

Draft Subrecipient AAM Survey

Fiscal Year 2024-2025

This survey refers to activities from March 1, 2024, through February 28, 2025.

The Recipient is the Miami-Dade County Office of Management and Budget-Grants Coordination.

All Ryan White Program Part A/MAI-funded subrecipients must complete the survey (more than one person can help!)

Due date: No later than April 25, 2025.

Notes:

- Responses are tallied and reported in aggregate form without identifying information.
- Your responses will be saved if you need to complete the survey in more than one session or if more than one person is responding.
- A separate survey will be distributed to Miami-Dade HIV/AIDS Partnership members addressing these issues and other concerns. If you represent both a subrecipient AND are a Partnership member, you are asked to complete two surveys.
- The Assessment of the Recipient Administrative Mechanism (AAM) is a Health Resources and Services Administration (HRSA)-mandated evaluation, and a major activity of the Miami-Dade HIV/AIDS Partnership Strategic Planning Committee.

Thank you!

* 1. Please enter your Organization's Name

Organization

* 2. Please enter the First and Last Name and Title of the primary person completing this survey. (This is required for tracking responses and will not be included in the final report.)

On the next page, you have the option to include additional people who are helping to complete the survey.

First and last name of primary person completing this survey

Title of primary person completing this survey

How many years have you been with your organization?

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3. OPTIONAL: Please enter the First and Last Name(s) and Title(s) of additional people who are helping to complete the survey.

First and last name of additional person completing survey (1)

Title of additional person completing survey (1)

How many years have you been with your organization (1)?

First and last name of additional person completing survey (2)

Title of additional person completing survey (2)

How many years have you been with your organization (2)?

Contract Negotiation

March 1, 2024, through February 28, 2025

* 4. The Miami-Dade County Office of Management and Budget-Grants Coordination ("the Recipient") conducted a fair contract negotiation process with our organization.

- Strongly agree
- Disagree
- Agree
- Strongly disagree
- Neither agree nor disagree
- Not applicable

Comments: Strengths, weaknesses & suggestions (optional)

Contract Negotiation

* 5. Please **explain your concern** and **suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Miami-Dade County Office of Management and Budget-Grants Coordination ("the Recipient") conducted a fair contract negotiation process with our organization.*

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Award Notification

March 1, 2024, through February 28, 2025

* 6. The Recipient sent award notifications/letters to our organization in a timely manner.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Award Notification

* 7. Please **explain your concern** and **suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient sent award notifications/letters to our organization in a timely manner.*

Contract Execution

March 1, 2024, through February 28, 2025

* 8. The Recipient executed our organization's contract in a timely manner.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Contract Execution

* 9. Please **explain your concern** and **suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient executed our organization's contract in a timely manner.*

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Contract Execution

March 1, 2024, through February 28, 2025

* 10. Were there internal factors within your organization that led to delayed contract execution?

- Yes
- No
- N/A - Our contract was executed on time.

Contract Execution

* 11. Please select up to three internal factors that led to delayed contract execution. You can also include other internal factors in the comment box.

- Difficulty obtaining the necessary paperwork.
- Difficulty obtaining the necessary signatures.
- Limited time due to other contract execution demands.
- Limited time due to program monitoring schedule.
- Delayed by Board of Directors process(es).
- Delayed by our internal document routing process(es).

Other internal factors

Contract Execution

March 1, 2024, through February 28, 2025

* 12. Were there external factors with the Recipient that led to delays in contract execution?

- Yes
- No
- N/A - Our contract was executed on time.

Contract Execution

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* 13. Please select up to three external factors that led to delayed contract execution. You can also include other external factors in the comment box.

- Delayed by the lateness of the Notice of Award.
- Delayed due to a contract language revision.
- Delayed due to multiple contract language revisions.
- Delayed in obtaining approval for the allocated amounts assigned to our agency.

Other external factors

Contract Execution

March 1, 2024, through February 28, 2025

* 14. Did delays in contract execution cause service disruptions and/or organizational disruptions?

- Yes
- No
- N/A - Our contract was executed on time.

Contract Execution

* 15. Please select up to three service disruptions and/or organizational disruptions resulting from delayed contract execution. You can also include additional feedback in the comment box.

- Delayed services to existing clients.
- Inability to expand services for existing clients.
- Inability to accommodate new clients.
- Delayed payroll.
- Unable to hire additional staff.
- Delayed billing (accounts payable).
- Interrupted cashflow.
- Unable to complete facilities upgrades with reserve funding.

Other service disruptions and/or organizational disruptions

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Reimbursements

March 1, 2024, through February 28, 2025

* 16. There were no significant differences between billed versus reimbursed amounts for our organization that were not discussed prior to any disallowance.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Reimbursements

* 17. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *There were no significant differences between billed versus reimbursed amounts for our organization that were not discussed prior to any disallowance.*

Utilization and Expenditures

March 1, 2024, through February 28, 2025

* 18. The Recipient contacted our organization to review utilization and expenditures that were not on target.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Utilization and Expenditures

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* 19. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient contacted our organization to review utilization and expenditures that were not on target.*

Utilization and Reimbursements

March 1, 2024, through February 28, 2025

* 20. The Recipient reviewed our organization's service utilization and reimbursement requests submissions in a timely manner.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Utilization and Reimbursements

* 21. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient reviewed our organization's service utilization and reimbursement requests submissions in a timely manner.*

Payment of Invoices

March 1, 2024, through February 28, 2025

* 22. After contract execution, the Recipient provided payment to our organization within 30 days of submission of complete and accurate invoices.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

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Payment of Invoices

* 23. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *After contract execution, the Recipient provided payment to our organization within 30 days of submission of complete and accurate invoices.*

Payment of Invoices

March 1, 2024, through February 28, 2025

* 24. The Recipient clearly explained any holds or disallowances on reimbursement requests.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Payment of Invoices

* 25. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient clearly explained any holds or disallowances on reimbursement requests.*

Communication

March 1, 2024, through February 28, 2025

* 26. The Recipient provided our organization with a clear explanation of Ryan White Program reporting requirements (i.e., Ryan White HIV/AIDS Program Services Report (RSR), Annual Progress Report, client eligibility screening, etc.).

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

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Communication

* 27. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient provided our organization with a clear explanation of Ryan White Program reporting requirements (i.e., Ryan White HIV/AIDS Program Services Report (RSR), Annual Progress Report, client eligibility screening, etc.).*

Communication

March 1, 2024, through February 28, 2025

* 28. Communication between the Recipient and our organization has been timely.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Communication

* 29. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *Communication between the Recipient and our organization has been timely.*

Communication

March 1, 2024, through February 28, 2025

* 30. Communication between the Recipient and our organization has been effective.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

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Communication

* 31. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *Communication between the Recipient and our organization has been effective.*

Communication

March 1, 2024, through February 28, 2025

* 32. The Recipient informed our organization of reallocation processes (sweeps) to identify unmet needs or service gaps, and the requirements of a spending plan in order to adjust our organization's budget during the contract year.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Communication

* 33. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient informed our organization of reallocation processes (sweeps) to identify unmet needs or service gaps, and the requirements of a spending plan in order to adjust our organization's budget during the contract year.*

Communication

March 1, 2024, through February 28, 2025

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* 34. The Recipient kept our organization well informed of Miami-Dade HIV/AIDS Partnership decisions that impact Ryan White Program subrecipients (e.g., approval of or changes to service definitions, notice of Prescription Drug Formulary changes, updates to Allowable Medical Conditions, changes to billable services, etc.).

- Strongly agree
- Disagree
- Agree
- Strongly disagree
- Neither agree nor disagree
- Not applicable

Comments: Strengths, weaknesses & suggestions (optional)

Communication

* 35. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient kept our organization well informed of Miami-Dade HIV/AIDS Partnership decisions that impact Ryan White Program subrecipients (e.g., approval of or changes to service definitions, notice of Prescription Drug Formulary changes, updates to Allowable Medical Conditions, changes to billable services, etc.).*

Compliance

March 1, 2024, through February 28, 2025

* 36. When contract non-compliance issues were raised, the Recipient provided adequate time for remediation specific to the issue.

- Strongly agree
- Disagree
- Agree
- Strongly disagree
- Neither agree nor disagree
- Not applicable

Comments: Strengths, weaknesses & suggestions (optional)

Compliance

* 37. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *When contract non-compliance issues were raised, the Recipient provided adequate time for remediation specific to the issue.*

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Technical Assistance

March 1, 2024, through February 28, 2025

* 38. When/if our organization requested programmatic and/or fiscal technical assistance or training, it was provided in a timely manner.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Technical Assistance

* 39. Please **explain your concern** and **suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *When/if our organization requested programmatic and/or fiscal technical assistance or training, it was provided in a timely manner.*

Technical Assistance

March 1, 2024, through February 28, 2025

* 40. In response to our requests, the Recipient provided guidance and clarification to our organization for any program-related document, reporting requirement, or other requested items, in a timely manner.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Technical Assistance

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* 41. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *In response to our requests, the Recipient provided guidance and clarification to our organization for any program-related document, reporting requirement, or other requested items, in a timely manner.*

Technical Assistance

March 1, 2024, through February 28, 2025

* 42. The Recipient responded adequately to inquiries, requests, and problem-solving needs from our organization.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Technical Assistance

* 43. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient responded adequately to inquiries, requests, and problem-solving needs from our organization.*

Staff

March 1, 2024, through February 28, 2025

* 44. The Recipient's staff was courteous and respectful.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

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Staff

* 45. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Recipient's staff was courteous and respectful.*

Staff

March 1, 2024, through February 28, 2025

* 46. Behavioral Science Research Corp. (BSR), the Recipient's Ryan White Program Clinical Quality Management contractor, responded adequately to inquiries, requests, and problem-solving from our organization.

- | | |
|--|---|
| <input type="radio"/> Strongly agree | <input type="radio"/> Disagree |
| <input type="radio"/> Agree | <input type="radio"/> Strongly disagree |
| <input type="radio"/> Neither agree nor disagree | <input type="radio"/> Not applicable |

Comments: Strengths, weaknesses & suggestions (optional)

Staff

* 47. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *BSR, the Recipient's Ryan White Program Clinical Quality Management contractor, responded adequately to inquiries, requests, and problem-solving from our organization.*

Provide® Enterprise Miami

March 1, 2024, through February 28, 2025

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* 48. The Groupware Technologies, LLC (GTL) Provide® Enterprise Miami (PE Miami) client data management system is reliable.

- Strongly agree
- Disagree
- Agree
- Strongly disagree
- Neither agree nor disagree
- Not applicable

Comments: Strengths, weaknesses & suggestions (optional)

Provide® Enterprise Miami

* 49. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The Groupware Technologies, LLC (GTL) Provide® Enterprise Miami (PE Miami) client data management system is reliable.*

Provide® Enterprise Miami

March 1, 2024, through February 28, 2025

* 50. The PE Miami client database system is easy to use.

- Strongly agree
- Disagree
- Agree
- Strongly disagree
- Neither agree nor disagree
- Not applicable.

Comments: Strengths, weaknesses & suggestions (optional)

Provide® Enterprise Miami

* 51. Please **explain your concern and suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The PE Miami client database system is easy to use.*

Provide® Enterprise Miami

March 1, 2024, through February 28, 2025

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* 52. The PE Miami client database system generates organization-specific data in an efficient and user-friendly manner.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Not applicable

Comments: Strengths, weaknesses & suggestions (optional)

Provide® Enterprise Miami

53. Please **explain your concern** and **suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The PE Miami client database system generates organization-specific data in an efficient and user-friendly manner.*

Provide® Enterprise Miami

March 1, 2024, through February 28, 2025

* 54. The PE Miami client database system vendor, Groupware Technologies, responds promptly and adequately to inquiries, data requests, and system trouble-shooting.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Not applicable

Comments: Strengths, weaknesses & suggestions (optional)

Provide® Enterprise Miami

55. Please **explain your concern** and **suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: *The PE Miami client database system vendor, Groupware Technologies, responds promptly and adequately to inquiries, data requests, and system trouble-shooting.*

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Additional Comments - Optional

56. Please offer additional comments or suggestions regarding the Recipient, BSR, PE Miami, Groupware Technologies, and/or other matters.