARE AND SUBSTANCE ABUSE SERVICES (RESIDENTIAL)

(Year 35 Service Priorities: #8 for outpatient Part A and #5 for MAI; and #11 for Part A residential only)

Excerpts from the Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 2025 (Year 35) Service Delivery Manual for the Miami-Dade HIV/AIDS Partnership's Community Coalition Roundtable; March 31, 2025

<u>Two</u> types of substance abuse counseling and treatment services are included in this section: Outpatient and Residential. **Substance Abuse Outpatient Care** is a core medical service. **Substance Abuse Services (Residential)** is a support service. Both of these substance abuse service components shall comply with the following requirements:

A. Program Operation Requirements: Providers are encouraged to provide services that are highly accessible to target populations.

Providers are also encouraged to demonstrate linkages with other service providers relevant to the needs of people with HIV in substance abuse treatment programs. Providers should especially demonstrate linkages with other services relevant to the needs of people in substance abuse treatment programs including housing and shelter programs.

Service must be provided in settings that foster the client's sense of self-determination, dignity, responsibility for own actions, relief of anxiety, and peer support.

Providers are encouraged to offer program services to families to support the family unit. However, substance abuse services may be provided to members of a client's family in an outpatient setting only (i.e., non-HIV family members may not stay in the residential facility), and only if the program-eligible individual served (client) is also being served. A family member's participation in the substance abuse counseling sessions is included in the per day cost charged to the Ryan White Program (See Section II.A. of this service definition on the following page for details). *IMPORTANT NOTE:* For the purpose of this service, family members are defined as those individuals living in the same household as the client.

Individual treatment plans must be documented in the client's chart and linked to the provision of primary medical care.

Providers must ensure that clients adhere to their treatment plan, including prescription drug regimens.

Providers of substance abuse services must offer flexible schedules that

accommodate the client's nutritional needs in order to facilitate client compliance with medication regimens.

Providers are encouraged to practice and incorporate motivational interviewing and harm reduction strategies to their clients, if deemed clinically appropriate.

A residential substance abuse episode is not a pre-requisite to access Substance Abuse Outpatient Care. However, clients stepping down from or completing Substance Abuse Services (Residential) are encouraged to transition to Substance Abuse Outpatient Care. Furthermore, providers shall attempt a warm hand off to Substance Abuse Outpatient Care, where appropriate.

I. Substance Abuse Outpatient Care

Substance Abuse Outpatient Care is the provision of outpatient services for the treatment of drug or alcohol use disorders. This service includes medical or other treatment and/or counseling to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in an outpatient setting by a Licensed Medical Provider or under the supervision of a Physician, or by other qualified personnel as indicated below. This program provides regular, ongoing substance abuse monitoring and counseling on an individual and/or group basis in a state-licensed outpatient setting.

Services include screening, assessment, diagnosis and/or treatment of substance use disorder. Allowable substance use disorder treatments include: pre-treatment/ recovery readiness programs; harm reduction; behavioral health counseling associated with substance use disorders; outpatient drug-free treatment and counseling; medication assisted therapy; psychopharmaceutical interventions; substance abuse education; and relapse prevention. Services may also include mental health counseling to reduce depression, anxiety and other disorders associated with substance abuse; conflict resolution; anger management; and relapse prevention. All clients receiving this service must have a Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR) or International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) diagnosis of substance use disorder.

Acupuncture therapy may be allowable under this service category only when, as part of a substance use disorder treatment program funded under the Ryan White HIV/AIDS Program, it is included in a documented plan. Acupuncture therapy must be provided by an acupuncturist who is licensed in the State of Florida to provide such service.

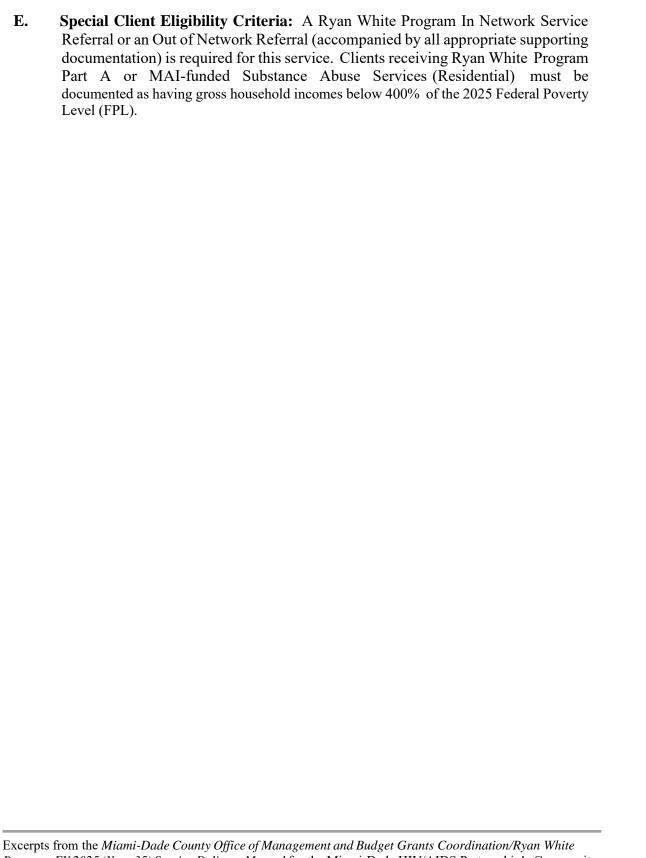
Providers of this service must specify the maximum number of clients expected to be enrolled in a group counseling session. The minimum amount of group participants is three (3) Ryan White Program clients per group and should be no higher than fifteen (15) total persons per group. The ratio of group counseling participants to Counselors should be no lower than 3:1 and no higher than 15:1. One unit is equal to one half-hour counseling session.

II. Substance Abuse Services (Residential)

This program offers substance abuse, including alcohol addiction and/or addiction to legal and illegal drugs, treatment and counseling, including HIV specific counseling, to program-eligible people with HIV (clients) on a short-term basis. Medication-Assisted Treatment (MAT) is also covered as part of the residential treatment services. **Substance Abuse Services (Residential)** provides room and board, in a secure, drug-free, state-licensed residential (non-hospital) substance abuse treatment facility, and, when necessary, detoxification. Detoxification services are allowable, if offered in a separate licensed residential setting (including a separately-licensed detoxification facility within the walls of an inpatient medical or psychiatric hospital). HRSA RWHAP funds may <u>not</u> be used for inpatient detoxification in a hospital setting unless the detoxification facility has a separate license. Proof of the separate license is required for detoxification services.

In accordance with HRSA Policy Clarification Notice #16-02, Substance Abuse Services (Residential), as part of a substance use disorder treatment program funded under the Ryan White HIV/AIDS Program, are permitted only when the client has received a written referral from a clinical provider. In Miami-Dade County's Ryan White Part A/MAI Program, this requirement shall be met if the client is accessing the service based on a Ryan White Program In Network Service Referral or Out of Network Referral as a result of a comprehensive health assessment conducted by a Medical Case Manager or other case manager or in response to a court-ordered directive to a residential treatment program. Upon arrival at the residential treatment center and PRIOR TO final enrollment in the treatment program, an assessment MUST be conducted by the residential clinical staff (e.g., Medical Director, Psychologist, Licensed Therapist, etc.) as appropriate using the Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR) assessment tool (e.g., ASAM Criteria®, a Level of Care determination tool) for diagnosis of a substance use disorder or International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) tools. Services will then be provided by or under the supervision of a Licensed Medical Provider or by other qualified personnel with appropriate and valid licensure and certification as required by the State of Florida.

If the client is participating in a residential treatment program, the client's family member may visit the facility and participate in the counseling sessions, but the family member may not physically live in the residential facility with the client during the treatment process. As a reminder, a family member's participation in the substance abuse counseling sessions is included in the per day cost charged to the Ryan White Program (See Section II.B. of this service definition on the following page for details).



Excerpts from the Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 2025 (Year 35) Service Delivery Manual for the Miami-Dade HIV/AIDS Partnership's Community Coalition Roundtable; March 31, 2025





Community Coalition Roundtable

Monday, March 31, 2025

4:00 PM – 6:00 PM (Dinner served at 3:30 PM)

Care Resource Community Health Center 3510 Biscayne Boulevard, 1st Floor Community Room, Miami, FL 33137

AGENDA

I. Call to Order Lamar McMullen II. All Introductions III. Recognition of Meeting Host Lamar McMullen IV. Housekeeping Lamar McMullen V. Floor Open to the Public Lamar McMullen Review/Approve Agenda A11 VII. Review/Approve Minutes of February 24, 2025 All VIII. Reports All Membership Partnership Ryan White Program Expenditures IX. **Standing Business** Staff/All Officer Training Brief 2025 Officer Elections Getting to Know Ryan White Services: Substance Abuse and Mental Health Services Recruitment Luigi Ferrer Phone Bank - Feedback from March and Scheduling for April □ Recruitment Event Planning All Tabling at Speed Networking Event - Wednesday, April 30, 2025 Budget Request for a Special Recruitment Event or Recruitment Materials X. **New Business** Application Updates Staff A11 Announcements and Open Discussion XII. Next Roundtable: April 28, 2025, at 5:00 PM Lamar McMullen Empower U CHC, 7900 NW 27th Avenue, Suite C3A, Miami FL 33147 XIII. Adjournment Lamar McMullen



Community Coalition Roundtable New Member Recruitment Script

	Date:
>	If you reach an answering machine. Do not leave a message. Call ends. Make a note on the call sheet.
Hi	, is this(client name)?
1.	If NO Thank you. I will try to reach _(client name)_ at a later time. Goodbye. Do not leave a message. Call ends. Make a note on the call sheet.
2.	If YES
	Good morning (afternoon). My name is and I'm a member of the Miami-Dade HIV/AIDS Partnership Planning Council.
	You took the Ryan White Program client satisfaction survey last fall and said you were interested in information about the planning council.
	The best way to learn more is to come to a Community Coalition Roundtable meeting.
	It's free and includes a light dinner and information about Ryan White Program services.
	Our next Roundtable is Monday, April 28 at 3:30 PM at Empower U at 7900 NW 27th Avenue. (Full address: Empower U Community Health Center, 7900 NW 27th Avenue, Suite C3A, Miami FL 33147)
	I'll be attending the Roundtable. Can I count on you to attend?
	Great. Let me get your email address for a meeting reminder and calendar invite.
	Nice to meet you, (client name), I'll see you next Monday at Care Resource. Call ends. Make a note on the call sheet.

Possible Pushback	Response
I don't want to attend.	I understand. How about I call you back for our next Roundtable in April?
I don't want to give my email address (or I don't have email).	I understand. How about if we give you a call back at this number?
Can I call you back?	Sure, you can call the Partnership Planning Council office at 305-445-1076 and ask for Christina.
I have a problem with	I understand. Those are the kinds of things we need to know more about to make improvements. Partnership committee meetings are where we work on solutions. Can I count on you to attend the meeting on April 28?

April 30: FDOH Speed Networking

Message from FDOH to FDOH-funded HIV Testing & Prevention Partners,



To continue improve our referral networks and facilitate the implementation of a Status Neutral Approach which addresses our clients' needs for holistic services and support their engagement in HIV prevention and care, the Florida Department of Health in Miami-Dade and the Miami-Dade Ryan White Program are hosting another Speed Networking event for Medical Case Managers, Social Service Providers, HIV Test Counselor and Outreach Workers.

Our next event will take place on Wednesday, April 30¹¹, 1:00-3:00pm at the Health District Center, 1350 NW 14th St, Conference Room 401B, Miami FL 33125. Parking garage entrance is off NW 13th Ct. Coffee and afternoon snacks will be provided. Please note that in 2025 we will only be hosting two Referral Improvement Speed Networking events, this one and a second one in Q3.

For these networking events to be successful we must have the right complement of Medical Case Managers/Social Service Providers and HIV Test Counselors/Outreach Workers, Please identify the appropriate staff members to participate in this event and have each of them fill out our questionnaire. Once all applications are reviewed, we will let them know who has been selected to attend – follow this link: https://www.surveymonkey.com/r/JGKZBRK

Space for this event is limited to 30 participants. We will prepare a personalized packet for each participant based on their responses. Please do not show up if you were not selected to attend. And know that if you are selected to attend, we are counting on your presence, please be on time.

Please reply through the link or QR code above **no later than Tuesday, April 15** .





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This is the application for membership on the committees and subcommittees of the Miami-Dade HIV/AIDS Partnership. The Partnership is the official Ryan White Program planning council and the Miami-Dade County advisory board for HIV prevention, care, and treatment. This application consists of seven (7) pages and must be completed in full.

All members of County boards shall be permanent residents and electors of Miami-Dade County. All members should have a reputation for integrity and community service; a demonstrated an interest in the field of HIV prevention, care, and treatment; and commitment to the board's requirements for membership.

Contact Information			
First Name: Middle Init	ial:	Last Name	::
Home Address:			
City: State: FL	(Florida re	esidency requ	ired) Zip Code:
Home Phone: Ce	ell Phone:		May we text your cell phone? ☐ Yes ☐ No
Home Email:			Is this your preferred email? ☐ Yes ☐ No, please use Business Email
Employer (if applicable):			
Business Address:			
City: State: Zip Code:	В	usiness Phon	ne Number:
Business Email:			Is this your preferred email? ☐ Yes ☐ No, please use Home Email
Demog	raphic Ir	nformatio	
Sex: Language(s) I speak: □ Male □ Female □ English □ Spanish	☐ Haiti	ian Creole	☐ Other (please specify)
Race/Ethnicity: ☐ White/Non-Hispanic ☐ Black/Non-Hispanic ☐ Hispanic ☐ Asian/Pacific Islander			
☐ American Indian/Alaska Native ☐ Other (please specify)			
Are you a registered voter in Miami-Dade County? (Voter registration required) Yes No I'm not sure Are you an officer, employee, representative, or co	(N	ate of Birth: MM/DD/YYYY	
subrecipient/service provider? See Page 3 for a lis ☐ Yes ☐ No ☐ I'm not sure			_



Statements of Commitment

Please read and initial each Statement of Commitment.

General Requirements			
As a Miami-Dade I	As a Miami-Dade HIV/AIDS Partnership Committee or Subcommittee Member, I agree to:		
	Devote a minimum of two (2) hours per month to committee activities, including:		
	Replying to committee meeting notices;		
	2) Preparing for meetings by reviewing agendas, minutes, and other materials posted		
	on the Partnership's website;		
	3) Attending meetings; and		
Your initials here	4) As appropriate, submitting reports and/or feedback.		
	Allow Partnership Staff to access my voter registration information from the Florida		
Your initials here	Department of State Voter Information Lookup website.		
Your initials here	Contribute professional and personal expertise to further the work of the committee.		
Your initials here	Uphold the goals, objectives, policies, and procedures of the committee.		
	Submit an annual Financial Disclosure Statement, required by 2-11.1(i) of the Code of		
Your initials here	Miami-Dade County.		
Your initials here	Adhere to all other federal, state, and local civil rights laws and regulations.		

	Attendance Requirements		
As a Miami-D	ade HIV/AIDS Partnership Committee or Subcommittee Member, I agree to:		
	Comply with attendance requirements in accordance with Sections 2-11.39 and 2-1102 (G) of		
	the Code of Miami-Dade County, as follows:		
	1) Five (5) absences from scheduled committee meetings in any County fiscal year (October		
	through September) shall constitute grounds for removal;		
	2) A member who attends a meeting for less than 75% of the scheduled or actual duration		
	of the meeting - whichever is less - is counted as absent from that meeting;		
Your	3) Absences which are due to Partnership business-related travel are not counted against		
initials here			

	Training Requirements		
As a Miami-I	As a Miami-Dade HIV/AIDS Partnership Committee or Subcommittee Member, I agree to:		
Your	Attend Partnership New Member Orientation and Training within the first three (3) months		
initials here	of joining.		
Your	Attend Miami-Dade County Advisory Board Member Ethics Training within the first three (3)		
initials here	months of joining.		
Your	Comply with all other Partnership and/or Miami-Dade County Government training		
initials here	requirements.		



Committees and Subcommittees of Interest

- 1. Check ☐ Yes or ☐ No for each committee or subcommittee of interest.
- 2. Read and initial each Statement of Commitment for the committee or subcommittee of interest.

Community Coalition Roundtable			
I am applying	I am applying for membership on the Community Coalition Roundtable: Yes No		
As a Commu	nity Coalition Roundtable Member, I agree to:		
Your	Attend the monthly Community Coalition Roundtable.		
initials here			
Your	Assist with recruiting potential Miami-Dade HIV/AIDS Partnership and Partnership Committee		
initials here	members from the community.		
Your	Encourage others from the affected HIV/AIDS communities to become more involved in		
initials here	Partnership and Committee activities.		
Your	Participate in the nominations process, including reviewing applications and nominating		
initials here	candidates for Partnership membership.		
Your	Assist with developing and implementing training and recruitment programs for the		
initials here	community to learn more about the Partnership and its activities.		
Your	Complete community outreach initiatives and report input and action items to the		
initials here	Partnership from community- based organizations and other groups.		

Housing Committee		
I am applying	I am applying for membership on the Housing Committee: Yes No	
As a Housing	As a Housing Committee Member, I agree to:	
Your	Attend the monthly Housing Committee meeting.	
initials here		
Your	Determine priorities and make funding and policy recommendations to the Housing	
initials here	Opportunities for Persons With AIDS (HOPWA) grantee for the use of HOPWA funds.	
Your	Bring knowledge and expertise on financing, developing, and managing special needs and	
initials here	affordable housing.	
Your	Coordinate planning efforts to address housing and housing-related services and identify	
initials here	opportunities to expand available housing for people with HIV in Miami-Dade County.	
Your	Engage key policymakers and stakeholders from both the public and private sectors in	
initials here	identifying additional resources and solutions to housing and housing-related service needs	
	of people with HIV.	



Committees and Subcommittees of Interest

- 1. Check ☐ Yes or ☐ No for each committee or subcommittee of interest.
- 2. Read and initial each Statement of Commitment for the committee or subcommittee of interest.

Strategic Planning Committee		
I am applying	I am applying for membership on the Strategic Planning Committee: Yes No	
As a Strategi	c Planning Committee Member, I agree to:	
Your	Attend the monthly Strategic Planning Committee meeting or the Joint Integrated Plan	
initials here	Review Team meeting.	
Your	Review and oversee the Care and Treatment activities of the Miami-Dade County Integrated	
initials here	Prevention and Care Plan for HIV/AIDS.	
	Develop an annual report for the community, including the Miami-Dade County Board of	
Your	County Commissioners, describing the Partnership's activities and the state of the epidemic	
initials here	in Miami-Dade County.	
Your	Assess the efficiency of the administrative mechanism for rapidly allocating funds to the	
initials here	areas of greatest need within the County.	
Your	Make recommendations to the Partnership regarding legislative and regulatory funding	
initials here	issues, and policy and rule changes related to HIV/AIDS and the Ryan White Program.	

Prevention Committee		
I am applying for membership on the Prevention Committee: Yes No		
As a Prevent	ion Committee Member, I agree to:	
Your	Attend the monthly Prevention Committee meeting or the Joint Integrated Plan Review Team	
initials here	meeting.	
Your	Review and oversee the Prevention activities of the Miami-Dade County Integrated	
initials here	Prevention and Care Plan for HIV/AIDS.	
	Review all pertinent data required to prioritize HIV prevention needs and collaborate with	
Your	the Florida Department of Health in Miami-Dade County on how to best obtain additional	
initials here	data and information.	
Your	Assess existing community resources to determine the community's capability to respond to	
initials here	the HIV/AIDS epidemic.	
Your	Identify unmet HIV/AIDS prevention needs within defined populations.	
initials here		
Your	Prioritize HIV/AIDS prevention needs by target population and geographic areas, and propose	
initials here	high-priority strategies and interventions.	
Your	Make recommendations to appoint two (2) nominees to the Florida Comprehensive Planning	
initials here	Network's Prevention Planning Group.	



Committees and Subcommittees of Interest

- 1. Check ☐ Yes or ☐ No for each committee or subcommittee of interest.
- 2. Read and initial each Statement of Commitment for the committee or subcommittee of interest.

Care and Treatment Committee		
I am applying for membership on the Care and Treatment Committee: Yes No		
As a Care and	Treatment Committee Member, I agree to:	
Your	Attend the monthly Care and Treatment Committee meeting, including additional dates (as	
initials here	needed) during the Annual Needs Assessment.	
Your	Develop and implement all care and treatment planning.	
initials here		
Your	Conduct an annual comprehensive Needs Assessment.	
initials here		
Your	Establish or revise Ryan White Part A/Minority AIDS Initiative service priorities and complete	
initials here	the Priority Setting and Resource Allocation (PSRA) processes for each fiscal year.	
Your	Make recommendations to the Partnership on service priorities and use of other funds to	
initials here	target the areas of greatest need.	
Your	Make recommendations to appoint two (2) nominees to the Florida Comprehensive Planning	
initials here	Network's (FCPN) Patient Care Planning Group (PCPG).	
L		

Medical Care Subcommittee						
I am applying for membership on the Medical Care Subcommittee: Yes No						
As a Medical Care Subcommittee Member, I agree to:						
Your	Attend the monthly Medical Care Subcommittee meeting.					
initials here						
	Make recommendations to the Care and Treatment Committee regarding medical policies					
	and procedures, quality management and improvement, Ryan White Program treatment					
	guidelines and standards, and outcome measures, performance measures, and standards of					
Your	care related to the delivery of Outpatient Medical Care, Prescription Drugs, and other core					
initials here	medical services.					
	Coordinate with State AIDS Drug Assistance Program (ADAP) and General Revenue to review					
Your	formularies, expenditures, and utilization data patterns to make recommendations regarding					
initials here	the local Ryan White Part A Program Prescription Drug Formulary.					



HIV Disclosure

☐ I prefer not to disclose my HIV status. I understand that I will be considered for membership in other membership

Ryan White Program

Meaningful involvement of people with HIV/AIDS is a cornerstone of Partnership and committee membership. Thank you for your participation.

categories, provided there is an open seat, and I meet the qualifications for that seat. (Skip to page 7)

I am applying for membership as a person with HIV. ☐ Yes ☐ No (Skip to page 7)

of this canceled Authorization.

Signature:

Ryan White Program Part A Service Providers AIDS Healthcare Foundation (AHF) Better Way of Miami Community Health of South FL (CHI) Borinquen Health Care Center Citrus Health Network Community Health of South FL (CHI) Borinquen Health Care Center Miami Beach CHC/St. Luke's Addiction Recovery Center New Hope C.O.R.P.S.							
■ Better Way of Miami ■ Community Health of South FL (CHI) Recovery Center							
 CAN Community Health Care 4 U Community Health Center Care Resource/Food for Life Network Legal Services of Greater Miami New Hope C.O.K.P.S. Public Health Trust/Jackson Health System (all clinics) University of Miami 							
Attestations							
Please read and initial each attestation below							
I understand that this information will become public record and <i>may</i> be discussed in open, public meetings. The Florida Government in the Sunshine Law requires open discussion in a public forum. In addition, I further understand that by signing this release, I waive any exemptions of the information concerning my HIV status pursuant to Chapter 119.07 of the Florida Statutes. My status will be released to anyone who requests a copy of this document.							
Your initials I further understand that I may revoke this authorization to disclose my HIV status, in writing, prior to my application being considered at the next committee or subcommittee meeting. However, I understand that the information may have already been disclosed on the basis of this authorization.							
I authorize the release and exchange of information about my HIV status among and between the Miami-Dade County Office of Management and Budget-Grants Coordination, the Office of the Mayor of Miami-Dade County, the Miami-Dade County Office of the Inspector General, the Miami-Dade HIV/AIDS Partnership, the United States Office of Inspector General, the United States Department of Health and Human Services, and Behavioral Science Research Corporation.							
Disclosure of Personal Health Information Authorization							
THIS AUTHORIZATION SHALL BECOME VALID IMMEDIATELY AND SHALL REMAIN IN EFFECT UNTIL REVOKED. I, (print your full name), understand that if I wish to be considered for membership as a person with HIV it is necessary to identify my HIV status. By signing this authorization, I willingly disclose my HIV status.							
Signature: Date:							
CANCELLATION OF DISCLOSURE AUTHORIZATION							
Lwish to cancel this Disclosure of Personal Health Information Authorization. Lunderstand that Lam entitled to a conv.							

Page 6 of 7 – Please complete every page.

Date:



Areas of Expertise and Signature of Completion

Areas of Expertise and Interest							
Please check ALL populations in which you have personal or professional expertise or interest: ☐ People represented in minority populations ☐ People who are unstably housed or experiencing homelessness ☐ Men Who Have Sex With Men (MSM) ☐ People who are immigrants ☐ People with HIV over age 50 ☐ People between the ages of 13-24 years old ☐ People engaged in commercial sex work ☐ People with substance addiction ☐ Other:	Please check ALL areas of expertise or interest: PrEP and HIV prevention Medical care and treatment Member recruitment Leadership and management Healthcare planning Financial resource allocations and budgeting Social services (i.e., mental health, substance use, etc.) Communications, including web design and social media Quality management and quality improvement Other:						
Sigr	and Date						
I, (print your full name), certify I have thoroughly read this application and will abide by the rules and regulations governing the Miami-Dade HIV/AIDS Partnership. I further certify that all the statements made in this application are true and correct.							
Signature	Date:						
Signature:	Application valid for 6 months from this date.						
Please contact Partnership staff at (305) 445-1076 or mdcpartnership@behavioralscience.com if you need assistance. Submit your completed application either by 1)mail, 2)email, or 3)fax: 1) Behavioral Science Research Corporation (BSR), Attn: Staff Support, 2121 Ponce de Leon Boulevard, Suite 240,Coral Gables, FL 33134 2) mdcpartnership@behavioralscience.com 3) (305) 448-3325 Upon receipt of your application, staff will contact you to review responses and next steps for membership. Following that review, your application will go before the committee or subcommittee to which you have applied. You are required							
to attend the meeting of that committee or subcommittee to introduce yourself and state your interest in serving as a member. Upon recommendation from that committee or subcommittee, your membership will be accepted or denied.							
Date received: Date membership approved/denied:							

Page 7 of 7 – Please complete every page.





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~ APRIL 2025 ~ Miami-Dade HIV/AIDS Partnership Calendar ~

Monday	Tuesday	Wednesday	Thursday	Friday	MIAMI-DADE HIV/AIDS PARTNER SHIP
MEETING LOCATIONS BSR Corp. ~ Behavioral Social 2121 Ponce de Leon Boules Gables, FL 33134 Care Resource Community Miami, 3510 Biscayne Boule Room, Miami, FL 3313	yard, Suite 240, Coral y Health Centers, Midtown	Miami-Dade HIV/AIDS Partnership New Member Orientation 1:00 PM to 4:00 PM via Microsoft Teams	3	4 Report for Action! April Partnership Meeting Briefing **Cancelled – Next briefing is May 2**	The Miami-Dade HIV/AIDS Partnership is the Official Ryan White Program Planning Council in Miami- Dade County. Our members are people with HIV and people who care about people with HIV! People with HIV are encouraged to participate! All events on this calendar are open to the public.
7 Miami-Dade HIV/AIDS Partnership **Cancelled – Next meeting is May 12**	8	9	10 % National Youth HIV/AIDS Awareness Day Care & Treatment Committee 10:00 AM to 12:00 PM at Care Resource	11	
14	15	16	17 Housing Committee 2:00 PM to 4:00 PM at Care Resource	18	RSVP Your participation matters! Please let us know if you're coming to the meeting! RSVP to (305) 445-1076 or mdcpartnership@ behavioralscience.com Be prepared! Go to www.aidsnet.org or
21	22	23	24 (New date) Joint Integrated Plan Review Team - Strategic Planning Committee and Prevention Committee 10:00 AM to 1:00 PM at MDC Main Library	25 Medical Care Subcommittee 9:30 AM to 11:30 AM at BSR Corp.	
Community Coalition Roundtable 5:00 PM to 7:00 PM (Dinner at 4:30 PM) at Empower U	29	30 Executive Committee Officer Training via Teams or In-Person Meeting with Officer Training, as Needed	MEETING LOCATIONS Empower U Community Hea Avenue, Suite C3A, Miami FL3 Miami-Dade County Main Li Street, Auditorium, Miami, FL Report for Action! Microsoft 012; Passcode: pW9t2mR7	ibrary, 101 West Flagler 33130 Stay connected!	





XIII. Adjournment

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Special thanks to our meeting host, Care Resource!

Lamar McMullen

