

Memphis TGA

Assessment of the Administrative Mechanism

October 2020

PURPOSE

The Federal Health Resources Services Administration (HRSA) requires that Part A Planning Groups conduct an Assessment of the Administrative Mechanism on a yearly basis. In accordance with the 2006 Ryan White Treatment Modernization Act (Section 2602), this process is to “assess the efficiency of the administrative mechanism in rapidly allocating funds to the areas of greatest need within the eligible area, and at the discretion of the Planning Group, assess the effectiveness, either directly or through contractual agreements of the services offered in meeting the identified needs.”

In July/August 2020, the Memphis Area Ryan White Planning Group conducted the Assessment of the Administrative Mechanism for FY20. The surveys were sent to the Ryan White Part A subrecipients and the HIV-Care and Prevention Group (H-CAP) members. Collaboration between the Recipient (Ryan White Part A Office) and H-CAP is essential to the overall effectiveness of the administrative mechanism. Data and survey responses were gathered from both the subrecipients and the Planning Group to assess the following areas:

HCAP Members

- The Planning Process
- Information and Reports to the Planning Group

Provider Members

- Procurement Process
- Distribution of Funds
- Sub Grantee Monitoring
- Communication and Technical Assistance

The results of the assessment process and recommendations of the Part A subrecipients and Planning Group members are used in conjunction with the Recipient’s response as a section of the Part A grant application for FY2021.

METHODS

The Evaluation and Assessment Committee of H-CAP has the responsibility of ensuring that an Assessment of the Administrative Mechanism is completed each year. The Planning Group Manager worked with the Data Analyst, Program Manager and committee to implement the survey, gather and analyze the data requested from the subrecipients and Planning Group members. The Evaluation and Assessment Committee selected Survey Monkey as the tool to gather anonymous responses from respondents on how they perceive the effectiveness and efficiency of the Part A program and rate the Administrative Mechanism in the six areas. The survey was sent to 39 Planning Group Members and up to three representatives at the 17 each subrecipients for FY2020. The total number of participants to complete the Planning Group survey was twenty four (24) members and the total number of participants to complete the subrecipients survey was twelve (12) members. The Evaluation and Assessment Committee was given an aggregate summary of the results and an overall summary of the Survey Monkey findings which are included as part of this report and (see Appendix B and C). In addition to the surveys, documents outlining the RFP and contracting procedures and timeline, financial reports, as well as Planning Group minutes and relevant documents were used to prepare this report.

PLANNING GROUP SURVEY RESULTS

The Planning group survey results are summarized according to the two (2) identified focus areas of the assessment (*The Planning Process & Information and Reports*). Data provided by the Planning Group members and general knowledge of various processes within the Part A system is all used to develop this section.

Planning Process:

Q1: The recipient regularly assessed the needs and service gaps of People Living with HIV/AIDS (PLWHA) in the Transitional Grant Area (TGA)

	Fully/Always	Partly/Usually	Slightly/rarely	Not at all/never	N/A/ Don't Know
FY12	69.63%	28.13%	2.25%	0.00%	0.00%
FY13	66.00%	26.34%	4.75%	0.00%	2.86%
FY14	71.20%	23.65%	0.48%	0.00%	3.80%
FY15	88.20%	11.18%	0.62%	0.00%	0.00%
FY16	66.67%	23.61%	5.56%	0.00%	4.17%
FY17	75.00%	18.75%	6.25%	0.00%	0.00%
FY18	NR	NR	NR	NR	NR
FY19	NR	NR	NR	NR	NR
FY20	82.61%	13.04%	0.00%	0.00%	4.35%

*NR=Not Reported in previous reports

Survey results for FY18 & FY19 were not reported due to a vacancy in the Data Analyst position.

Questions about the planning process were sent to 36 full and three (3) alternate members of the Planning Group. Twenty Four members completed questions relative to the Recipient and Planning Group interactions with directing and understanding services as well as community participation. Results from question one Planning Group & Grantee assess unmet need & service gaps the survey results show steady improvements with the response of “Fully/always” at 82.61%. Included in this survey there were several comments from Planning Group members which indicate a common belief that significant improvement in engagement of PLWHA in the planning process is a response to the recipient effective use of funds. Comments received when asked what the grantee did best were “funds were used the way that they should have been used”, “allowed for assistance for consumers to be included” and “responding to the needs”. However, response for “Not Applicable/Don't Know” increased FY20 4.35% from FY17 0.00%. H-CAP comments when asked where office needs improvements were attributed to direct response received of “the need for more training for consumers”. Based on review of Planning Group documents from the past year, the Planning Group still has some challenges in being mindful of providing training for consumers.

Q2: The Needs Assessment and Planning process provided adequate opportunities for participation of the general community.

When asked about Assessment & Planning process opportunities for the general community the Planning Group members overall response of “Fully/always” was FY20 73.91% versus FY17 87.50% down 13.59%. The members survey response of “Partly/usually” was 21.74% versus 6.25% and members responds to “Not Applicable/Don't know” was at 4.35% of which is down from 6.25% in FY17. The data results downturn in part could be a response to the absence of both Priority Setting Resource Allocation (PSRA) and Assessment of the Administrative Mechanism surveys which were not completed, in part “*due to Coronavirus Disease 2019*”. This missed opportunity resulted in H-CAP group members not able to fully participate in assessment and planning process and “*leadership involvement in meetings*”.

Q3: Does the HIV-Care and Prevention Group (H-CAP) make notice of the representation of People Living With HIV/AIDS (PLWHA) during the Needs Assessment process.

The survey posed the question regarding high level of representation of PLWHA participation during the Needs Assessment process. There are several comments from planning group members which indicate a common belief that there has been significant improvement in engagement of PLWHA in the Needs Assessment process. Response from H-CAP group survey results include grantee do best “*responding to the needs*”, “*Partnership*” “*assistance for consumers to be included*” and most importantly comments received expressing grantee “*provided representation*”. The Planning Group members survey results for FY20 response are “Fully/always 69.57% and Partly/usually 21.74% when compared to FY17 the survey results were “Fully/always 87.50% and Partly/usually 6.25%.

Q4: To fully meet legislative requirements, the H-CAP Group provided the recipient with the following:

The FY20 Planning Group members survey response to providing the recipient with the following results were observed in the response to meet legislative requirements 65.22% for “*clear directives to meet priorities*”. The survey response to “*reallocation of funding to avoid underspending and/or carryover*” is 73.91%, “*approval of allocation to carry-over*” is 52.17% and “*development/refine standards of care*” is 52.17%. Noting several of the survey comments from planning group members where the recipient did best were “*remain receptive to HCAP committee members. No questions were too small to ask*” and “*building community*”. The planning group expressed positive comments regarding the recipient such as “*Transparency*”, “*providing information*”, “*Allowed Person growth*”, “*Open door policy*” and “*Allocate funds*”.

Q5: The HIV-Care and Prevention Group provided the recipient with clear directives on how to best meet the priorities of the community.

The Planning Group members survey results for FY20 response reveals that the H-CAP members provided the recipient with clear directives on how to meet the priorities & other factors to consider in procurement “Fully/always” 60.87% and “Partly/usually” 34.78% and “Slightly/rarely” 4.35%. When compared to FY17 “Fully/always” 87.50% and “Partly/usually” 0.00%, “Slightly/rarely” 6.25% and “Not Applicable/Don’t know” 6.25%. Clear directives did not show improvements in survey response FY20 versus FY17. “Fully/always” survey response are down 26.63% FY20 versus FY17.

Information and Reports to the Planning Group:

Q6: The recipient provided the H-CAP Group with reports on service utilization and expenditures that enable it to monitor progress and to determine the need for reallocation in making informed decisions.

	Fully/Always	Partly/Usually	Slightly/rarely	Not at all/never	N/A/ Don’t Know
FY12	86.40%	11.40%	0.70%	0.00%	1.40%
FY13	83.60%	11.92%	3.72%	0.00%	0.74%
FY14	90.28%	5.98%	0.00%	0.00%	3.73%
FY15	89.57%	9.56%	0.87%	0.00%	0.00%
FY16	80.55%	18.05%	0.00%	0.00%	1.39%
FY17	92.86%	0.00%	7.14%	0.00%	0.00%
FY18	NR	NR	NR	NR	NR
FY19	NR	NR	NR	NR	NR
FY20	66.67%	23.81%	9.52%	0.00%	0.00%

***NR=Not Reported in previous reports**

Survey results for FY18 & FY19 were not reported due to a vacancy in the Data Analyst position.

The survey asked the Planning Group about the recipient's responsiveness during the past year to service utilization, expenditures and other data needed in the decision-making process. The survey response from H-CAP regarding clear direction on when & how to reallocate funds to avoid carryover were down from FY17 92.86% to FY20 66.67%. The data response is down in part due to new and administrative staff changes in the recipients' office which slowed or prevented the development, or progress of report updates to HCAP.

Q7: The recipient provided H-CAP with a year-end summary of expenditures, service utilization, client or unit costs, and client demographics by service category, in a format useful for priority setting and resource allocations.

The Planning Group members survey results FY20 response to recipient providing clear allocations and directives for use of carryover funds "Fully/always" 80.95%, "Partly/usually" 9.52%, "Slightly/rarely" 4.76% and "Not Applicable/Don't Know" 4.76%. This compared to FY17 "Fully/always" 92.86% and "Not Applicable/Don't Know" 7.14%. The planning group comments show recipients office needs improvement in "*Communication regularly on expenditures*".

Q8: The recipient provided other information and analyses, as needed by the Planning Group, for its planning and decision making.

The Planning Group members survey results FY20 response "Fully/always" 66.67%, "Partly/usually" 28.57% and "Slightly/rarely" 4.76%. The survey comparison to FY17 "Fully/always" 85.71% and "Partly/usually" 14.29%. The planning group provided comments that show recipients improvement are needed in areas such as "*Training for Consumers*", "*Organize time for the meeting so won't last for long*", and "*Spending or reallocation of funds during the previous grant year*". Improvements were expressed by the planning group in survey comments such as "*bring back surveys for recipients so customer can say their views*". The planning group comments were best for the recipients in "*have caring people onboard*", "*Technical Support*" provided, and "*Training for HCAP*". The recipient provided other information including Memphis TGA standards of Care document to the Planning Group August 18, 2020.

Q9: The recipient had at least one representative at H-CAP and committee meetings to support the work of the Planning Group.

The Planning Group members survey results FY20 response was "Fully/always" 85.71% and "Partly/usually" 14.29%. These numbers compared to FY17 "Fully/always" 84.62% and "Partly/usually" 15.38%. Results show that 85.71% "fully/always" agreed the Grantee has made efforts to have at least one representative, including the Planning Group Support Staff, at the Planning Group and committee meetings. The support staff was able to answer questions, give summary data reports and financial update received within 60 days. Survey comments showed grantee has made "*improvements in presentation by leadership regularly*". The survey results also suggest that the planning group has improved with visibility of representatives from the recipient's office attending the H-CAP meetings FY20 vs FY17.

Recommendations for improvements are listed in the *Summary of Recommendation* section of the report.

SERVICE PROVIDER SURVEY RESULTS

The service providers survey report is summarized according to four (4) identified focus areas of the assessment (*Procurement Process, Distribution of Funds, Sub Grantee Monitoring, and Communication and Technical*

Assistance). Data provided by the service providers survey Group members and general knowledge of various processes within the Part A system is all used to develop this section.

Procurement Process:

Q1: The recipient conducted an open and competitive request for proposal (RFP) process, with standardized procedures and requirements for all applicants, to select providers of services for which the Planning Group has allocated funds.

	Fully/Always	Partly/Usually	Slightly/Rarely	Not At All/Never	Not Applicable Don't Know
FY12	73.35%	10.00%	2.22%	0.00%	14.45%
FY13	73.70%	6.48%	1.75%	0.00%	18.07%
FY14	75.00%	6.06%	0.00%	0.76%	18.18%
FY15	69.98%	6.83%	1.11%	2.22%	20.16%
FY16	66.42%	16.78%	1.96%	0.00%	14.83%
FY17	81.25%	6.25%	0.00%	0.00%	12.50%
FY18	NR	NR	NR	NR	NR
FY19	NR	NR	NR	NR	NR
FY20	58.33%	25.00%	8.33%	0.00%	8.33%

*NR=Not Reported in previous reports

Survey results for FY18 & FY19 were not reported due to a vacancy in the Data Analyst position.

Questions about the service providers process were sent to 24 provider members, up to no more than three representatives at the 17 each subrecipients for FY20. Twelve members completed survey questions relative to the service providers group interactions with directing and understanding services as well as community participation. Of the 24 providers members that received the survey no more than 12 members completed questions relative to the recipient and subrecipients. The recipient conducts a competitive procurement process for distribution of funds that is open to all TGA. The service providers members survey results and response for FY20 to Q1 regarding standardized procedures and requirements for all applicants as well as open and competitive procurement process is “Fully/always 58.33% and Partly/Usually 25.00%. This compared to FY17 “Fully/always 81.25% and Partly/usually 6.25%. The request for proposal is renewal every four years (renewal of agreement) unless the service providers has a new category, in which case the updates are processed and renewal is sooner. The “Fully/Always” drop of 22.92% could include the expectant of full/complete contract each year. The renewal of agreement is a two page amendment not the full/complete contract that the service providers may have seen in the past and expected to see each year.

Q2: The RFP clearly stated expectations, including Health Resources and Services Administration (HRSA) policies and procedures, standards of care that must be met, expected performance measures, and reporting requirements.

The service providers survey results regarding standards of care and expected performance for FY20 response are “Fully/always” 66.67% and “Partly/usually” 25.00%. This compared to FY17 “Fully/always 93.75% and Partly/usually 6.25%. The service providers summary response to recipients lack of knowledge and need improvements are “ensure that messages are consistent “ In regards to RFP’s the finance group follows purchasing policies posted on Shelby County Website which are based on laws, ordinances, resolutions, or rules and regulations amended or adopted and promulgated by the Administrator of Purchasing.

Q3: The recipient disseminated information about the availability of funds, targeting both current providers and potential new providers throughout the Transitional Grant Area (TGA).

The Ryan White community and the public are informed when there is availability of funds. Grant Summary Information provided on Shelby County website. The Memphis Ryan White Program receives funds from the U.S. Department of Health and Human Services to provide for the medical and support care needs of over 2,000 low income, uninsured/underinsured individuals living with and affected by HIV/AIDS. The program is 100% grant funded and consists of Part A and Minority AIDS Initiative. The service providers members survey results FY20 response when asked about availability of funds throughout the TGA is “Fully/always 50.00% and Partly/usually 25.00% compared to FY17 “Fully/always 93.75% and Partly/usually 0.00%.

Q4: The recipient considered opportunities to identify new service providers and enhance capabilities of their capacity to participate in the RFP process.

When the service providers were asked about opportunities to identify new providers and enhance capacity for RFP process survey results FY20 response “Fully/always” 50.00% and “Partly/usually” 16.67%, “Slightly/rarely” 8.33% and “Not Applicable/Don’t Know” 25.00%. This compared to FY17 “Fully/always 75.00% and Partly/usually 12.50% and “Not Applicable/Don’t Know” 12.50%. The summary response from service providers survey members noted that the recipient were best at “Do Best Effective Communications”.

Q5: Selection criteria provided reasonable consideration to new sub-recipients (providers).

The service providers survey results when asked about reasonable consideration to new sub-recipients FY20 response “Fully/always” 33.33%, Partly/usually” 33.33% and “Not Applicable/Don’t Know” 33.33%. This compared to FY17 “Fully/always” 60.00% and “Partly/usually” 20.00% and “Not Applicable/Don’t Know” 20.00%. The summary response from service providers survey members noted that the recipient were best at “Provide guidance and support for financial instructions” and “Assisting with questions and concerns”

Q6: The recipient provided written feedback on request to each bidder, regarding its application

There is no evidence based on records that respondents to the RFP are given written feedback related to the quality of proposals other than whether or not they were selected. The service providers survey members survey results FY20 response “Fully/always” 50.00%, “Partly/usually” 16.67% and compared to FY17 “Fully/always 50.00% and Partly/usually 25.00% “Not Applicable/Don’t Know” 33.33%.

Distribution of Funds

Q7: The recipient ensured that contracts for services provide a clear definition for each funded service category.

	Fully/Always	Partly/Usually	Slightly/Rarely	Not At All/Never	Not Applicable Don't Know
FY12	69.34%	26.66%	1.34%	0.00%	2.66%
FY13	71.00%	25.00%	0.00%	0.00%	4.00%
FY14	84.00%	12.00%	0.00%	0.00%	4.00%
FY15	77.90%	13.91%	4.00%	0.00%	4.19%
FY16	80.00%	17.65%	0.00%	0.00%	2.35%

FY17	93.33%	6.67%	0.00%	0.00%	0.00%
FY18	NR	NR	NR	NR	NR
FY19	NR	NR	NR	NR	NR
FY20	77.78%	11.11%	0.00%	0.00%	11.11%

*NR=Not Reported in previous reports

Survey results for FY18 & FY19 were not reported due to a vacancy in the Data Analyst position.

The service providers members survey results FY20 response to clear definition for each funded service category “Fully/always” 77.78% and “Partly/usually” 11.11% and “Not Applicable/Don’t Know” 11.11%. This compared to FY17 “Fully/always” 93.33% and “Partly/usually” 6.67%.

Q8: Service contracts between the recipient's office and sub- recipient (provider agencies) were signed and initiated prior to the beginning of a new service period and/or within a reasonable grace period for continuing services from one program year to the next.

The service providers members survey results FY20 response “Fully/always” 77.78% and “Partly/usually” 11.11% and “Not Applicable/Don’t Know” 11.11%. This compared to FY17 “Fully/always” 78.57% and “Partly/usually” 14.29% and “Not Applicable/Don’t Know” 7.14%.

Q9: Payments to sub-recipients (providers) were made within 30 days of submission of complete and accurate invoices.

Payment to subrecipients was lagging 6-7 months FY19 due to Ryan White Program had not processed contracts, therefore Shelby County Health Department was put on hold for submissions of invoices. Processing of invoices in FY20 is now submitted within 30 days of receiving invoices that are complete and accurate. When asked if payments are made to subrecipients within 30 days the service providers members survey results for FY20 response is “Fully/always” 55.56% and “Partly/usually” 33.33% and “Not Applicable/Don’t Know” 11.11%. This compared to FY17 “Fully/always” 60.00% and “Partly/usually” 26.67% and “Not Applicable/Don’t Know” 13.33%.

Q10: Invoices were processed in the recipient’s office within 2 weeks after submission.

Results from previous survey shows steady improvement for Grantee processes invoices within 2 weeks of submission. The service providers members survey results FY20 response when asked if invoices are processed within 2 weeks is “Fully/always 55.56% and “Partly/usually” 11.11% compared to FY17 “Fully/always” 50.00% and “Partly/usually” 28.57%. The finance department has a 5 business day turnaround time and invoices are processed complete within 2 weeks. When asked specifically about the recipient’s ability to process invoices within two weeks of submission, 55.56% of subrecipients stated this was “fully/always” done, there has been an increase from FY17.

Q11: The recipient fund (allocation and reallocation) distribution system was adaptable in order to respond to the needs of the community-based HIV/AIDS service providers.

When asked if Grantee modified existing systems to respond to needs of service providers the members survey results FY20 response “Fully/always” 66.67% and “Partly/usually” 11.11%, “Slightly/rarely” 11.11% and “Not Applicable/Don’t Know” 11.11%. This compared to FY17 “Fully/always” 78.57% and “Partly/usually” 21.43% . The recipient funds are reviewed for spending patterns throughout the year. Additional fund are allocated 3-4 times per year based on spending pattern. The rapid reallocation is processed after December 1 and prior to the

end of the FY. The finance group reaches out to communicate with subrecipients with detailed information and review their response when/if we are not able to reallocate a request.

Sub Grantee Monitoring:

Q12: The recipient conducted site visits with sub-recipient at least once a year to assess sub-grantee performance.

	Fully/Always	Partly/Usually	Slightly/Rarely	Not At All/Never	Not Applicable Don't Know
FY12	88.90%	8.90%	0.00%	0.00%	2.23%
FY13	88.17%	6.77%	0.00%	0.00%	5.10%
FY14	93.33%	3.33%	0.00%	0.00%	3.33%
FY15	95.55%	2.22%	0.00%	0.00%	2.22%
FY16	86.03%	7.96%	0.00%	0.00%	6.00%
FY17	93.33%	0.00%	0.00%	0.00%	6.67%
FY18	NR	NR	NR	NR	NR
FY19	NR	NR	NR	NR	NR
FY20	100.00%	0.00%	0.00%	0.00%	0.00%

*NR=Not Reported in previous reports

Survey results for FY18 & FY19 were not reported due to a vacancy in the Data Analyst position.

The service providers members survey results FY20 response “Fully/always 100.00% and Partly/usually 0.00% compared to FY17 “Fully/always 93.33% and Partly/usually 0.00% . The service provider comments for recipients show best improvement with “*Site Visit*”. Responses regarding site visits conducted at least 1X/year to assess contractor performance continue to improve since FY17.

Q13: Site visits used a standardized review process and established information gathering tools that adhere to HRSA's monitoring standards.

When questioned about standardized review process and established information gathering tools the service providers members survey results FY20 response were improved. The “Fully/always 88.89% and Partly/usually 0.00% compared to FY17 “Fully/always 80.00% and Partly/usually 13.33%. The service provider comments for recipients show best improvement with “*gave programmatic feedback during site visit*” Responses continue to improve since FY17. The rising response of “fully/always”, from FY 17 80.00% to FY20 88.89%, over past years demonstrates approval with the monitoring process.

Q14: Sub-recipient received at least two week advance notice of an impending site visit and are advised of what documentation they will need to have available at the time of the visit

Providers get 2 week advance notice and advised about documentation to have on hand was much improved. The service providers members survey results FY20 response “Fully/always 88.89% and Partly/usually 0.00% compared to FY17 “Fully/always 86.67% and Partly/usually 6.67%. Subrecipients see a consistent response satisfaction in contract monitoring from FY17-FY20. There was an increase from FY17 to FY20 from 86.67% to 88.89%.

Communication and Technical Assistance:

Q15: The recipient provided all funded sub-grantees information, technical assistance and training needed to perform the following:

When asked about provided technical assistance and training the service provider response to the survey were that the Grantee “meet financial management 88.89%, data collection 77.78% data management 55.56% and reporting requirement 7.78% comments 11.11% . Compared to FY17 “meet financial management 93.33%, data collection 66.67% data management 73.33% and reporting requirement 86.67% comments 6.67%. The service provider comments reveal recipients does best “*Supportive of subrecipients*”, *assisting with questions concerns and provide trainings and updates*.

Q16: Within 5 working days, the recipient provided responses to verbal or written requests for information and/or assistance from funded sub-recipient.

The service providers members survey results FY20 response “Fully/always 44.44% and Partly/usually 22.22% compared to FY17 “Fully/always 73.33% and Partly/usually 26.67% .

	Fully/Always	Partly/Usually	Slightly/Rarely	Not At All/Never	Not Applicable Don't Know
FY12	73.30%	26.70%	0.00%	0.00%	0.00%
FY13	72.50%	22.50%	0.00%	2.50%	2.50%
FY14	85.00%	10.00%	0.00%	0.00%	5.00%
FY15	93.33%	6.67%	0.00%	0.00%	0.00%
FY16	76.47%	23.533%	0.00%	0.00%	0.00%
FY17	73.33%	26.67%	0.00%	0.00%	0.00%
FY18	NR	NR	NR	NR	NR
FY19	NR	NR	NR	NR	NR
FY20	44.44%	22.22%	11.11%	0.00%	22.22%

*NR=Not Reported in previous reports

Survey results for FY18 & FY19 were not reported due to a vacancy in the Data Analyst position.

SUMMARY OF RECOMMENDATIONS FOR SYSTEM IMPROVEMENTS

Overall the survey results were improved and providers were satisfied. Recommendations for improvements are listed below for this report. Based on the information provided through review of the surveys and supporting documentation for the Assessment of the Administrative Mechanism, there are four categories of recommendations for system improvements for the Memphis TGA Ryan White Part A Program. These categories include PLWHA Engagement, Capacity Building for New Service Providers, Planning Group Membership and Training, and Service Providers Training and Technical Assistance.

PLWHA Engagement

- Increase opportunities for trainings related to fundamental concepts necessary to understand the Ryan White system, specifically terminology and logic behind reallocations
- Increase membership from PLWHA from more rural parts of the TGA (particularly North MS)
- Increase membership among HIV positive women

Capacity Building for New Service Providers

- Identify existing community based organizations currently providing related services and encourage participation in RFP process, especially in rural Tennessee, Mississippi and Arkansas counties
- Identify opportunities for creating easier systems for RFP process, contracting and reimbursement that could encourage participation of new, smaller organizations
- Provide written feedback for all respondents to RFP, including those unsuccessful responses, to encourage future applications

Planning Group Membership and Training

- Increased recruitment of Planning Group members to ensure required membership
- Development of structured trainings from non-grantee sources relevant to committee needs during committee meetings (i.e., HOPWA and other community resources that may impact population served)
- Increased training for Planning Group and Grantee staff related to Planning Council requirements
- Ongoing specialized training and technical assistance for consumer membership of Planning Group

Service Providers Training and Technical Assistance

- Increase opportunities for clinical training and workshops for service providers in multiple forms (in person, webinar, telephone)
- Identify potential service expansion opportunities for providers to serve more people

APPENDIX A. PLANNING GROUP 2020 SURVEY RESULTS

**Planning Group
Summary of Survey Monkey Results – 2020**

Question #	Planning Process
1	PG & Grantee-assess unmet need & service gaps
2	Assessment & Planning process – opportunity for gen community participation
3	High level of PLWHA participation
5	clear directives on how to meet the priorities & other factors to consider in procurement

N=	Response Rate R=23	Fully/ Always	Partly/ Usually	Slightly/ Rarely	Not At All/Never	N/A – Don't Know
24	95.83%	82.61%	13.04%	0.00%	0.00%	4.35%
24	95.83%	73.91%	21.74%	0.00%	0.00%	4.35%
24	95.83%	69.57%	21.74%	4.35%	0.00%	4.35%
24	95.83%	60.87%	34.78%	4.35%	0.00%	0.00%
		71.74%	22.83%	2.17%	0.00%	3.26%

Question #	Information and Reporting to Planning Council
6	clear direction on when & how to reallocate funds to avoid carryover
7	Clear allocations and directives for use of carryover funds
8	PG & Grantee – develop & refine Standards of Care
9	Grantee provides PG – summary data reports and financial info within 60 days

N=	Response Rate R=21	Fully/ Always	Partly/ Usually	Slightly/ Rarely	Not At All/Never	N/A – Don't Know
24	87.50%	66.67%	23.81%	9.52%	0.00%	0.00%
24	87.50%	80.95%	9.52%	4.76%	0.00%	4.76%
24	87.50%	66.67%	28.57%	4.76%	0.00%	0.00%
24	87.50%	85.71%	14.29%	0.00%	0.00%	0.00%
		75.00%	19.05%	4.76%	0.00%	1.19%

APPENDIX A. PLANNING GROUP AND PROVIDER AND 2020 SURVEY RESULTS

Subrecipients Summary of Survey Monkey Results – 2020

Question #	Procurement Process	N=	Response Rate R=12	Fully/ Always	Partly/ Usually	Slightly/ Rarely	Not At All/Never	N/A – Don't Know
1	Grantee conducts an open and competitive procurement process	12	100.0%	58.33%	25.00%	8.33%	0.00%	8.33%
2	RFP clear re expectations, HRSA P&P, Stds of Care, expected performance	12	100.0%	66.67%	25.00%	0.00%	0.00%	8.33%
3	measures, rptg requirements disseminates info wisely re availability of funds	12	100.0%	50.00%	25.00%	8.33%	0.00%	16.67%
4	opportunities to identify new providers and enhance capacity for RFP*	12	100.0%	50.00%	16.67%	8.33%	0.00%	25.00%
5	selection criteria provide reasonable consideration to new providers	12	100.0%	33.33%	33.33%	0.00%	0.00%	33.33%
6	Grantee provides feedback to each bidder	12	100.0%	50.00%	16.67%	0.00%	0.00%	33.33%
				51.39%	23.61%	4.17%	0.00%	20.83%

Question #	Distribution of Funds	N=	Response Rate R=9	Fully/ Always	Partly/ Usually	Slightly/ Rarely	Not At All/Never	N/A – Don't Know
7	Contracts – clear definition for each funded service category	12	75.0%	77.78%	11.11%	0.00%	0.00%	11.11%
8	Contracts – initialed & signed prior to new service period –	12	75.0%	77.78%	11.11%	0.00%	0.00%	11.11%
9	Payments – within 30 days of submission of complete, accurate invoices	12	75.0%	55.56%	33.33%	0.00%	0.00%	11.11%
10	Grantee processes invoices within 2 weeks of submission	12	75.0%	55.56%	11.11%	11.11%	0.00%	22.22%
11	Grantee modified existing systems to respond to needs of service providers	12	75.0%	66.67%	11.11%	11.11%	0.00%	11.11%
				66.67%	15.56%	4.44%	0.00%	13.33%

Question #	Contract Monitoring
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N=	Response Rate R=9	Fully/ Always	Partly/ Usually	Slightly/ Rarely	Not At All/Never	N/A – Don't Know
12	75.0%	100.00%	0.00%	0.00%	0.00%	0.00%
13	75.0%	88.89%	0.00%	0.00%	0.00%	11.11%
14	75.0%	88.89%	0.00%	0.00%	0.00%	11.11%
		92.59%	0.00%	0.00%	0.00%	7.41%

12 Site visits – Grantee conducts at least 1x/year to assess contractor performance

13 Grantee uses standardized review Process and info gathering tools

14 Providers get 2 week advance notice and advised about documentation to have on hand

Question #	Communication and Assistance
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N=	Response Rate R=9	Meet financial mgmt	Data collection	Data mgmt	Rept requirements	comments
12	75.0%	88.89%	77.78%	55.56%	77.78%	11.11%
		88.89%	77.78%	55.56%	77.78%	11.11%

15 Grantee provided technical assistance & training

Question #	Communication and Assistance
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N=	Response Rate R=9	Fully/ Always	Partly/ Usually	Slightly/ Rarely	Not At All/Never	N/A – Don't Know
12	75.0%	44.44%	22.22%	11.11%	0.00%	22.22%
		44.44%	22.22%	11.11%	0.00%	22.22%

16 Grantee responds within 5 days requests for info or assistance

➤ What we need to do to make it better?